

# Good Samaritan Drug Overdose Act

## Knowledge, Attitudes and Experiences Survey (THN Sites)

This survey asks about your thoughts and experiences with overdoses, calling 9-1-1 when an overdose happens, and your knowledge about the Good Samaritan Drug Overdose Act (GSDOA), an Act that aims to encourage seeking medical attention for overdose. We will also be asking you about potential impacts of COVID-19 (corona virus) on responding to overdose. You do not have to answer any questions, including questions about COVID-19 (corona virus), that may be triggering or may cause you discomfort. A “prefer not to answer” option exists for every question. Not answering any question will not disqualify you from participating. No personal identifying information will be collected and your responses will be kept confidential. Support services are available, and a list can be provided by the research coordinator. The survey will take roughly 15 minutes of your time. Please note that you can only complete the survey once.

**\*You are invited to fill out this survey because you are getting a take home naloxone kit and therefore think you are at risk of an opioid overdose and/or likely to see an opioid overdose.**

First, we'd like to ask some questions about you:

**1. What is your current GENDER identity? (Select all that apply)**

Woman       Man       Trans man       Trans woman       Gender non-binary  
 Other, specify: \_\_\_\_\_       Prefer not to say

**2. How old are you? \_\_\_\_\_ (years)       Prefer not to say**

**3. Do you identify yourself as any of the following? (Select one)**

First Nations       Métis       Inuit       No, do not identify as Indigenous       Prefer not to say

**4. In what region of BC do you live? (Select one)**

Northern BC       Interior BC       Vancouver coastal area       Vancouver Island       Fraser area       Prefer not to say

**5. Do you live: (Select one)**

In a private residence, alone       In a private residence, with someone else  
 Other residence (hotels, motels, rooming houses, single room occupancy (SRO), shelters, social/supportive housing etc.)  
 I have no regular place to stay (homeless, couch surf, No Fixed Address)  
 Other, specify \_\_\_\_\_       Prefer not to say

**6. How long has this been your living situation? (Select one)**

More than 1 year       7-12 months       1-6 months       Less than 1 month       Prefer not to say

**7. Are you currently in school? (Select all that apply)**

Yes, high school       Yes, post-secondary education       No       Prefer not to say

**8. Are you currently employed? (Select all that apply)**

Yes, paid volunteer       Yes, part-time       Yes, full-time       No       Prefer not to say

**9. Do you have a cellphone? (Select one)**

Yes       No       Prefer not to say

**10. In the last 6 months, have you felt at risk of experiencing an overdose? (Circle or select one)**

Never      Rarely      Sometimes      Often      All the time       Prefer not to say

**11. In the last 6 months, have you felt as though it was likely that you would witness an overdose? (Circle one)**

Never      Rarely      Sometimes      Often      All the time       Prefer not to say

**12. Are you picking up your first Take Home Naloxone Kit? (Select one)**

Yes (*skip to #13*)       No       Not picking up a kit (*skip to #13*)       Prefer not to say (*skip to #13*)

**12a. If you answered no – why are you picking up a new Take Home Naloxone kit? (Select one)**

Used last kit to respond to an overdose       Last kit expired  
 Lost last kit       Other: \_\_\_\_\_  
 Gave last kit to someone else       Prefer not to say  
 Last kit was confiscated

**Content Warning:** In the next part of this survey we'll be asking about your experiences of overdosing, witnessing overdoses and responding to overdoses, to get a better understanding of how people respond and what may influence them seeking help. You are not required to answer any questions that may cause you to experience discomfort.

13. In the last 6 months, have YOU overdosed (overamped) by accident from using a stimulant (eg. crystal meth or crack)? (Select one)

Yes       No (skip to #14)       Don't know (skip to #14)       Prefer not to say (skip to #14)

13a. If you answered yes – how many times in the last 6 months? \_\_\_\_\_

14. Have you used opioids in the last 6 months?

Yes       No (skip to #16)       Prefer not to say (skip to #16)

14a. If you answered yes - how do you take opioids (Select all that apply)?  Inject  Smoke  Snort  Swallow

14b. If you answered "smoke" – how do you do this?

- In foil
- In a pipe
- Rolled into a cigarette/joint
- Other: \_\_\_\_\_

15. In the last 6 months, have YOU overdosed (overamped) by accident from using any opioids (eg. fentanyl, heroin)? (Select one)

Yes       No (skip to #16)       Don't know (skip to #16)       Prefer not to say (skip to #16)

15a. If you answered yes – how many times in the last 6 months? \_\_\_\_\_

16. In the last 6 months, have you SEEN an accidental overdose in someone using any stimulants? (Select one)

Yes       No (skip to #17)       Don't know (skip to #17)       Prefer not to say (skip to #17)

16a. If you answered yes – how many times in the last 6 months? \_\_\_\_\_

17. In the last 6 months, have you SEEN an accidental overdose in someone using any opioids? (Select one)

Yes       No (skip to #19)       Don't know (skip to #19)       Prefer not to say (skip to #19)

17a. If you answered yes – how many times in the last 6 months? \_\_\_\_\_

17b. In the last 6 months, who did you see accidentally overdose using any opioids? (Check all that apply)

- Someone I didn't know       Partner
- Casual friend/acquaintance       Family member
- Close friend       Prefer not to say

18. At the last opioid overdose you witnessed, what happened? (Select all that apply)

I left the scene

I gave breaths (no chest compressions)

I gave chest compression (no breaths)

I gave breaths and chest compressions

I gave naloxone/narcan

Someone else gave breaths (no chest compressions)

If so, please circle who: Bystander (friend, stranger...)      Staff (overdose prevention site, drop-in...)      Paramedic      Police

Someone else gave chest compressions (no breaths)

If so, please circle who: Bystander (friend, stranger...)      Staff (overdose prevention site, drop-in...)      Paramedic      Police

Someone else gave breaths and chest compressions

If so, please circle who: Bystander (friend, stranger...)      Staff (overdose prevention site, drop-in...)      Paramedic      Police

Someone else gave naloxone/narcan

If so, please circle who: Bystander (friend, stranger...)      Staff (overdose prevention site, drop-in...)      Paramedic      Police

They recovered without any of the above

Prefer not to answer

18a. At the last opioid overdose you witnessed, was 9-1-1 called? (Select one)

Yes (skip to #18c)       No       Don't know (skip to #18c)       Prefer not to say (skip to #18c)

18b. Why was 9-1-1 not called? (Select all that apply)

- Didn't have a phone/phone not available
- Worried about calling 9-1-1 because I or others have rarely called 9-1-1 before
- Situation seemed under control
- Worried about family services being notified
- Worried about neighbors/landlord knowing about drug use
- Worried about mine or someone else's ethnicity and interactions with police/other 9-1-1 responders
- Worried about police coming, with no relation to ethnicity. If so, specify why: \_\_\_\_\_

Worried about paramedics or fire services coming, with no relation to ethnicity. If so, specify why: \_\_\_\_\_

Other, please specify: \_\_\_\_\_

Prefer not to say

**18c. At the last opioid overdose you witnessed, did the ambulance come? (Select one)**

Yes       No       Don't know       Prefer not to say

**18d. At the last opioid overdose you witnessed, did the police come? (Select one)**

Yes       No (*skip to #19*)       Don't know (*skip to #19*)       Prefer not to say (*skip to #19*)

**18e. What did the police do at the overdose scene? (Select all that apply)**

Provided medical assistance (naloxone/Narcan, CPR, etc.)

Watched/bystander role

Zoned off the area

Searched myself and/or others at the scene

Checked for warrants/IDs/red zone restrictions

Made arrests/pressed charges

Other, please specify: \_\_\_\_\_

Prefer not to say

**19. Are you concerned about COVID-19 (corona virus) when you respond to an overdose?**

Yes       No (*skip to #20*)       Prefer not to say (*skip to #20*)

**19a. If you answered yes – what are your concerns? (Select all that apply)**

Proximity to others (e.g. person overdosing, bystanders...)

Giving breaths

Contact with healthcare workers/hospitals

Any other concerns, please specify: \_\_\_\_\_

Prefer not to say

**20. Does COVID-19 (corona virus) make you change the way you respond to an overdose?**

Yes       No (*skip to #21*)       Prefer not to say (*skip to #21*)

**20a. If you answered yes – how does COVID-19 (corona virus) make you change the way you respond? (Select all that apply)**

Won't give breaths

Won't give chest compressions

Will give naloxone sooner

More likely to call 9-1-1

Less likely to call 9-1-1

Any other changes, please specify: \_\_\_\_\_

Prefer not to say

*Now, we would like to ask some questions about the Good Samaritan Drug Overdose Act:*

**21. Have you heard about the Good Samaritan Drug Overdose Act? (Select one)**

Yes       No (*skip to definition*)       Prefer not to say (*skip to definition*)

**22. Have you seen any posters, pamphlets or online material about the GSDOA? (Select one)**

Yes       No       Prefer not to say

**23. Please indicate your agreement with this statement: The Good Samaritan Drug Overdose Act has encouraged some people to call 9-1-1 in the event of an overdose. (Select one)**

Strongly agree       Agree       Neutral       Disagree       Strongly disagree       Don't know

**24. Do you believe the GSDOA protects the following people from being arrested for simple possession of substances (small amount of drugs for own use) at the scene of an overdose? (Select all that apply)**

a. The person who calls 9-1-1

Yes       No       Don't know       Prefer not to say

b. The person who overdoses

Yes       No       Don't know       Prefer not to say

c. Anyone at the scene of an overdose

Yes       No       Don't know       Prefer not to say

**25. Imagine there is an overdose in a public place; 9-1-1 is called and the police come to the scene. Do you think the police can legally arrest a person if they: (Select all that apply)**

a. Have a larger amount of drugs on them or items (eg. scale) that may look like they are involved in drug dealing

Yes       No       Don't know       Prefer not to say

b. Are in a red/no-go zone they received for a previous charge that was not simple drug possession (eg. theft)  
 Yes       No       Don't know       Prefer not to say

c. Have an outstanding warrant for something other than simple drug possession (eg. theft)  
 Yes       No       Don't know       Prefer not to say

**Definition:** The **Good Samaritan Drug Overdose Act** was made law in May 2017. It protects the person who overdoses, the person who calls 9-1-1, and anyone else at the scene of an overdose from being arrested for 'simple' possession that means having illegal drugs for their own personal use. It does not protect anyone at an overdose from being arrested for outstanding warrants, controlled substance trafficking or production, or any other serious offense

**26. Based on this description, if you were to witness someone overdose in the future, would you call 9-1-1? (Select one)**

Yes (*skip to #27*)       No       Prefer not to say

**26a. If you answered no – why not:**

Don't have a phone  
 Worried about family services being notified  
 Worried about others knowing about drug use  
 Worried about mine or someone else's ethnicity and interactions with police/other 9-1-1 responders  
 Worried about police coming, with no relation to ethnicity. If so, specify why: \_\_\_\_\_  
 Worried about paramedics or fire services coming, with no relation to ethnicity. If so, specify why: \_\_\_\_\_  
 Other, please specify: \_\_\_\_\_  
 Prefer not to say

**27. Based on the description, please indicate your level of agreement with the following statement: This act will encourage people to call 9-1-1 in the event of an overdose. (Select one)**

Strongly agree       Agree       Neutral       Disagree       Strongly disagree

**28. Do you have any other thoughts you'd like to share about the Good Samaritan Drug Overdose Act?**

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**Thank you for taking the survey!**