

HIGHLIGHTS FROM

The Ottawa Community Action Plan Virtual Summit

To continue to move the Ottawa Community Action Plan (OCAP) forward, the 2020 Virtual Summit was hosted by Ottawa Public Health (OPH), The Royal, Community Addictions Peer Support Association (CAPSA), Canadian Centre on Substance Use and Addiction (CCSA) and the Canadian Public Health Association (CPHA).

With logistical planning support from CCSA, the half-day event was structured around four expert panel discussions: an opening panel, which provided current context and vision, and three subsequent panels which each focused on one of three main themes – preventing stigma and problematic substance use, emerging harm reduction initiatives and collaborating and integrating across the system.



The Virtual Summit, held on November 20th, 2020 brought together more than 160 attendees with varying perspectives and expertise to discuss issues and ideas for further action.

The event brought in many new participants, with over two-thirds (68%) indicating that they had not previously attended the Summit in 2019.

The final report was written by
The Strategic Counsel.

Key Takeaways – Panel Discussions



There is a **willingness across the community in Ottawa to continue to address stigma** related to substance use. It is also clear, however, that **stigma still widely exists**, driven by a lack of understanding that substance use disorder is a chronic medical condition. Stigma can contribute to an individual's reluctance to seek support and services.

Ottawa continues to lead the way in providing access to harm reduction services through several supervised consumption sites and public access to Naloxone kits. Innovative solutions, such as virtual witness consumption, wearable technology and isolation treatment centres, are creating new and better treatment options.

Progress has been made towards **creating a more centralized and simplified way to access substance use and mental health services in Ottawa** (for example, through [AccessMHA](#) and 'One call/one click'). Those with lived/living experience, as having previously or currently accessed the system, should be central to leading change discussions on access. Providing children/youth with improved access to such services is critical.

"It is hard for me to name just one thing that gives me hope because we heard a lot [today] about all the progress that is being made. I feel re-energized about this work and this plan, and I hope others do too."

(Dr. Vera Etches, Medical Officer of Health, Ottawa Public Health)

"Just the act of speaking contributes to opening space where people in need can feel free and empowered to seek the help they need and deserve."

(Dr. Benoit-Antoine Bacon, President and Vice Chancellor, Carleton University)

Opening Panel Discussions

Where have we seen some successes?

- CAPSA hosted the first ever virtual Recovery Day Ottawa 2020, bringing together health-based and community organisations, through engaging messaging on the importance of carrying through COVID-19 together, leaving no one behind, non-stigmatizing language, stigma reduction and increased wellness.
- Creation of the resource *Overcoming Stigma Through Language* developed by CCSA in partnership with CAPSA.
- Harm reduction initiatives continue to adapt to meet the needs of the community, including implementation of supervised consumption services within isolation centres. Work to increase access and availability to Naloxone is underway with partners across the sector.
- Easier access to support and services, through initiatives like [AccessMHA](#) and 'One Call/One Click' (a service which will provide a central point of entry for children/youth).
- Community consultations, undertaken by the City of Ottawa, have taken place to better understand how to promote community safety and well-being.
- Initiatives to address stigma related to substance use are being offered locally and scaled to a national level through CAPSA and CCSA.

What are some of the ongoing challenges?

- It is still not clear to some people where they can turn to for help regarding substance use and mental health. Certain groups remain under-served (e.g., African, Caribbean, Black and Indigenous people).
- Despite ongoing efforts by organizations, those with lived and living experience have not yet seen much change regarding the experience of stigma. More open community conversations need to be had to help address this issue.
- More integration is required and greater cross-collaboration – beyond health and police to other partners.
- There is a need for a better understanding of the importance of the early child development and the impact of trauma in the early years, including adverse childhood events (ACEs).

Looking Ahead to 2021

Where do we go from here?



Continue to **raise awareness** of substance use issues and wellness with government officials – so they continue to recognize there is a need.



Bring clients more directly into the service model – as knowledge experts, trainers and educators.



Think about ways in which we can **advance the goals of the OCAP** – those with lived/living experience should be central to leading change discussions on access to services.



Make connections – connecting the dots, sharing the good work that is happening in other provinces and making it easier for those working at the local level to access information on what is happening elsewhere.



Enhance meaningful collaboration – this requires meeting various partners where they are, listening and understanding to different viewpoints, seeing the contribution of all partners as valuable and ultimately standing together.

"We are taking steps and the community action plan has the right goals... [we] absolutely need to stand beside the experts who have lived experience and living experience. ... we need to actually aim for culture change and that's not just individuals, that's organizations and that it takes all of us." (Dr. Vera Etches, Medical Officer of Health, Ottawa Public Health)

What Participants Had to Say Throughout the Summit

(through Mentimeter polling/voting system)



General Understanding/Knowledge

- Participants pointed to a number of sectors as requiring **more person-first language training**, including police, first responders, educators, health care providers
- 95% of participants felt the **general public did not understand that Substance Use Disorder is a medical condition**
- 90% of participants felt the **general public did not have a strong understanding of the impact of the early years**, including adverse childhood experiences (ACEs) and the link to mental health and substance use challenges
- Over four-in-five (86%) participants indicated they believed it would be **helpful for the public to have more information on the Good Samaritan Overdose Act**.

Looking Forward

- Attendees were **eager to learn more about** many aspects of these issues, including **trauma-informed care, harm reduction, stigma and decriminalization**.
- They provided **several ideas for actions** they could commit to going forward, including **continuing to be advocates, improved listening, better collaboration and more education**.

Barriers to Harm Reduction

- Participants **identified stigma, funding and a lack of understanding as the top barriers** to implementing a harm reduction approach to substance use, in addition to systemic oppression and issues related to access to assistance.
- Participants believe that **stigma** is one of the **main reasons** why:
 - people are **reluctant to seek help** or reach out for support;
 - individuals **choose to use substances alone**; and
 - why there is an **increased sense of shame**, often resulting in increased/more severe use.