



Haliburton, Kawartha Lakes, Northumberland

# DRUG STRATEGY

## Presentation to Kawartha Lakes Committee of the Whole

Tuesday, October 8, 2019

Lindsay



# Why a Drug Strategy?

- Substance use identified as a key area of concern from stakeholders & residents
- A comprehensive, coordinated approach
  - Improves collaboration
  - Identifies gaps between services
  - Fosters evidence-informed work that reflects the 4 pillar model, best practice research, existing expertise and local experience
  - Informs a tailored local response

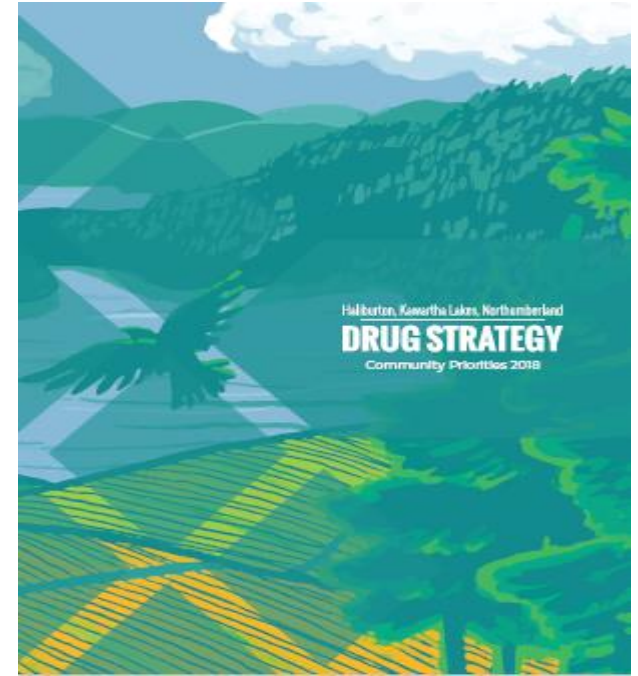


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# Background

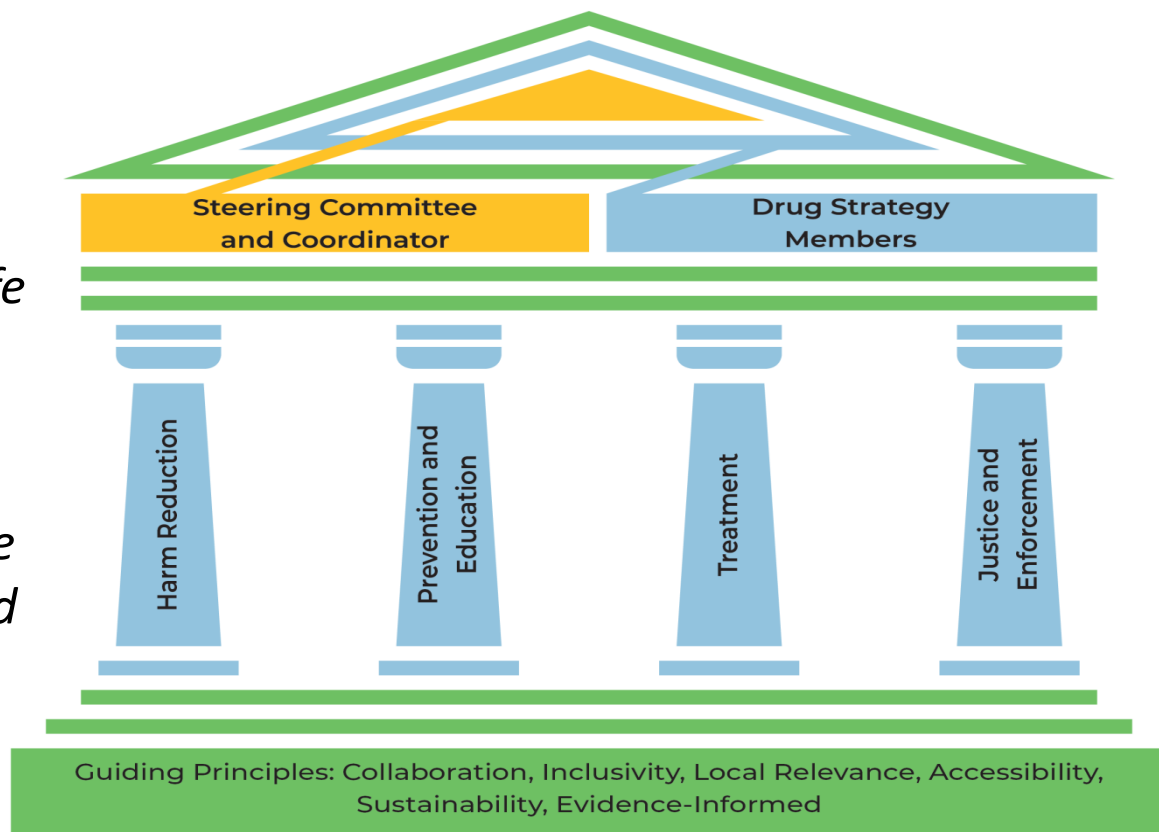
- Awarded 3-year grant from the Ontario Trillium Foundation
- Consultations & research throughout 2016-2017
- Municipal drug strategy evaluation framework developed in 2018



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*The HKLN Drug Strategy strives for supportive and safe environments that promote the health and resiliency of individuals, families and communities, and reduce the harms and stigma associated with substance use.*



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# Projects and Impact

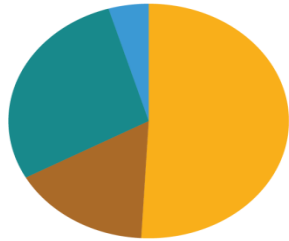
- Naloxone enhancement distribution program
- Van mobile outreach services (KL and NH)
- Unity Project and film production
- HKPR Opioid Response Task Force and Early Warning Surveillance System
- Proactive media and communications activities to increase awareness and reduce stigma (campaigns, columns, weekly E-newsletters, etc.)
- Growth of membership: 84 members (52 organizations represented)
  - E-news and peripheral membership = 159
- Community consultation 2016-2017
  - Community Priorities Report 2018
- Municipal Drug Strategy Coordinators Network of Ontario Scoping Review (n = 27) and Evaluation Framework

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# Identifying Community Priorities

- 548 surveys



City of Kawartha Lakes: 51.1%  
Northumberland County: 29.7%  
Haliburton County: 15%  
Other (maj. Peterborough): 4.2%

- 79 interviews with service providers
- 62 follow-up surveys with SPs

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# Identifying Community Priorities

Top concerns for the community in CKL:





- 1) Crime and Community Safety
- 2) Impaired Driving
- 3) Children and Youth
- 4) Lack of Resources and Access to Services



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 <b>Harm Reduction</b>	Greater access to safe(r) injection/inhalation kits, safe disposal, and naloxone
	Increased awareness and understanding of harm reduction
	Access to drug maintenance therapies (i.e. medical prescription of heroin)
	Substance use-related housing evictions
 <b>Prevention &amp; Education</b>	Reducing stigma associated with substance use
	Responding to increasing opioid overdoses and overdose deaths
	Patient-focused and patient-centered prevention strategies
	Better access to primary health care
 <b>Treatment</b>	Greater access to fitness & recreation for youth and people with low income
	Greater awareness about prescription use and opioids
	Better understanding of the intersections between mental health, trauma, addiction and substance use
	Access to local detoxification services and residential treatment centres
	Funding for alternative treatments options that exist in community
 <b>Justice &amp; Enforcement</b>	More timely access to addiction services and psychiatric services
	More investment in services working towards recovery
	Addressing stigma among health and social service providers, and within treatment programs
	Increasing the number of Adult Protective Service Workers
	Decriminalizing drugs for personal use
	Violence and robberies associated with fentanyl
	Drug and alcohol-related crime
	Proactive police involvement in drug-related events

**Opioid-related harms & services continue to be a top priority**

# Opioid-related harms

- **222 suspect drug overdose-related ED visits** (includes opioid and other drugs) among HKPRDHU residents (2018).
- **145 confirmed opioid overdose-related ED visits** reported among HKPRDHU residents 10 years and older (2018)
  - This rate was higher than that reported for 2017 (64.4%)
- **29 hospitalizations** reported among residents of HKPR District Health Unit for **confirmed opioid related causes** (2018).
  - This rate was similar to that reported for 2017
- **20 deaths** reported during January-September 2018
  - Almost **2.5 times** higher for the same time period in 2017(8 deaths)

# Opioid-related harms

In 2019 Kawartha Lakes Police Service has investigated:

- **75** suspected overdose incidents
  - Significant spike in the number of overdose incidents between February - May
- **7** Death Investigations where an opioid overdose was suspected
- **68%** of charges laid by Drug Investigators were opioid related

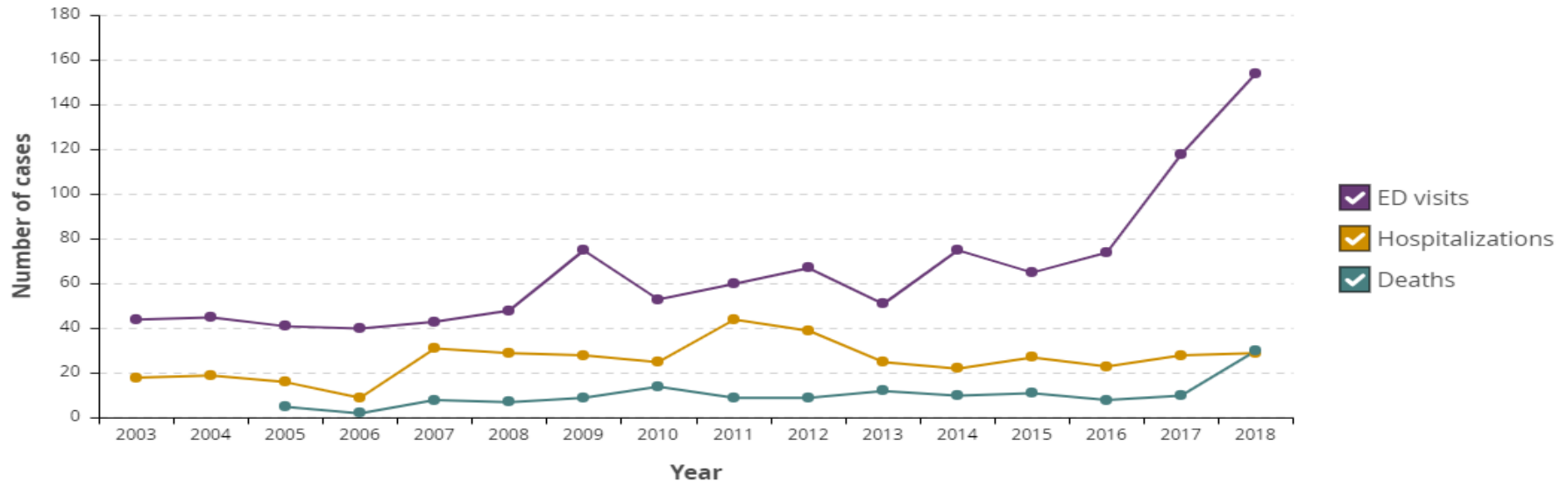


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# Opioid-related harms

Cases of opioid-related morbidity and mortality, Haliburton, Kawartha, Pine Ridge District Health Unit , 2003 – 2018



Ontario Agency for Health Protection and Promotion. (2019).

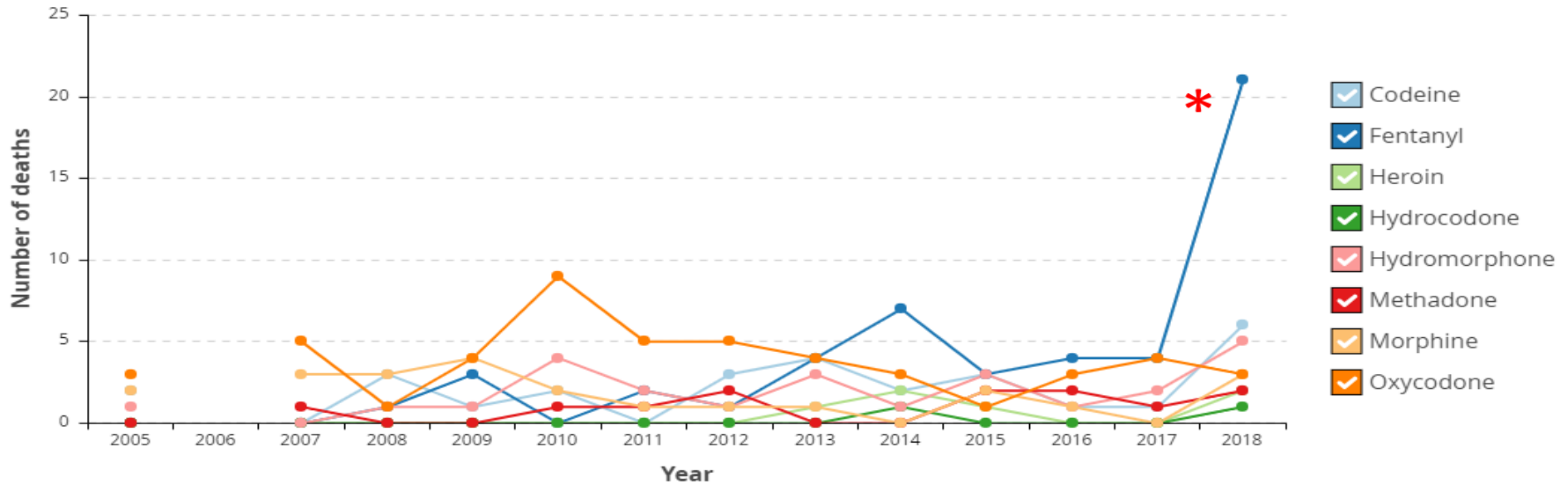
<https://www.publichealthontario.ca/en/data-and-analysis/substance-use/interactive-opioid-tool>

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# Opioid-related harms

Type of opioid present at death, Haliburton, Kawartha, Pine Ridge District Health Unit, 2005 – 2018



Ontario Agency for Health Protection and Promotion. (2019).

<https://www.publichealthontario.ca/en/data-and-analysis/substance-use/interactive-opioid-tool>

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# Opioid-related harms

- Opioid Mortality Surveillance Report Analysis of Opioid-Related Deaths in Ontario July 2017–June 2018
- 1,337 confirmed opioid-related deaths in Ontario
  - The majority of which were accidental (90.4%)
  - Fentanyl and fentanyl analogues contributed to nearly  $\frac{3}{4}$  of deaths

Ontario Agency for Health Protection and Promotion (Public Health Ontario); Office of the Chief Coroner; Ontario Forensic Pathology Service; Ontario Drug Policy Research Network. Opioid mortality surveillance report: analysis of opioid-related deaths in Ontario July 2017-June 2018. Toronto, ON: Queen's Printer for Ontario; 2019. [www.odprn.ca/opioidmortality/](http://www.odprn.ca/opioidmortality/)


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# A comprehensive response to opioid-related harms

## DEMOGRAPHICS

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 **3/4** were male

 Over **1/2** were individuals between the ages of 25 and 44

Lived in:

**74%** a private residence

**62%** large urban centres

**32%** areas with high material deprivation



Employment status:

**47%** unemployed      **18%** employed      **33%** unknown

**31%** of those employed worked in the construction industry



[www.odprn.ca/opioidmortality/](http://www.odprn.ca/opioidmortality/)

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# A comprehensive response to opioid-related harms


## CIRCUMSTANCES SURROUNDING DEATH

Nearly  $\frac{1}{2}$  were alone at time of incident

Almost  $\frac{1}{2}$  involved a resuscitation attempt



$\frac{3}{5}$   of incidents occurred in the person's own home

 Over  $\frac{1}{5}$  had naloxone administered

[www.odprn.ca/opioidmortality/](http://www.odprn.ca/opioidmortality/)

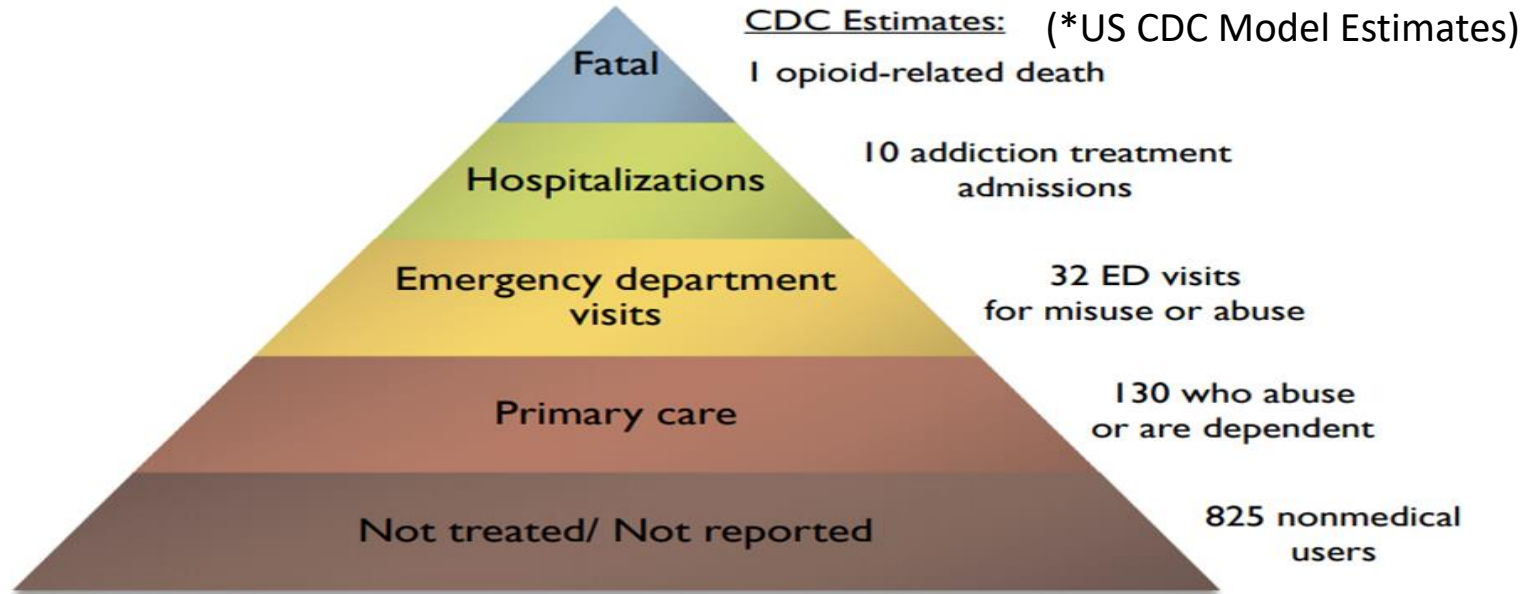
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# Opioid-related harms

## Injury Pyramid



Adapted from:

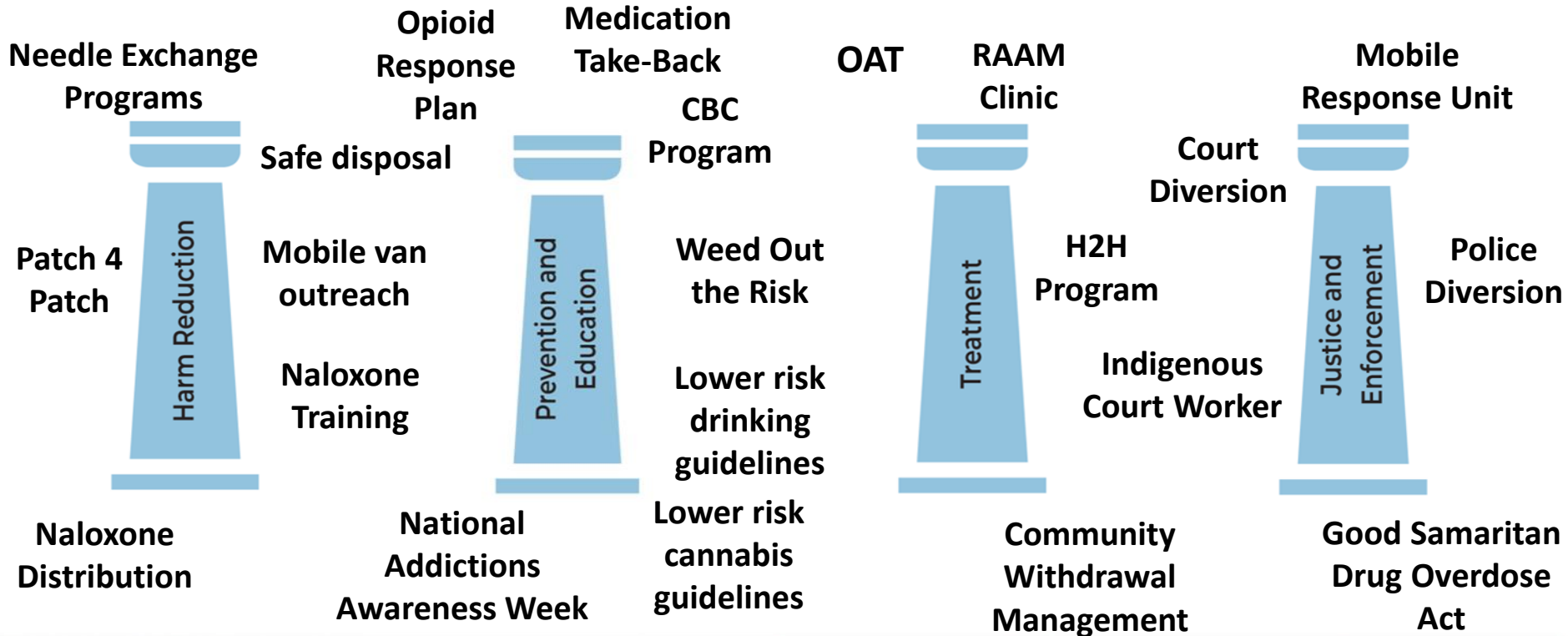
[http://apps.who.int/iris/bitstream/10665/149798/1/9789241508018\\_eng.pdf?ua=1&ua=1&ua=1](http://apps.who.int/iris/bitstream/10665/149798/1/9789241508018_eng.pdf?ua=1&ua=1&ua=1)

<http://www.cdc.gov/drugoverdose/pdf/policyimpact-prescriptionpainkillerod-a.pdf>

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# Local Responses



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# Guiding Opioid Responses

- Jury Recommendations from the Chapman Inquest
- Association of Municipalities Ontario: Addressing the Opioid Overdose Emergency in Ontario
  - Municipal Recommendations for a Provincial Response
- CELHIN Opioid Strategy



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# Guiding Opioid Responses

HEALTH

April 3, 2019 2:58 pm

## Peterborough County calls on Ontario and federal governments to help stop opioid crisis

## Peterborough County supports motion to battle opioid crisis

County councillors call on provincial government to take more action

NEWS

Apr 03, 2019 by Jason Bain Examiner Staff Writer



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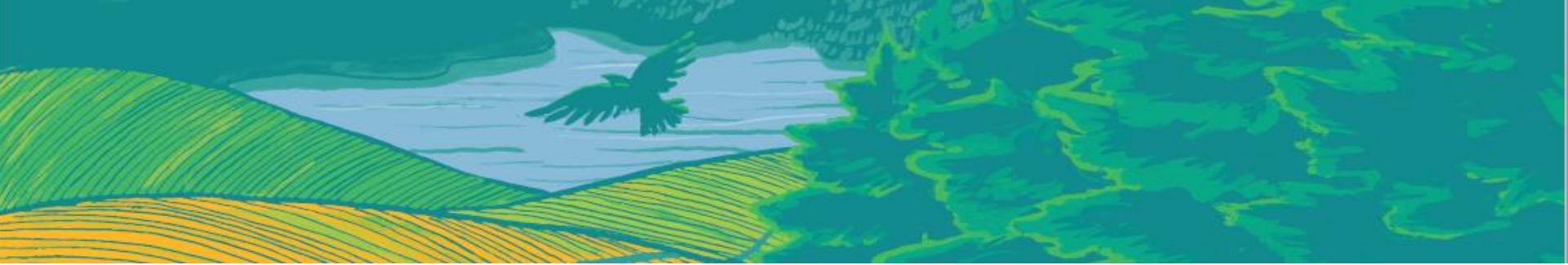
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# Opportunities

- Community Safety and Wellbeing Plans
- Ontario Health Teams
- MOHLTC Harm Reduction Program Enhancement
  - HKPR District Opioid Task Force
  - Evaluation of the HKPR Opioid Enhancement
- Local drug strategy
- Municipal Round Table models and other municipal approaches

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***Thank you!***

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