Lambton County

Community Drug and Alcohol Strategy

Are drugs and alcohol a problem in Lambton County?

The health and social harms from drugs and alcohol are significant across Ontario and Lambton is no different. In 2014, substance use cost Ontario \$14.7 billion. Almost 1,500 emergency department visits were made in 2017 for substance-related diagnoses accounting for 1.7% of all visits.

81% of Lambton adults use alcohol and 19% of adults report using cannabis (both recreational and medical, before legalization). Young people are at particular risk of harm with 27% of youth reporting binge drinking in the past year iv and 20% of adults under 35 years old reporting at least weekly use of cannabis. In 6 Lambton residents reported taking prescription opioids for medical purposes in 2018.

Although it's difficult to know how many people use illegal drugs, roughly half a million needles are distributed annually through the Lambton Public Health (LPH) harm reduction program. Rates of hepatitis C, often attributed to intravenous drug use, are significantly higher here than the provincial average. V

Lambton has a significantly higher rate of admissions to government-funded substance abuse treatment services than the provincial average. vi

Why develop a Community Drug and Alcohol Strategy?

Problematic drug and alcohol use is a complex problem requiring innovative, community-based solutions. Factors that positively or negatively impact substance use such as access to treatment, recreational activities, and safety are often unique to communities or modified by local governments making a community-based strategy an important opportunity to make change.

In 2017, the provincial government provided funding for public health units to enhance their harm reduction programs, including facilitating the development of a community strategy to respond to emerging substance use issues.

The County of Lambton supported a motion for Lambton Public Health (LPH) to strike a steering committee and develop a community drug and alcohol strategy. Since then, LPH has engaged with close to 20 stakeholders involved in supporting people who use drugs and alcohol to identify how we can better prevent and reduce the harms associated with substance use.

Strategy: Why include both drugs and alcohol?

Preventing problematic substance use before it starts is a key component in reducing future harms. Many of the factors that lead to, and protect from opioid misuse, are similar to those influencing misuse of other drugs and alcohol. By focusing our efforts far enough upstream, we can have a greater impact on reducing the harms by all substances.

In Lambton there are multiple substances that need to be addressed.

- Opioid morbidity and mortality continue to increase across Ontario and there is much more work needed to curb the crisis.
- Alcohol accounted for over half the substance-related emergency department visits in 2017 compared to opioids' 15%.ⁱⁱ

 Crystal methamphetamine is the most commonly reported substance of choice by people attending LPH's harm reduction program.^{vii}

Strategy: Who is involved?

Close to 20 stakeholders have been involved in the process of strategy development with multiple sectors involved including education, primary care, mental health and addictions treatment providers, law enforcement, harm reduction services, First Nations, child and youth services, social services, elected officials, and the public with lived experience (people who use drugs, have used drugs, and their loved ones).

Other communities and regions have also been consulted about their strategies.

Strategy: What has been done so far?

After completing a situational assessment and gaining valuable insights from other regions, people with lived experience, service providers, and the data itself, a motion was passed by County Council supporting the development of a Steering Committee to create a Community Drug and Alcohol Strategy.

Community partners were invited to participate in a series of meetings to collaboratively develop a vision, guiding principles, and goals as well as a comprehensive list of objectives. 5 objectives were identified as strategic priorities because they cut across the goals and are vital for the strategy's success.

VISION: A flourishing community, working together, to prevent and reduce drug and alcohol misuse.

STRATEGIC PRIORITIES:

- Healthy, Resilient Communities
- Stigma Reduction
- Coordinated, Holistic, and Easily Navigated Systems
- A Culture of Safer Use of Drugs and Alcohol
- Equitable Access and Outcomes

GOALS and OBJECTIVES:

Demand Reduction

 Improve the community conditions that promote resilience & support healthier alternatives to substance use.

Harm Reduction & Treatment

Reduce the negative consequences of problematic substance use.

Supply Reduction

Access to substances is limited, regulated & responsible

... Next Steps on page 3

Next Steps

Moving forward, we will be reviewing the identified priorities with stakeholders and collecting feedback focused on implementation. This will involve determining what needs to be done first, what is missing, and what else should be included. Setting priorities for the initial work of the Strategy will help determine how others can be meaningfully involved to support action.

Stakeholders (core, involved or supportive) will be engaged for feedback, followed by a more formal public consultation process to connect with the community.

- Stakeholder Engagement Group Interviews and Survey
- Community Public Consultations

Questions

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¹ Canadian Centre on Substance Use and Addiction, 2018

ⁱⁱ IntelliHealth Ontario, 2018

iii Ipsos Survey, 2018

iv Ontario Student Drug Use and Health Survey, 2017

^vLambton Public Health Infectious Disease Report, 2017

vi Drug and Alcohol Treatment Information System, 2017

vii Harm Reduction Program Enhancement Report, 2018