

**Board of Health Meeting – May 07, 2024**

**Advisory Committee Meeting – April 22, 2024**

Subject: HSS-24-015 Community Drug and Alcohol Strategy Information Report.docx  
Report Number: HSS-24-015  
Division: Health and Social Services  
Department: Public Health  
Purpose: For Information

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**Recommendation(s):**

THAT report HSS-24-015 Community Drug and Alcohol Strategy Information Report be received for information.

**Executive Summary:**

The Community Drug and Alcohol Strategy is developed through a collaborative process with community partners to reduce the harms associated with substance use and promote healthy communities. Guided by the four-pillar approach, the strategy will include goals to reduce substance use prevalence, improve access to services, reduce stigma, and enhance community safety. The strategy fulfills over 20 requirements under the Ontario Public Health Standards for the Board of Health. The development plan for the strategy outlines timelines, responsibilities, and performance indicators. Moving forward, community collaboration will be key to the success of the strategy, as the strategy is implemented and evaluated to create healthier, safer communities for all residents.

**Discussion:**

**Background**

The Community Drug and Alcohol Strategy for the region is a crucial response to the pressing substance use challenges facing Haldimand-Norfolk Health Unit. In 2022 alone, Haldimand-Norfolk experienced 19 deaths attributed to opioids.<sup>1</sup> This is an unfortunate statistic that is increasing rapidly over the years and highlights the urgent need for comprehensive action.<sup>1</sup> Naloxone administration also remained high in 2022, as 6500 doses were administered in the region, indicating ongoing concerns regarding opioid poisonings.<sup>2</sup> Additionally, there has been a 10% higher self-reported rate of current alcohol drinking than the Ontario provincial average – the third highest per

population in all of Ontario.<sup>3</sup> The Haldimand-Norfolk region is also the highest for self-reported rate of consuming seven or more standard alcoholic drinks in the past seven days in 2020.<sup>3</sup> An unfavourable statistic, as this represents the highest risk for adverse health outcomes on Canada's new continuum for alcohol and health.<sup>4</sup> Smoking also continues to be a significant concern, with smoking attributing to 18.1% of deaths in an average year from all causes in people age 35 and older in Haldimand-Norfolk.<sup>5</sup> Lastly, the region also faces challenges related to cannabis, as the Haldimand-Norfolk region had a 55% higher rate per 100,000 population over the provincial average of emergency department visits for cannabis related poisonings for all ages in 2021.<sup>6</sup> Particularly concerning is the fact that Haldimand-Norfolk has the highest rate of emergency department visits for cannabis-related poisonings in youth aged 0 – 12 years in the province for 2021 as well.<sup>6</sup> These statistics underscore the urgent need for a comprehensive and collaborative approach to address substance use harms in the region.

One such approach is a Community Drug and Alcohol Strategy. The Ontario Public Health Standards (OPHS) supports this strategy. Participation and facilitation of a Community Drug and Alcohol Strategy by the Haldimand-Norfolk Health Unit would satisfy over 20 of the mandated requirements under the OPHS for the Board of Health.<sup>7</sup> The OPHS mandates fulfilled by the implementation of a Community Drug and Alcohol Strategy include:

1. Increasing public and partner awareness on the harms of substance use, risk and protective factors for substance use, and healthy behaviours and skills;
2. Building on existing community services and assets, and support the capacity of local partners to act on the factors associated with preventing, delaying and reducing harms related to substance use;
3. Consulting and collaborate with local partners in the health, education, municipal, labour, non-governmental, community and other relevant sectors when developing programs and services for substance use prevention and harm reduction in accordance with the Standards;
4. Working with school boards and schools to assist with the implementation of health-related curricula and health needs in schools related to substance use prevention and harm reduction;
5. Working with additional local partners in other sectors based on local context and need including but not limited to: justice and enforcement, businesses, workplaces, housing, employment, children and youth services, community and social services, priority populations including individuals who use drugs and people with lived experience of problematic substance use, and sectors that work with priority populations;
6. Developing programs and services that develop personal skills and healthy behaviours to prevent, delay or reduce harms related to substance use;
7. Developing harm reduction programs and services based on the identified needs of communities, including priority populations; and,
8. Developing substance use prevention programs and services based on the identified needs communities, including priority populations.

By addressing key areas such as substance use prevention, treatment, harm reduction, and community safety, the strategy would not only improve the health and well-being of our community members, but also ensure the Health Unit is fulfilling its mandate to protect and promote the health of all residents.

The origin of the Community Drug and Alcohol Strategy was a collaborative process involving various community partners and community members. The strategy was initiated by the formation of the Harm Reduction Action Team (HRAT) in 2017, a coalition of community organizations and people with lived/living experience of substance use, whose goal was to address the social and health issues associated with substance use in the region. Unfortunately, the COVID-19 pandemic delayed HRAT progress. Upon resuming in November 2023, the HRAT identified a need for a comprehensive community response to growing harms of substance use in the area. In February 2024, there was a unanimous vote in favour of pursuing a Community Drug and Alcohol Strategy for the region of Haldimand County, Norfolk County, and Mississaugas of the Credit First Nation. In March 2024, a Community Drug and Alcohol Strategy planning sub-committee formed to develop the structure and development plan of the Community Drug and Alcohol Strategy for the region.

## **Purpose and Structure**

The Community Drug and Alcohol Strategy for Haldimand-Norfolk is a comprehensive plan aimed at reducing the harms associated with substance use and promoting healthy, safe communities. The strategy is guided by an evidence-based four-pillar approach, which includes prevention, treatment, harm reduction, and community safety.<sup>8-10</sup> The focus for each pillar of the Community Drug and Alcohol Strategy is as follows:

- **Prevention** – Implementing evidence-based prevention programs targeting youth, families, and the broader community to prevent, reduce, or delay the initiation of drug and alcohol use.
- **Treatment** – Increasing access to evidence-based treatment services for substance use disorders, while reducing waitlists, improving culturally safe services, and enhancing peer support programs.
- **Harm Reduction** – Expanding access to naloxone and other harm reduction services, as well as implementing strategies to reduce the transmission of blood-borne infections among people who use drugs.
- **Community Safety** – Enhancing collaboration between law enforcement, health services, social services, and people who use drugs to address drug-related crime and improve community safety.

The overarching goals of the strategy are to reduce the prevalence of problematic substance use in the community, improve access to health and social services, reduce stigma associated with substance use, and enhance community safety. To achieve these goals, the strategy is supported by an advisory committee comprised primarily of people with lived/living experience of substance use to provide insight and realistic

actions. Engagement of people with lived/living experience of substance use aligns with best practice and OPHS requirements.<sup>7,11-13</sup> The advisory committee provides guidance and oversight to ensure the strategy is effectively meeting the needs of the community.

In addition to the advisory committee, the strategy is supported by a steering committee composed of executive directors to properly allocate resources and personnel to action the strategy, as well as people with lived/living experience of substance use. The steering committee is responsible for coordinating efforts across the various pillar groups and overseeing the actions of the strategy. As such, the steering committee plays a vital role in the development and implementation of the Community Drug and Alcohol Strategy, ensuring it remains aligned with the needs of the community and is effectively implemented to achieve its goals.

### **Haldimand-Norfolk Health Unit's Role**

The Haldimand-Norfolk Health Unit (HNHU) plays a key role in the Community Drug and Alcohol Strategy. HNHU's primary function is to provide leadership and coordination in bringing together key partners from various sectors, including healthcare, social services, law enforcement, education, and other community organizations. The Health Unit is responsible for facilitating collaboration and communication among these partners to ensure that the strategy is comprehensive, evidence-based, and responsive to the needs of the community. Additionally, HNHU is responsible for data collection and analysis, program development and implementation, community engagement, and evaluations of the strategy's impact. By taking a collaborative and multi-faceted approach, with coordination from HNHU, the Community Drug and Alcohol Strategy will address the complex issues of substance use and improve the health and well-being of residents.

### **Development Plan**

The formation of a Community Drug and Alcohol Strategy requires several key steps. The first and vital step is the formation of the steering committee. This committee will oversee the development and implementation of the strategy. The steering committee will be responsible for coordinating the efforts of the pillar groups and advisory committee, ensuring the strategy is comprehensive and aligned with the needs of the community. The committee will be composed of two strategy co-chairs, ten pillar co-chairs, a strategy coordinator, and an administrative assistant. The key goal in establishing an effective steering committee is ensuring representation from a variety of community partners, the appropriate knowledge to coordinate the overall strategy, and the authority to allocate resources and personnel. The formation step should take no more than one month.

The next step is the formation of the pillar groups, evidence review, and the draft action plan. Pillar group participants will be recruited through public forums in each area. Each pillar group will focus on a specific element of addressing substance use. These groups will be responsible for conducting a needs assessment to identify the current state of

drug and alcohol use in the community, priority populations, and service gaps. In conjunction with the needs assessment, an evidence review will be undertaken to establish a list of best practices and possible solutions. Compiled, this information will provide a landscape of the current substance use situation in the region, what influences are making the situation better or worse, what service gaps need to be addressed, and a list of possible actions to address substance use in our communities. The formation of the pillar groups and evidence review should take from three to six months. The pillar groups will use the information from the evidence review to create a draft action plan. The drafting of the action plan, along with compilation of documents from all pillars should take between two to four months.

Review of the draft action plan will begin with the advisory committee, followed by the steering committee. Both committees will provide feedback and recommendations to strengthen the draft action plan. To ensure transparency, feasibility, and accountability, the draft action plan will then go through a community consultation process. After the action plan is reviewed and updated; public forums, key informant interviews, and focus groups will be held to further enhance the draft action plan. The plan will then be revised by the pillar groups and forwarded to the advisory and steering committee for review and compilation into a final strategy document. During the compilation of the strategy, timelines, key progress indicators, and prioritization will be assigned to each action. Altogether, this consultative and finalization process can take between three to five months to complete.

The implementation of the Community Drug and Alcohol Strategy will require a coordinated effort from all partners involved. The pillar groups will transition into working groups to complete all recommended activities of the action plan. Each of the actions will have an assigned lead and supporting organization. The advisory group will assist with the implementation of actions and ensuring the actions meet the needs of the community. The steering committee will ensure public accountability, acquire necessary resources, and confirm all activities are implemented according to establish timelines of priority. Implementation periods will last for one year each, culminating in a summative evaluation for continuous quality improvement.

The evaluation of the Community Drug and Alcohol Strategy will be conducted through both formative and summative approaches. Formative evaluation will be ongoing throughout the planning and implementation process, allowing for real-time feedback from strategy members and the public to the steering committee. This formative process will also involve monitoring key indicators, such as changes in substance use trends, service utilization rates, and community perceptions of the strategy. The summative evaluation will be conducted at the end of each year to assess the overall impact of the strategy. Indicators to monitor the success of the strategy may include fluctuations in substance use rates, access to treatment and support services, drug-related crime rates, and number of protective factors or risk factors for substance use. Evaluation findings will be used to inform future iterations of the strategy and ensure continued effectiveness.

## **Next Steps**

Moving forward, the success of the Community Drug and Alcohol Strategy hinges on community collaboration. Ongoing engagement with community partners and people with lived/living experience of substance use will ensure the strategy remains agile and responsive to evolving community needs.<sup>14-16</sup> Key immediate actions include convening the steering committee and pillar groups to begin the development of the strategy. Anticipated barriers, including funding constraints and resource limitations, will be addressed through strategic partnerships and resource-sharing agreements with other community organizations. Establishing clear communication channels and feedback mechanisms will be essential for identifying and addressing barriers in real-time, ensuring the strategy's continued effectiveness and sustainability. By working together, we can implement a strategy that meets the unique needs of our community and create healthier, safer communities for all.

## **Financial Services Comments:**

### **Norfolk County**

There are no direct financial implications within the report as presented.

The Community Drug and Alcohol Strategy is one of many programs offered by the Health Unit as part of the Ontario Public Health Standards Substance Use and Injury Prevention standard. Since multiple teams complete program activities, a single team's budget cannot be directly allocated to this strategy. However, the Haldimand-Norfolk Health Unit's 2024 Annual Service Plan and Budget Submission includes a total allocation of \$983,700 to comply with the standard.

Levy costs for Mandatory Programs are shared between Haldimand and Norfolk counties per the arbitration agreement for Public Health. For 2024, the cost share is projected to be 41.16% for Haldimand County and 58.84% for Norfolk County.

### **Haldimand County**

Haldimand Finance staff have reviewed this report and agree with the information provided by Norfolk Financial Services.

## **Interdepartmental Implications:**

### **Haldimand County**

The 2024 Annual Service Plan and Budget Submission has identified a priority: a way for HNHU to address tobacco control, cannabis, alcohol, and opioids in a comprehensive manner. This informational report presents the Community Drug and Alcohol Strategy which aligns with one of Haldimand's Corporate Strategic Pillars as it

provides a strategy that will aid in promoting the well-being of communities and residents within.

### **Consultation(s):**

None

### **Strategic Plan Linkage:**

This report aligns with the 2022-2026 Council Strategic Priority Empowering Norfolk - Putting the tools and resources in place to ensure our businesses' and residents' success

#### **Explanation:**

Substance use can have significant impacts on individuals, families, and communities, affecting mental health, productivity, and overall well-being.<sup>17,18</sup> By implementing a comprehensive strategy that addresses substance use prevention, treatment, harm reduction, and community safety, we are creating a healthier and safer community where residents can thrive. Additionally, by engaging with businesses and community organizations, the strategy aims to reduce the social and economic burden of substance use, ultimately supporting the success and prosperity of Norfolk's businesses and residents.

### **Conclusion:**

In conclusion, the Community Drug and Alcohol Strategy represents a significant step forward in addressing the complex issues of substance use in our communities. Through a collaborative and evidence-based approach, the strategy aims to reduce the harms associated with substance use, improve access to treatment and support services, and enhance community safety. The development and implementation of the strategy will be guided by the input and expertise of a wide range of community partners, including government agencies, healthcare providers, community organizations, and individuals with lived/living experience of substance use. Moving forward, continued commitment and collaboration will be essential to the success of the strategy. By working together, we can create a healthier, safer community for all residents of Haldimand-Norfolk.

### **Attachment(s):**

- None

## Approval:

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