

WIDER IMPACTS OF COVID-19

A look at how substance-related harms across Canada have changed during the pandemic

SUBSTANCE-RELATED DEATHS



Between March and September 2020, the total number of all (alcohol, cannabis, opioids, stimulants) **substance-related deaths increased** in the emergency departments (by 12%) and hospitals (by 13%) compared to the same period in 2019



Nationally, there were **3,351 opioid-related deaths** between April and September 2020, an **82% increase** compared to the same time period in 2019¹

SUBSTANCE-RELATED HOSPITALIZATIONS



Between March and September 2020, there were **80,954 hospitalizations**, representing a **5% increase** compared to the same period in 2019

	Alcohol	Cannabis	Opioids	Stimulants
OVERALL CHANGE	+5%	+5%	+7%	+8%
♂ Male	+6%	+6%	+17%	+9%
♀ Female	+2%	+4%	-5%	+6%

SUBSTANCE-RELATED EMERGENCY DEPARTMENT VISITS



Between March and September 2020, there were **176,902 emergency department visits**, representing a **5% decrease** compared to the same period in 2019

This decrease is solely driven by alcohol-related visits. Cannabis-, opioid-, and stimulant-related ED visits have increased.

	Alcohol	Cannabis	Opioids	Stimulants
OVERALL CHANGE	-11%	+8%	+8%	+5%
♂ Male	-9%	+5%	+12%	+5%
♀ Female	-13%	+14%	0%	+5%



¹ Special Advisory Committee on the Epidemic of Opioid Overdoses. Opioids and Stimulant-related Harms in Canada. Ottawa: Public Health Agency of Canada; March 2021. <https://health-infobase.canada.ca/substance-related-harms/opioids-stimulants>



WHO WAS AFFECTED?



People aged **20 to 59** years had increased hospitalizations for the total of all substances from 2019* to 2020*

People among neighbourhoods where income is the lowest²



1/3 of hospitalizations for substance-related harms

2/5 of emergency department visits for substance-related harms



Males



66% of all substance-related emergency department visits



64% of all substance-related hospitalizations



79% of all substance-related in emergency department deaths



71% of all substance-related in-hospital deaths

RESOURCES

- [GET HELP FOR PROBLEMATIC SUBSTANCE USE](#)

HOW YOU CAN REDUCE SUBSTANCE-RELATED HARMS

- Get informed, reach out to peers, family or health professionals for support.
- **Wellness Together Canada (WTC):** This online portal provides free and confidential, 24/7 access to mental health and substance use resources to help support the well-being of people across Canada during the COVID-19 pandemic.
- **Learn more about alcohol** and how to lower the risk of alcohol-related harms.
- **Learn more about cannabis and how to lower the risks of cannabis-related harms.**
- Learn more about **fentanyl** and **other opioids, how reduce risks of an opioid overdose, the signs of an opioid overdose** and what to do **if you witness an opioid overdose**.
- Learn more about stimulants, such as **methamphetamines, cocaine and crack**—and how to reduce the risks of stimulants-related harms.

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NOTES AND LIMITATIONS

- The study population includes residents of Canada aged 10 years and older.
- Substances included in the total grouping (all substances) are: alcohol, opioids, cannabis, other central nervous system (CNS) depressants, cocaine, other CNS stimulants, other substances, and unknown and multiple substances. Substance categories for alcohol, opioids, stimulants and cannabis were examined individually. The most common substance noted in both substance-related emergency department visits and hospitalizations was alcohol, followed by opioids, then cannabis and stimulants.
- Emergency department data reported includes full coverage in Quebec, Ontario, Alberta and Yukon. It includes partial coverage in Prince Edward Island, Nova Scotia, Saskatchewan and British Columbia. Hospitalization data reported includes all provinces and territories, except Quebec. For additional information, please refer to CIHI's **full report**.
- This analysis was based on provisional data and are not final; results presented should be interpreted with caution.
- This analysis only reveals the tip of the iceberg. Many people who use substances may not visit hospitals during the pandemic due to the fear of contracting COVID-19. Some may have died in the community because of acute toxicities of substances, and these individuals would not be captured in this analysis.

* Represents data from March to September

² Data for lowest income quintile neighbourhoods