

October 2024

Overdose Fatality Review

Focus Area: Men aged 35-44

Summary

The first meeting of the Snohomish County Overdose Fatality Review (OFR) team focused on two men aged 35-44 who tragically lost their lives to a fatal overdose. The reasons for choosing this focus area are detailed in the community context column below.

The discussion covered a range of topics aimed at formulating recommendations and identifying opportunities to enhance prevention strategies. We explored issues such as housing stability and the support needed for transitions in and out of housing, medications for opioid use disorder (MOUD), substance use disorders (SUD) and co-prescribed psychiatric medications, missed service connections, and frequent interactions with emergency services. Given the significant emphasis on housing during our conversation, we provide further elaboration on this topic below.

Key Findings

Although housing stability wasn't selected as the primary focus area for this review, it generated significant discussion, including the following points:

- A direct correlation exists between housing stability and a reduction in emergency service encounters, such as emergency department visits.
- There are limited resources available to support transitions out of supportive housing models, including the termination of time-limited rent assistance, noncompliance with housing guidelines, and the closure of housing programs.
- Housing needs are not universal. It's essential to consider different recovery paths and varying levels of social and emotional support in conjunction with diverse housing models.

According to data from the Snohomish County Medical Examiner's office, in 2023:



1 in 5

An estimated 1 in 5 opioid overdose deaths involved individuals who were experiencing homelessness or unstable housing in Snohomish County.

Community Context

This focus area was selected as this age group of men make up the largest share of overdose decedents in our community. Since the start of 2022 in Snohomish County:

Selected Age and Gender



1 in 5

Approximately 1 in 5 opioid overdose deaths occurred in men aged 35-44.

Age



1 in 4

Approximately 1 in 4 opioid overdose deaths occurred in people aged 35-44.

Gender



3 in 4

Approximately 3 in 4 opioid overdose deaths occurred in males.

Data Sources

[Snohomish County Medical Examiner's Office](#)

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Recommendations

These recommendations are based on insights gathered by the multidisciplinary Overdose Fatality Review team, representing various agencies that offer direct services to individuals with substance use disorders. Their collaborative efforts aim to address the complexities of overdose fatalities and improve prevention strategies.



Increase availability and diversity of supportive housing programs to accommodate various needs and support all dimensions of wellness.

- Increase psychosocial support during housing stabilization and destabilization periods.



Increase care coordination to ensure individuals at a high risk of overdose are supported by available programs.

- Creation of a shared platform for care-coordination and handoff communication.



Increase understanding of prescribing best practices for co-occurring mental health diagnoses and SUD medical management.

- Medication management of SUD and co-occurring mental health is vital and often complex; provider education is paramount in working alongside people who use drugs to facilitate positive outcomes.



Increase harm reduction messaging and practices in supportive housing facilities.

- In facilities that prohibit smoking inside, increase harm reduction messaging related to intravenous drug use.
- Integrate safe consumption sites and increase harm reduction practices into housing facilities.



Modify OFR meeting structure and increase participation.

- Increase meeting length to 2.5 hours.
- Increase sharing of aggregate data during OFR meetings.
- Modify agency report-out structure for better understanding of events leading up to fatal overdose.
- Add members to OFR team.

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