

Community Response to Opioid Crisis

City of Greater Sudbury Council Delegation

January 21, 2020

Community Drug Strategy, Executive Co-Chairs

Chief Paul Pedersen, Greater Sudbury Police Services

Dr. Penny Sutcliffe, Medical Officer of Health, Public Health Sudbury & Districts



Public Health
Santé publique
SUDBURY & DISTRICTS



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contre les drogues

What are our key messages about opioids?

1. It is a crisis
2. Sudbury is not immune
3. Sudbury is well-prepared to respond
4. Key messages for the public
5. Key actions for municipal leaders



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The evolution of a crisis

1990s

Opioid Rx for chronic pain



2002

Canada #2 worldwide consumer of Rx opioids

2013

Fentanyl in illicit market



2014-15

Youth recreational opioid use

2009-2014

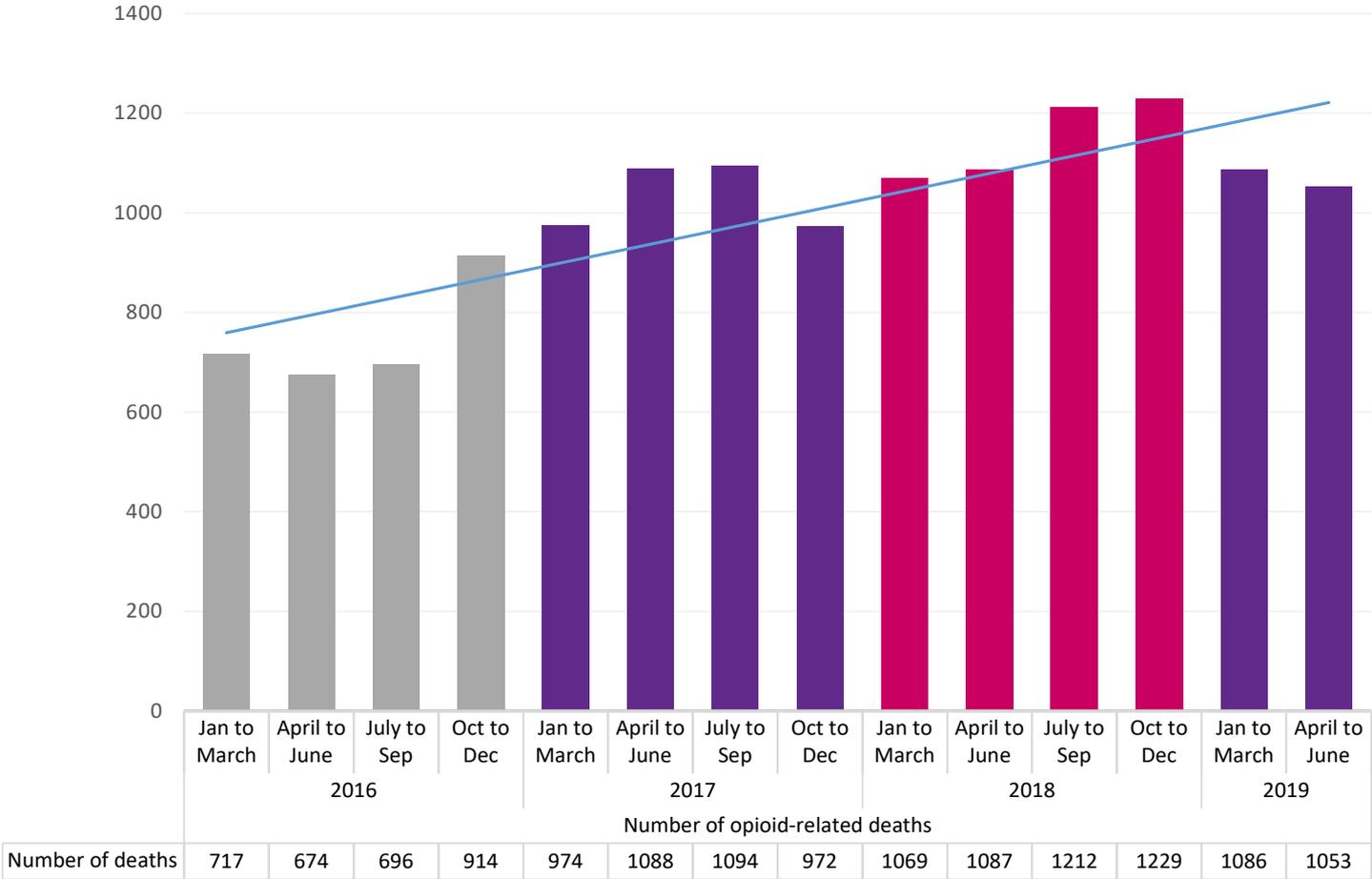
655 fentanyl implicated deaths in Canada



2016-June 2019

>13,900 apparent opioid-related deaths in Canada

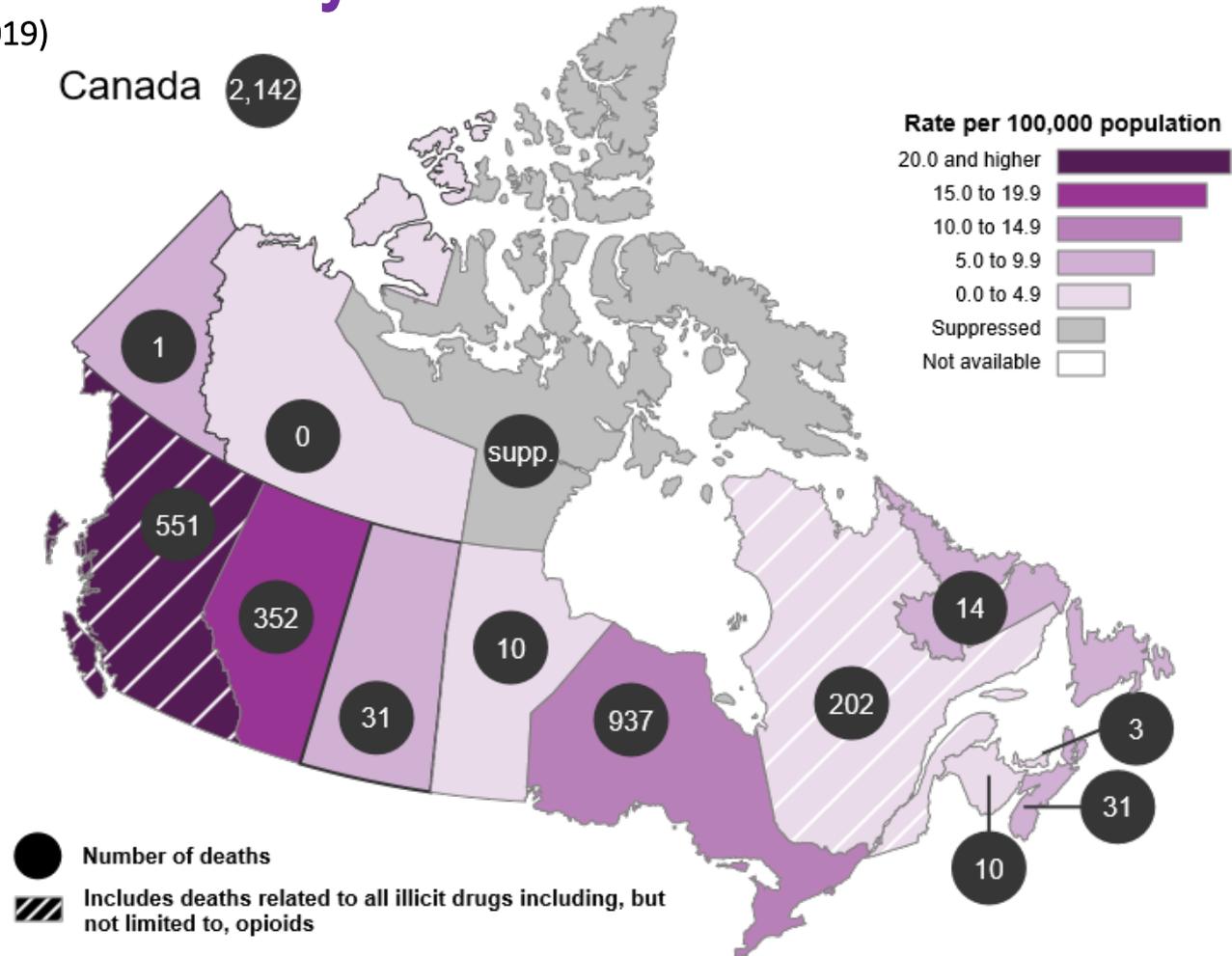
Opioid-related deaths in Canada 2016-2019



Data source: Health Canada, National Report: Apparent Opioid-related Deaths in Canada, June 2019

Number and rate of apparent opioid-related deaths by province and territory

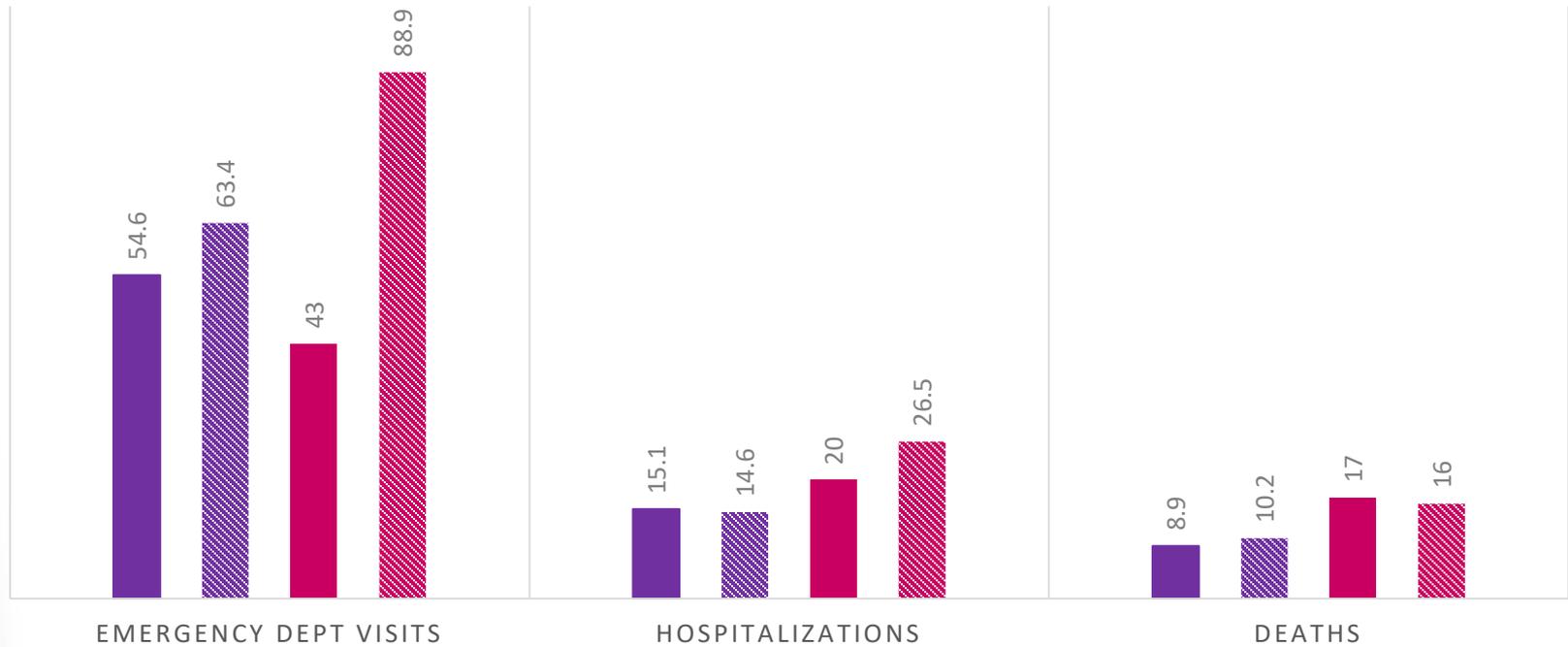
(January to June 2019)



Sudbury is not immune to the opioid crisis

Emergency Department visits, hospitalizations, and deaths (rates per 100,000, Ontario and PHSD, 2017 and 2018)

■ Ontario 2017 ■ Ontario 2018 ■ Public Health Sudbury & Districts 2017 ■ Public Health Sudbury & Districts 2018



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What do we know about people in our area who died from opioid-related causes?

Occupation	Unavailable
Sex	75% male
Intention	90% unintentional
Demographics	80% Caucasian
Age	44% 25-44 years old
Dwelling	Most in private residence
Location	Most used and died in private residence

Sources: PHO Interactive Tool, April 2017 to June 2019 and Office of the Chief Coroner for Ontario, April 2017 to June 2019

Sudbury is well prepared to respond

“The opioid overdose crisis is a complex problem that we know will take time to turn around. To have a significant and lasting impact, we need to continue working together on whole-of-society changes. This includes addressing the **stigma** that surrounds substance use, implementing further **harm reduction** measures and **reducing barriers to treatment**. It also means continuing to work together to better understand and address the drivers of this crisis, such as **mental illness**, and **social and economic** factors that put Canadians at increased risk.”

Dr. Theresa Tam, Co-Chair, Special Advisory Committee on the Epidemic of Opioid Overdoses [Joint Statement](#) December, 2019

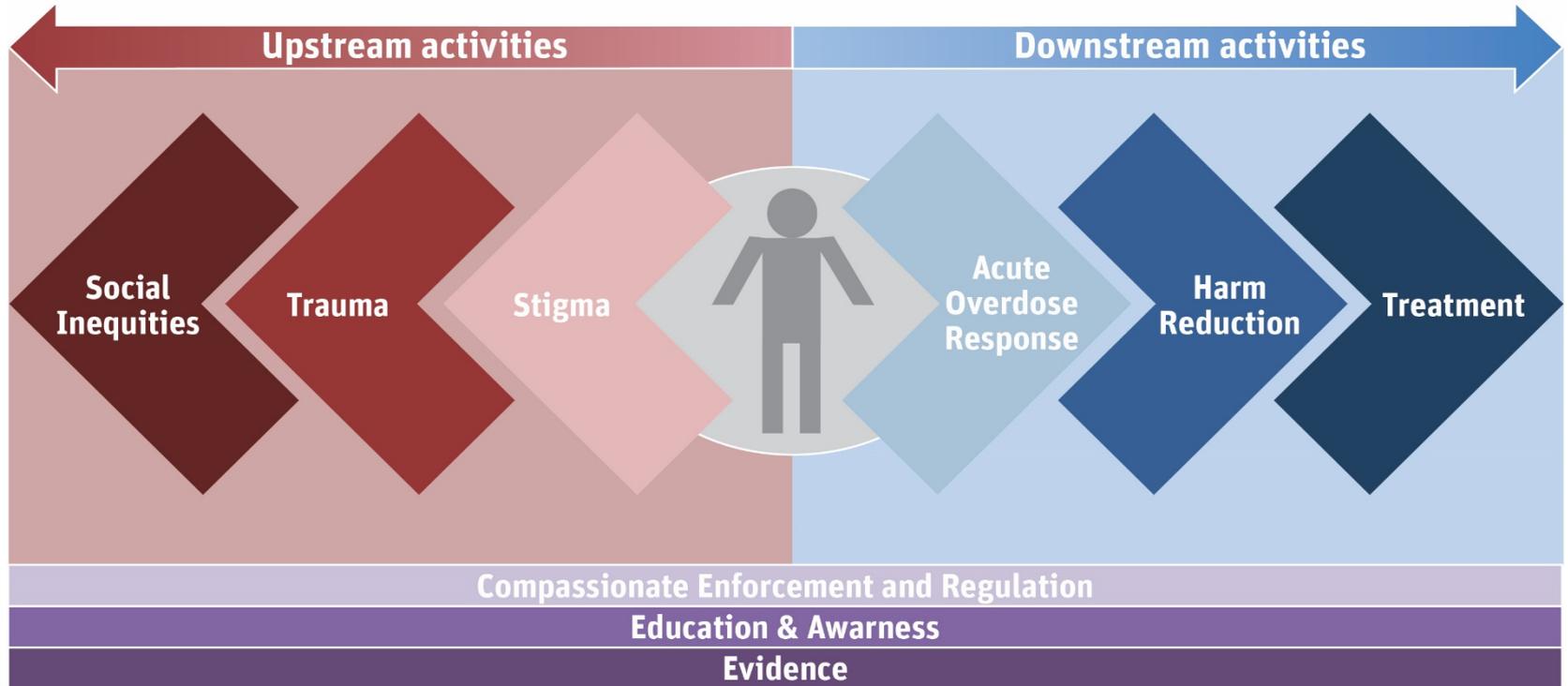


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If there was an easy solution,
we would have found it.



<https://www.oecd.org/health/health-systems/Canada%E2%80%99s-Opioid-Crisis-Presentation-OECD.pdf>

The steps currently being taken to address the crisis, as well as those being proposed, demand, however, that enough people **care**, a precious commodity in the crisis.

[Ottawa Citizen](#)

Four pillars

**Health
Promotion**

**Enforcement
and Justice**

**Harm
Reduction**

Treatment



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Community Drug Strategy organizational chart



● time limited

R: June 18, 2019



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Drug Strategy pillars

Health Promotion

- Opioid poisonings response plan
- Surveillance and early warning
- Communications – media, social media, website, presentations
- Empowerment and resiliency

Enforcement and Justice

- Community safety & target on suppliers with Joint Force Operation partners
- Naloxone training
- Officer & Security presence

Harm Reduction

- Naloxone program
- Needle exchange
- Service access
- Safer consumption

Treatment

- Expansion of treatment options and crisis response First responders training for diversion options
- Needs based planning and gap analyses

Four pillars



**Health
Promotion**



**Enforcement
and Justice**



**Harm
Reduction**

Treatment



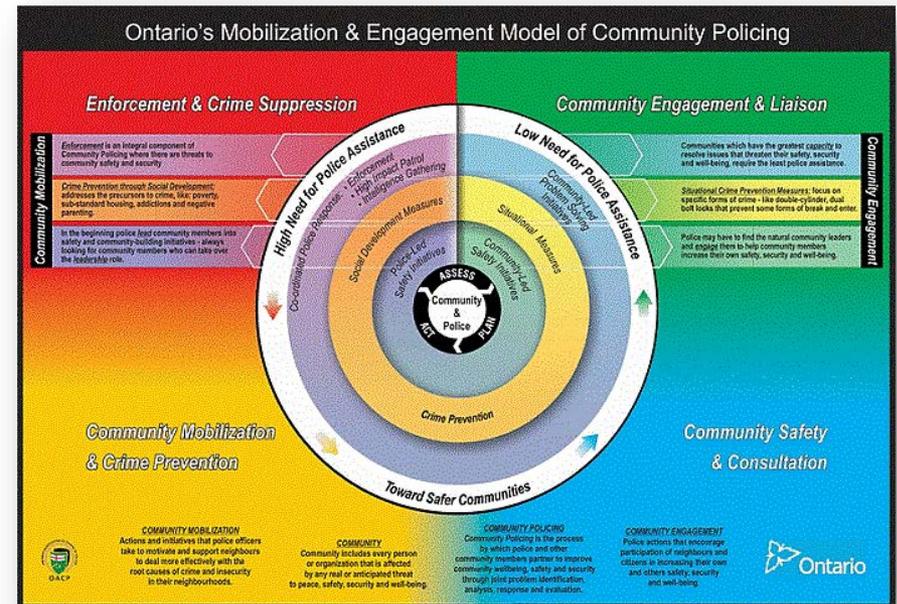
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Enforcement by GSPS

- GSPS responsible for all illicit drug complaints (Trafficking, Possession for the Purpose, Possession)
- Includes unlicensed cannabis sales and related investigations (CBD)
- Drug overdoses
- Crimes related to prescription frauds
- Asset forfeiture



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2019 drug seizure totals

- Cocaine \$380,000
- Crack cocaine \$2,200
- Heroin \$1,992
- Fentanyl/heroin \$284,000
- Fentanyl patches \$144,000
- Fentanyl \$6,400
- Methamphetamines \$475,000
- Cannabis products \$270,000

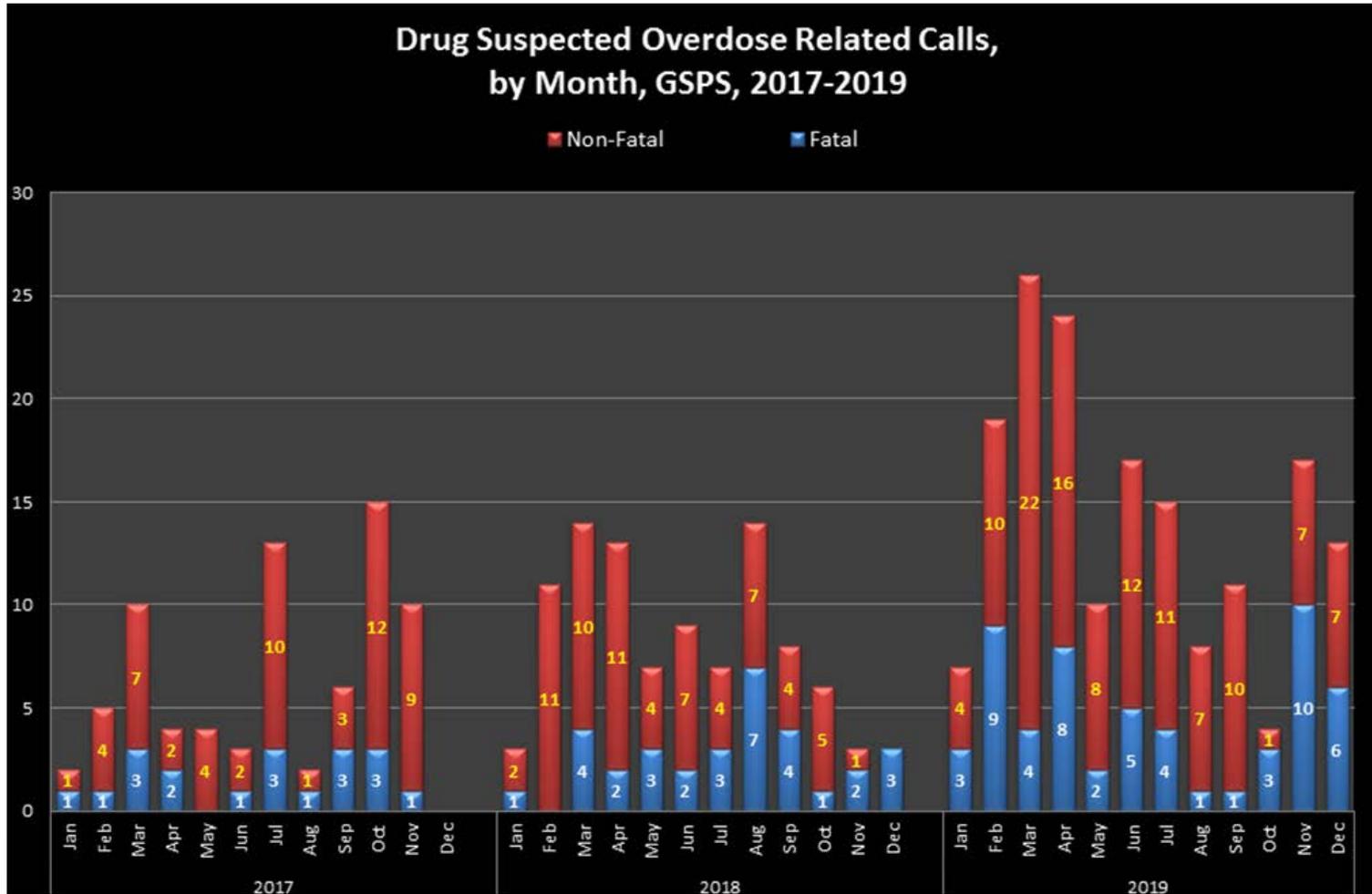


Proactive activities

- Trespass to Property Act, Liquor License Act, CDSA enforcement
- Partnership strategies with AGCO
- CPTED Audits
- BIA meetings & Coffee with a Cop
- Visibility and deterrence through increased foot and bike patrol
- Mobilization and Engagement



2019 drug overdose statistics



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Downtown strategy: problem and analysis

- Increased property crime from 2017 to 2018 (+15.8%)
- Decreased violent crime from 2017 to 2018 (-8.5%)
- Increased social disorder from 2017 to 2018 (+11%)
- Hot Spot Analysis
 - Transit Centre/Tim Hortons/LCBO
 - Rainbow Centre
 - Old City Hall Lane
- Increased calls for service from 2018 to 2019 Jan-Nov (+6.5%)
- Closure of several places (including Salvation Army) in 2019 resulted in 275 people being displaced

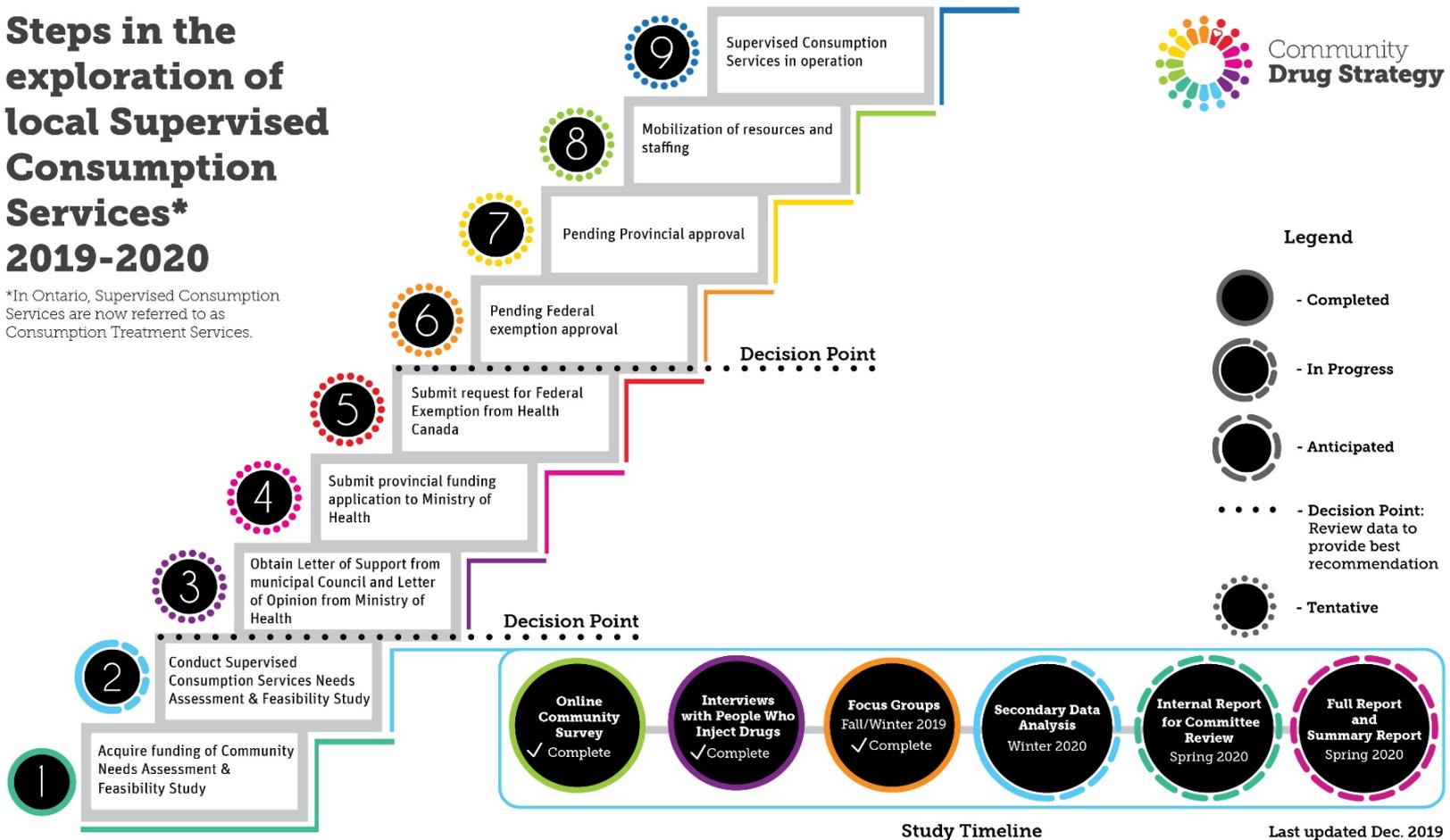


Photo retrieved from Sudbury.com

Harm Reduction: Spotlight on safer consumption

Steps in the exploration of local Supervised Consumption Services* 2019-2020

*In Ontario, Supervised Consumption Services are now referred to as Consumption Treatment Services.



Community Drug Strategy

Study Timeline

Last updated Dec. 2019

Harm Reduction: Spotlight on Needles

Access to clean needles

- ~120,000 distributed per month
- ~75,000 returned per month (not including kiosks)
- Publicly-funded
- Evidence-based harm reduction
- Multiple locations (Public Health Sudbury & Districts Rainbow Centre and 1300 Paris Street, SACY, Reseau, OAHAS)



Needle disposal kiosks

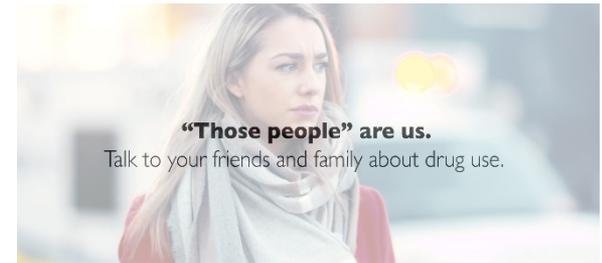
1. Energy Court, vacant lot
2. Leslie Street, at the entrance of the Junction Creek Waterway Park Trail
3. Corner of Eva Avenue and Kathleen Street
4. Corner of Durham and Beech Street
5. Ste. Anne's stairs
6. Greater Sudbury Library, Mackenzie Street
7. Memorial Park
8. Hnatyshyn Park
9. Paris Street, next to Brady square
10. Pine Street
11. Red Cross Boulevard
12. Paris Street at Public Health Sudbury & Districts

Health Promotion: Spotlight on stigma

Stigma is a barrier to accessing services, health care, and treatment for people who use drugs.

“Stigma is the chief reason that people who use opioids do so alone. It prevents them from coming forward, and if they do seek help, it keeps them from admitting they were unwell in the first place.”

Gord Garner, Executive Director, Community Addictions Peer Support Association (CAPSA) [Ottawa Citizen](#)



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Key messages for the public

- Get involved – be a part of the Community Drug Strategy
- Start early with resilience and opportunities for life
- Substance use does not discriminate
- Share overdose prevention messages
- We cannot enforce or treat our way out of this crisis
- It takes all of us; all sectors



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Key municipal actions



- Decide on goals and get behind priorities
 - Youth wellness hub
 - Safer consumption
 - Roles for paramedicine
- Support public campaigns and personal actions to end stigma
- Make needle disposal bins normative
- Share success stories and learn from others



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In closing

This is complex and costly. It's the consequence of 20 or 30 years of events... and to throw your hands up is not going to be successful. That's not the right solution, to say it's too big, too complex or not to think about those issues that are longer-term that we have to address.

Dr. Jeff Turnbull, [Ottawa Citizen](#)



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