

Maple Ridge Opioid Overdose Community Response

Maple Ridge Opioid
Overdose Response
Task Group



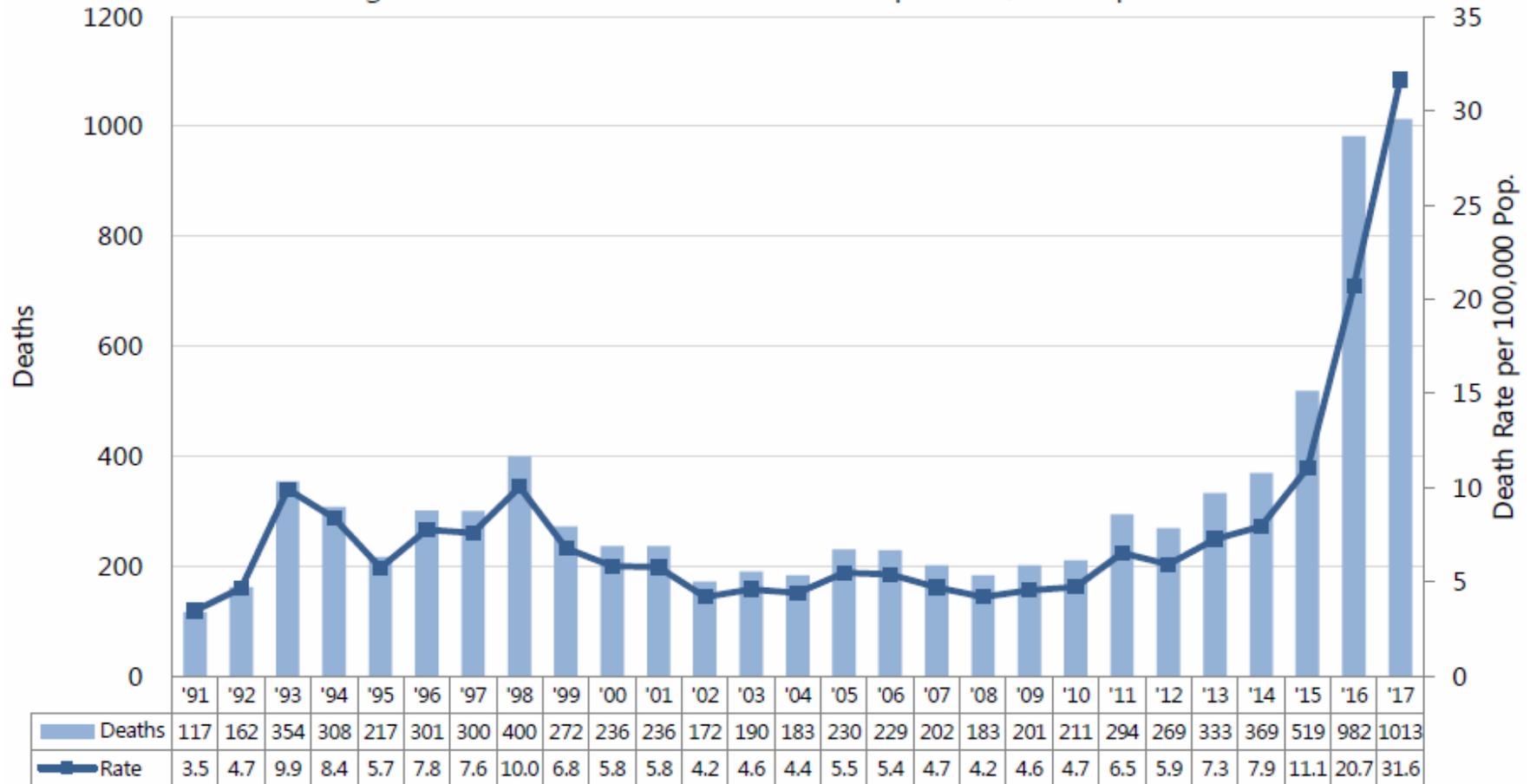
Ridge Meadows
Ministries
Faith. Hope. Dignity.



The Opioid Overdose Crisis in Numbers

Overdose Deaths in BC

Illicit Drug Overdose Deaths and Death Rate per 100,000 Population [2,5]



Data source: BC Coroner service

Provisional Data - subject to change as cases are closed

<http://www2.gov.bc.ca/assets/gov/public-safety-and-emergency-services/death-investigation/statistical/illicit-drug.pdf>



Overdose Crisis - Background

- Declared a public health emergency in April 2016
- Nearly 1,000 deaths across B.C. in 2016
 - One third occurring in Fraser Health region
 - Even more deaths this year
- Disproportionately impacting men (85% of overdose deaths in our region), especially men 19-59 years old
- 70% of overdose deaths in the region occurring in private residences

Why this increase in 2016?

- From 2000 - 2010, an average of 200 deaths per year in B.C. were attributed to illicit drug overdoses
- Increased risk of overdose due to presence of more lethal opioids such as fentanyl and other analogues contaminating the illicit drug supply
- A higher proportion of fatal overdoses are associated with fentanyl, from 25% in 2014 to over 80% in 2017
- Fentanyl is not necessarily the drug the individual intends to take

Overdose Deaths in Maple Ridge

	No. Deaths Jan-Aug 2017	Projected* No. Deaths 2017	No. deaths 2016	% Increase (2017* vs. 2016)
BC	1,013	1,520	982	55
Fraser Health[^]	335	503	332	51
Surrey	123	185	121	52
Maple Ridge	25	38	27	39
Abbotsford	34	51	39	31
Langley (City+ Township)	24	36	30	20
Burnaby	33	50	39	27
Chilliwack	19	29	12	138
Coquitlam	18	27	13	108
New Westminster	13	20	11	77
Other communities	46	69	40	73

Data Source: BC Coroner Service. Preliminary numbers, subject to change.

* Projected by multiplying the available months of data with 12/(number of months for which the data was available)

[^] BC Coroner assigns location based on location of injury (i.e. overdose) and if that is missing, location of death.

Suspected Overdose Visits to FH EDs

Community [^] of residence	2017		2016
	No. events Aug (Avg. past 12 months~)	No. events Jan - Aug (Rate per 100,000*)	No. events (Rate per 100,000)
Abbotsford	32 (44.9)	339 (442)	481 (418)
Agassiz-Harrison	<5 (<5)	17 (321)	30 (377)
Burnaby	27 (26.5)	212 (157)	308 (152)
Chilliwack	20 (33.7)	283 (573)	283 (382)
City of Langley	6 (14.8)	125 (865)	142 (655)
Coquitlam	16 (14.8)	124 (170)	149 (136)
Delta	11 (11.2)	85 (145)	111 (127)
Hope	5 (<5)	20 (449)	24 (359)
Maple Ridge	30 (27.3)	230 (535)	341 (529)
Mission	<5 (12.6)	100 (452)	118 (340)
New Westminster	7 (14.3)	106 (265)	186 (310)
Pitt Meadows	<5 (<5)	35 (351)	52 (348)
Port Coquitlam	12 (11.9)	89 (277)	126 (261)
Port Moody	<5 (6.6)	52 (281)	70 (252)
Surrey	137 (153.8)	1,254 (444)	1,697 (401)
Township of Langley	15 (13.6)	108 (184)	184 (209)
White Rock	6 (<5)	40 (336)	44 (246)
Non-Fraser Residents	33 (41.0)	344 (n/a)	398 (n/a)
Fraser Health	368 (440.1)	3,563 (382)	4,744 (339)

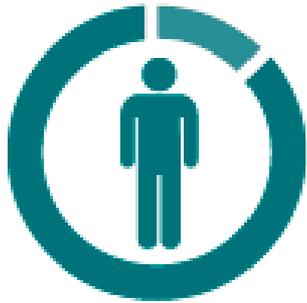
[^] Community based residential address of the patients. Homeless people assigned to the location of the hospital.

-- counts under 5 not reported as they are potentially identifiable

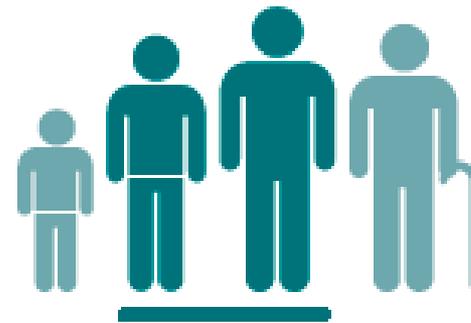
~ Monthly average based on past 12 months

* Rate annualized based on data from Jan-Aug 2017

Who is Dying from overdose?



85%
of fatal overdoses
are among men.²



19 - 59 year olds
are the most impacted³
with **30 - 39 year olds**
having the highest number
of overdose deaths.



70%

of overdose deaths
are in private
residences.

Of all suspected overdose deaths in Fraser Health, our analyses show that most occur in someone's home, which counters the common misconception that most overdoses are happening on the street to people who are homeless.



Most people overdose
in the community
they live in.

This means local community driven interventions are likely to reach those who overdose or are at risk of overdosing in the community.

While fatal and nonfatal overdoses are occurring across Fraser Health communities, **two thirds** of fatal and nonfatal overdoses were in Surrey, Abbotsford, Maple Ridge, Chilliwack, and Langley City and Township.

Serious non fatal events seen in Emerg



Men who use illicit substances infrequently.

Men who use illicit substances infrequently typically use cocaine or other stimulants, and were more often first-time or occasional users.



Men who use illicit opioid substances frequently.

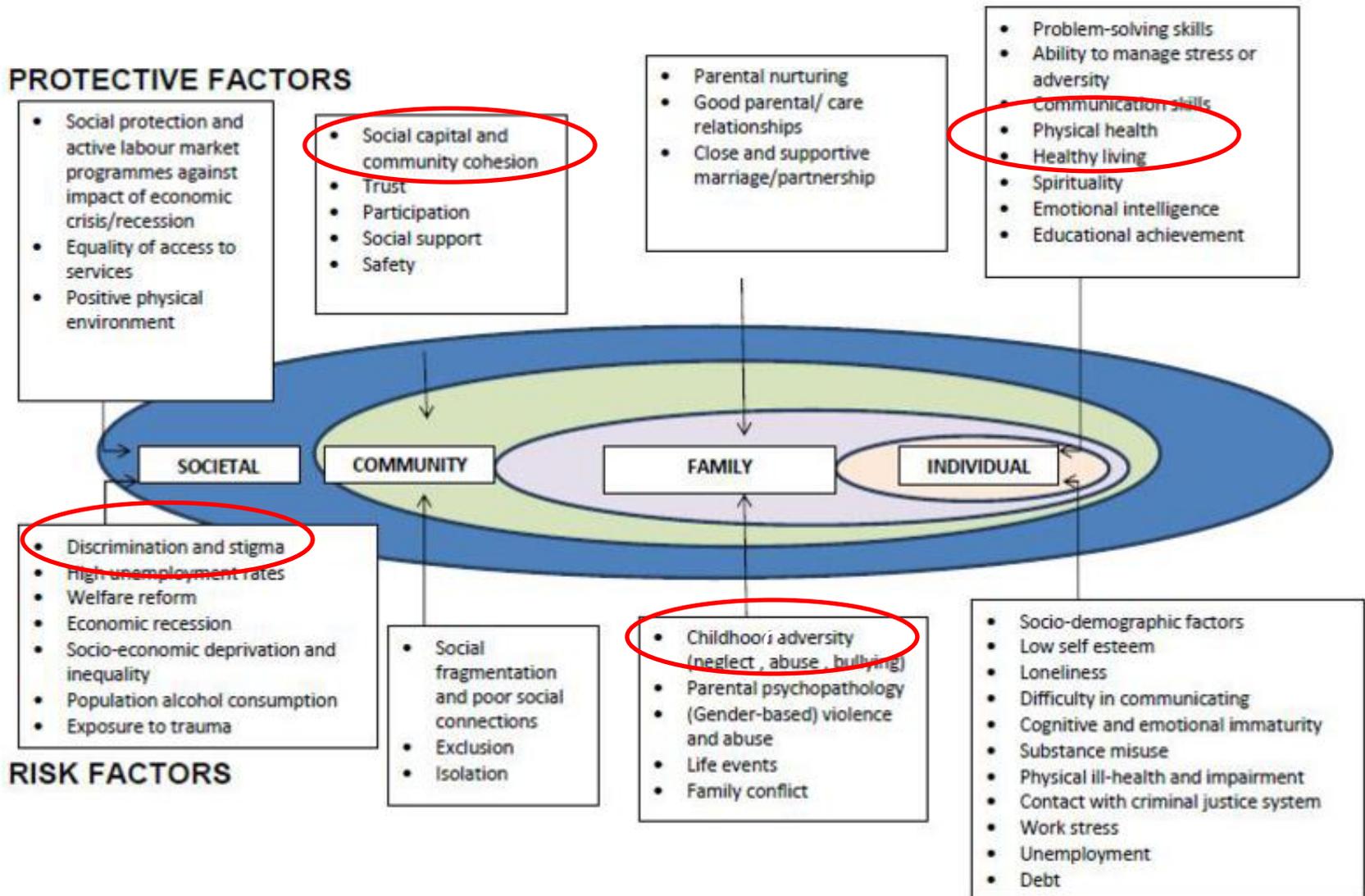
Men who frequently used opioid-containing substances, including heroin, had prior overdose events and a history of prior substance use treatment; this group also had more overdoses than the other groups.



Men who use drugs to manage pain.

Men who use substances for managing their pain are typically older, unemployed, have a history of physical pain, and most had a prescription for opioids at the time of their overdose. The other groups both include younger men more engaged in the job market with fewer physical pain concerns.

Mental Health - Risk and Protective Factors



The Opioid Overdose Crisis Community Response

Provincial Direction 2018 - Community Action Teams

- Established by January 2018
- In communities having most urgent need.
- Spearhead local coordination and communication to mount a robust response to the needs of those most at risk of overdose within their communities.
- Include representation from municipal government, Indigenous partners, first responders, front-line community agencies, Divisions of Family Practice, people and families with lived experience and local provincial ministry offices providing housing, children and family, and poverty reduction services.

Opioid Overdose Task Group Est. Jun 2016

- City of Maple Ridge
- Fraser Health
- Fire Department
- RCMP
- Alouette Addictions
- Salvation Army
- RainCity Housing
- SD42 & DPAC
- Purpose Society
- Division of Family Practice
- PCRS
- Plea
- Maple Ridge Treatment Centre
- Community Network



Task Group Goals

- Increase **overdose awareness and education**
- Reduce **stigma**
- Increase **compassion, inclusion & engagement**
- **Focus on peers and youth in the community**

*Actions of the
Maple Ridge Opioid Overdose
Working Group*

Overdose Awareness & Education

- Homelessness Dialogue Series 2016



Partnership with City

- Fentanyl Forums 2016, 2017



Partnership with SD42



Increase Knowledge of Local services

- Forums
 - Community Network
 - Physicians



- Wallet resource cards



Reduce Stigma

- Business Poster Campaign 2017

Maple Ridge Opioid Overdose Response Task Group

Understanding the Community Overdose Response

FACT SHEET FOR BUSINESSES

How has the Opioid Overdose Crisis affected Maple Ridge? Drug-related overdoses and deaths are a serious concern in Maple Ridge. In 2016, there were 27 overdose deaths in the community of Maple Ridge. This was the highest rate per population in the Fraser Health region and one of the highest rates in the province. In 2016, the majority of deaths in Maple Ridge occurred in private residences. Numbers of deaths started to decline in early summer, but overdose and death remains a very real risk for those who struggle with substance use.

DON'T LET THIS PARTY BE YOUR LAST

You can't know if the drug you use is safe. Any drug—cocaine, crack, ecstasy, meth, heroin—can contain fentanyl.

- *Never use alone*
- *Go slow*
- *Carry naloxone*

Learn more at gov.bc.ca/overdose

ICSI CARRY A NALOXONE KIT **CALL 911** **#STOPOVERDOSE**

BRITISH COLUMBIA First Nations Health Authority
Health through wisdom

Compassion, Inclusion & Engagement

- PhotoVoice Project 2018



Small Group Questions

1. How do we reach individuals and the families of those who are using in their homes?
2. How do we encourage compassion and reduce stigma?
3. How do we engage the community in solutions in a time of information overload and compassion fatigue?