



Manitoba Centre for Health Policy

# The Rise of Meth Use in Manitoba

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**A summary of the report *Methamphetamine Use in Manitoba: A linked administrative data study***

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Not many people in Manitoba would be surprised to hear that the use of the drug methamphetamine (“meth”) is on the rise in our province. In the last few years, the media have reported that more people are being charged for having meth in their possession and that deaths from meth overdose are increasing. And in 2019, meth was the most common reason (aside from alcohol) why Manitobans were seeking support for addictions and drug use.

People who have used meth explain that it makes them feel good and the “high” they get lasts a long time. They say that the drug helps them cope with trauma they are experiencing. For some people, it can take the place of medications they can’t access easily. The drug can also cause a lot of harm, though. People who use meth may see things that aren’t there, sometimes causing them to act in strange or violent ways. The drug also puts them at risk for heart attack, stroke, seizure, or even death.

When meth use goes wrong, paramedics and other emergency health workers answer the call for help. They confirm that there is more meth use and more harm from meth in recent years. But we still have much to learn about meth use in Manitoba as we try to find the best way to respond.

A new study by the Manitoba Centre for Health Policy aims to provide information that will help create the best response. The study uses data from the Manitoba Population Research Data Repository, which includes information on Manitobans’ age, sex, income and area of residence. It also contains information on health care Manitobans receive. The health care data include information on whether someone receiving care has recently used meth.

In this study, researchers at MCHP identified Manitobans who had used meth by looking at why people came into contact with the health care system. The team also used data from the Winnipeg Fire Paramedic Service to track calls for emergency services that then resulted in people who had used meth receiving health care.

The privacy of Manitobans is important when looking at these sensitive data. The data in the Repository are “de-identified”, which means that we can’t tell who the individual people in this study are. Any personal information (names and addresses) is removed before the data are added to the Repository. The data were linked using a 9-digit number that cannot be unscrambled by anyone on the research team.

## The study on meth use in Manitoba aimed to answer the following questions:

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- How many Manitobans receive health care after using meth?
- What are their characteristics (like age and sex)? What can the data tell us about their day-to-day lives?
- Where is meth use occurring?
- How many Manitobans who use meth have a mental illness?

## Here is what we found:

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### ***Health Care Contacts among Manitobans who used Meth***

From 2013-2018, there was a 7-fold increase in the number of Manitobans who used meth and then had contact with the health care system. During each year of the study, more Manitobans used meth than in the previous year.

### ***Characteristics of Manitobans who used Meth***

Most people who used meth were between the ages of 18 and 34. Many lived in the lowest-income areas of Manitoba. The split between men and women was about equal. Most meth use occurred in Winnipeg, but there was also some in the rural areas of Manitoba.

### ***Geography of Meth Use in Winnipeg***

Within Winnipeg, data from the Fire Paramedic Service showed where in the city they were called to help people who had used meth. At the beginning of the study, this was mostly in downtown areas. Over time, there were more calls from other areas of Winnipeg too.

### ***Mental Disorders among Manitobans who used Meth***

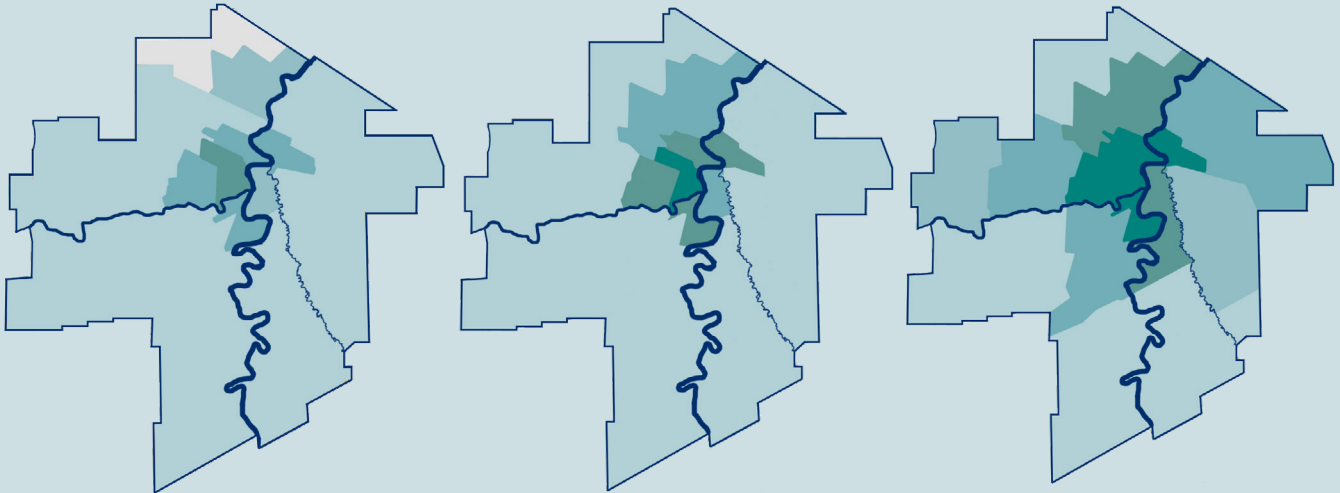
Many Manitobans who had contact with the health care system after using meth had already been diagnosed with a mental disorder. Examples of the types of mental health problems they had included severe depression, anxiety or panic attacks, and/or psychotic disorders.

# Calls for Help to Winnipeg Fire Paramedic Service

2013

2015

2018



In 2018 there were

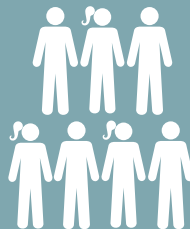
# 7x

first documented meth use while receiving health care than in 2013

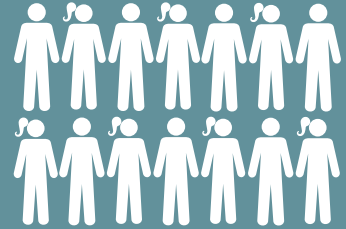
2013



2015



2018



## What comes next?

These findings paint a stark picture of rising meth use in Manitoba. More people are using meth, and this means more 9-1-1 calls to the Winnipeg Fire Paramedic Service. Emergency health workers have seen the terrible harms caused by meth in recent years, and the media have reported on “Manitoba’s meth crisis”. People who use meth are often seeking to escape their own crisis. Trauma, mental illness, poverty and other social factors combine to make using meth seem like an answer, at least for a short time. But there are risks to individuals and to society as a whole.

This study provides some key information about patterns of meth use in Manitoba and highlights areas of concern. This work is continuing in a project funded by Health Canada in which the research team will collect data on the experiences of people who use meth to study their health outcomes. By partnering with community groups, this research will identify the most pressing issues that face Manitobans who use meth and the health workers who provide care for them.



### Manitoba Centre for Health Policy

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The Manitoba Centre for Health Policy is a research unit in the department of Community Health Sciences at the University of Manitoba’s Max Rady College of Medicine, Rady Faculty of Health Sciences.

MCHP conducts population-based research on health services, population and public health, and the social determinants of health.

To View the Full Report, Please Visit

[http://mchp-appserv.cpe.umanitoba.ca/reference/Meth\\_Report\\_Web.pdf](http://mchp-appserv.cpe.umanitoba.ca/reference/Meth_Report_Web.pdf)



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