BRITISH COLUMBIA CENTRE ON **SUBSTANCE USE**

Networking researchers, educators & care providers

Youth and Drug Checking

A GUIDE FOR SERVICE PROVIDERS

2026

ABOUT THE BCCSU DRUG CHECKING PROGRAM

The BC Centre on Substance Use (BCCSU) connects people and knowledge to improve substance use outcomes through research, guidance, training, and systems design. The BCCSU is an academic centre housed within Providence Health Care and Providence Research, and is a University of British Columbia Faculty of Medicine-affiliated centre. The BCCSU is also affiliated with the Vancouver Coastal Health Research Institute.

The BCCSU Drug Checking Program supports a network of drug checking services across BC through research, training, and practical guidance. In partnership with people who use drugs, service users and providers, health authorities, Indigenous communities, researchers, clinicians and harm reduction experts, we collaborate to share evidence generated from drug checking services across the province, build capacity among technicians and service providers, and develop resources to support service set up and delivery. The BCCSU Drug Checking Program achieves this through **three main focus areas**:

Data mobilization, Research and Evaluation

Leading an innovative multidisciplinary program of research, monitoring, and evaluation of drug checking programs in community settings throughout BC. This includes weekly updates to the Drug Sense Dashboard, and the development of monthly reports, data reports, and bulletins to share findings from drugs brought for drug checking at partner sites, and to provide a glimpse into the current drug supply.

Education and Training

Strengthening the drug checking community through a provincial technician certification program designed to equip drug checking technicians with the necessary knowledge, skills, and hands-on experience to deliver high-quality and consistent drug checking services. A community of practice brings together technicians across the province to share expertise and access drug checking-related resources, supporting knowledge exchange and continued professional development beyond the training program.

Guidance and Systems Design

Developing technical materials, operational guidance, and tools to assist drug checking programs in planning, implementing, and delivering drug checking services. This growing suite of resources includes introductory guidance for communities considering establishing drug checking services, operational and best practice guidance to support service delivery elements, and standard operating procedures to ensure service quality and consistency, and regulatory compliance.

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- BC Ministry of Children and Family Development
- BC Ministry of Health

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Land Acknowledgement

The British Columbia Centre on Substance Use would like to respectfully acknowledge that the land on which we work is the unceded territory of the Coast Salish Peoples, including the territories of the xʷməθkwəy̓əm (Musqueam), Sḵwx̱wú7mesh (Squamish), and səlílp lwətaɬ (Tsleil-Waututh) Nations.

We recognize that the ongoing criminalization, institutionalization, and discrimination experienced by people who use drugs disproportionately harms Indigenous peoples and that continuous efforts are needed to dismantle colonial systems of oppression. We are committed to the process of reconciliation with Indigenous peoples and recognize that it requires significant and ongoing changes to the health care system.

Feedback

We love to hear from you! If you have comments, suggestions, or to request drug checking training, please contact us: drugchecking@bccsu.ubc.ca

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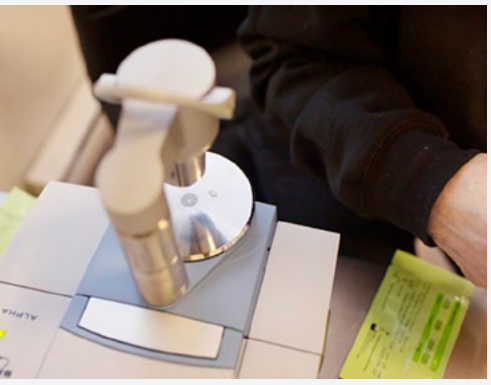
INTRODUCTION

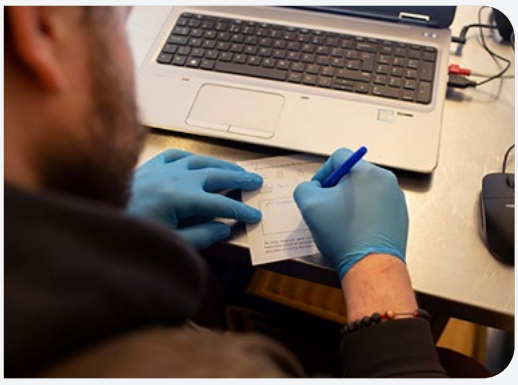
About This Guide

This guide has been developed to support organizations and staff who deliver drug checking services to better meet the needs of young people. It offers practical, evidence-informed guidance for designing, adapting, and providing services that are youth friendly, accessible, and inclusive. The content reflects current research and frontline experience, and has been shaped by input from an advisory committee and a youth focus group.

As a component of a harm reduction and health promotion approach, drug checking promotes safety and well-being by offering people who use drugs clear, accurate information about what is in their drugs, supportive conversations about ways to reduce risk, and links to other resources. When these services are offered in youth-friendly ways, they can create space for open dialogue about substance use, and enable young people to ask questions, explore concerns, and make informed decisions.

The guidance offered here is not prescriptive. Drug checking services differ in size, mandate, and resources, and not all practices described will be possible in every setting. The goal is to provide ideas, examples, and adaptable strategies that can inform local approaches and support continuous improvement.





Why This Guide Is Needed

National data show that youth and young adults use unregulated substances at a considerably higher rate than the general population. According to the 2023 Canadian Substance Use Survey, 14 per cent of 15–24-year-olds reported using unregulated substances in the past year compared to 8 per cent of the population overall.[1]

Youth in B.C. face real risks linked to the toxic drug supply. While recent provincial data show that youth age 0–18 make up about 1 per cent of paramedic-attended opioid overdose events, the number jump alarmingly among older youth and

14% 15–24-year-olds who reported using unregulated substances in the past year

young adults: young males age 19 to 29 make up 11% of paramedic-attended toxic drug poisonings, while young females comprise 5%. Most people who receive paramedic care for a drug toxicity event survive, so non-fatal exposure forms much of the overall picture.[2] Non-fatal exposures may include long term impacts related to loss of oxygen to the brain, including acquired brain injury or hypoxic brain injury[3]. Longer term data show that unregulated drug toxicity has been the leading cause of unnatural death among youth, with about 25 deaths per year between 2019 and 2023.[4]

These risks are not experienced equally. First Nations youth face a disproportionately high burden. Between 2018 and 2022, First Nations youth age 15–29 accounted for one third of all toxic drug events among First Nations people in B.C. In 2022, the rate of toxic drug events among First Nations female youth was ten times higher than among other female youth, and the rate among First Nations male youth was seven and a half times higher. Between 2017 and 2022, First Nations youth made up more than 17 per cent of youth toxic drug poisoning deaths while representing just over 4 per cent of the youth population.[5]

These data show the need for accessible, youth-friendly, and culturally appropriate drug checking services, yet current services do not always meet this need.

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1 Government of Canada. Canadian Substance Use Survey (CSUS): summary of results for 2023. Ottawa (ON): Health Canada.

2 BC Centre for Disease Control. Unregulated Drug Poisoning Emergency Dashboard. Paramedic-Attended Opioid Overdose Event Indicators. Vancouver (BC): BCCDC. Accessed November 25, 2025.

3 BC Center for Disease Control. A Brain Injury Following Drug Toxicity Event. Knowledge Update. Vancouver (BC): BCCDC. Accessed March 20, 2016

4 British Columbia Coroners Service. Youth Unregulated Drug Toxicity Deaths in British Columbia: January 1, 2019 – December 31, 2023. Victoria (BC): BC Coroners Service; 2024.

5 First Nations Health Authority. Toxic Drug Poisoning Trends among First Nations Youth (aged 15-29) in British Columbia. FNHA: n.d.

Drug checking services in B.C. have generally been designed for adults. While young people can and do use these services, they may feel unsure or uncomfortable about accessing adult-focused programs. Many youth may not know that drug checking is available to them at all.

In turn, staff operating drug checking services may feel uncertain about how to engage youth effectively or how to adapt existing practices to meet young people's needs. Staff may also wonder how to engage with young people's parents

> "For me, I definitely want to see [drug checking] in my community."

or guardians. Without clear guidance, even experienced workers can find it challenging to balance youth autonomy, safety, and legal considerations.

This guide is designed to support equitable access to drug checking for youth. It is intended to help existing services adapt so that they are more youth friendly and give staff more confidence when engaging with young people. The guide can also help inform the development of youth-specific drug checking services.

Who This Guide Is For

There are two primary audiences for this guide:

Frontline staff working in drug checking services. This includes technicians (those who carry out the drug checking process), support staff, and others in the service who interact directly with youth.

Program managers, public health professionals, and policymakers responsible for managing, planning and supporting drug checking services, including youth-centred service models.

FOUNDATIONS FOR YOUTH DRUG CHECKING

1. Youth and Substance Use

Defining Youth

In legal terms, "youth" (or "minors") usually means anyone under 19 years old. In this guide, though, "youth" refers generally to people age 12–25. This definition takes into account that the brain continues developing into the mid-twenties and that major life changes or transitions occur during these years, and is consistent with the age requirements for many youth-oriented services, such as employment programs and sexual health services. These shifts shape how youth use substances and what kind of services and supports they may need.

Individuals within this age range are diverse—differences in age, life experiences, identity, and developmental stage all matter. A 14-year-old and a 24-year-old are in very different places in their lives. What works for a teenager figuring out secondary school may not fit a young adult juggling employment, education, or parenting. Street-involved youth may face urgent concerns related to safety, basic needs, or survival, and require different kinds of support than young people who are living in stable housing, either independently or with their families.

The goal is to meet each youth where they are at, with care and conversations that fit their stage in life.

Legal Considerations

Health and social service providers can improve young people's access to drug checking and other harm reduction interventions by considering their needs and understanding key British Columbia legislation when planning and delivering services.

Consent and Access

> *People under the age of 19 can access basic harm reduction services, including drug checking, without parent or guardian consent.*

BC's Infants Act explains the legal position of children under age 19 as it relates to accessing health care, including their ability to consent to health care on their own behalf. Drug

checking staff can be reassured that a young person under the age of 19 is able to access drug checking services on their own—youth can access all basic harm reduction services without parent/guardian consent, including access to naloxone kits and training, harm reduction supplies such as needles and pipes, accessing overdose prevention sites, and receiving education about harm reduction strategies and services [6,7].

When youth seek drug checking service, staff should engage them in conversation to confirm they understand:

- The purpose and limits of drug checking (i.e., information only, no guarantee of safety).
- How results will be shared, and what the results mean.

BC's Harm Reduction Strategies and Services Policy and Guidelines provide more information on youth access to basic harm reduction services—such as drug checking—as well as youth access to more advanced services. Interior Health has developed a comprehensive frequently asked questions fact sheet on this topic—see Appendix A.

Reporting Child Protection Concerns

> *Youth substance use on its own is not a protection concern that requires a report to the Ministry of Children and Family Development.*

In British Columbia, any member of the public who has reason to believe[8] that a child under 19 needs protection, has a duty to report their concern to the Ministry of Children and Family Development or to a delegated Indigenous Children and Family Services Agency under section 14 of the Child, Family and Community Services Act. This includes staff at drug checking services.[9] The legal duty to report suspected child abuse or neglect supersedes clinical confidentiality[10].

The public's duty to report is based on what a parent/guardian is or is not doing—(commission or omission)—not the activities of the youth. Awareness that a youth is using substances, or that a youth is accessing drug checking services, is not something that requires a report to the Ministry of Children and Family Development.

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6 Sedgemore K, Crabtree A, Stititlis B. Supporting BC youth at risk of drug poisoning from unregulated supply BCMJ 2023.

7 For advanced harm reduction services—which do not include drug checking—there may be a need for staff to perform a competency assessment while obtaining youth consent. Advanced harm reduction services are within the legal and regulatory scope of a regulated health care provider, including services such as inserting an IV, helping with venipuncture, or prescribing contraceptives.

8 "Reason to believe" simply means that, based on what you have seen or information you have received, you believe a child/youth has been, or is likely to be, at risk. You do not need to be certain. It is the child protection worker's job to determine whether abuse or neglect has occurred or is likely to occur.

9 For detailed information, drug checking staff may wish to refer to Interior Health's frequently asked questions legal considerations fact sheet— which is included as Appendix A and summarized in this section.

10 Failing to promptly report suspected abuse or neglect to MCFD is a serious offence under Section 14 of the CFCSA.

The *Child, Family and Community Services Act (CFCSA)* provides the following overarching examples of protection concerns under section 13 (see for more details) that require reporting to government:

- Inadequate access to food, clothing, shelter,
- Inadequate access to health care
- Inadequate protection from illness injury and other harm
- Need for protection from physical, sexual or emotional abuse
- Need for protection from neglect.

Awareness that a parent/guardian is using substances also does not on its own mean that a youth needs protection. However, if a member of the public including a drug checking staff person has reason to believe a child needs protection as

Examples of protection concerns that require reporting

Has been, or is likely to be, physically harmed, sexually abused or sexually exploited by a parent or another person and the parent is unwilling or unable to protect the child or youth;

Has been or is likely to be physically harmed because of neglect by the child or youth's parent;

Is emotionally harmed by the parent's conduct;

Has been abandoned and adequate provisions have not been made for the child or youth's care;

The child or youth is deprived of necessary health care;

Is living in a situation where there is domestic violence by or towards a person with whom the child or youth resides;

Is likely to have seriously impaired development by a treatable condition and the child or youth's parent refuses to provide consent to treatment;

Is or has been absent from home in circumstances that endanger the child or youth's safety or well-being;

Has a parent that is unable or unwilling to care for the child or youth and has not made adequate provisions for the child or youth's care;

Has a parent that is no longer alive and adequate provisions have not been made for the child or youth's care.

From section 13 of *Child, Family and Community Services Act*

per Section 13 of the CFCSA they must make a report promptly to the Ministry of Children and Family Development's (MCFD) Provincial Centralized Screening number (1-800 663-9122), or to any MCFD or Indigenous Child and Family Service Agency child welfare worker.

Developing clear, organizational policies regarding duty to report protection concerns can help drug checking and other harm reduction staff navigate specific situations with confidence. Interior Health has developed four practice recommendations (see Appendix A) to guide harm reduction staff when they are considering making a report under the CFCSA:

1. **Be aware of your biases and stigma.** It is important to be mindful of your own values and assumptions as well as the role stigma plays in influencing those. Reporting based on stigma or fear can prevent youth from accessing services.
2. **When possible, do a broader safety assessment.** Youth who have experienced trauma are at greater risk of substance use disorders. Youth or parent/guardian substance use may be indicators of possible child protection issues, especially when coupled with other indicators - further assessment is recommended.
3. **When in doubt, consult.** There are many grey areas when working with youth. Discuss youth cases with your team and manager. Consider consulting with the Ministry of Children and Family Development (MCFD). MCFD encourages the public to call and consult when they are concerned about possible indicators that a child may need protection. If you wish to consult with MCFD you should do so without disclosing identifying information about the child/youth unless the youth has given consent for you to share that level of information.
4. **Be transparent with youth if making a report to MCFD.** When a child needs protection and a report to MCFD is required, service providers should communicate openly and transparently with the youth about what will be shared with MCFD, invite them to be involved in making the report and offer support during the process.

In addition, it is recommended to consult resources from the Ministry of Children and Families Development to inform policies for organizations serving youth. These resources can be helpful when designing policies and procedures about recognizing warning signs, and understanding how to support direct and indirect disclosures of abuse or neglect[11].

11 Additional MCFD resources that can help both technicians and program planners can be consulted at: Responding to Child Welfare Concerns: Your Role in Knowing When and What to Report The B.C. Handbook for Action on Child Abuse and Neglect: For Service Providers Duty to Report - MCFD Pamphlet

Diversity of Substance Use Among Youth

Youth have many new experiences as they grow, which for some, may include trying substances. Substance use isn't always problematic. Some young people use occasionally or socially, while for others it may become a regular part of life. A small proportion may develop patterns of problematic use.

Young people use substances for many reasons. For some, they offer connection, pleasure, or fun. For others, substance use can be a way to manage stress, pain, or trauma. In the McCreary Centre Society's 2023 BC Adolescent Health Survey most youth who used substances said they did so for fun (61%), experimentation (32%), or connection with friends (30%). Stress (22%) and feeling down or sad (20%) were also common reasons. A much smaller number of youth reported use related to addiction (5%).[12]

These dynamics exist in the context of an unregulated drug supply that carries significant risks for youth. The toxic drug crisis affects youth in different ways, and the level of risk varies across communities and circumstances.

The nature of substance use can shift over time, with young people moving between different places on the wheel of youth substance use patterns[13] (Figure 1).

Drug checking services can support youth at any point on this wheel. They can also be tailored for the needs of specific groups of youth, so that the service feels appropriate and responsive to their circumstances.

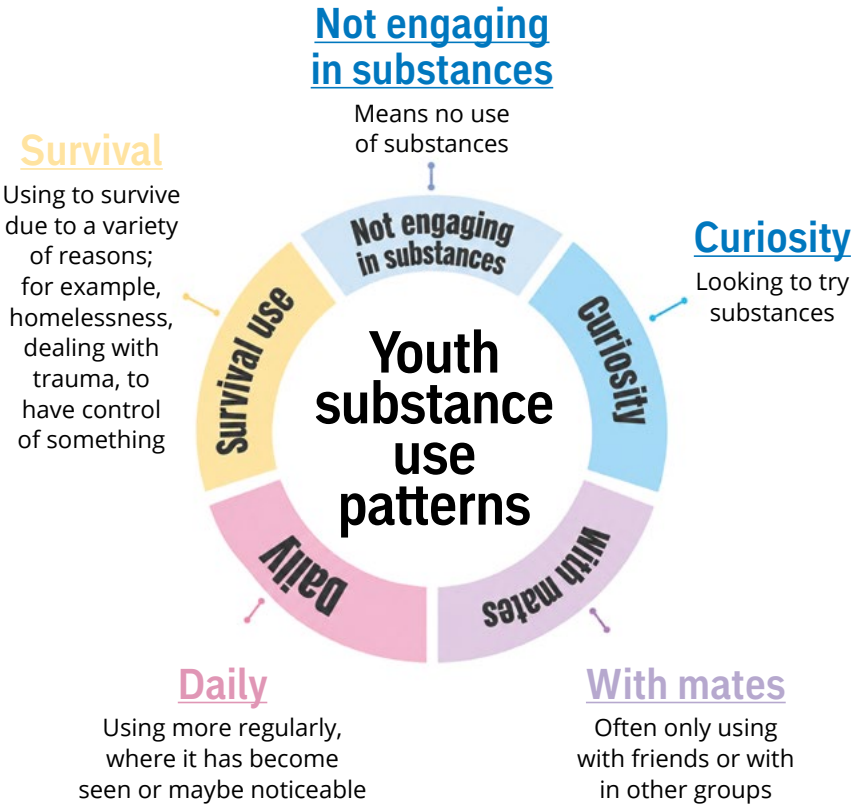

Figure 1. Youth substance use patterns, from Kali Sedgemore (2023)

12 Smith A, Poon C, Peled M, Forsyth K, Saewyc E, McCreary Centre Society. The Big Picture: An overview of the 2023 BC Adolescent Health Survey provincial results. Vancouver (BC): McCreary Centre Society; 2024.

13 Sedgemore, Kali. (2023) developed from work in Report on Resistance 3: Youth Use Drugs Why Deny It? https://www.bccsu.ca/wp-content/uploads/2023/04/yudror.pdf

Barriers to Service

Youth and service providers consulted for this guide identified several barriers to young people accessing drug checking services. These include:

- Fear of being seen or recognized.
- Feeling nervous about getting results and not wanting to deal with the choices that an unwanted result presents.
- Reluctance to give up part of their supply for checking.
- Feeling unsure or intimidated about approaching a service.
- Anxiety about not knowing what to do or what will be expected from them at the service.
- Adult-focused spaces that feel unwelcoming, even if youth are technically allowed in.
- Workers who take a saviour approach that undermines trust and makes youth feel judged.
- An abstinence culture that penalizes youth for using substances.

  These barriers reflect a combination of personal, practical, and structural hurdles that can limit access to drug checking for youth.

Some young people face greater barriers because of their circumstances or identities. For instance:

- For Indigenous youth, racism in health and social services and the ongoing impacts of colonial policies can make services feel unwelcoming or unsafe.
- Youth who experience poverty or homelessness may struggle with practical barriers such as lack of transportation and the pressure of meeting basic survival needs, which can take priority over harm reduction.
- Youth in and from care may fear stigma, judgement, or harsh consequences if their substance use is shared with caregivers, social workers, or authorities.
- For 2SLGBTQIA+ youth, discrimination or a lack of respect for their identities can add to feelings of exclusion or lack of safety.
- International students may have limited information about the toxic drug supply in B.C., may be far from trusted supports, and may not know where to find help or what services are available. There may be added barriers to reaching out for information because of fears of based on legal responses to drugs their country of origin and threats to student status.

These overlapping challenges make it harder for young people to access critical supports, even when services are, in principle, available.

Historically, youth have had little say in how harm reduction services are planned and delivered. This has contributed to the barriers they face today. Service providers can start to close these gaps by listening to youth, involving them in decisions, and making sure services feel comfortable, respectful, and geared to their realities.

The rest of this guide focuses on how drug checking services can be shaped to be more accessible and appropriate for young people.

> *It's important to remember that youth use drugs and should be given the same dignity and services as adults.*

Figure 2. Youth Harm Reduction Services Policy Draft, Report on Resistance from Kali Sedgemore (2023)

2. Foundations of a Youth-Friendly Approach

A youth-friendly approach to drug checking is grounded in some key foundations: the values that guide service delivery; the meaningful involvement of youth in shaping and leading services; and the staff that make those services feel comfortable, respectful, and supportive.

This section explores those foundations. It describes the core values and principles that underpin youth-centred practice, practical ways to involve youth in design and delivery, key staff characteristics, and the importance of understanding developmental differences when working with young people.

Core Values

The core values set out below reflect what youth have already said should guide the delivery of youth-focused substance use services. They are drawn from *Youth Voices on Treatment: In the Shadow of the Overdose Crisis* (BCCSU, 2022), which was developed in collaboration with young people who use substances.[14]

What do these values look like in practice for drug checking services?

Non-judgmental

Staff welcome youth without criticism or assumptions about their choices. Youth can ask questions, share concerns, and bring in substances without being shamed or stigmatized.

Individualized

Support is tailored to each young person's situation. Staff listen to what each youth needs, offer options, and avoid a one-size-fits-all approach. For example, one youth might want detailed information about results, while another might only want a quick check.

Trauma-informed

Services are designed with the understanding that many young people who use substances have experienced trauma. Staff aim to create a calm, predictable, and safe environment. They explain what will happen, give youth control over decisions, and avoid practices that might feel overwhelming or uncomfortable. For example, technicians might ask before handling a youth's belongings, offer choice about staying during checking, or use quiet, private spaces for conversations.

Culturally-informed

Services respect and reflect the cultural identities of the youth who use them. This could mean having culturally relevant resources, staff who reflect the diversity of young people, or space for youth to bring their own practices and perspectives.

Confidential

Youth can trust that their information and substance checks will not be shared without their consent. Staff are clear about what will and won't be recorded or reported, so youth know their privacy is protected.

Accessible

Services are easy for youth to use. This includes convenient locations, flexible hours, low-barrier entry, and clear information about what to expect.

These core values are reflected in every part of this guide. You'll see them referred to both directly and indirectly, often more than once, because they matter in every aspect of drug checking services.

14 BC Centre on Substance Use. Youth Voices on Treatment: In the Shadow of the Overdose Crisis. Vancouver (BC): BCCSU; 2022.

> “The need and the desire for a service like this is definitely there. It is more so now about creating it and working with other young people to bring it to life.”

Youth Voice in Service Design

Involving youth in service design can help make drug checking services more relevant, relatable, and effective. Youth input can inform adjustments to existing services designed largely with adults in mind as well as shape the development of new, youth-specific options.

Ways youth can be involved

There are many entry points for youth involvement, and services can choose approaches that fit their capacity and context. For example:

- Gathering input on existing services: Invite young people to share what works and what doesn’t through surveys, focus groups, or casual conversations. This could cover a wide range of issues, such as hours of operation, confidentiality, and location of services.
- Advisory roles: Create a youth advisory group to provide regular feedback and suggestions. This could be an ongoing or short-term group focused on specific issues such as physical space, service promotion, or what works to engage young people.
- Partnership in outreach and promotion: Involve young people in co-designing posters, shaping social media content, or participating in community events to spread the word in ways that connect with their peers.
- Participation in service delivery: Where possible, engage youth as leaders, peers, staff, practicum students, or volunteers. They can connect with other young people more readily and help make services more accessible and welcoming.

Engaging with diverse youth

Young people are not all the same. Experiences differ based on culture, gender identity, sexual orientation, socioeconomic status, and patterns of substance use. Seeking input from a wide range of youth helps avoid one-size-fits-all approaches and makes services more equitable.

Ongoing involvement

Youth voice is most impactful when it continues beyond the initial design stage. Advisory groups, regular check-ins, or simple feedback tools (such as suggestion boxes or online forms) help services stay connected and responsive to young people’s needs.

Doing what you can

Not every service has the same resources or opportunities for engagement. Some may have the ability to build youth-specific programs or standing advisory groups. Others may only be able to gather feedback and make small adjustments to existing services. Either way, what matters is creating space for youth input, respecting what is shared, and acting on it wherever possible.

It also helps to let young people know that their ideas matter, even when a service can't act on them immediately. Being open about what is possible builds trust and shows youth that their input has value.

Youth involvement: Start where you can

With limited capacity:

- Collect quick feedback through short surveys or casual conversations.
- Add a suggestion box for anonymous input.
- Make small adjustments in response to youth feedback.

With moderate capacity:

- Run a one-time focus group or feedback session.
- Form a short-term youth working group to advise on a project or issue.
- Invite youth to review service materials for clarity and accessibility.

With greater capacity:

- Establish a standing youth advisory group that meets regularly.
- Co-develop youth-specific programs or service hours with youth input.

Recognizing youth involvement

If resources allow, acknowledge young people's time and expertise with a cash honorarium or gift certificate. If resources are limited, consider alternatives such as a recognition certificate, a letter of recommendation, or support with employment or education applications. Partnerships with academic institutions may also have opportunities for work experience or co-op placements for some students. On campus harm reduction services may also have volunteer or staff positions available for youth.

Assessing youth involvement at your organization

Resources such as the Youth Service Assessment Tool, developed by the YMCA of Northern BC and Foundry Prince George in collaboration with the Canadian Centre on Substance Use and Addiction, can help organizations think through youth involvement in service development as part of assessing their overall approach to better supporting youth and young adults who use substances.

Staffing and Staff Characteristics

As outlined in the *BCCSU Drug Checking Implementation Guide* (2022), frontline staff in drug checking services typically comprise:

- **Technicians:** Trained to conduct drug checks using available drug checking technologies and to share results with service participants.
- **Support staff:** Guide people into the service, help with sample intake, and, in some cases, provide results.[15]

In the context of providing youth-friendly services, it's important to think about who is best suited to these roles, the types of skills and competencies they bring, and their capacity for supporting youth-centred service approaches.

Work from a youth-centred approach

Working from a youth-centred approach means recognizing each young person as an individual with their own particular experiences, identities, and needs. Staff who understand this can create drug checking services that feel welcoming, comfortable, and relevant. The following skills and competencies build on the core values of youth-focused substance use services and help staff meet young people where they are.

Build trust: Many youth mistrust institutions and may approach services with caution. Every interaction can shape whether they feel comfortable returning in the future. Respect youth confidentiality and be honest about what you can and cannot help with. Avoid over-promising or taking a saviour approach. Be consistent and transparent so youth know what to expect.

Connect with youth: Be friendly, personable, and bring positive energy. Listen carefully to both the words a young person uses and the emotions behind them. Show genuine interest and empathy. Engage youth with a spirit of collaboration, not from a position of power.

Support gender identity: Respect each young person's gender identity and use the name and pronouns they share. If you are unsure, ask simply and respectfully. Introducing yourself with your preferred pronouns can also help set a tone of acceptance. This small step can help youth feel seen, respected, and comfortable.

Use non-judgmental language: Approach every young person with respect and without assumptions. Ask open questions and use language that is clear and factual. Avoid judging choices as "bad" or "unwise."

15 BC Centre on Substance Use. *Drug Checking Implementation Guide: Lessons Learned from a British Columbia Drug Checking Project*. Vancouver (BC): BCCSU; 2022.

Practise cultural safety and humility: Apply the principles of cultural safety and humility in every interaction. Recognize that colonialism, racism, discrimination, and intergenerational trauma shape how First Nations, Métis, and Inuit youth access and experience services. Ask rather than assume, respect each youth's knowledge of their own needs, and create space for choice. Services should support staff to access cultural safety and humility training to deepen this practice.

Provide trauma- and violence-informed care: Trauma- and violence-informed practice helps to create a sense of comfort and predictability for youth who may have experienced trauma, violence, or other disruptions in their lives. Be clear about what will happen during drug checking and support each youth's control over decisions. Services should support staff to access training in trauma- and violence-informed approaches so they can apply this practice effectively.

> "Just being a really friendly person who doesn't really make assumptions about who is coming in and what they look like."

Make youth part of the team

Young people with lived or living experience are an important part of youth-friendly drug checking services. When young people are visible representatives of the service it can help youth engage with drug checking—youth often say they trust staff more when they know the person has "been there," and this credibility can make it easier to ask questions and take in information. Workers who are closer in age to youth using the service may further increase comfort and trust.

Support staff positions are well suited for young people and can provide a clear entry point into the service. With training and mentorship, these roles can expand into technician or leadership responsibilities. Involving youth both as peer support and, where appropriate, as drug checkers or project leads helps ensure the service feels relevant, approachable, and responsive to young people's needs.

Bringing youth into the delivery of services also strengthens the system as a whole, by building credibility with young people now and helping to develop the next generation of skilled harm reduction workers and leaders.

> "Having someone in a similar age group who has experience consuming drugs and also ideally getting their drugs tested or checked… It's really important to have a peer."

Recognizing Developmental Differences

Youth who come to a drug checking service will not all have the same needs or ways of engaging. Developmental stage influences how young people understand drug checking results, what kinds of risks they pay attention to, and how they decide whether to change their use. Differences in life experience can also shape how youth approach conversations about substance use. Recognizing developmental differences, while staying aware of variations in experience, can help staff tailor their approach so youth feel understood and supported.

Developmental stage matters: Younger adolescents[16] may be more concrete in their thinking, more influenced by friends, and less likely to anticipate long-term consequences. Older youth often have more independence, stronger abstract reasoning skills, and may see substance use as part of social identity or stress management. These differences can affect how youth interpret drug checking results and what information feels relevant to them.

Communication styles vary: Younger youth may respond better to simple, direct explanations and reassurance, while older youth may want more detailed information, discussion of risks and trade-offs, or space to ask critical questions. Research also shows that credibility matters across all ages—youth are more likely to take in information when they trust the source.

Substance use experiences differ: It can help to understand whether a young person is exploring substance use for the first time or has more experience. Evidence suggests that younger adolescents are more likely to experiment or use occasionally, and older youth may be more likely to use more regularly or as a coping mechanism. At the same time, age alone does not show how much experience or knowledge a young person has. Asking a few questions often clarifies what a young person already knows and what kind of information or support they are seeking.

Age is not usually disclosed: Youth are not likely to share their exact age, and staff are not required to ask. Staff may try to assume age based on appearance. Rather than trying to determine age, staff are encouraged to instead focus on tailoring communication to each young person's level of understanding, the questions they ask, and the cues they provide.

Chronological age only tells you so much: Youth mature at different rates, and their needs are shaped not only by age but also by social, cultural, and personal factors, including cognitive differences and neurodiversity. Staff should aim to provide information that is accessible across age groups, while adjusting tone and detail in response to the individual youth in front of them.

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16 Chapter 4: A developmental approach to prevention and intervention. In *Childhood and adolescent pathways to substance use disorders*, Leyton, M., & Stewart, S. (Eds.). Canadian Centre on Substance Use and Addiction. https://www.ccsa.ca/sites/default/files/2019-04/CCSA-Child-Adolescent-Substance-Use-Disorders-Report-2014-en.pdf

MAKING SERVICES WORK FOR YOUTH

3. Strategies for accessible, appealing programs

This part of the guide focuses on making drug checking services more accessible and appealing to youth—so they feel comfortable showing up, using the service, and returning. It highlights ways to increase youth awareness, adapt existing service models, and connect young people with information, resources, and ongoing support. The guidance can also inform the development of new, youth-specific services.

Raising Awareness and Building Understanding

Letting youth know that drug checking is available—and giving them a clear sense of what to expect—is a critical part of making services accessible. Awareness-raising is not just about promotion. It's about building trust, reducing uncertainty, and ensuring young people understand that drug checking is available and relevant to their needs. Youth consulted for this guide emphasized the need for practical, accessible information—not just about where services are, but how they work.

Tips for raising awareness among youth

- Keep messages short, visual, and easy to share.
- Use platforms that youth already spend time on (e.g., Instagram, TikTok).
- Explain the step-by-step process to reduce uncertainty.
- Share information through trusted youth-serving organizations.
- Provide take-home materials (pamphlets, FAQs) that youth can refer to.
- Encourage peers to spread the word—word of mouth builds credibility.

> “Starting small like pamphlets. Something that is kind of simple like a step-by-step type of thing… There is not enough information out there for people to know that this is there.”

Some youth-focused settings may have policies about how harm reduction services can be promoted or in what ways youth can be engaged to raise awareness about options such as drug checking. It is recommended to connect with administrative leadership to get clarity on these policies. This is also a good place to start building awareness with the adults that support youth and ensuring that promoting or offering drug checking is endorsed.

Build awareness through partnerships: Many youth consulted for this guide said they simply did not know that drug checking exists. Working with youth-serving organizations, and community programs such as Foundry can help raise awareness about local drug checking services. When trusted youth services share information, it helps to normalize drug checking as a safe and supportive option.

Use youth-relevant promotion: Social media platforms are an important way to reach young people. Instagram and Tik Tok, for example, could be effective tools to engage older youth. Content should be short and visually appealing.

Provide clear and comprehensive information: Youth have said they want more than just an address and service hours. When possible, use social media or a web page to share information about the service. Pamphlets, FAQs, step-by-step guides, infographics, and photos of the building and drug checking space can also help demystify the drug checking process. Linking to a website with reliable information also supports transparency, and providing resources for parents or caregivers can reduce stigma and questions at home. Services can make sure information stays useful by reviewing materials with youth and making updates based on what they say.

Promote drug checking as part of health services: Campaigns from health authorities or other reputable organizations can present drug checking as a standard and accessible health promotion service.

Spread the word: Word of mouth remains a powerful tool. Staff and peers involved in drug checking services can encourage ongoing conversations about what the service does, who it’s for, and why it matters.

> “Like pamphlets, infographics, social media campaigns or videos… There is such a lack of information.”

Service Delivery Models and Youth-Friendly Settings

Drug checking services in BC operate through a range of models and settings. Each can meet youth needs when adapted thoughtfully and delivered in ways that reflect how young people use substances, move through their communities, and seek support. This section offers guidance for tailoring service models to youth, along with considerations for offering drug checking in youth-focused settings.

About models and settings

Service delivery models (such as fixed sites, drop-off, mail-in, mobile, and pop-up) refer to ***how*** drug checking is offered. Sites across the province apply these models in different ways, and local operations may vary.

Youth-friendly settings refer to ***where*** information on how to access services can be provided. Youth friendly settings include community based places such as youth health clinics, shelters, youth cultural groups, sports organizations, community centres or other more informal locations. Schools and post secondary institutions are educational settings for youth. Educational settings may have restrictions on operating drug checking services but might be a location for promoting awareness about drug checking.

Many settings can host more than one model. For example, a youth centre may host a pop-up or a mobile van or an existing drug checking service may host a night just for youth to use the service. The guidance describes models and settings separately so you can choose the combination that fits your local context.

Adapting established models to youth needs

Adapting an existing drug checking service for youth begins with understanding how well the current service fits the needs of young people in your community. This involves looking at who is currently using the service, who is not, and what features of the service make it easier—or harder—for youth to access.

A **simple internal review** can help identify gaps. Useful questions include:

- Do youth currently access the service at all?
- If they do, which youth are showing up, and are certain groups missing?
- Is the location, hours, or the physical space comfortable for young people?
- Is the information provided appropriate for youth with varying substance-use experience?
- Do staff feel confident communicating with youth of different ages, identities, and backgrounds?

These questions help clarify where adjustments are likely to make the greatest difference.

A **needs assessment with youth** can offer clear direction about what to change and why. This doesn't need to be lengthy or formal. Short surveys, informal conversations, or input from youth advisors can help reveal what young people find welcoming, what feels uncomfortable, and what would make the service more relevant to them.

A thoughtful needs assessment helps services make targeted, meaningful changes rather than broad or generic ones. It also supports decisions about whether adapting the current service is sufficient or whether a youth-specific option is needed.

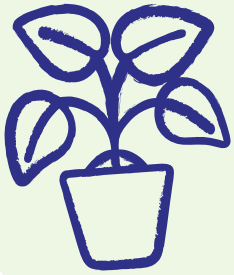
Below are the primary service models used in B.C., with specific ways to strengthen use, access and comfort. Many youth-friendly strategies apply across all models—such as providing privacy, using plain language, offering choice in how youth receive information, and involving peers or youth workers. Points listed under each model highlight features unique to that approach.

> "There is the need to have youth only spaces but I also think it should not be a reason to not include youth in sites that are already existing..."

Creating youth-friendly spaces

The look and feel of a fixed site can affect whether youth feel comfortable using the service. Young people consulted for this guide noted that sterile, clinical spaces can feel unwelcoming.

Display artwork and imagery that reflect the community and youth culture, including youth-created content.



Use plants, warm lighting, or colour to make spaces feel calm and inviting.

Provide comfortable seating and some private areas.

Offer things to do while waiting, and provide charging points

Display policies and signage that promote respect and equity.

Fixed sites

Permanent or fixed-site drug checking services are often co-located with harm reduction or community health programs. Many are within supervised consumption or overdose prevention sites, which are mostly used by adults and may feel intimidating or unfamiliar for youth.

Fixed-site services provide real-time analysis and face-to-face conversations with drug checkers. These elements work well for youth, since immediate results support timely decision-making and in-person discussions allow space for questions.

Ways to strengthen youth access and comfort:

- Make entry areas easy to identify and navigate.
- Create quieter, low-stimulus spaces within busy sites.
- Connect with on-site youth workers or nearby youth programs for coordinated access and supported referrals.
- Offer youth-specific time blocks when the site is less busy with adults.
- Provide small comfort items (e.g., fidget tools) that help reduce anxiety in clinical or adult-oriented spaces.

Drop-off sites

Drop-off models allow people to leave a small sample at one location for analysis elsewhere, with results returned later by text, phone, web-based results portal, or email. This model offers discretion and can be especially valuable in communities that do not have fixed-site drug checking. Drop-off services also give people more control over how they engage.

Ways to strengthen youth access and comfort:

- Provide step-by-step instructions specific to drop-off logistics (packaging, labelling, where to leave samples).
- Offer clear timelines for when results will be available.
- Make it easy for youth to opt into follow-up conversations if they want more context or support.

Mail-in services

Mail-in services allow people to send samples anonymously through the postal system and receive results electronically. This model can feel more discreet and easier to access, particularly for those who have concerns about being seen entering a site or need greater control over when and how they engage.

Ways to strengthen youth access and comfort:

- Ensure instructions cover mailing requirements youth may not know (e.g., postage, drop boxes).
- Provide paid postage if possible.
- Make mail-in kits available in places youth already access (campuses, libraries, youth centres).
- Provide an easy way for youth to ask questions online or by text after receiving results.

Mobile services

Mobile services use vans or portable setups to bring drug checking into community spaces. They increase access for people who have difficulty travelling to a fixed site and are especially useful in rural or remote regions where transportation barriers are common. For youth, bringing services directly to familiar places can reduce hesitation and make drug checking feel more approachable.

Ways to strengthen youth access and comfort:

- Choose locations that youth already frequent at predictable times.
- Coordinate with youth-serving programs for regular presence or co-programming.
- Combine drug checking with other services to increase comfort and reduce stigma.

> “I think it is really important to have [drug checking] outside of safe consumption sites or detox centres. There are so many community health centres and spaces that youth would already be going to and would want to connect with a provider or a peer support workers.”

Pop-up services

Pop-up services set up temporary drug checking stations at events, gatherings, and social spaces. They introduce drug checking to people who may not otherwise access it and can help raise awareness. Pop-ups also allow youth to learn about drug checking without needing to use the service immediately.

Ways to strengthen youth access and comfort:

- Establish clear communication with event organizers during planning
- Promote the service ahead of time with clear details about when and where it will be available.
- Position the pop-up in a spot that youth will gravitate toward, while still offering enough privacy for conversations. Consider location relative to security tents and potential line ups for other event activities.
- Clearly communicate that drug checking is a health service with legal protections for service users, and is not connected to event security or police[17].
- Use peers to welcome youth and answer their questions.
- Offer brief, practical harm reduction tips suited to fast-paced environments.

Drug checking at BC music festivals

Music festivals in B.C. offer valuable opportunities to reach youth with harm reduction information and drug checking services. While most events are 19+, a large number of attendees are 19-25. Many young people encounter drug checking for the first time in these settings.

What makes festivals unique:

- High attendance allows services to reach many young people in a short period of time.
- Attendees often arrive with questions about substances they plan to use the same day.
- Festivals are high energy environments that attract people seeking new experiences.
- Festival-goers often share drug checking results with friends.
- Harm reduction services are well utilized and considered a trusted source of information and support. Attendees will often wait in long lines to access drug checking services and talk with harm reduction staff.

17 Airth L, Wallace B, Kennedy MC, Standing L, Marcheterre A, Ti L, et al. (2025) An implementation science study of a campus-based drug checking service at a Canadian university. PLoS One 20(9): e0332899. https://doi.org/10.1371/journal.pone.0332899

Test strips

Test strips for fentanyl and benzodiazepines are available at many harm reduction services in BC and are used at drug checking services alongside a Fourier-transform infrared spectrometer (FTIR), a small instrument used to identify components in a drug sample. In a number of locations, fentanyl test strips are available for take home use packaged with clear instructions so people may test their drugs independently.

Test strips are quick, inexpensive, and provide an entry point for youth to learn about substance content and contamination risks. They often serve as a way to start conversations about substance use and harm reduction. Youth can speak with service providers to learn more about how test strips work and, where available, acquire test strips to use on their own, outside of services.

Ways to strengthen youth access and comfort:

- Ask open-ended questions that give a young person the opportunity to seek more information or support.
- Explain what test strips are, how they work, and what they can test for.
- Offer brief demonstrations, when possible, either in person or through short videos or illustrations.
- If distributing fentanyl test strips for take home, explain how to interpret results accurately, describe limitations and let them know how to access drug checking services if they want more detailed analysis.
- Provide information on a sticker attached to or a pamphlet distributed with the test strip package, or a web link, that illustrates instructions for later reference. Include a contact email or phone number to a drug checking service for the youth to contact if they have questions.

Opportunities in Youth-focused settings

Drug checking can reach more young people when it is promoted or offered in settings they already know and trust. Youth-focused settings provide natural entry points for information, connection, and support.

Drug checking services for youth may work best when co-located with youth specific programs. Youth can access services alongside programs that they already attend. It can offer a safe space that caters to youth, rather than adapting adult settings where youth may not feel comfortable. Youth community spaces may have more flexibility to adapt their services to incorporate drug checking and to learn what works best for youth in their area. In post secondary settings, services may be offered as part of student wellness programming and co-located in health clinics or in student spaces during hours that cater to youth who socialize on weekends.

Youth-focused settings can also be places to raise awareness about drug checking and promote access to local services. Secondary schools and post-secondary institutions reach a wide number of students, some who may benefit directly from knowing where they might drug checking services and others who may benefit from better understanding how drug checking can help protect others from risks of toxic drug poisonings. Educational settings are good places to open dialogue with youth about how harm reduction can help promote health and what to do in case of drug poisoning. Post-secondary settings may also incorporate promotion of drug checking into health promotion campaigns, and connect students to local services.

Youth community spaces

Many young people spend time in community spaces such as youth drop-ins, recreation centres, queer youth programs, cultural groups, libraries, and informal gathering places. These settings often feel more relaxed and familiar, which can help youth feel comfortable learning about or accessing drug checking.

Key considerations and opportunities:

- Work with youth workers, peer programs, or community staff who already have strong relationships with local youth. Many programs have youth advisory committees who can provide good insight into the needs of local youth.
- Co-locate drug checking with programs serving 2SLGBTQIA+ youth, cultural groups, or other identity-based communities.
- Offer short demonstrations, answer questions, and provide general health promotion information without requiring personal disclosure.
- Use these settings to gauge interest in more regular or expanded services.

Youth services and shelters

Some youth access supports through agencies such as Foundry centres, youth shelters, housing programs, or youth-specific mental health or substance-use services. Co-locating drug checking within these settings can support youth who may have more frequent or complex needs.

Key considerations and opportunities:

- Build on existing relationships between youth and trusted staff.
- Facilitate supported hand-offs to youth-specific health, cultural, or social services when needed.
- Use drug checking as a point of connection that can link youth to other supports they may want to explore.

Post-secondary institutions

Post-secondary students have a wide range of substance use experiences. Some may be living with addiction, some may be affected by overdose, and others may be trying substances for the first time. Students also arrive from regions and countries with different drug policies and varying exposures to harm reduction.

It is important that promoting or providing any services on post-secondary campuses requires the agreement and approval of the institution's administration. Building relationships with services on campus that are already working with issues of student health and safety can be a good place to start talking about how drug checking could be a part of health promotion for students.

Drug checking in post-secondary settings works best when information is clear, factual, and easy to understand, and when students know what to expect from the service[18].

Key considerations and opportunities

- Integrate drug checking into broader student health promotion that could include sharing information about where to access naloxone training, destigmatizing campaigns, sobriety support, and other harm reduction resources.
- Work with post-secondary institutions to raise awareness about services by using visible spaces, social media, posters, student newsletters, guest lectures, and/or class announcements
- Communicate clearly that the service: does not require appointments, students can drop-in, it is free, confidential, does not collect personal information, and there are no links with students' academic records.
- Ensure staff understand the *Good Samaritan Drug Overdose Act* and share its contents in communications campaigns[19].
- Engage students as peer staff through work-study or experiential education placements across a range of disciplines.
- Consider offering drug checking in confidential spaces, like health clinics at campuses that offer such services, or student peer programs with office space and consider alternative access options (e.g., drop-off boxes, pop-ups at learning centres, mobile visits, mail-in kits).
- Maintain a consistent schedule, with additional hours during busy social times such as the start of the semester or during major student social events.
- Build relationships with local student societies and harm reduction organizations to strengthen local harm reduction capacity and facilitate education, employment, and substance use health pathways between campus and community.

18 Information adapted from findings in Airth L, Wallace B, Kennedy MC, Standing L, Marcheterre A, Ti L, et al. (2025) An implementation science study of a campus-based drug checking service at a Canadian university. PLoS One 20(9): e0332899. https://doi.org/10.1371/journal.pone.0332899

19 See these resources about the Good Samaritan Drug Overdose Act to inform awareness campaigns or training materials. . https://www.canada.ca/en/health-canada/services/opioids/about-good-samaritan-drug-overdose-act.html

Secondary Schools

Schools can play an important role in helping students build general knowledge about health promotion, harm reduction, and what drug checking is[20]. While students are prohibited from possessing substances on school property which does not allow for drug checking services in such settings, schools do have a role to play in promoting school health through education and and raising awareness about harm reduction. School environments offer opportunities to share factual, non-judgmental information about the toxic drug supply and strategies to minimize harm without asking students to disclose personal experience. For example, Ladysmith Secondary School in School District 68[21] has partnered with Island Health to deliver naloxone training to all teachers, staff and grade 11/12 students, while engaging parents and families as part of a successful health promotion program.

Key considerations and opportunities:

- Offer demonstrations or presentations that explain how drug checking works in general terms, without requiring personal disclosure.
- Use science-focused activities to spark curiosity and help students understand the purpose and limits of drug checking in a safe, non-stigmatizing way.
- Work with school staff to clarify everyone's roles, expectations, and referral pathways if a student asks where to find community-based services.
- Tailor educational approaches to the school context, including available time, space, and the needs of different student groups.

Youth-led innovation: Nanaimo school harm reduction project

In 2023 and 2024, students at Learning Alternatives in Nanaimo partnered with Island Health and regional drug checking programs to raise awareness about drug checking as a way to protect against the risk of drug poisonings. The project was designed to increase understanding of drug checking, with fentanyl test strips and mail-in drug checking packages made available. The students developed a harm reduction bulletin board, distributed clear instructions about how to submit samples through mail-in services, and trained peers, teachers, and the school principal how to respond to a drug poisoning, including rescue breathing and how to use naloxone.

This project shows how youth-led initiatives can make harm reduction supports more relevant, accessible, and trusted within school settings.

20 Interior Health provides a healthy schools toolkit that includes resources and curriculum on harm reduction developed for schools and other education settings. https://www.interiorhealth.ca/sites/default/files/PDFS/healthy-schools-toolkit-substance-use-and-harm-reduction.pdf

21 To learn more about the naloxone training program offered in Nanaimo-Ladysmith Public Schools, School District 68, please see https://www.sd68.bc.ca/aed-naloxone-kits-coming-to-all-nlps-high-schools/.

Enhancing Inclusive Access

There are a few broader access considerations that help ensure services work well for all young people, regardless of the location.

- **Provide clear information about the service**: Communication materials should follow plain-language principles (such as those outlined in the Michael Smith Foundation's Plain Language Guide) and clearly explain what the space is like—including any accessibility constraints such as stairs, lighting, noise levels, or limited privacy.
- **Offer flexible hours:** Many youth have school, work, sports, or caregiving responsibilities that limit when they can attend. Evening and weekend hours, or rotating schedules, can make services more accessible.
- **Support accessibility and individual accommodations:** Youth with mobility, sensory, communication, or privacy needs should be able to use services without extra hurdles. Adjustments such as wheelchair access, clear signage, gender-neutral washrooms, quiet or low-sensory areas, or choosing easier-to-navigate locations for mobile and pop-up services can make a meaningful difference. Staff can also offer individual accommodations, such as reading information aloud, communicating in multiple formats, using gender-neutral language unless a young person shares their pronouns, or providing more privacy on request. All resources should be written in plain language.
- **Be attentive to cultural diversity:** Service spaces should feel welcoming to First Nations, Métis, Inuit, newcomer, and racialized youth. This may involve environmental cues—such as culturally relevant artwork or materials—and offering translated or multilingual information when feasible. Provincial Language Services provides confidential, spoken interpreting services and may be an option for some youth. Staff should avoid making assumptions about cultural backgrounds or beliefs and remain open, curious, and respectful in every interaction. Seek guidance from local cultural or community organizations to strengthen cultural safety and ensure the space reflects the young people who use it.
- **Encourage low-barrier return visits:** Youth may not be ready to have their substances checked every time they come in. Letting them know they are welcome to return at any point—without judgement or explanations—helps build comfort and keeps the door open for future use.

Bridging to Resources and Referrals

Drug checking can also act as a bridge to other supports. Providing a few well-chosen resources alongside checking reduces the number of places youth need to go to meet

their needs and helps create a more seamless experience. Because young people have diverse identities, circumstances, and levels of support, offering options that reflect this diversity is key.

These may include:

- **Printed or digital materials:** Youth-friendly handouts or online resources with harm-reduction information and local service listings give youth something they can revisit or share with friends.
- **Low-barrier workshops:** Informal sessions on topics such as health promotion, overdose response, or navigating services can build knowledge and confidence. These work best when co-designed with youth.
- **Referrals to other services:** If a young person expresses interest in additional support, staff can offer connections to relevant substance use, health, cultural, or social services. Working with a young person to help facilitate a connection can improve chances a youth will follow up with a needed service. Staff should be mindful that some adult services may not be fully prepared to serve young people.
- **Helpful extras.** Where possible, offering snacks, transit vouchers, hygiene supplies, and safer use equipment can make the service more welcoming and supportive.

While some of these approaches may require funding, many can be integrated into everyday practice at little or no extra cost.

4. Making Connections: Talking with Youth

This section builds on the foundations of a youth-friendly approach by focusing on practical communication skills. The way staff speak and listen to young people can help create conditions that support comfort and trust. Making time for engagement and being ready to ask more questions can help ensure a positive experience. Recognizing young people often arrive in pairs or groups means being prepared to alter traditional one-on-one approaches.

Making Youth Feel Welcome

First impressions matter and can influence whether a young person decides to access a service or return in the future. A warm welcome begins at the first point of contact. Tone of voice, body language, and the way staff greet youth all help create a sense of comfort and belonging.

For drop-off or mail-in drug checking, clear and engaging written communication also supports a welcoming experience. Website content, step-by-step instructions, online forms, and result summaries should be easy to understand so youth feel informed and supported, even without direct contact.

First impression checklist

These factors help create a positive first impression.

- **Greeting:** Use neutral, non-judgmental, age-appropriate language. Be friendly and approachable.
- **Tone of voice:** Speak calmly and clearly, using a warm and respectful tone.
- **Body language:** Keep an open posture, appropriate eye contact (taking into account cultural and neurodiverse differences), and a relaxed manner.
- **Environment:** Make the space inviting and easy to navigate, with clear signage and enough privacy for youth to feel at ease.

> "The first person you meet should have good energy."

Communicating Effectively

The way staff talk with youth about substances and drug checking can open the door to conversation or shut it down. The following practice tips, adapted from the *Safety First Educator Guide* (Interior Health Authority, 2022), support open, respectful dialogue.[22]

- **Be aware of tone:** Use a calm, even tone that conveys respect and openness.
- **Be comfortable with silence:** Youth may need time to feel at ease and gather their thoughts.

22 Interior Health Authority. Safety First Educator Guide: Getting Prepared. IHA; 2022.

- **Support and empower:** You may not agree with every decision a young person makes, but you can let them know you respect their right to make their own choices.
- **Listen:** Be present, give your full attention, and listen to understand.
- **Use open-ended questions:** For example, “What brings you in today?” or “What would you like to know more about?”
- **Gender-neutral language:** Youth often explore and express gender in different ways, so it helps to use gender-neutral language unless a young person shares their name and pronouns. This helps avoid misgendering and supports comfort and trust.
- **Boundaries:** Be clear about what you can and cannot help with, and why. If a youth needs support beyond your role, explain what other services might assist and how to access them.
- **Avoid technical language:** drug checking has many technical terms. Use plain language and ask if you need to clarify anything.

Trust and rapport are central to creating a supportive experience. When youth feel respected and supported, they are more likely to ask questions, share honest information, and return for in the future. Being authentic, honest and reliable are key to building trust with young people.

Helping Youth Make Informed Choices

Young people need clear and accurate information so they can decide what works best for them. Staff can support autonomy by offering facts, outlining options, and leaving room for questions—without steering youth toward any particular choice.

Examples of supportive phrasing include:

- “You can ask us any questions about how the drug check works. You don’t have to give us a drug to test. We can explain how it all works and then you can make up your mind.”
- “We can either test the sample with the FTIR and test strips or we can just use one of those options. Here are the types of results you would get for each of those choices."
- “There are a few different ways you can get your results. You can wait for me to finish the analyses or I can show you some options for how to get your results later.”
- “We can test the substance for you, or we can give you some fentanyl test strips and you can use them at home. Here’s what the different types of results you will get from those options.”
- “If you are worried about what we will find in the results, you have choices about what you can do with the substance—we can talk through what the results mean and what your options are.”

- "Do you have a plan for where and when you might consume these drugs? We can go through some of your options, and I can share some harm reduction information with you."
- "We have other harm reduction supplies. Do you need any of them?" (Offer naloxone, snorting supplies, or any other harm reduction information available to take away[23].)

If a youth decides not to check, their decision should be respected. Staff can let them know they are welcome to return whenever they feel ready.

Tips for supporting informed decision-making

Provide printed or digital materials youth can review later.

Tailor information to each young person age, experience, language, and comfort level.

Use plain, concrete language and avoid technical jargon.

Present information calmly and without judgement.

Explaining the Drug Checking Process

Clear communication about the drug checking process helps build trust. Youth will appreciate knowing what will happen and how their sample and information will be handled.

Describe the process plainly, covering:

- **What happens during checking**: The steps, how long it takes, and what part of the sample will be used.
- **What kinds of results are provided:** For example, substance identification or relative concentration, and any limitations.
- **How information is recorded:** Note that sample data are anonymous and used only to improve services and monitor trends. If the sample is recommended for a drug alert, it only contains information about the drug - no identifying information is included.

23 Harm reduction resources can be found at Toward the Heart, along with information about Take Home Naloxone and the naloxone site finder.

- **Service scope:** Outline what the service includes (drug checking, results discussion, harm reduction information) and what it does not provide (counselling, treatment, supervised consumption).

You can use short, consistent phrasing to make this conversation straightforward. For example:

"Here's how this works: you tell me what you'd like to learn today, we look at the checking options, and I'll walk you through the steps. When the results are ready, we'll go over what they mean together."

Requests from Parents, Caregivers, or Relatives of Youth

Parents or caregivers of youth may access drug checking services to test a substance they found (and suspect belongs to the youth) but have not yet discussed with the youth. Because conversations with parents and caregivers can be emotional, it's important for technicians to be prepared to support them in navigating these situations.

Talking with a parent or caregiver openly about their concerns can be a good starting point for the technician to help the third party connect meaningfully with the youth. It also provides the opportunity to share harm reduction information and resources to help support their loved one and reduce the risk of substance related harms. Detailed guidance for these situations is provided in BCCSU's operational guidance for third party drug checking.

5. Guidance for Specific Situations

In daily practice, staff may encounter situations involving youth that require extra care and sensitivity. This section offers practical guidance for handling some of the more challenging scenarios that may arise. Each example shows how the approaches and principles covered in this guide can be applied to promote youth safety, while maintaining professional boundaries.

1 Younger Youth Approaches Service

Scenario

A young person who appears much younger than most service participants brings in a sample. The goal is to ensure they understand the process, feel respected, and leave with accurate information and support, while also following legal and safety procedures.

Guidance

When a participant appears very young, the focus is on clear communication, reassurance, and safety—not on confirming their age. Asking directly how old they are can feel intrusive and may make them uncomfortable or less willing to engage with the service. Instead, the technician should explain the service in simple, concrete language and look for cues that the young person understands what's being said.

Short, friendly check-ins such as *"Does that make sense?"* or *"How does that sound to you?"* help confirm comprehension in a natural way. If the youth seems uncertain, the technician can repeat key points or simplify the explanation.

It's common for staff to feel some unease about serving very young participants, especially given public perception or concerns about liability. The technician's role, however, is to provide accurate information and harm reduction support, not to assess maturity or investigate circumstances. If there are any signs that the young person might be unsafe or at risk, the technician should follow the organization's established procedures, such as consulting a supervisor or contacting child protection services.

Keeping the tone calm, friendly, and non-judgmental helps the young person feel safe and respected. The aim is to make sure the young person gets clear, accurate information in a safe and respectful way, while keeping the interaction focused and appropriate to their age.

Younger Youth Approaches Service
Continued...

What you might say

To explain the service clearly:

- "Here's how it works—I'll take a very small amount of your sample, check it, and we'll go over the results together."
- "If anything doesn't sound clear or you want to pause, just let me know."

To check comfort and understanding:

- "Does that sound okay to you?"
- "Do you have any questions about what happens next?"
- "You can always stop or ask me to explain something differently."
- "Do you know what this drug is and what it does? I've given you the proper name for this drug but it may be known by other names too, such as... "

To reinforce harm reduction and safety:

- "It's safest to start with a small amount and avoid mixing substances."
- "If you ever use, try not to do it alone—even having someone you trust nearby can make a big difference."
- "Carrying naloxone and knowing how to use it is a good idea—lots of people keep a kit just in case."

To offer ongoing support (if appropriate):

- "I can share some info about youth drop-ins or other supports—no pressure."
- "If you'd rather look things up on your own, I can give you a few websites that you might find useful."

2 Disclosure of Personal Challenges

Scenario

While a technician is checking a sample, a young person begins sharing personal struggles—for example, problems at home, mental health challenges, relationship stress, or worries about using more lately. These moments can be emotionally charged and may leave technicians unsure how to respond without crossing professional boundaries.

Guidance

Drug checking sometimes opens the door to deeper conversations. When a young person begins to share personal struggles, the goal is to respond with care, maintain professional limits, and help connect them to more specialized supports.

The core approach can be summed up in four steps:

1. **Acknowledge and validate** what's been shared.
2. **Be honest** about the limits of your role.
3. **Offer a warm handoff**—if possible, introduce or link the person to another worker who is trained to support youth.
4. **Stay grounded in harm reduction**—focus on safety and connection rather than counselling or problem-solving.

If a youth seems distressed but not in immediate crisis, it's okay to ask gentle questions that clarify their level of risk, such as whether they have someone they can lean on after leaving. If they appear to be in crisis, the technician should stay calm, explain what will happen next, and follow the organization's established safety procedures. Collaboration and transparency are key: involve the youth in deciding how to get additional support whenever possible.

This approach allows technicians to show compassion without taking on the role of counsellor, ensuring that youth feel heard, supported, and safely connected to appropriate resources.

Disclosure of Personal Challenges
Continued...

What you might say

If someone starts opening up about personal challenges:

- "Thanks for trusting me with that—it sounds like a lot to carry."
- "I'm really glad you said something. I'm not a counsellor, but I do know people who can help in a more ongoing way—if you want that."
- "Would you like me to link you with someone safe to talk to? I can't solve that myself, but I won't leave you hanging. "

If mental health struggles are hinted at (but not a crisis):

- "It makes sense you're feeling that way. I just want to make sure you've got someone to lean on after you leave here. Who's in your corner right now?"
- "I'm not the best person to help with that, but I can connect you with someone who is."

If you're unsure whether to escalate:

- "I hear you—and I don't want to overstep. Do you feel like you're in danger right now, or more that things are just really hard?"

If the youth seems to be in crisis:

- "I'm really glad you told me. Let's figure out together who's safe to talk to next."
- "I won't force anything on you—but I also won't ignore it. Let's bring someone else in who can support you properly."

3 Navigating Cultural or Language Barriers

Scenario

A young person comes to the service and seems unsure about how it works or struggles to find the right words to describe their substance. They may be new to Canada, new to harm reduction services, or simply less familiar with local terminology. The goal is to communicate clearly and respectfully while avoiding assumptions about background or experience.

Guidance

Drug checking may be unfamiliar to youth from a range of cultural or linguistic backgrounds. Some may be anxious about confidentiality or legal implications, especially if drug use carries severe stigma or penalties in their home context. Others may simply have trouble finding the right words or worry about being misunderstood.

A respectful tone is key. Technicians should use clear, concrete language and avoid slang, jargon, or acronyms. Rather than assuming a person's background, respond to what's observable—such as confusion, hesitancy, or language challenges—and adapt communication as needed. When appropriate, invite use of translation tools or visuals and reassure participants that it's okay to describe things in their own way. Translation services may also be an option, such as Provincial Language Services, which can provide confidential and accurate interpretations that can tailor interpretation needs to the individual. Confidentiality of drug checking services should be emphasized early, especially for those who may fear repercussions through school, family, or immigration systems.

These strategies help create an inclusive environment where everyone feels safe to participate, regardless of language or cultural familiarity.

Navigating Cultural or Language Barriers
Continued...

What you might say

To start the conversation:

- "Hi. Have you used drug checking before, or would you like me to explain how it works?"
- "Is English okay, or would it help if we use a translation app or some visuals?"

To build comfort and trust:

- "It's really common for people to have questions about how drug checking works."
- "Some people are more familiar with this service than others—we'll go at your pace."
- "This service is private, and what we talk about stays here unless there's a serious safety concern."

If language or communication is a barrier:

- "Would it help to use pictures? We can also type things out and translate together."
- "If something doesn't make sense, just let me know and I can say it another way."
- "No rush—we can go through it slowly and make sure it all makes sense."

When something isn't clear:

- "I want to be sure I understand you correctly—can I check what you meant?"
- "If I'm not getting it quite right, feel free to correct me."

4 Youth Enters with a Parent/Caregiver

Scenario

A young person comes in with their parent/caregiver. The parent/caregiver expresses concern about the youth's substance use and the pills they found in their bedroom. The young person is quiet while the adult does most of the talking. Although the parent/caregiver is upset, they are more concerned than angry. In particular, they are worried about the risk of fatal overdose.

Guidance

The goal in this situation is to meaningfully involve the young person in the conversation, ensuring their needs are met and their questions answered. Early in the interaction, the technician should make space for the youth to speak and signal that their questions and opinions matter. This approach can also help the parent pause and listen to the young person's point of view.

Technicians play an important role in establishing a youth-centred dynamic from the outset. This can be challenging when a parent/caregiver arrives with heightened emotions. Even so, technicians should take the time to engage both the youth and the adult, ensuring each has an opportunity to share concerns and ask questions. Technicians can also help normalize conversations about substance use and model non-stigmatizing language.

These interactions should include clear, concise, and actionable harm reduction messaging. This often involves providing drug education, explaining the benefits and limitations of drug checking, and promoting protective health behaviours where appropriate.

Technicians may feel tempted to "jump in" to correct inaccurate information while the youth or parent/caregiver is speaking. Instead, it is best to practise active listening. Allowing each person time to speak helps them organize their thoughts and feel heard. Technicians can then respond and address any inaccuracies respectfully.

In some cases, it may be helpful to speak with each party separately. When speaking with the youth one-on-one, another staff member may engage the parent/caregiver, for example, by providing education on harm reduction strategies such as naloxone training. When speaking with the parent/caregiver, technicians should express compassion, demonstrate understanding, and answer questions neutrally, factually, and without stigma.

When youth and parents/caregivers access services together, it also creates an opportunity to provide shared harm reduction education, correct misinformation, and support open dialogue about substance use.

Youth Enters with a Parent/Caregiver
Continued...

What you might say

To start the conversation:

- [*Technician*] "Hi, I'm [Name], one of the technicians here. What's your name?" [*to Youth*] "Nice to meet you, [Youth]. And what's your name?" [*to Parent/Caregiver*]
- "Really glad both of you came in today. How can I help?"

To encourage the youth to talk:

- "This is a space where you can ask questions and talk openly. There is no judgement here."
- "Thanks for coming in today—it can be hard to take the first step."
- "I'd like to hear what questions you have and what you're hoping to get from this visit."
- [*To Youth*] "If you'd prefer to talk one-on-one for a bit, we can do that."

To support the parent/caregiver:

- "I understand this can feel overwhelming. We can take things one step at a time."
- "It's clear you care a lot about [Youth]'s safety. Coming here is a positive step."
- "There's a lot of information about substances out there. Is there anything specific you were hoping to learn or talk about today?"

When delivering drug checking results with harm reduction messaging:

- "Are there any surprises in these results? Are they what you expected?"
- "I'm seeing that there's [substance] in your drugs. Have you used [substance] before?"

If the parent/caregiver becomes angry or starts blaming the youth:

- "I understand this situation can feel overwhelming. Right now, it's important that [Youth] feels able to speak and ask questions."
- "I can hear that you're really concerned about [Youth]. Our goal here is to help them stay as safe as possible."
- "This can be a difficult situation for families. Let's focus on making sure [Youth] gets clear information and support."

Helpful Resources

For Youth

- Help Starts Here: Provincial youth mental health and substance use support.
- Foundry virtual and local youth services
- Kids Help Phone phone, text, on-line
- Here2Talk
- Y Mind Youth | YMCA BC
- BC Gov youth substance use beds
- With Open Arms toolkit for First Nations Youth
- Local resources you know and trust to support youth and can meet them where they are at.

For Parents/caregivers

- FamilySmart support for families
- Foundry: Parents Like Us
- Holding Hope (Moms Stop the Harm)
- Kelty Mental Health Services for families
- Cannabis Use and Youth—a parent's guide
- Local resources you trust to provide positive understanding of youth and substance use.

For Schools

- Healthy Schools Toolkit Series—Substance Use and Harm Reduction—list of curriculum and resources from Interior Health

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APPENDIX A:

Interior Health FAQs: Providing Harm Reduction Services to Youth – Legal Considerations

Interior Health

FAQ: Providing Harm Reduction Services to Youth – Legal Considerations

Youth are often overlooked when planning the delivery of harm reduction services resulting in multiple barriers including exclusion from critical services that prevent illness, injuries, infections, and death from overdose. Health and social service providers can improve access for youth through consideration of youth needs and understanding key legislation when planning and delivering harm reduction services.

1. Consent and Access to Harm Reduction Services

There is often confusion about whether youth are allowed to access harm reduction services on their own or if the youth needs a parent or guardian's consent. This confusion creates unnecessary barriers for youth and distress for staff. BC's *Infants Act* explains the legal position of children under 19 years of age. One of the topics covered in the Infants Act is the ability of someone under the age of 19 to consent to health care.

➢ Do youth need parent guardian consent in order to access harm reduction services?

Youth can access *basic* and *advanced harm reduction services* without parent/guardian consent. When providing advanced harm reduction services, the *health care provider* must do a *competency assessment* to determine if the service is in the youth's best interest, whether the youth is capable of understanding the risks and benefits of the service, and is capable of giving consent.

➢ Is there an age limit for youth to be able to access harm reduction services?

In B.C., there is no set age when a child is considered capable to give consent. This means there is no legal age limit for youth to access harm reduction services; however, some programs and services may have age limits or may not be appropriate for youth. When in doubt, check with the service/agency.

Practice Recommendations

Develop rapport and work collaboratively with youth. When delivering harm reduction services to youth, it is a good idea to take time to develop rapport, assess their needs, wants and substance use history whenever possible; however, this should not be a barrier to accessing service.

Provide opportunities for education and referrals. Youth often have a shorter substance use history and there may be opportunities to provide education and/or referrals if the youth is interested. Youth may be less familiar with harm reduction supplies and safer substance using practices so additional coaching may be beneficial.

Develop policies and protocols. It is recommended that agencies have clear policies and training protocols in place for all staff who provide harm reduction services to youth. Agencies may wish to consult with their legal counsel.

2. Duty to Report a Child in Need of Protection

The *Child, Family and Community Services Act* protects children in B.C. The Act states that anyone who has reason to believe that a child needs protection must make a report to MCFD (Ministry of Children and Family Development). Section 13 of the Act provides information on what must be reported; examples include inadequate access to food, clothing, shelter, health care, inadequate protection from illness injury and other harm, in need of protection from physical, sexual or emotional abuse and neglect.

- **Is there a Duty to Report that a youth is using substances or accessing harm reduction services?**

The public's duty to report is based on what a parent/guardian is or isn't doing – (commission or omission) - not the behavior of the youth. Awareness that a youth is using substances or a youth who is accessing harm reduction services is not something that you are required to report to MCFD.

- **Is there a Duty to Report that a youth's parent or guardian is using substances?**

Awareness that a parent/guardian is using substances also does not necessarily mean that a child/children are in need of protection and does not (on its own) need to be reported to MCFD. However, if the youth is in need of protection as noted in Section 13 of *the Child, Family and Community Services Act* then there is a duty to report.

Practice recommendations

Be aware of your biases and stigma. It is important to be mindful of your own values and assumptions as well as the role stigma plays in influencing those. Reporting based on stigma or fear can prevent youth from accessing services.

When possible, do a broader safety assessment. Youth who have experienced trauma are at greater risk of substance use disorders. Youth or parent/guardian substance use **may be** indicators of possible child protection issues, especially when coupled with other indicators - further assessment is recommended.

When in doubt, consult. There are many grey areas when working with youth. Discuss youth cases with your team and manager. Consider consulting with MCFD. MCFD encourages the public to call and

consult when they are concerned about possible indicators that a child may need protection. If you wish to consult with MCFD you should do so without disclosing identifying information about the child/youth unless the youth has given consent for you to share that level of information.

Be transparent with youth if making a report to MCFD. When child is in need of protection and a report to MCFD is required, service providers should communicate openly and transparently with the youth about what will be shared with MCFD, invite them to be involved in making the report and offer support during the process.

Definitions:

Basic harm reduction services: *services that do not need to be delivered by a regulated health care provider, examples include supply distribution, drug checking services, basic overdose response, providing information on safer substance using practice etc.*

Advanced harm reduction services: *harm reduction services that are within the legal and regulatory scope of a regulated health care provider; examples include inserting an IV, helping with venipuncture, prescribing contraceptives etc.*

Regulated health care provider*: people who are licensed, registered or certified in British Columbia to provide health care services as determined by their legal and regulatory scope.*

Competency assessment: *the process of explaining to the youth the nature and consequences, foreseeable benefits and risks of a health care service and assessing the youth's understanding of those benefits and risks while making reasonable efforts to determine that the health care is in their best interest.*

Sources and more information:

- Child, Family and Community Service Act (gov.bc.ca)
- Duty to Report – Reporting Concerns about Children and Youth
- COVID19_EpisodicOPSProtocolGuidelines.pdf (bccdc.ca)
- Infants Act
- BC Harm Reduction Strategies and Services Policy and Guidelines, November 2022

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If you would like more information about drug checking services in BC, please visit:

www.drugcheckingbc.ca

or email drugchecking@bccsu.ubc.ca