



TIMISKAMING
DRUG AND ALCOHOL STRATEGY
STRATÉGIE CONTRE LES DROGUES ET
L'ALCOOL DU TIMISKAMING

Report to the Community

March 2024



Timiskaming Drug and Alcohol Strategy and partners on the International Overdose Awareness Day event. Photos taken by Timiskaming Health Unit staff (August 2023).

About this report

Launched in 2022, the Timiskaming Drug and Alcohol Strategy (TDAS) is supported by over 20 local organizations and agencies working together to reduce the impact of substance use in Timiskaming. As we continue to work toward this common goal, this report shares progress and future directions.

While high-risk substance use continues to impact the health of people in Timiskaming, to collaboratively address the underlying causes is essential for meaningful change. TDAS is actively forging cross-sector partnerships and engaging with those who have first-hand experience of drug use. TDAS is working to make changes in Timiskaming that support health and safety, for everyone.

We invite you to learn more about substance use as a health issue, our local situation, services, and policies; and most importantly, to reaffirm your awareness and support for this work in the future.

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Message from the chairs

We are pleased to present this progress report for the Timiskaming Drug and Alcohol Strategy. As co-chairs, we reflect on a year filled with dedicated efforts and collaborative achievements.

This report provides an overview of the strategy, including its governance structure and guiding principles, its performance, and how it contributes to our commitment to the community. We have made significant progress in addressing substance use harms, focusing on enhancing collaboration, increasing capacity, and improving engagement and awareness across sectors under the leadership of four pillar working groups.

Looking ahead to 2024, we outline our priorities, emphasizing the need for continuous adaptation and responsiveness to the evolving needs of our community. We also highlight the vital work of our People with Lived and Living Experience Committee, which ensures the strategy stays relevant – a strategy that is “by Timiskaming, and for Timiskaming”.

We extend our gratitude to all members and our community for their steadfast support and participation. As we continue this vital work, we call for your ongoing support and investment to further our impact on the health and quality of life in the district. Only with your support can we make impactful and long-lasting changes.

Erin Cowan
Director of Strategic Services and Chief Nursing Officer
Timiskaming Health Unit

Angèle Desormeau
Director of Addiction and Housing Services
CMHA Cochrane Timiskaming

The members of the Timiskaming Drug and Alcohol Strategy (TDAS) acknowledge that our work occurs within the Robinson-Huron Treaty, Treaty 9, and unceded Indigenous territory, specifically within the traditional territories of Beaverhouse, Matachewan, Temagami, and Timiskaming First Nations. Today these lands encompass communities with enduring presence of Algonquin, Anishnabai, Ojibwe, Cree, and Métis Peoples. We offer our gratitude for their shaping and strengthening of our community, province, and country, and affirm our collective responsibility and commitment to work toward reconciliation.

We are mindful of those with lived or living experience of substance use and addiction, their individual and collective experiences, and those who have lost their lives as a result. We recognize the expertise of those with lived or living experience, whose insights are invaluable in our efforts to improve the quality and impact of services and resources related to substance use and addiction and reduce the harms that result from it.



Members

The Strategy membership consists of over 20 community organizations and people with lived and living experience. Among member organizations, the sectors represented include:

Child and Family Health Services

Hospitals

Family Health Teams

People With Lived Experience

Justice Services

Indigenous Services

Municipalities

Social Services

Mental Health and Addictions Treatment Services

Public Health

Police

School Boards

Community Organizations



The Strategy

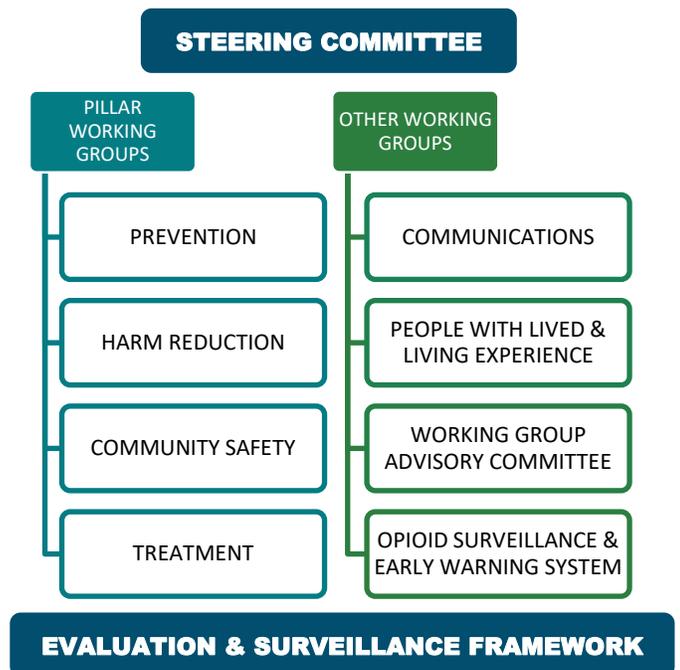
The Timiskaming Drug and Alcohol Strategy (TDAS) was launched as a collective response to the challenges of substance use in our community. With Timiskaming Health Unit (THU) as the host organization, we recognize the complex nature of substance use and its impacts on individuals, families, and the wider community. We represent a concerted effort to bring about meaningful change.

Structure

TDAS operates under the leadership of a multi-sectoral Steering Committee and is supported by four working groups, which correspond to our four-pillar approach to substance use:

Prevention, Harm Reduction, Treatment, and Community Safety.

An advisory group consisting of People With Lived and Living Experience (PWLLE) of substance use actively participates in the work of each pillar group. They meet monthly to review progress and inform the steering committee of their expertise. A communication working group also supports the strategy and other project working groups form as needed.



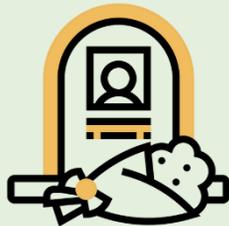
Guiding Principles



Trauma and violence-informed	Evidence-informed	Collaborative	Equity and accessibility
Locally relevant	Cultural sensitivity, safety, and competence	Reconciliation aware	
Inclusive of people with lived and living experience of substance use, including family and friends.			
The five conditions for Collective Impact and Collective Impact Practices:			
A common agenda,	shared measurement systems,	mutually reinforcing activities,	continuous communication,
			and a backbone support organization.

Our Current Situation

In Timiskaming, high-risk substance use and its consequences continue to impact community health, safety, and well-being. The latest local data indicate dire health and social impacts, with many indicators showing significantly higher rates of harm compared to the rest of Ontario.



Deaths

7

Opioid-related deaths in 2022 which is up from 4 in 2021.

> 3x

Higher death rate related to methamphetamine than Ontario.



Hospitalization

40

Opioid-related ED visits in 2021 which is the highest it has ever been.

74%

Higher rates of hospitalization entirely attributed to alcohol than Ontario.



High-risk use

70%

Higher rates of cannabis-related ED visits than Ontario.

>1 in 2

People in Timiskaming exceeded the Low-Risk Alcohol Drinking Guideline, which is significantly more than Ontario.

In addition



In 2020, the rate of substance use during pregnancy in Timiskaming was **4 times higher** than Ontario. This rate has been higher than the Ontario average since 2012.



Based on community surveys, we know:

- Addiction is one of the most critical issues in Timiskaming.
- Stigma is a common barrier to accessing healthcare.
- Addiction or substance use is one of the most common reasons for losing housing.



The community's approach

Building upon our public consultation and using evidence-informed practices, our vision is a community where risk factors of substance use harms are reduced, and the overall health and quality of life of all residents are enhanced through promoting protective factors.

Over the last year, we have focused on the four pillars to address gaps and explore new opportunities. In the following section, we proudly present the details of accomplishments from each pillar group.

Further details provided in Appendix: Data and Reference.



Progress from the Prevention Pillar

In September 2023, the Timiskaming Health Unit signed an agreement with the Planet Youth Guidance Program, officially launching Planet Youth Timiskaming. This marked the beginning of a 5-year journey based on the Icelandic Prevention Model, a world-renowned, community-based prevention approach aimed at improving youth well-being and reducing drug and alcohol use.

In the following months, Planet Youth Timiskaming established a steering committee that includes school boards, Indigenous partners, municipalities, and local agencies. The program completed its first survey among Grade 10 and 11 students across the district, achieving an impressive 83% response rate. This approach empowers communities to use local data to understand and address the root causes of early substance use.

The pillar working group compiled an inventory of prevention programs and activities in our district, such as PreVenture and Planet Youth Timiskaming, to enhance resource integration, system mapping, and knowledge sharing. Under the guidance of pillar partners, the Timiskaming Health Unit launched communications campaigns on youth vaping, alcohol use and health, and lower-risk cannabis use.



Prevention

The Prevention pillar focuses on **preventing high-risk substance use** by preventing or delaying its onset, particularly among youth, through addressing its root causes and strengthening protective factors within the broader context of the social determinants of health across the lifespan.

Prevention Priorities for 2024

Collaboration

- To complete the local prevention service inventory and share results.
- To continue to improve data collection and sharing among local partners.
- To collaborate with Timiskaming's Community Safety and Wellbeing Plan.
- To plan and ensure Planet Youth Timiskaming program sustainability.

Build Solutions

- To continue identifying and putting new interventions into practice.
- To educate and to build the knowledge of parents and carers, school staff, and the public on substance use.
- Continue enhancing engagement with local youth.
- To increase access to peer support for substance use, including relapse prevention.

Advocacy

- To advocate for healthier alcohol, tobacco, vape, and cannabis policies.
- To advocate for income security.



Progress from the Harm Reduction Pillar

In 2023, the harm reduction pillar focused on enhancing access to and awareness of local services available to support substance use health. These services are summarized in a directory on the TDAS website which includes Indigenous-based services, justice support, treatment services, peer support, among others. In addition, the pillar supported the launch of an Opioid Early Warning Surveillance System (OEWS) dashboard for Timiskaming and played a significant role in developing a referral pathway tool to help service providers make timely connections.

The newly formed Timiskaming Substance Use Health Knowledge Network, a local community of practice for service providers, occurs bi-monthly with a formal presentation and discussion session. Three Knowledge Network meetings were held in 2023, covering rapid access addiction medicine, safer supply practice in Ottawa, as well as harm reduction and treatment practice in the North Bay area.

Reducing stigma is also a major focus within harm reduction efforts. TDAS organized and sponsored three virtual learning sessions to help reduce stigma among service providers. Around 80 participants attended the workshop sessions delivered by Community Addictions Peer Support Association (CAPSA), with positive feedback.

Other initiatives of the pillar include signing on for Our Healthbox, a vending machine-type unit that dispenses free harm reduction supplies and functions as a point of interaction with health services; starting the development of an outreach harm reduction services model; and piloting a take-home drug testing kit program.



Harm Reduction

The Harm Reduction pillar aims to **reduce the harmful effects of substance use** without demanding abstinence. The pillar works towards decreasing stigma around substance use, ensuring easy access to support, and facilitating timely connections to health and social services.

Harm Reduction Priorities for 2024

Collaboration

- To explore the local application of safe consumption and safe supply.
- To increase access to peer support and other group offerings.
- To enhance data collection among harm reduction service providers.

Build Solutions

- To complete and circulate the service providers' referral pathway and build a public-facing service map.
- To continue increasing the capacity of harm reduction sites and the number of safe disposable sites.

Advocacy

- To increase the awareness of stigma toward substance use in healthcare, media, and the public.



Progress from the Treatment Pillar

In 2023, the Treatment pillar facilitated capacity-building among service providers to address trauma and substance use. This included promoting trauma-informed approach training with an Indigenous perspective. The training, led by Dr. Marsh from the Northern Ontario School of Medicine, was attended by organizations across the district.

Collaborating with the harm reduction pillar, a knowledge network was established to facilitate the exchange of best practices and knowledge for prescribers. The network hosted several guest speakers, including Leslie Edwards, the nurse practitioner responsible for Rapid Access Addiction Medicine (RAAM) at CMHA, and Marlene Haines, PhD Candidate at the University of Ottawa. The network also welcomed the North Bay AIDS Committee who leads harm reduction practices in the region.

Moreover, the treatment pillar strengthened relationships among service providers such as CMHA, Blanche River Health, Family Health Teams, and the newly welcomed Northeastern Recovery Centre. This pillar also supported the development of a clinical referral pathway tool, a cross-sectoral flowchart that guides frontline workers to make timely and accurate referrals across local services.

Informed by the treatment pillar, CMHA applied for the Ontario Models of Care Innovation Fund, which would allow for day/ evening treatment across the CMHA Cochrane-Timiskaming service area. Additional proposals have been submitted through Substance Use and Addictions Program 2023, including a mobile community withdrawal management program, which would provide accessible and flexible treatment; and a Peer Support Worker program, which would operate the SMART Recovery group to offer peer-based guidance and provide career opportunities for people with lived experience.



Treatment

The Treatment pillar is focused on **supporting innovative approaches to treatment and recovery**, promoting, and ensuring accessible and equitable treatment services and supports, increasing the understanding and application of trauma-informed approaches that integrate mental health care, and reducing stigma associated with substance-use treatment.

Treatment Priorities for 2024

Collaboration

- Continue to expand and strengthen membership.
- To develop an overdose protocol tailored to the district of Timiskaming.
- To complete and expand the treatment referral pathway tool.

Build Solutions

- Continue to support and expand residential recovery options, prioritizing withdrawal management services.
- Securing funding to expand local treatment availability such as Sublocade programs.
- Subject to funding, to develop programs for day/evening treatment, community withdrawal management, and SMART Recovery Peer Support.

Advocacy

- Advocating with local service providers to ensure policies support people who use substances.
- Broadening Rapid Access Addiction Medicine (RAAM) services, to increase the local capacity and availability beyond CMHA.



Progress from the Community Safety Pillar

Since September 2023, the Community Safety pillar has grown to include expert representatives from various sectors including law enforcement, justice, probation, victim services, and health and social services, as well as people with lived and living experience.

The working group has been conducting system mapping to assess gaps and opportunities within the continuum of social justice and health systems, while setting objectives and inventorying available services.

Thanks to this work, the TDAS website service directory has been broadened to include justice support resources. This directory can help people involved with the justice system to access mental health and addiction services and legal support. It also offers potential opportunities for diversion and link victims of crime to timely support.

Furthermore, the mandate of this pillar aligns with the Timiskaming Community Safety and Well Being Plan (CSWB), which facilitates resource integration across municipalities with priorities addressing community safety, health and wellbeing, housing, and other protective factors of substance use.



Community Safety

The Community Safety pillar focuses on developing and strengthening a **coordinated approach between enforcement, justice, and health and social services**, reducing the presence of illicit substances in the community, and enhancing overall community safety measures.

Community Safety Priorities for 2024

Collaboration

- Continue to expand pillar membership.
- To explore alignment with the Timiskaming Community Safety and Wellbeing Plan.

Build Solutions

- To build a mapped inventory of existing justice support, diversion, and social service programs.
- To identify and address service bottlenecks and gaps.
- To enhance communications and data sharing among key agencies and municipalities.

Advocacy

- To explore opportunities for decriminalization and justice diversion.

Substance Use Harm is significant in Timiskaming, when compared to provincial average.

- The rates^{**†} of opioid-related deaths have continued to increase from 3.0 in 2017 to 21.3 in 2022. In 2022, opioid-related deaths were the highest they have ever been with 7‡ occurring (PHO, 2023a).
- The rates of deaths related methamphetamines in Timiskaming have continued to increase from 4.0 in 2018 to 26.3‡ in 2022, more than 3 times the Ontario's average of 6.2 (PHO, 2023b).
- The rates of opioid-related ED visits were the highest they have ever been in 2021 at 121.4, with 40 cases occurring (PHO, 2023a).
- The rate of hospitalizations for conditions entirely attributed to alcohol in 2021 was 73.9% higher than the provincial rate (PHO, 2023d).
- The rates of ED visits of all cannabis related harms were 66.9% higher than the provincial average (203.5 and 121.9 respectively), and the rates of ED visits for cannabis-related mental health conditions were 71.1% higher (185.1 and 108.2 respectively) in 2021 (PHO, 2023c).
- 53% of Timiskaming residents exceeded the Low-Risk Alcohol Drinking Guideline in 2019-20, which is significantly higher than the provincial average (PHO, 2023e).
- The rate of women who use substances during their pregnancy has remained higher than Ontario's rate since 2012. In 2020, 4% of pregnant women in Timiskaming report using substances in comparison to Ontario's 1% (THU, 2021).

*Age-standardized rates have been adjusted to the 2021 Canadian population; all rates are per 100,000 population.
†Monthly and quarterly rates have been annualized for comparability between different time periods.
‡Death data for 2022 should be considered as preliminary and is subject to change.

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TDAS' collaborative efforts have led to early achievements, creating momentum in addressing substance use issues. Our joint endeavors have resulted in more substantial progress than could have been made individually.

As we move into 2024, TDAS will intensify its efforts to increase support for these initiatives in the district. We are dedicated to advancing these goals, ensuring sustained impact and further improvements to our community's health and well-being.

More Information

To learn more about the Timiskaming Drug and Alcohol Strategy, access resources and reports, drug toxicity alerts, and view data, please visit

www.tdas.ca

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