

Key Considerations for Episodic Overdose Prevention Services (eOPS)

YOUTH

Youth face significant barriers to accessing overdose prevention and response services, especially Indigenous youth, those who experience poverty and homelessness, those in and from the child welfare system, and 2SLGBTQ+ youth.

Service providers affect a youth's trust in the healthcare system and their future decisions to seek care.

Support, don't punish

- Provide a welcoming environment for youth
- Support youth to identify their needs and access services

Know regulations about youth access

- Youth can access basic harm reduction services (e.g. eOPS, harm reduction supplies, naloxone, drug checking) on their own
- If a youth wishes to access healthcare services (e.g. safer supply), refer them to a trusted healthcare provider
- Providers can give naloxone and emergency drug poisoning response without guardian consent
- Providers can witness substance use, provide safer substance use education, and support safer substance use practices without a formal capacity assessment or guardian consent

Respect confidentiality

- Youth have a reasonable expectation of confidentiality when accessing services
- Premature or inappropriate reporting could damage trust

Understand your responsibilities

- Providers have a duty to report to child welfare if they believe a child under 19 is being abused or neglected
- Substance use alone or accessing harm reduction are NOT reasons to report
- Duty to report should be done thoughtfully and together with the youth and with any support people identified by the youth