

Facilitator Guide for Teachers and Educators

Substance Use Health, Addictions and Related Behaviours : Opioids (Grades 9-12)

Introduction

This module provides educators who teach students in grade 9-12 with a lesson on opioids. The module supports the learning objectives of The Health & Physical Education Ontario Curriculum for the 2023-2024 school year.

Learning objectives

By the end of this presentation students will be able to better understand:

- The definition of an opioid
- Fentanyl, and the associated risks
- Short-term and long-term effects of opioid use
- Benzodiazepines
- Physical dependence
- Addiction
- Recognize the signs and symptoms of an opioid overdose
- The good Samaritan drug overdose act
- Naloxone
 - What it is
 - How it works
 - Recovery position
- Myths related to an overdose response
- Reducing harm
- Stigma



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- Recovery
- Coping with stress and emotional pain

Purpose

Improving and protecting the health and well-being of school-aged children and youth is a priority for Ontario’s public health sector. Childhood is a time when health practices and behaviours are learned, and adolescence is a period when both positive health behaviours and risk behaviours can be adopted. This guide allows educators to deliver self-paced content related to opioids in the classroom at their convenience. Depending on the level of discussion, student engagement, and the preferences of the educator, the length of this presentation can vary from approximately 60 to 90 minutes. Please ensure familiarization of the content prior to teaching to ensure there is sufficient time within classroom hours.

About this guide

This guide is intended as a supplemental resource for educators who choose to deliver the health modules developed by Ottawa Public Health (OPH). As content is updated annually and/or when new evidence emerges, we encourage educators to frequently check back on the [School Health Online](#) webpage to access the most up-to-date content.

Additional resources

For more information on opioids, available services and resources please visit the following:

- [School Health Online](#)
- [Opioids and benzodiazepines — The Link](#)
- [Ottawa Public Health – Stop Overdose Ottawa](#)
- [Naloxone & where to get a kit](#)
- [5 steps to respond to an overdose poster](#)
- [“Anything can be cut with Fentanyl or Carfentanil” poster](#)
- [Substance Use Health Services and Resources](#)

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- [Tips for Talking About Substance Use](#)
- [People-First Language: Substance Use Disorder and Stigma](#)

Disclaimer

The information provided is not a substitute for professional medical advice. Educators should encourage students to consult their parents or guardians, and/or qualified healthcare professionals for personal guidance related to substance use health. Educators should approach questions about opioids with sensitivity, respect, and an understanding of the diverse backgrounds and perspectives of their students. When responding to a student question, the response should be adapted to reflect the age and maturity of the student as well as the classroom environment and individual school policies.

Considerations

Becoming informed about a topic prior to discussing it in a classroom setting, will help create a productive and comfortable conversation with youth. This module includes topics that some students may find uncomfortable and/or difficult to understand. Here are some considerations to support the students' learning experience:

- Be sensitive to different backgrounds and experiences.
 - As much as possible, be aware of experiences in your students' lives that may make certain discussions uncomfortable for them. Consider letting students know ahead of time that the topic will be discussed in class and use proper judgment if accommodations are needed.
- Watch for signs of discomfort.
 - Monitor students' faces and body language.
- Allow ample time for discussion.
 - Allow enough time to introduce the topic, discuss as a group, summarize, and answer questions.
 - Using an anonymous "question box" may encourage students to ask questions they otherwise would not feel comfortable asking in front of the class.



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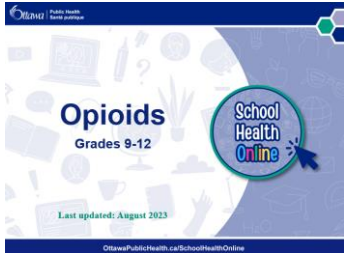

Continued collaboration

Our commitment to improving health outcomes is an ongoing journey. We encourage you to share feedback and suggestions for improvement on this module, using our feedback form found on our [School Health Online](#) webpage. Together, we can continuously refine our resources to better the evolving needs of our school communities.


Last updated: August 2023

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Module

<p>Slide 1</p> 	
<p>Slide 2</p> <p>Before we start...</p> <p>Let's cover some ground rules!</p> <p><i>*Reminder that support is always available at school. Other community resources will also be shared at the end of the module.</i></p> 	<p><u>Before we start...</u></p> <p>It is always important to create a safe learning environment when addressing health topics that may be sensitive to some students. Establishing some ground rules or going over classroom etiquette can be helpful.</p> <p>Here are some examples:</p> <ul style="list-style-type: none"> • Some students might want to share personal stories. Ask that students do not share names or situations that might give away who they are talking about to respect people's privacy. • Ensure that all classroom discussions will remain confidential unless a student shares something that may lead to believe that they are in danger, or that they are putting themselves or others at risk. <p>*Please take the time to also review the considerations on page 3 of this guide.</p>
<p>Slide 3</p>	<p><u>What is an Opioid?</u></p> <p>Opioids are a family of drugs that have morphine-like effects. Opioids are mostly prescribed to treat pain. Other medical uses include control of coughs and diarrhea, and the treatment of addiction to other opioids. Opioids can cause feelings of euphoria (feeling high) and relaxation which is why some people start using them when they don't need them for medical reasons.</p>

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<p>What is an opioid?</p>  <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p>	<p>Examples of opioids include:</p> <ul style="list-style-type: none"> • Heroin • Morphine • Fentanyl • Codeine • Oxycodone • Hydromorphone <p>People can make or get opioids illegally.</p> <p>https://www.canada.ca/en/health-canada/services/opioids.html</p>
<p>Slide 4</p> <p>True or false: It is illegal to have OPIOID medication unless you have a prescription from a health care professional.</p> <p>A. True B. False</p> <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p>	<p><u>Question 1: True or False</u></p> <p>TRUE. Because of their psychoactive properties (properties that affect the mind) and because some people may use them for non-medical reasons, opioid and benzodiazepine medications are managed in Canada under the Controlled Drugs and Substances Act (CDSA).</p> <p>Under the CDSA, it is illegal to:</p> <ul style="list-style-type: none"> • have opioid/benzo medications unless you are a patient with a prescription from a licensed health care professional; • sell or give away your prescription opioid/benzo medication to someone else; • "double doctor," i.e., look for a prescription for an opioid/benzo medication from more than one doctor in a short period of time without the doctor knowing that you have already gotten a prescription from another doctor. <p>http://www.hc-sc.gc.ca/hl-vs/iyh-vsv/med/ana-opioid-med-eng.php</p>
<p>Slide 5</p>	<p><u>What is fentanyl?</u></p> <p>Fentanyl is an opioid. It is usually prescribed as a patch for managing chronic (long-term) pain or used in hospitals during surgery. It is around 50 to 100 times more toxic than morphine. This makes the risk of overdose much higher.</p>


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<p>What is Fentanyl?</p>	<p>There are also different Fentanyl's being made illegally and sold. Illicit fentanyl is often made as a powder and mixed with other substances (like heroin, cocaine or crack). It is also being pressed into pills and sold as 'oxycodone' (oxycontin, oxys, eighties or Percocet) or other pills including speed and ecstasy/MDMA. It may be in substances that are in powder, liquid or pill form.</p>
<p>Slide 6</p>	<p><u><i>What's the risk with fentanyl?</i></u></p> <p>Illicit fentanyl is much more toxic than other opioids from a pharmacy. There is no way to know if fentanyl is in other substances (drugs). You can't see it, smell it, or taste it. Any substance can be cut (mixed) with fentanyl. Even a very small amount can cause an overdose. When fentanyl is mixed with other opioids, alcohol, benzodiazepines, or stimulants like cocaine, it increases the risk of overdose.</p> <p>When someone is getting substances from anywhere other than a pharmacy or medical professional, like from a friend, ordering online, or a dealer, there is no way to be sure exactly what is in them or how toxic they may be.</p> <p>Carfentanil</p> <p>Carfentanil is an opioid that is used by veterinarians for very large animals like elephants. It is not for human use. It is approximately 100 times more toxic than fentanyl and 10,000 times more toxic than morphine. This means carfentanil can be deadly in very small amounts (as much as a grain of salt).</p> <p>Carfentanil has been found here in Ontario. It is being cut in to other illicit (illegal) substances like heroin and fake pills made to look like prescription opioids (including green pills stamped 'CDN' on one side and '80' on the other). There is no easy way to know if carfentanil is in other substances, you can't see it, smell it or taste it. It is extremely toxic and a very small amount can cause an overdose or even death.</p>

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<p>Slide 7</p> <p>Can you tell the difference?</p>	<p><u>Can you tell the difference?</u></p> <p>What's the risk with fake pills?</p> <p>Fake pills also known as counterfeit pills can be made to look almost identical to prescription opioids (i.e. Oxycontin, Percocet) and other medications. Getting substances from a non-medical source such as a friend, ordering online, or a dealer, there is no way to know what is actually in them or how toxic they may be.</p>
<p>Slide 8</p> <p>What are possible long-term effects of taking opioids?</p> <p>A. Constipation B. Decreased interest in sex C. Liver damage D. Substance use disorder or dependence E. Mood swings F. All of the above</p>	<p><u>Question 2: What are the long-term effects of taking opioids?</u></p> <p>All of the above.</p> <p>Substance use disorder can have long-term social, financial and emotional effects.</p> <p>We will talk about addiction, substance use disorder and dependence later in the presentation</p> <p>https://www.camh.ca/en/health-info/mental-illness-and-addiction-index/prescription-opioids</p> <p>https://www.canada.ca/en/health-canada/services/opioids.html</p>
<p>Slide 9</p> <p>Lean</p> <ul style="list-style-type: none"> Also known as 'Purple Drank', 'Sizzurp', 'Liquid Heroin', 'Texas T' and 'Dirty Sprite'. Made with codeine cough syrup, soda, and hard candy. Perceived as safe, because people don't realize it is an opioid. More dangerous when combined with alcohol, and other depressants. 	<p><u>Lean</u></p> <ul style="list-style-type: none"> Also known as 'Purple Drank', 'Sizzurp', 'Liquid Heroin', 'Texas T' and 'Dirty Sprite' Made with Codeine cough syrup, soda, and hard candy. Perceived as safe because people don't realize it is an opioid. More dangerous when combined with alcohol, and other depressants.

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<p>Slide 10</p> <p>Benzodiazepines (Benzos)</p>  <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p>	<p><u><i>Benzodiazepines (Benzos)</i></u></p> <p>Benzodiazepines or “benzos” are substances (drugs) that can slow down brain activity and can change the way people think, move, speak, and breathe. They create a drowsy or calming effect and can help with sleep problems, anxiety, epilepsy/seizures, and alcohol withdrawal. Benzodiazepines are only legally available by prescription, usually in pill form and are some of the most prescribed drugs in the world.</p> <p>Examples:</p> <ul style="list-style-type: none"> • Xanax • Ativan • Valium • Rivotril
<p>Slide 11</p> <p>What are possible signs of benzodiazepine toxicity/overdose?</p> <p>A. Extreme sleepiness, passing out, or loss of consciousness</p> <p>B. Dizziness, poor balance and movement control</p> <p>C. Slurred speech</p> <p>D. Memory loss of “blackouts”</p> <p><u>E. All of the above</u></p> <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p>	<p><u><i>What are the possible signs of benzodiazepine toxicity/overdose?</i></u></p> <p>All of the above.</p> <p>These symptoms can last for hours. Benzodiazepine toxicity can affect a person’s coordination, memory, consciousness, and ability to think like they normally would, because of this it increases the risk of physical harm.</p>
<p>Slide 12</p>	<p><u><i>Benzodiazepines (Benzos)</i></u></p> <p>When someone is getting substances (drugs) from anywhere other than a pharmacy or medical professional, like from a friend, ordering online, or a dealer, there is no way to be sure exactly what is in them or how toxic they may be. Benzodiazepines are being found in the unregulated drug supply in Ontario. They can be “cut” (mixed) into opioids and other drugs.</p> <p>When people take benzodiazepines, opioids or alcohol at the same time, they have a higher chance of overdosing. Naloxone can reverse an opioid overdose, but it has no effect on</p>


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	<p>benzodiazepines. Naloxone should still be used in benzo-related overdoses because the person could have also taken an opioid. We will be going over overdose response later in the presentation.</p>
<p>Slide 13</p> <p>Physical dependence</p> <ul style="list-style-type: none"> The body gets used to regular amounts of opioids. Withdrawal symptoms will be experienced when the body detects an absence or decrease of the substance. A person who regularly uses opioids may feel like they can't function without it and get anxious. <p>↳ Youth can be even more heavily impacted!</p>	<p><u>What is physical dependence?</u></p> <ul style="list-style-type: none"> Physical (body) response to opioids, when someone has been taking opioids for some time, the body gets used to regular amounts. The person may need more of the opioid to get the same effect. Possible symptoms when someone stops taking opioids or lowers the amount they take quickly (withdrawal): feel irritable, chills, nervousness, diarrhea, upset stomach and stomach pain, sweating, trouble sleeping, increase in pain, and body aches. <p>Source: https://www.canada.ca/en/health-canada/services/opioids.html</p>
<p>Slide 14</p> <p>Addiction</p> <ul style="list-style-type: none"> Medical condition Anyone can develop an addiction Changes how the brain works Behaviors (i.e. gambling, gaming) The 4 C's: <ul style="list-style-type: none"> use becomes Compulsive (uncontrollable urge) continues even with harmful Consequences have Cravings (strong need for substance) Feeling a loss of Control <p>Addictions are not a choice and does not mean someone is bad or weak.</p>	<p><u>Addiction</u></p> <ul style="list-style-type: none"> Addiction refers to a complex medical condition that changes how the brain works [affecting a person's reward, motivation (when we want to do something), stress, and executive function systems (allow us to plan, pay attention, remember instructions, and keep track of what we are doing)]. Addictions can be related to some behaviors like gambling, gaming, and working out too much. People who smoke cigarettes often say there are certain routines in their day that make them want a cigarette, for example, talking on the phone with a friend. They also feel less stress when they have a cigarette in their hand and through hand to mouth gestures. Addictions are defined by the 4 "C"s: <ul style="list-style-type: none"> use becomes Compulsive (uncontrollable urge) continues even with harmful Consequences



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	<ul style="list-style-type: none"> ○ have Cravings (strong need for substance) ○ Feeling a loss of Control <ul style="list-style-type: none"> ● Substance Use Disorder is more than just the 4 C's. The signs and symptoms that would lead to a diagnosis of SUD will be discussed after addiction. ● Even though there is a difference between Addictions and Substance Use Disorders, they are closely related ● The 4 C's that make up Addiction are a good tool for reflection for someone questioning their relationship with substances. ● Anyone can develop an addiction or a SUD. We all grew up in different environments, with different relationships, been through different life events and have different risk factors, all of which can affect our brain. ● It is a sign of strength to reach out for help and people are not alone, there are supports that can help. ● We discuss resources at the end of the presentation.
<p>Slide 15</p> <p style="text-align: center;">Behaviours</p> <p>Addictions can develop to behaviors and processes:</p> <ul style="list-style-type: none"> ■ Substance Use ■ Gambling ■ Gaming ■ Technology ■ Exercise ■ Sexual activity ■ Excessive working <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p>	<p><u>Behaviours</u></p> <ul style="list-style-type: none"> ● Another difference between Addictions and SUDs is that Addictions can be linked to certain behaviours, while SUDs are very specific to substances ● As of right now, Gambling is the only behavioral addictive disorder listed in the DSM-5 ● But evidence is coming out on other behaviors that can also be addictive, such as gaming, exercise, sexual activity and excessive working. Meaning our brain can be affected in a way that makes these activities addictive. ● The use of substances IS a behavior. Anyone who smokes cigarettes can tell you there are specific things they do that make them reach for a cigarette. You can see how the behavioral part of substance use paired with the physical tolerance to substances make it a complex medical condition.
<p>Slide 16</p>	<p><u>Question 3: What is a risk of taking an opioid that increases even more when taken with other depressants like alcohol?</u></p> <p>Breathing can stop.</p>

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<p>What is a risk of taking an opioid that increases even more when taken with other depressants like alcohol?</p> <p>A. Heart attack <u>B. Breathing can stop</u> C. Seizure D. Stroke E. Muscle spasms</p> <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p>	<p>Opioids are <i>depressants</i>, which means that they slow down the part of the brain that controls breathing. Opioids can be dangerous when taken in large amounts or when taken with other depressants, such as alcohol or benzodiazepines. Death can happen, usually because breathing stops. If caught in time, overdose can be treated with drugs such as naloxone, which temporarily blocks the effects of opioids, including the effect on breathing. An overdose is a medical emergency, 911 needs to be called even when naloxone is given.</p> <p>https://www.camh.ca/en/health-info/mental-illness-and-addiction-index/prescription-opioids</p>
<p>Slide 17</p>  <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p>	<p><u>Opioid overdose signs and symptoms</u></p> <p>An Overdose is when a person uses more of a substances, or a combination of substances than the body can handle. The brain is no longer able to control basic life functions.</p> <p>An overdose may look different from one person to the next and depending on the substances someone used.</p> <p>An overdose is a medical emergency and the first step is always to call 9-1-1.</p> <p>Signs & symptoms of Opioid overdose include:</p> <ul style="list-style-type: none"> • Breathing is very slow, or irregular, or they may not be breathing at all • Fingernails and/or lips are blue/purple • Body is limp • Deep snoring or gurgling sounds • Loss of consciousness/passed out (can't wake the person up) • Unresponsive (not answering when you talk to them or shake them) • Pinpoint (tiny) pupils • Vomiting
<p>Slide 18</p>	<p><u>Overdose</u></p> <ul style="list-style-type: none"> • An overdose is a medical emergency. • Seeing someone go through an overdose can be a scary. It is important to call 9-1-1 if you or someone you know is going through an overdose after using substances (drugs). The first

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<p>Overdose</p> <ul style="list-style-type: none"> An overdose is a medical emergency The <i>Good Samaritan Drug Overdose Act</i> protects you <p>Call 9-1-1!</p>  <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p>	<p>responders are there to help.</p> <p>The <u><i>Good Samaritan Drug Overdose Act</i></u> protects you, the person who is overdosing, and anyone at the scene from being charged with:</p> <ul style="list-style-type: none"> Simple possession of illegal substances Breaches in pre-trial release, probation orders, conditional sentences, or parole related to simple possession <p>The Good Samaritan Drug Overdose Act does not provide protection against charges for:</p> <ul style="list-style-type: none"> Selling illegal substances Outstanding arrest warrants Offences other than simple possession of illegal substances Violating conditions of pre-trial release, probation orders, conditional sentences, or parole for an offence that is not simple possession
<p>Slide 19</p> <p>Naloxone</p> <ul style="list-style-type: none"> Recognizing the signs of an overdose, calling 9 -1-1 and having a naloxone kit can save a life. Naloxone kits are free and training on how to use the kit are available at most pharmacies. <ul style="list-style-type: none"> Virtual training and kit available from: naloxonecare.com  <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p>	<p><u><i>Naloxone</i></u></p> <p>How does Naloxone work?</p> <p>In an opioid overdose a person’s breathing slows down or stops. Naloxone blocks the effect of opioids on the brain. It temporarily reverses these effects on a person’s breathing. Giving naloxone can prevent death or brain damage from lack of oxygen.</p> <p>Naloxone will only work on opioid-related overdoses. It is important to remember that a lot of other drugs are being cut with fentanyl. If the person has used any drugs and is showing signs of an opioid overdose call 911 and give naloxone.</p> <p>What is Naloxone:</p> <ul style="list-style-type: none"> A medication that temporarily binds to opioid receptor sites and reverses the effects of an opioid overdose It does not eliminate the opioid itself from the body It will have no effect on an overdose from any other substance. It WON'T cause any harm if given to someone who does not have opioids in their body.

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	<ul style="list-style-type: none"> Since anything could have fentanyl or carfentanil if you suspect an overdose....give naloxone. <p>How quickly does it work / how long last:</p> <ul style="list-style-type: none"> It starts working within 2-3 minutes and the effects can last up to 2 hours If the person does not respond within 3 minutes of receiving naloxone, another dose can be given <p>The effects of Naloxone will wear off, and a person can return to an overdose state quite quickly.....always call 911 during an overdose, even if naloxone is given</p>												
<p>Slide 20</p> <p>Recovery position</p> <p>RECOVERY POSITION If the person begins breathing on their own, or if you have to leave them alone, put them in the recovery position.</p> <p>head should be tilted back slightly to open airway</p> <p>hand supports head</p> <p>knee stops body from rolling onto stomach</p> <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p>	<p><u>Recovery Position</u></p> <p>If the person is breathing on their own while waiting for paramedics or if you have to leave the person at any time put them in the recovery position. The recovery position helps keep a person's airway open so they can breathe and can prevent them from choking on vomit or spit.</p> <ol style="list-style-type: none"> Extend the person's closest arm above their head Position their other arm across their chest and bend their furthest leg at the knee. Roll the person towards you and place them on their side The person lays on their side with their head stabilized on their extended arm. Top knee is bent and stabilized 												
<p>Slide 21</p> <p>Overdose response MYTHS</p> <table border="1"> <thead> <tr> <th>DO NOT</th> <th>WHY NOT?</th> </tr> </thead> <tbody> <tr> <td>Put the person in a bath or cold water</td> <td>Could drown or put person in shock</td> </tr> <tr> <td>Make the person vomit</td> <td>Could choke</td> </tr> <tr> <td>Inject them with anything (i.e., salt water, other drugs, milk, etc.) other than naloxone</td> <td>Will not help and could cause serious harm</td> </tr> <tr> <td>Slap or shake the person too hard, Or attempt to wake someone by kicking, burning, or any other way that could cause harm</td> <td>Could cause injury</td> </tr> <tr> <td>Let them sleep it off</td> <td>Could stop breathing and die</td> </tr> </tbody> </table> <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p>	DO NOT	WHY NOT?	Put the person in a bath or cold water	Could drown or put person in shock	Make the person vomit	Could choke	Inject them with anything (i.e., salt water, other drugs, milk, etc.) other than naloxone	Will not help and could cause serious harm	Slap or shake the person too hard, Or attempt to wake someone by kicking, burning, or any other way that could cause harm	Could cause injury	Let them sleep it off	Could stop breathing and die	<p><u>Overdose Response Myths</u></p> <p>Stress that in an overdose situation you need to CALL 911</p>
DO NOT	WHY NOT?												
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Slide 22

Reducing harm



Reducing Harm

- Reduces harm, stigma, and increases safety.
- Everyone tries new things and sometimes the things we try have risks.
- People try and use substances for many different reasons. Not the same for everyone.

What are some examples of reducing harm in our everyday lives?

- Some examples of reducing harm in our everyday lives: wearing a seatbelt, wearing a helmet while riding a bike. Wearing protective gear when playing sports, ex. shin guards when playing soccer.

Don't use alone

If you overdose when you are alone, there will be no one there to help you. Visit a [Supervised Consumption Service](#) or have a friend or family member with you when you use.

Know your tolerance

Tolerance is the body's ability to handle the effects of a substance being used. Tolerance will change depending on many factors (i.e. weight, illness, stress, etc.). Tolerance can decrease when someone has taken a break from using.

Don't mix drugs with other drugs or alcohol

Using different substances together can increase impairment. This increases your chance of overdoses, accidents, and injuries.

Carry naloxone


[Naloxone](#) is a medication that can temporarily reverse the effects of an opioid overdose. [Free naloxone kits](#) are available through the Ontario Naloxone Pharmacy Program. (Already talked about)

Be aware

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	<p>Anything can be cut (mixed) with fentanyl or carfentanil. You cannot see it, taste it, or smell it. Even the smallest amount of fentanyl or carfentanil (i.e. the size of a few grains of salt) can cause an opioid overdose. Do tests to check the strength of what you are using.</p>
<p>Slide 23</p> <p style="text-align: center;">Stigma</p> <ul style="list-style-type: none"> Stigma can make people living with an addiction hide their symptoms and stop them from getting help, which can lead to poorer health. <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p>	<p><u><i>What is Stigma?</i></u></p> <ul style="list-style-type: none"> To have negative feelings (prejudice) and negative behaviors (discrimination) toward people, includes having fixed ideas and judgements about people or groups of people. People can experience stigma for a variety of reasons: race, sexuality, gender identity, age, illness. <ul style="list-style-type: none"> An example of Stigma- we may think that people with mental health or substance use health challenges are different or not like us; or that they caused their own problems; or that they can simply get over their problems if they want to. <p>Why do we talk about stigma?</p> <p>Stigma can make people living with an addiction hide their symptoms and stop them from getting help, this can lead to poorer health.</p> <p>All of us have biases (a person prefers an idea and possibly does not give equal chance to a different idea) or prejudices we need to pay attention to and work to overcome.</p> <p>Stigma is one of the biggest reasons people who are living with an addiction don't get help or health care... OR don't tell people in their life, that they are closest to about the addiction. And this takes away support that is needed to get help and stay well. And we know that the sooner someone gets help, the better.</p> <p>Preventing Stigma</p> <ul style="list-style-type: none"> We see that stigma can be a serious problem for many reasons. What can we do about this? There are many things we can all do: <ul style="list-style-type: none"> Say positive things about the situation - helps provide hope to people


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	<ul style="list-style-type: none"> ○ By correcting myths, rumours and stereotypes we can make sure that people have the correct information and are not causing panic and fear as well as creating more stigma. ○ Make sure that we do not use language that blames anyone for getting sick or having an illness. ○ Using person first language that recognizes someone as a person before describing personal characteristics or health conditions. Example: We wouldn't say "They're a cancer." We'd say "They have cancer." Same for an addiction, instead of referring to someone as an addict or an alcoholic, say a person living with an addiction or challenges with alcohol. The important thing to remember is we want people to feel they deserve and can get help if needed, using person first language can help people feel that way. ○ This respects people's worth and dignity. It focuses on medical terms, it encourages them to get help and avoids supporting negative stereotypes. ○ Explore your own feelings about a topic: Do you have some biases (a person prefers an idea and possibly does not give equal chance to a different idea) that you developed in your family, perhaps from your parents or friends. <p>Having compassion (feeling kindness and care for another person) and empathy (understanding what another person is going through, putting yourself in their situation to see how that might feel).</p>
<p>Slide 24</p> <p style="text-align: center;">Recovery</p> <ul style="list-style-type: none"> ■ Addiction is a medical condition and like other medical conditions a person may need help with their recovery. ■ Treatment does work and recovery is possible.  <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p>	<p><u>Recovery</u></p> <ul style="list-style-type: none"> ● We can't make someone stop using opioids, addiction is a medical condition and like other medical conditions a person may need help with their recovery. ● Treatment does work and recovery is possible. ● "Recovery" does not mean that someone is "cured" (which makes it sound like they are no longer living with the condition). Being in recovery is a lifelong journey/daily decision. ● Treatment for addiction can work as well as treatments for other chronic medical conditions. ● Recovery is about a person feeling stronger and confident in a way that allows them to live their life in a meaningful way, regardless of illness or medical condition ● Recovery can be different for every person; some people do not want to use substances at all. ● No use is not the only choice for recovery. Some people do better with using less substances or choosing safer ways to use their substance.

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	<p>Suggest that things would be much easier for us if we thought about our heart aches the way we think about physical pain or illness (example: not being embarrassed to talk about it, getting help).</p>						
<p>Slide 26</p> <p>Coping with stress and emotional pain</p> <table border="1"> <thead> <tr> <th>☺ Positive</th> <th>☹ Neutral</th> <th>☹ Negative</th> </tr> </thead> <tbody> <tr> <td> <ul style="list-style-type: none"> • Talk to a friend or a parent • Exercise/Sports • Keep a journal • Meditate </td> <td> <ul style="list-style-type: none"> • Walk away from the situation • Watch TV • Use humour </td> <td> <ul style="list-style-type: none"> • Break something • Yell at someone • Use alcohol or drugs </td> </tr> </tbody> </table> <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p>	☺ Positive	☹ Neutral	☹ Negative	<ul style="list-style-type: none"> • Talk to a friend or a parent • Exercise/Sports • Keep a journal • Meditate 	<ul style="list-style-type: none"> • Walk away from the situation • Watch TV • Use humour 	<ul style="list-style-type: none"> • Break something • Yell at someone • Use alcohol or drugs 	<p><u><i>Coping with stress and emotional pain</i></u></p> <p>Ask students how they cope with stress or emotional pain.</p> <p>Emphasize the need to:</p> <ul style="list-style-type: none"> • Identify the problem. Is your job, school, a relationship with someone, or worries about money causing stress? • Solve problems as they come up. What can you do, and what are the possible outcomes? • Talk about your problems. You may find it helpful to talk about your stress. Loved ones may not realize that you're having a hard time. Once they understand, they may be able to help different ways. <p>Positive coping strategies:</p> <ul style="list-style-type: none"> ➤ Helps to restore emotional balance and/or feel better about yourself ➤ Respectful of you, others and property ➤ Helps you to solve the problem ➤ A positive coping strategy can turn into a negative coping strategy if used too much <p>Neutral coping strategies:</p> <ul style="list-style-type: none"> ➤ Not positive or negative, but could lead to problems if used too much ➤ May help to calm you and restore emotional balance ➤ Are temporary strategies, and should be used with a positive coping strategy to solve the problem <p>Negative coping strategies:</p> <ul style="list-style-type: none"> ➤ Does not restore emotional balance, and may make strong emotions (like anger) even worse
☺ Positive	☹ Neutral	☹ Negative					
<ul style="list-style-type: none"> • Talk to a friend or a parent • Exercise/Sports • Keep a journal • Meditate 	<ul style="list-style-type: none"> • Walk away from the situation • Watch TV • Use humour 	<ul style="list-style-type: none"> • Break something • Yell at someone • Use alcohol or drugs 					

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	<ul style="list-style-type: none"> ➤ May be harmful to you, others or property ➤ Does not solve the problem ➤ May create more problems <p>Understand the way you think about situations affects the way you respond to them.</p> <p>Learn about stress management. There are also counsellors who specialize in stress specific to youth.</p>
<p>Slide 27</p> <p>Talk to someone you trust</p>  <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p>	<p><u><i>Talk to someone you trust</i></u></p> <p>Talking to others and getting help if needed are good strategies for coping with feelings, stress or a substance use disorder.</p> <p>Talking about the current issue may help you feel less worried and anxious. It might also help to solve the problem, sometimes the problem is too big or too hard to handle alone.</p> <p>If you are struggling or know someone who is, it can help or at least prevent things from getting worse. It feels good to know someone understands you and supports you.</p>
<p>Slide 28</p> <p>Community resources: substance use health</p> <ul style="list-style-type: none"> ■ Your school's addiction/guidance counsellor, family doctor or Nurse Practitioner (NP) ■ Access MHA.ca An easier way to reach services in eastern Ontario's system of care for mental health and addictions (16+ years) ■ BreakingFreeOntario.ca A free virtual tool for those experiencing substance use disorder available free for all Ontarians ■ Rideauwood Addiction and Family Services Rideauwood.org 613-724-4881 ■ 1call1click.ca For ages up to 21 years and their family ■ National Overdose Prevention Line at 1-888-688-NORS (6677) ■ Free Brave app for anonymous support (works with IOS and android phones) <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p>	<p><u><i>Community resources: substance use health</i></u></p> <p>If you are vaping and need support speak to your family doctor or Nurse Practitioner (NP) or the addictions/guidance counsellor at your school, (discuss how students can access the addictions counsellor at the school).</p> <p>Access MHA and 1Call1Click help people connect to the right mental health or substance use resource.</p> <ul style="list-style-type: none"> ● You visit their website to complete a form. ● Once the form is completed a mental health and substance use professional will reach out to you to talk more ● They will connect you to the right resource.



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	<p>BreakingFreeOnline.ca is available to everyone in Ontario. It is a free virtual care tool for those with a substance use disorder (accessible as an app or web browser).</p> <p>Rideauwood Addiction and Family Services offer substance use, behavioural addictions and mental health services.</p>
<p>Slide 29</p> <p>Communityresources: mental health</p> <p>24/7 Crisis Support</p> <ul style="list-style-type: none"> ■ Mental Health Crisis Line at 613-722-6914 (for people 16+ years old) ■ Youth Services Bureau at 613 -260-2360 or Crisis Chat: www.ysb.ca ■ Kids Help Phone at 1-800-668-6868, text CONNECT to 686868 <ul style="list-style-type: none"> • Live Chat (open 7 pm – midnight ET): https://kidshelpline.ca/live-chat/ <p>Counselling Services</p> <ul style="list-style-type: none"> ■ Walk in Counselling Clinics at walkincounselling.com or 613 -755-2277 <ul style="list-style-type: none"> • Services in English, French, Arabic, Spanish, Somali, Cantonese and Mandarin at a variety of different locations. <p>Counselling Connect at counsellingconnect.org</p> <ul style="list-style-type: none"> ■ Provides free quick way to get phone or video counselling. <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p>	<p><u><i>Community resources: mental health</i></u></p> <p>If you know someone who needs help or who needs someone to talk to about their mental health, these are some helpful resources</p> <ul style="list-style-type: none"> • YSB Crisis Line @ 613-260-2360 (for people aged 12-18 years old) (EN/FR) • Kids Help Phone: 1-800-668-6868 (Phone, Text, Live Chat) (EN/FR) for children and youth <p>Counselling Services</p> <ul style="list-style-type: none"> • Two resources that offer free and quick way to get counselling. • All you have to do to get an appointment is call or visit their website
<p>Slide 30</p> <p>Want to learn more?</p> <ul style="list-style-type: none"> ■ Ottawa Public Health ■ The LINK Ottawa ■ Community Addictions Peer Support Association (CAPSA) ■ Health Canada ■ Canadian Centre on Substance Use and Addiction (CCSA) ■ Centre for Addiction and Mental Health (CAMH) ■ Centers for Disease Control (CDC) <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p>	<p>Want to learn more?</p> <ul style="list-style-type: none"> • https://www.ottawapublichealth.ca/en/public-health-topics/drugs.aspx • https://www.thelinkottawa.ca/en/alcohol-drugs-and-tobacco/substances.aspx • https://www.ottawapublichealth.ca/en/public-health-services/stop-overdose-ottawa.aspx • https://capsa.ca/ • https://www.ccsa.ca/ • https://www.camh.ca/ • https://www.canada.ca/en/health-canada.html <p><i>Thank you for your time and attention!</i></p>

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<p>Slide 31</p> <p>Located in a rural area? Here's where to find help :</p> <p><i>Mental Health Support</i> <i>for rural Ottawa youth</i></p> <p>www.ruralottawayouth.ca</p> <p> @RuralOttawaYouth</p> <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p>	<p>(Slide for Rural Schools only)</p> <p>Rural youth face unique barriers in obtaining Mental Health Support.</p> <p>The goal of the Rural Ottawa Youth Mental Health Collective (ROYMHC) is to help rural Ottawa youth feel supported if they need mental health help and making sure they know where to go for support if they need it. We know there are challenges with accessing mental health supports that are unique to rural Ottawa youth. Whether it's distance, transportation, not knowing what resources exist, or a lack of privacy / ability to access existing resources, we are listening to your concerns and working hard to ensure that you feel supported.</p> <p>Please introduce students to the Rural Ottawa Youth Website. www.ruralottawayouth.ca</p> <p>Go to rural Ottawa youth website and show them around:</p> <ul style="list-style-type: none"> • Go to homepage: see the “get help now” if it’s a crisis • Go to “help in your area” to see what resources YOU can access (click to the map and help students to find their ward – then navigate to the resources specific to their ward.) • If you’re in a specific school, go to THAT ward’s resources page to show them that they’ve got their own • Book mark this website (take a picture)
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