Introduction/Background

In 2016, the Government of British Columbia (BC) declared a provincial health crisis after a number of calls and deaths were related to the illicit synthetic drug fentanyl being found on the streets all across the province. The diagram below is a flow-chart created by the RCMP that shows the process of how fentanyl is trafficked onto our streets. RCMP suggest that from start to finish can take any where from approximately 10 days to a month.

Of the academic peer-reviewed literature used for the research, three common themes were found:

- Reverse Control Theory- Drug trafficking routes are not at random but actually methodically and carefully planned out.
- Online and Technical- Drug dealers and drug traffickers are using the internet and dark-web , such as the TOR network, more than ever before.
- More Research- The majority of studies and academia is largely medical related and not enough on drug trafficking or illicit drug use.

Saanich Police procedural logistics throughout a drug investigation and the process that a team or unit have to follow to gain evidence to a drug-related file identified that over 80 percent of drug investigation seen by Saanich Police Department are cross-jurisdictional (ex: Involving another police agency) and only approximately 30 percent of drug files are concluded. Out of the most recent drug seizures by Saanich Police Department, 31 percent of the fentanyl obtained was in pill form versus 69 percent in powder form. In order for Saanich Police to obtain intelligence or information from another police agency could take up to two weeks, and if detectives sent an unknown substance to the lab for testing, could take up to two months to get results back.

Approximately two milligrams of pure fentanyl can be enough to kill an average human adult from exposure by either touching, inhaling, smoking or injection. As a result, the provincial government expressed the need for health and law enforcement agencies to shift their mandates, resourcing and personnel, as well as funds to reflect the current state of the dangerous opioid crisis. This meant, not only more ambulances and first responders attending to calls out on the streets and more education and preventative measures, but also, the need to find out where the fentanyl was coming from and how this can be stopped. Many police agencies across the province followed suit by directing personnel from front-line members to specialized drug and street-crime units to prioritize their time and efforts on fentanyl, much like the Saanich Police Department on Vancouver Island. Thus, the goal of this research was to focus on the domestic part of fentanyl trafficking in BC to provide police with recommendations that can enhance their strategies to reducing fentanyl on the streets.

Methods

To help understand and answer the research question, the researcher collected secondary data using a mixed methods approach as it was best-suited for the purpose of this research. The advantage of using the mixed methods design for this research is that quantitative numerical data can add meaning and support to the accuracy of the qualitative data collected by providing better understanding and confidence from the inferences and conclusions made from the data collected in the research. In addition, mixed methods enhances the evidence to support positions or insights from the data by integrating both qualitative data and quantitative data. The researcher decided to collect both types of data for this research, as quantitative data for this research was collected from the PRIME-BC database, BC Corner Service (BCCS), and RCMP. Qualitative data was collected through the Saanich Police Department along with academic peer-reviewed literature from the Justice Institute of British Columbia online library database.

Findings/ Discussions

Upon analysis the statistical quantitative data from the BC Corner Service and PRIME-BC, Victoria saw their highest amount of illicit drug overdose in 2017 at 91 deaths, parallel to the overall generalization that British Columbia had its worst year of fentanyl-related deaths. Moreover and consistent for the past two years, the age range of 30-39 years-old accounted for the highest percentage of deaths across the province at 27 percent followed by 40-49 years-old at 24 percent, suggesting that over half of the fentanyl and illicit drug deaths across the province were people in their prime adulthood. Furthermore, fentanyl accounted for almost 70 percent of all overdose deaths within the province, in addition that private residences made up over 60 percent of the location in which a person was mostly likely to die from illicit drug overdose not on the streets, like some people would assume (BCCS, 2018).

The PRIME-BC data demonstrated, and was supported by BCCS stats, that 2017 was the busiest year for law enforcement agencies in the Greater Victoria area relating to fentanyl. It is important to note that not all overdose deaths involved the police unless there was evidence to suggest foul play or criminal circumstances. Furthermore, the PRIME-BC data distinguishes the most common places police dealt with files relating to fentanyl such as highways, streets, or roadways as the most common followed by single family homes, townhouses and duplexes. The PRIME-BC data categorized the person(s) involved with an investigation relating to fentanyl where the subject of a compliant (SOC) was most likely to be charged or chargeable upon completion of the investigation, next to, the person(s) turning up deceased.

Conclusions and Recommendations

In conclusion, an overabundance of information and data was collected from academic literature, quantitative and qualitative data from various agencies in BC for this research project. The ongoing crisis has made fentanyl a central issue in Canadian society which has shifted the focuses and mandates of first responders, particularly law enforcement. Based on the data collected and the findings, there are a number of recommendations that encourage police strategies to reducing the amount of fentanyl on the streets and are stated as the following:

- Eliminate all municipal drug enforcement units and create a province-wide drug enforcement unit that has jurisdiction of the whole province to investigate drug trafficking files to reduce the barrier and challenges of cross-jurisdictional investigations.
- Create a new province-wide drug intelligence database to reduce the time of transferring intelligence from one department to another and be easily accessible to every police agency within the province.
- Create a national pill-press registration, with special powers given to police to have the ability to obtain a search warrant for suspected unregistered pill-presses.
- Ban Bulk Imports at the border of chemicals used to buff fentanyl coming into the country.
- Create new legislation to restricting and enforcing online servers and databases used to buy illegal drugs coming into the Canada.
- Invest additional money into more research around drug trafficking routes into Canada, such as online, ports, and border crossings, as well as how to maximize enforcement at the border while not impacting economic activity.

By implementing these six strategies, police can be better fitted to finding and reducing fentanyl on the streets, as well as, take a more pro-active approach to enforcing and stopping any potential fentanyl coming into Canada. As the drug market continues to evolve over time, so does the ways in which police need to adapt to new strategies of reducing illegal drugs on the streets. As each and every day passes, new information becomes available to the fentanyl-crisis in BC which could be of benefit to starting new research or finding more strategies but for now, police will continue to use the resources and strategies they have to overcome this deadly-opioid crisis.

References


