



HARM REDUCTION, EQUITY, ADVOCACY,
RESPECT, TRUST AND SUPPORT

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Advocates Warn: Single-Month Data in Lethbridge Masks Deepening Provincial Drug Toxicity Crisis

Edmonton, March 10, 2025

In response to the Premier of Alberta's recent statements on social media ([Facebook](#) and [Platform X](#)) in which she celebrated "zero overdose deaths" in the city of Lethbridge in November 2025, attributing that decline to her government's recovery model: advocates, frontline workers and researchers are calling for more transparent examination of this data.

While fewer people dying is very good and welcome news, it's important to highlight that isolating a single month of data in one city provides a dangerously incomplete picture of the crisis across the province. These are not just numbers or statistics on a spreadsheet but these are people who are loved. Because of the human impact of this, one has to examine this decline in the context of overall trends in the entire province.

The numbers are incomplete

The volume of cases in Alberta has long caused delays in the Medical Examiner's office. Euan Thomson of Drug Data Decoded [recently reported](#) that an analysis of the provincial "[Cause of Death](#)" dashboard reveals that Alberta still has 3,244 fatalities pending investigation by the medical examiner from 2020 to 2024. Although it appears that the 2024 data has since been removed from the dashboard, a reliable source has shared that there are currently over 4000 outstanding fatality investigations, including those presumably caused by drug poisoning.

An investigation, reported by [Filter Magazine](#), [showed](#) that 2023 and 2024 numbers of drug death toxicities went up between 10% to as much as 28% from the initial release, due to the

delays in investigations. The Alberta government typically reports initial, but not updated increased numbers.

Drawing conclusions on the effectiveness of government policy based on ONE month and only in ONE city ignores longer data trends, especially in smaller communities, revealed in the [Alberta Substance Use Surveillance System](#).

The Premier [stated](#) that the November 2025 data was “the first time since 2017 that the South Zone has recorded zero opioid overdose deaths.” July 2025 also saw zero deaths in Lethbridge, while May and September spiked. One could attribute zero fatalities in one month to fluctuations in the capacity of the Medical Examiner's Office, unless this trend continues over time.

Decreases not sustained across the province

If government policies were the reason for the decline in deaths, this should be evident across all regions. While Premier Smith celebrates decreases in Lethbridge she fails to take responsibility for record breaking death rates in the Edmonton region.

Edmonton has had zero months with zero deaths.

Instead Edmonton had the [highest numbers of deaths ever recorded](#) in March of 2025 with a rate of [91 per 100,000](#) higher than any month since 2021, which had previously been the worst year on record. In March 2025 the provincial average was 35.3 per 100,000. In 2025, with December numbers not reported the rate of deaths in Edmonton is more than twice the provincial average, 62.82 per 100,000 versus 27.37 provincially. This is in part attributed to carfentanil being detected in the local supply of drugs, as [reported by Recovery Alberta](#) in October of 2025.

Reasons behind declining numbers

As explained by the coalition [HEARTS Alberta](#) lower deaths observed across the United States and Canada are attributed to three reasons:

- 1) The drugs - detection of lower fentanyl concentration; but also
- 2) The user - more people are smoking rather than injecting and fewer use fentanyl; and
- 3) A declining at risk population - fewer young people use substances and many of those at risk have died.

What has been ignored by those who claim victory over lowering death rates is the fact that across all regions many more died in 2025 than in 2019, a time when we saw significant investment in harm reduction, including consumption services and wide naloxone distribution. Since then, one consumption service was closed in Lethbridge and Red Deer and two in Edmonton (Royal Alexandra Hospital in-patient site and the Boyle Street Community Service site), while Calgary is under threat of closure.

What we need

For those personally affected by this crisis and those working to save lives, self-congratulatory remarks based on misinterpretation of limited data sets, while ignoring what is happening on the ground, is deeply offensive and counterproductive.

The driver for higher and lower deaths is mainly the level of toxicity of the illegal drug supply. As long as governments refuse to address that and make regulated alternatives available to all at risk, people will die.

What we need are not meaningless victory laps but a comprehensive system of care and support, as [stated by HEARTS Alberta](#):

Harm reduction and treatment go hand in hand and must work together within a robust, voluntary, and evidence-based system that prioritizes human rights, personal autonomy, and trauma-informed care.

During an International Overdose Awareness Day interview with CBC, Jenn McCrindle from [RECLAIM COLLECTIVE](#) was asked what she thought about overdose numbers going down.

Her response was simple and devastating in its truth: ***“You can’t die twice.”***

Note: Death per 100,000 person years data is based on the “all substances” report in the provincial dashboard.

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