

**CRAWFORD COUNTY
DRUG OVERDOSE
FATALITY REVIEW
(OFR)**

**ANNUAL
REPORT
2020**

(RELEASED JULY 2021)



ABOUT OFR:

The purpose of the Drug Overdose Fatality Review (OFR) is to review and share information about unintentional drug overdose deaths to gain a better understanding of the circumstances surrounding these deaths.

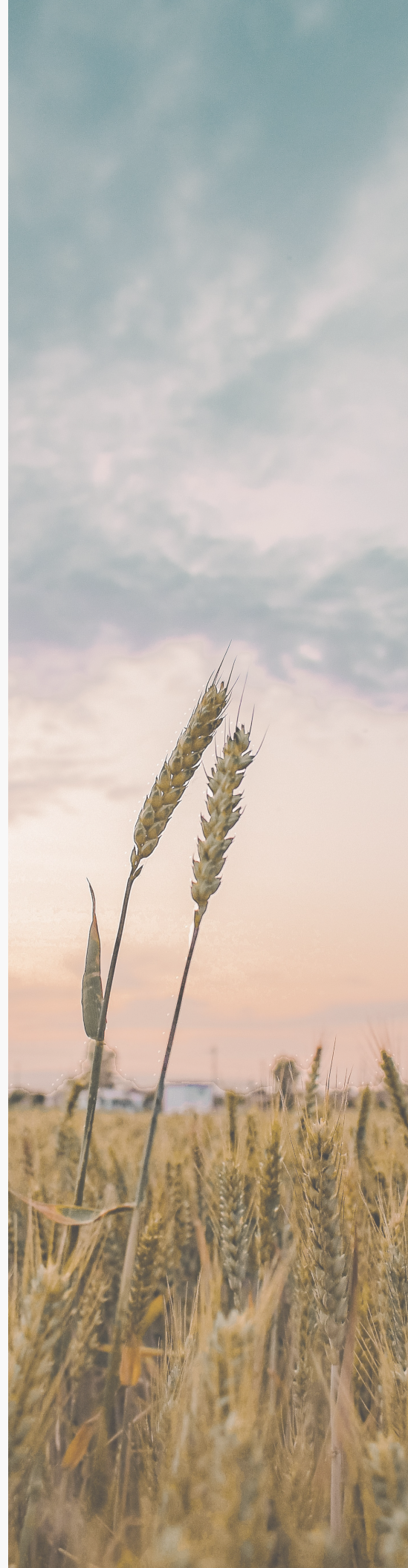
The goal of the OFR is to develop local recommendations based on information collected through the OFR process to prevent drug overdose deaths.

The OFR team meets quarterly, either virtually or in-person. Current OFR membership includes:

- Crawford County Coroner's Office
- Crawford County Prosecutor's Office
- Crawford County Public Health
- Crawford County Sheriff
- Crawford-Marion ADAMH Board
- Marion-Crawford Prevention Programs

Sources of data include the Death Certificate, Coroner/Medical Examiner Report, Police/Sheriff Reports, Obituaries, News, Social Media, Court Records, Medical Records, Mental Health Records, and EMS Reports.

HIPAA regulations prevent access to or exchange of some protected health information. All OFR participants are required to maintain confidentiality of information obtained throughout the process.

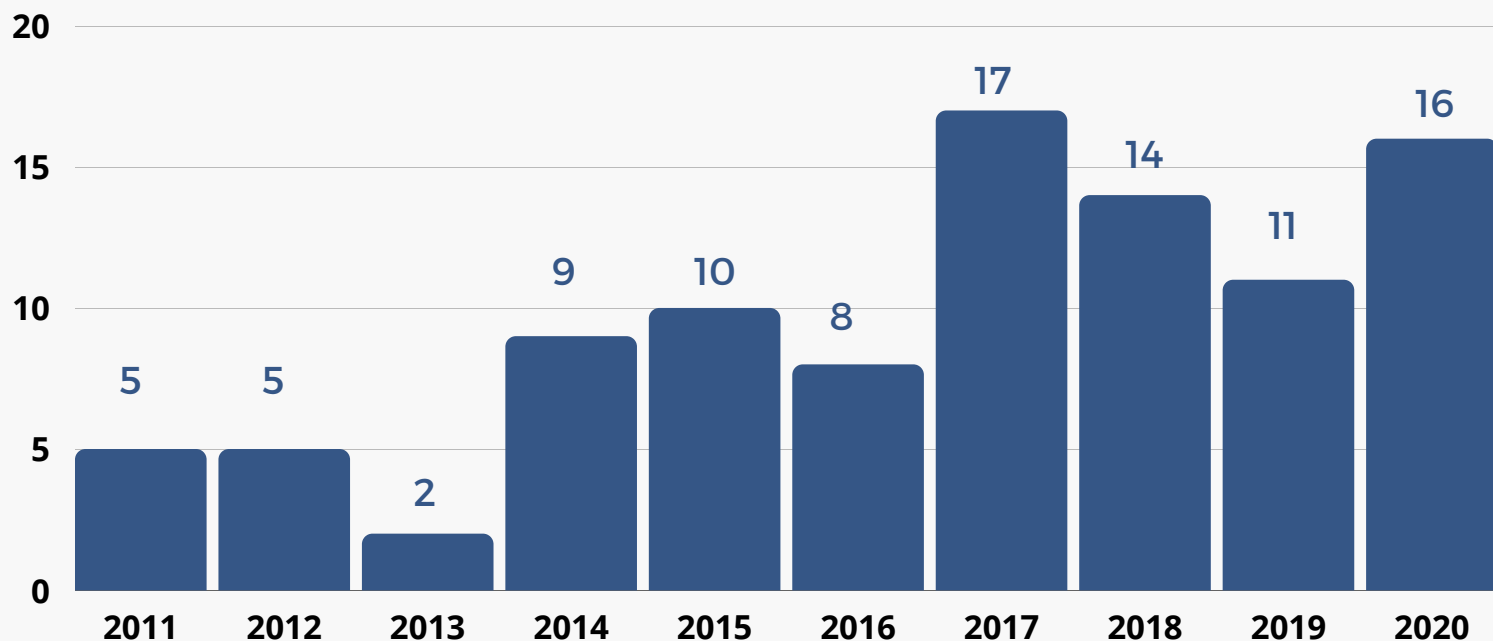


NARRATIVE SUMMARY

- In 2020, the total number of drug overdoses reported was 140 with 16 unintentional drug overdose deaths (6 males and 10 females).
- Eight of the decedents (50%) lived within the 44820 (Bucyrus area) zip code, five from 44833 (Galion area) and three from 44827 (Crestline area).
- Ages of decedents ranged from 22 to 47 years. The average age of decedent was 34 years.
- There were at least 20 children under the age of 18 years that lost a parent to drug overdose during 2020.
- Home was identified as the most frequent location of death.
- Fentanyl was listed in the toxicology reports for 11 of the 16 fatal overdoses (69%).
- Laborer in manufacturing/factory was the occupation listed most frequently (50%). Only one decedent had their occupation unlisted on the death certificate.
- Six decedents were married at time of death, three were divorced and seven had never married.
- The highest education level obtained for 13 decedents (81%) was a high school diploma or GED or they did not have a high school diploma. One decedent had an associate degree and two had taken some college courses but did not have a college degree.
- None of the decedents were in the military or a veteran.
- All decedents had prior involvement with law enforcement.



2011 - 2020 NUMBER OF DRUG OVERDOSE DEATHS



Mortality data is provided by the Ohio Department of Health from the Ohio Public Health Data Warehouse. The Department of Health specifically disclaims responsibility for any analyses, interpretations or conclusions.

2020 DRUG OVERDOSE DEATHS AGES



Minimum Age Males: 25
Maximum Age Males: 42
Average Age Males: 35

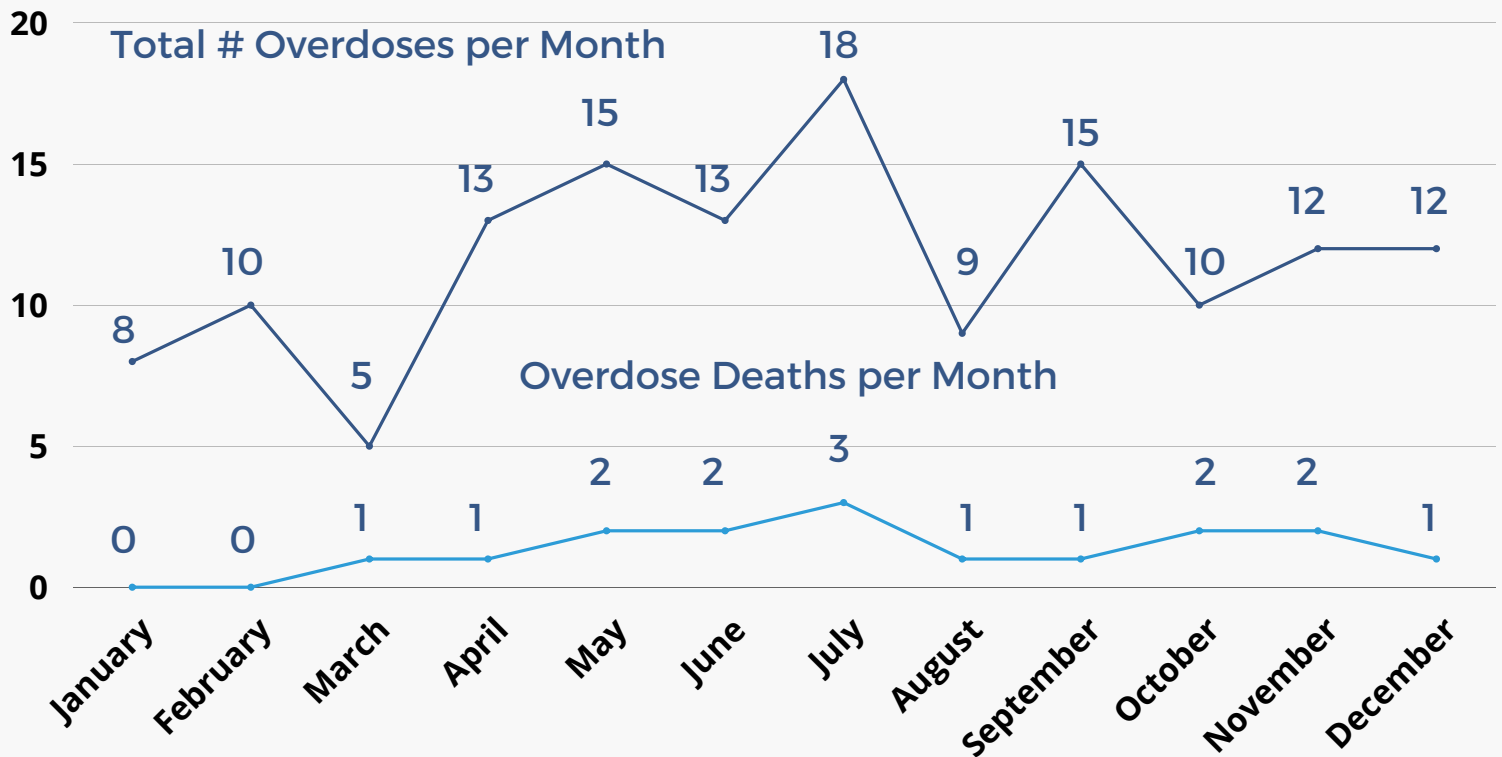
Males: 6
Females: 10

Overall Minimum Age: 22
Overall Maximum Age: 47
Overall Average Age: 34



Minimum Age Females: 22
Maximum Age Females: 47
Average Age Females: 33

2020 DRUG OVERDOSES & DEATHS PER MONTH

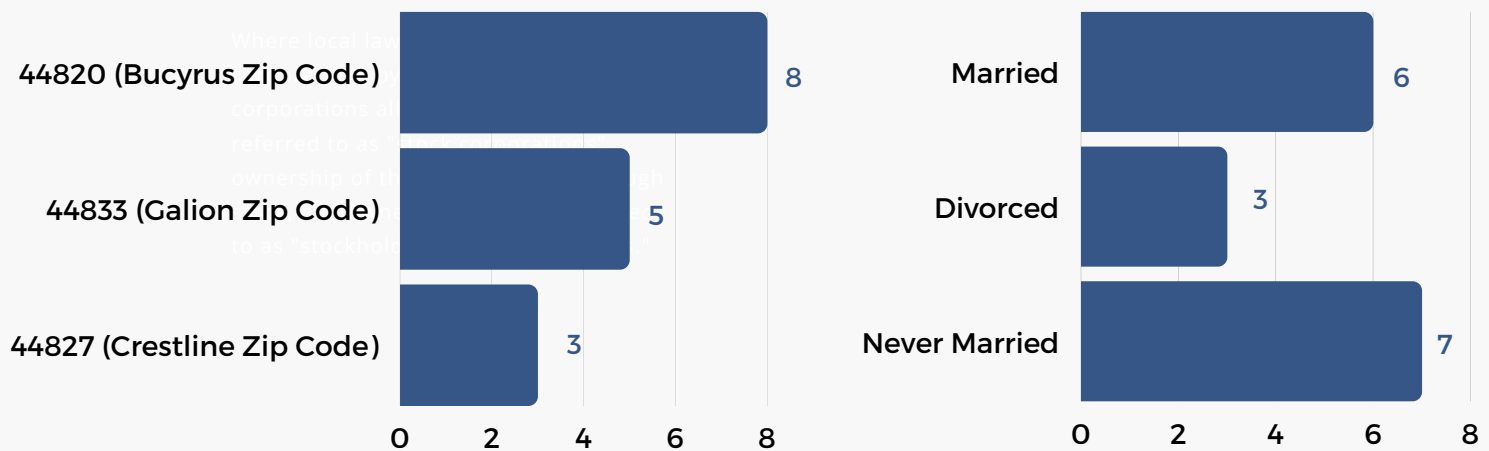


2020	Overdoses	Deaths
January	8	0
February	10	0
March	5	1
April	13	1
May	15	2
June	13	2
July	18	3
August	9	1
September	15	1
October	10	2
November	12	2
December	12	1

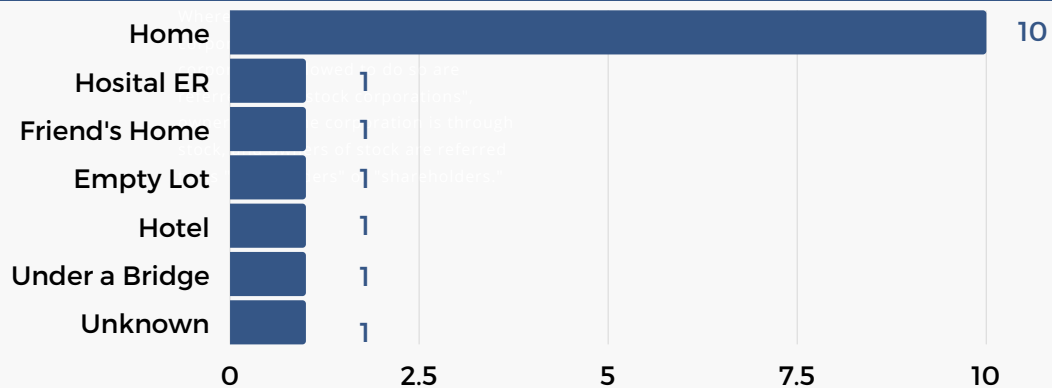
2020 Drug overdose data was extracted from EpiCenter and ESSENCE, surveillance systems that classified the chief complaint in real-time. This surveillance data captured Crawford County residents that presented to an ER or Urgent Care Center anywhere in Ohio.

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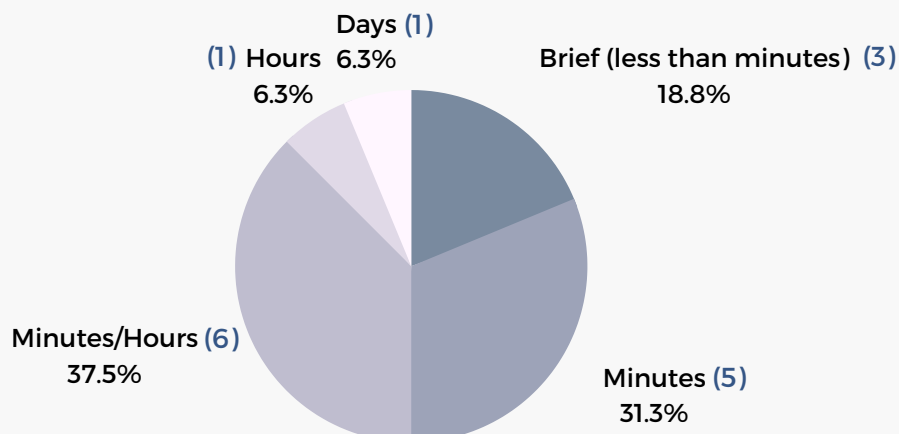
RESIDENCY & MARITAL STATUS



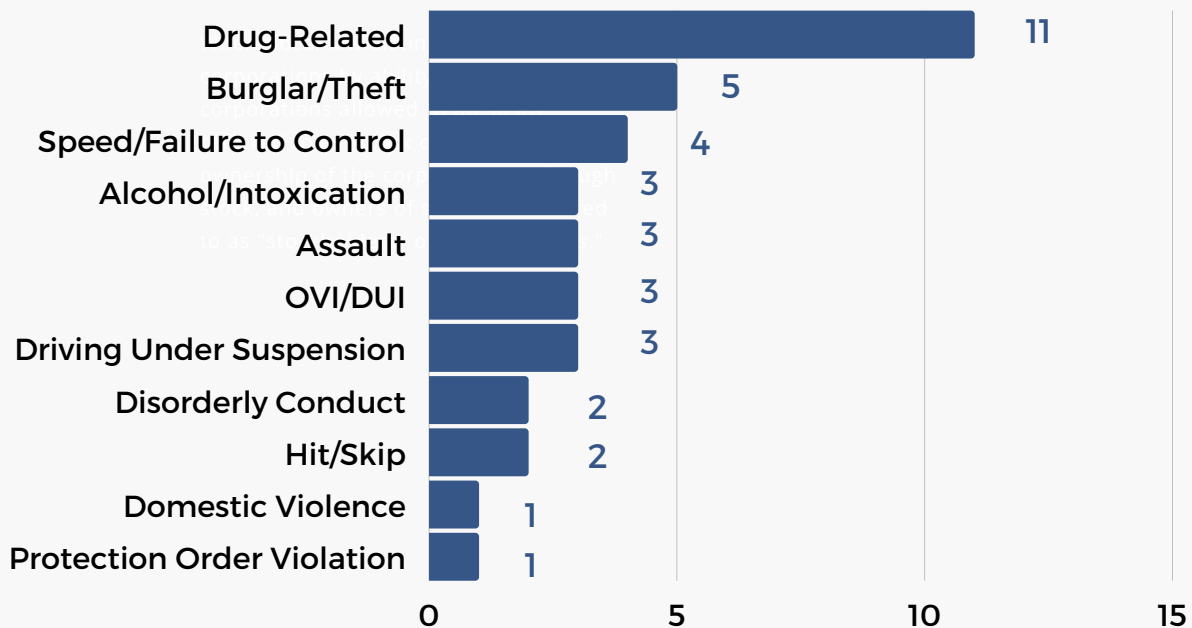
LOCATION OF OVERDOSE



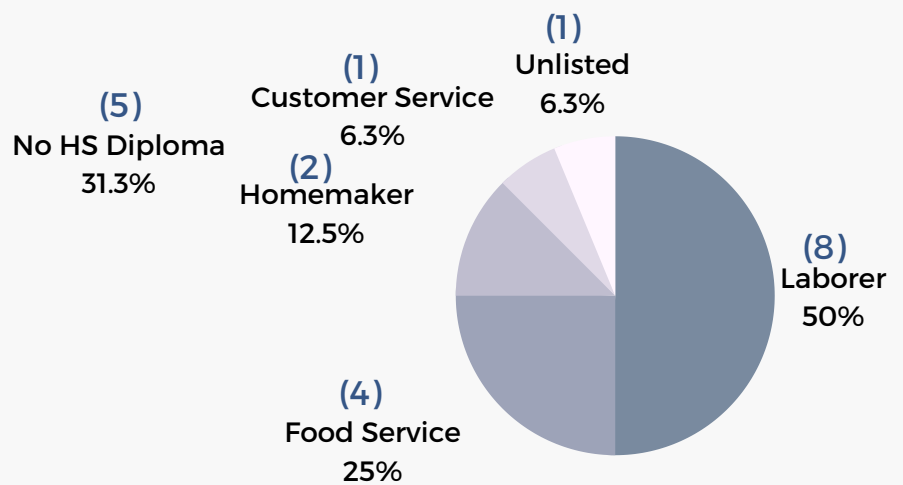
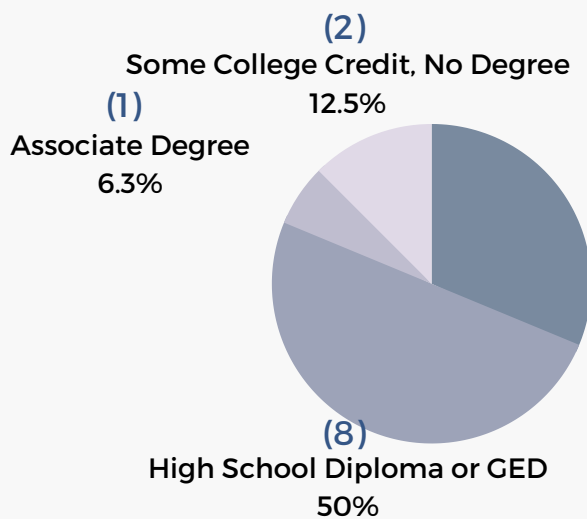
INTERVAL OF TIME BETWEEN OVERDOSE & DEATH



LAW ENFORCEMENT HISTORY



EDUCATION & OCCUPATION



NEXT STEPS

Drug misuse prevention is an important component of any community. Overdose is preventable. Informing individuals of the dangers of addiction, prevention techniques, and where to find recovery help are necessary to reduce drug misuse in our neighborhoods, schools, and workplaces.

NOTED TRENDS

Upon reviewing the 2020 unintentional drug overdose deaths, the OFR team noted the following:

- Use of fentanyl was listed on 69% of the cases.
- Ten of the reviews indicated the individual had been referred to treatment previously.
- Twenty Crawford County children under the age of 18 lost a parent to unintentional drug overdose in 2020 with no known follow-up care provided to the children.
- The 44820 zip code (Bucyrus area) was the area with the most overdoses and deaths during the year 2020.
- Half of the deaths (8) occurred within minutes of the overdose, prior to the arrival of EMTs or first responders.
- Home was the most common location of an unintentional drug overdose death.



NEXT STEPS

RECOMMENDATIONS

The OFR team discussed the following recommendations for the Crawford County community:

- **Expand distribution of naloxone** and encourage individuals who are personally at risk and their family/friends to carry naloxone. Provide anyone who has an encounter with EMS, Law Enforcement, or a medical facility for an overdose naloxone for the home. Distributing naloxone is recognized as one of the top strategies for addressing the opioid epidemic.
- Explore the local **distribution of fentanyl test strips** as a means of averting drug overdose by detecting the presence of fentanyl. Increase awareness and education on the risks of exposure to fentanyl.
- **Expand substance use disorder services** available locally within Crawford County.
- **Expand school-based prevention programs**, with emphasis on middle school and high school grades.
- **Increase community education** on recognizing the signs of drug misuse and empower friends/family members to engage conversations.
- **Reduce stigma** towards getting treatment.



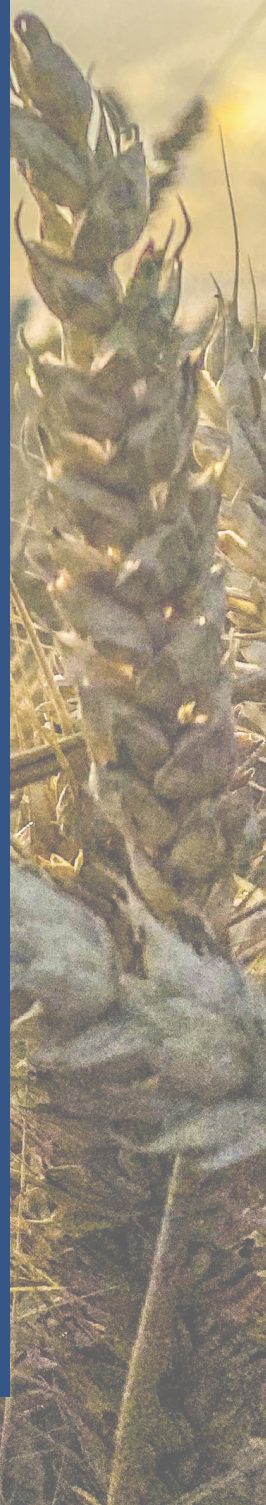
CONSIDERATIONS

Fentanyl is a synthetic opioid that can be prescribed for severe pain management. It is 50 to 100 times more potent than morphine. Most cases of fentanyl-related overdose and death in the United States are due to illicitly made fentanyl. It is often mixed with other drugs (heroin, cocaine, methamphetamine, etc.) to increase the effects. The risk of overdose increases when any type of fentanyl is present, but risk is especially high among people that are not tolerant to it or may not be aware of the presence of fentanyl in what they are using.

Naloxone was approved by the US Food and Drug Administration (FDA) in 1971 as a diagnostic and therapeutic agent for the treatment of opioid-induced respiratory depression and is currently on the World Health Organization's List of Essential Medicines (World Health Organization, 2014).

It has been used for more than 40 years by emergency medical services personnel to reverse opioid overdose and resuscitate individuals who otherwise might have died in the absence of treatment (SAMHSA, 2018).

Fentanyl test strips (FTS) allow testers to dissolve a small amount of substance in water and then dip the test strip into the liquid for 15 seconds. The test strip is then placed on a flat surface until results appear, typically within a few minutes. If one line appears on the test strip, the substance is positive for fentanyl. Two lines on the test strip indicates the drug is negative for fentanyl. The result of the test provides people with more information that may increase their safety and change their drug use behavior to reduce the risk of overdose. Distribution of FTS as a harm reduction effort provides opportunities to engage those that misuse drugs with members in healthcare services, treatment and recovery. Each interaction with a harm reduction advocate offers a possible connection that could lead to changing behavior and preventing overdose.



CONSIDERATIONS

Harm reduction is a set of strategies and ideas aimed at reducing negative consequences associated with drug misuse.

A key concept for successful incorporation of harm reduction strategies is meeting people who use drugs "where they're at," and addressing conditions of use along with the use itself.

The National Harm Reduction Coalition considers the following principles central to harm reduction practice:

1. Accepts, for better or worse, that licit and illicit drug use is part of our world and chooses to work to minimize its harmful effects rather than simply ignore or condemn them.
2. Understands drug use as a complex, multi-faceted continuum of behaviors from severe use to total abstinence, and acknowledges that some ways of using drugs are clearly safer than others.
3. Establishes quality of individual and community life and well-being - not necessarily cessation of all drug use - as the criteria for successful interventions and policies.
4. Calls for the non-judgmental, non-coercive provision of services and resources to people who use drugs and the communities in which they live in order to assist them in reducing attendant harm.
5. Ensures that people who use drugs and those with a history of drug use routinely have a real voice in the creation of programs and policies designed to serve them.
6. Affirms people who use drugs as the primary agents of reducing the harms of their drug use and seeks to empower them to share information and support each other in strategies which meet their actual conditions of use.
7. Recognizes that the realities of poverty, class, racism, social isolation, past trauma, sex-based discrimination, and other social inequities affect both people's vulnerability to and capacity for effective dealing with drug-related harm.
8. Does not attempt to minimize or ignore the real and tragic harm & danger that can be associated with illicit drug use.

(Principles of Harm Reduction, <https://harmreduction.org/about-us/principles-of-harm-reduction/>)



WHO CAN HELP PREVENT OVERDOSE?

- People who use drugs
- Friends/family members of people who use drugs
- Local community leaders
- Policymakers
- Faith-based organizations
- Schools
- Substance use treatment providers
- Shelters and supportive housing agencies
- Anyone! You!

Help us bring overdose prevention conversations and services to your neighborhood.

CRAWFORD COUNTY
PREVENTION
COALITION

For a safe and healthy Crawford County.



Visit the Crawford County Prevention Coalition Facebook page for local meeting information and updates. Or call (740)914-6444 to learn more on how you can get involved.

Other Resources:

Pathways of Central Ohio
Contact Crawford County
Crisis Text Line

800-544-1601
419-562-9010 or 419-468-9081
text 4HOPE to 741741
