

# Health Reports, February 2021

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The February 2021 issue of *Health Reports* contains three articles.

## Contacts with economic, justice, immigration and health systems by people who experience opioid overdoses

Canada's opioid overdose public health emergency has worsened over time, with opioid overdoses and deaths continuing to increase and the COVID-19 pandemic further exacerbating the situation.

The report on a new study, "[Understanding the socioeconomic profile of people who experienced opioid overdoses in British Columbia, 2014 to 2016](#)," provides insight into the socioeconomic characteristics of people who suffered non-fatal opioid overdoses or illicit drug toxicity deaths in British Columbia between 2014 and 2016. The study was based on new information about the contacts of these individuals with the economic, immigration, justice and health systems preceding, and at the time of, their overdose.

Results showed signs of economic marginalization among people who had fatal and non-fatal opioid overdoses. One-third were employed, primarily in construction (21.4%), in the year prior to their first observed overdose, yet 65.5% of these workers had experienced unemployment in the five years prior to their first observed overdose.

While one-fifth (20.4%) of people who experienced an overdose were employed for all of the five previous years, 41% had no paid employment during that time. Half (49.6%) had not received social assistance in the year leading up to their first observed overdose, and 44% had not received it in the five years prior to the overdose.

Approximately 60% of people who experienced an overdose had no formal police contact in the two years prior to their first observed overdose. Of those individuals who did have formal contact, the charges were primarily for non-violent offences such as shoplifting (16.5%).

Among people who experienced an overdose, immigrants were under-represented (7%) compared with immigrants in British Columbia's general population in 2016. Among immigrants who experienced an opioid overdose, most (41%) had arrived in Canada more than two decades before their first observed overdose in the study period.

## Significant increase in childhood cancer survival

A second study, "[Trends in paediatric cancer survival in Canada, 1992 to 2017](#)," examines trends in childhood cancer survival in Canada over time. A significant increase in five-year survival for all childhood cancers combined was observed in the 1992–1996 period (77%) compared with the 2013–2017 period (84%). However, much of the increase occurred in the first half of the study period.

At 35 percentage points, the greatest increase was for chronic myeloproliferative diseases—a group of diseases in which the bone marrow makes too many blood cells or platelets. In the first period, survival was relatively poor for cancers of the liver, bones and soft tissue; it was virtually unchanged in the second period. Once a child survived five years, the probability of surviving another five years exceeded 95% across most diagnoses.

## Overall, 22% of Canadian nonsmokers reported regular exposure to secondhand smoke

A third study, by researchers at Health Canada, "[Exposure to tobacco smoke among Canadian nonsmokers based on questionnaire and biomonitoring data](#)," used urinary cotinine (COT) measurements and questionnaire data from the Canadian Health Measures Survey to examine secondhand smoke exposure for nonsmokers aged 6 to 79. Among Canadian nonsmokers, 22% reported having been regularly exposed to secondhand smoke; of those, 26% had detectable COT levels. The most important contributor to elevated COT was exposure "at home."



### Note to readers

In 2018, Statistics Canada collaborated with the Government of British Columbia to augment provincial linked health monitoring of opioid overdoses. Previously, the province created the B.C. Overdose Cohort in order to inform provincial policy and strategic interventions. This partnership allowed Statistics Canada to generate the *Statistics Canada British Columbia Opioid Overdose Analytical File*, which provides new types of information on the links to immigration, employment, social assistance and justice systems at the time of a person's overdose and in the years prior, through the use of federal data holdings.

Detailed information about the data and their limitations is available in the report.

The report "[Understanding the socioeconomic profile of people who experienced opioid overdoses in British Columbia, 2014 to 2016](#)" as well as the articles "[Trends in paediatric cancer survival in Canada, 1992 to 2017](#)" and "[Exposure to tobacco smoke among Canadian nonsmokers based on questionnaire and biomonitoring data](#)" are now available in the February 2021 online issue of *Health Reports*, Vol. 32, no. 2 ([82-003-X](#)).

Also released today is a technical paper titled "[Statistics Canada British Columbia Opioid Overdose Analytical File: Technical Report](#)," which is part of the *Analytical Studies: Methods and References* series ([11-633-X](#)).

To enquire about "Understanding the socioeconomic profile of people who experienced opioid overdoses in British Columbia, 2014–2016" or "Statistics Canada British Columbia Opioid Overdose Analytical File: Technical Report," contact Gisèle Carrière ([gisele.carriere@canada.ca](mailto:gisele.carriere@canada.ca)), Health Analysis Division.

To enquire about "Trends in paediatric cancer survival in Canada, 1992 to 2017," contact Larry Ellison ([larry.ellison@canada.ca](mailto:larry.ellison@canada.ca)), Centre for Population Health Data.

To enquire about "Exposure to tobacco smoke among Canadian nonsmokers based on questionnaire and biomonitoring data," contact media relations at Health Canada (613-957-2983).

For more information, or to enquire about the concepts, methods or data quality of this release, contact us (toll-free 1-800-263-1136; 514-283-8300; [STATCAN.infostats-infostats.STATCAN@canada.ca](mailto:STATCAN.infostats-infostats.STATCAN@canada.ca)).