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REPORT FOR ACTION

Our Health, Our City: Annual Progress Report 2024

Date: November 1, 2024To: Board of HealthFrom: Medical Officer of HealthWards: All

SUMMARY

In November 2023, the Board of Health adopted <u>Our Health, Our City: A Mental Health,</u> <u>Substance Use, Harm Reduction and Treatment Strategy for Toronto</u>, which is a comprehensive five-year and city-wide strategy to address both mental health and substance use related issues in Toronto. The Board of Health also directed the Medical Officer of Health to report back to the Board with annual progress reports on the implementation of Our Health, Our City.

This staff report provides an update on the current landscape, including the ongoing drug toxicity epidemic, as well as an overview of progress made in 2024 towards the implementation of the strategy, such as establishing the Our Health, Our City Implementation Panel, which includes representatives with lived and living experience of substance use and/or mental health challenges and a range of community partners.

Over the last year, significant progress has been made towards the first-year priorities identified in the strategy. For example, the City has made advances on affordable and supportive housing, partners are taking steps to increase access to 24-7 crisis support services, and the Toronto Police Service has established a new pilot project to improve hospital transitions. Most notably, the Toronto Community Crisis Service has been expanded city-wide, which improves access to appropriate services and support for people in crisis.

Partners across the City have demonstrated action in areas that are well-aligned with Our Health, Our City recommendations, as well as continued partnership and collaboration to advance the strategy. Some examples of divisional initiatives are highlighted in this report, and a comprehensive status overview is provided in Attachment 1: Our Health, Our City Status Overview 2024. The Our Health, Our City Implementation Panel was also established in September 2024 following a public application process, and this panel will provide ongoing advice to further implement the strategy, including exploring priority areas of action for the following years. Finally, this report also provides an update on recent actions to reduce harms specifically associated with cannabis, vaping, and smoking for youth. Toronto Public Health continues to provide an inspection and enforcement function, as well as health promotion, prevention, and education to reduce the harms associated with youth vaping.

Children's Services, Economic, Development and Culture, Toronto Employment and Social Services, Fire Services, Municipal Licensing and Standards, Parks, Forestry and Recreation, Senior Services and Long-Term Care, Social Development, Finance and Administration, Toronto Paramedic Services, Toronto Police Services, Toronto Public Library, Toronto Shelter and Support Services, and Toronto Transit Commission were consulted in the development of this report.

Parallel work on a co-developed Indigenous Wellness strategy is also underway at Toronto Public Health. An Indigenous Wellness Table and Indigenous Harm Reduction Circle with Indigenous-led service providers in the city were established and both groups continue to convene to advance Indigenous wellness, with a particular focus on harm reduction and promoting mental health and wellness.

RECOMMENDATIONS

The Medical Officer of Health recommends that:

1. The Board of Health continue to recognize the drug toxicity epidemic as a public health crisis and continue to commit to actions that are evidence-based and urgently needed to promote wellbeing and community safety and aligned with the Our Health, Our City strategy.

2. The Board of Health reiterate its request to the Government of Ontario to:

a. Protect community health, well-being and safety by continuing to fund, and permit the operation of, all currently operating Supervised Consumption Services and Consumption and Treatment Services Sites beyond March 31, 2025.

b. Permit the co-location of Homelessness and Addiction Recovery Treatment Hubs (HART Hubs) and Supervised Consumption Services and Consumption and Treatment Services sites to provide for life-saving medical services, primary care, and increased pathways to treatment services.

3. The Board of Health reiterate City Council's request to the Government of Ontario to consider the inclusion of Supervised Consumption Services in their new Homelessness and Addiction Recovery Treatment program proposals that demonstrate outcomes for life-saving medical services, primary care, and increased pathways to treatment services and that include mandatory neighbourhood and operational safety plans.

4. The Board of Health requests the Our Health, Our City Implementation Panel to provide advice on the next set of priority actions, and to especially consider recommendations related to alcohol and tobacco.

5. The Board of Health reiterate its request to the Government of Ontario to fund the proposal submitted to Ontario Health for the Substance Use Crisis Centre - Toronto (SCC-T).

FINANCIAL IMPACT

There are no financial impacts associated with the adoption of the recommendations in current and future years. The Chief Financial Officer and Treasurer has reviewed this report and agrees with the information as presented in the Financial Impact Section.

DECISION HISTORY

On September 09, 2024, The Board of Health appointed twelve candidates to the Our Health, Our City Implementation Panel, for a 2.5-year term beginning on September 9, 2024, and ending on March 9, 2027, and until successors are appointed. https://secure.toronto.ca/council/agenda-item.do?item=2024.HL16.7

On July 24, 2024, City Council requested the Medical Officer of Health to include, as part of the forthcoming Our Health, Our City Strategy annual report, a review of existing and planned actions to reduce harms associated with cannabis, vaping, and smoking for youth, including outreach and education initiatives for and with schools. <u>https://secure.toronto.ca/council/agenda-item.do?item=2024.MM20.21</u>

On November 27, 2023, the Board of Health directed the Medical Officer of Health to report to the Board of Health with annual progress reports on the implementation of Our Health, Our City: A Mental Health, Substance Use, Harm Reduction and Treatment Strategy for Toronto.

https://secure.toronto.ca/council/agenda-item.do?item=2023.HL8.1

On November 27, 2023, the Board of Health endorsed Our Health, Our City: A Mental Health, Substance Use, Harm Reduction and Treatment Strategy for Toronto and requested the Medical Officer of Health to establish an implementation panel for the strategy.

https://secure.toronto.ca/council/agenda-item.do?item=2023.HL8.1

On April 7, 2023, the Board of Health requested the Medical Officer of Health to undertake an Indigenous-specific and distinctions-based approach to ensure that the Mental Health and Addictions Strategy for Toronto be co-developed in true partnership with Indigenous organizations and communities to ensure that approaches and actions that support the unique needs of urban Indigenous people living in Toronto can be collectively activated.

https://secure.toronto.ca/council/agenda-item.do?item=2023.HL3.1

On April 7, 2023, the Board of Health requested the Medical Officer of Health to continue to develop the comprehensive Mental Health and Addictions Strategy, which

includes the refreshed Toronto Drug Strategy, with targeted actions to address mental health and substance use and present to the Board of Health in fall 2023. <u>https://secure.toronto.ca/council/agenda-item.do?item=2023.HL3.1</u>

COMMENTS

Current Landscape

Drug Toxicity Epidemic

In Toronto, the drug toxicity epidemic continues to be characterized by high rates of fatal and non-fatal opioid overdoses. The Office of the Chief Coroner for Ontario has reported over 500 deaths due to opioid toxicity per year for the last four years in Toronto (525 deaths in 2023, 510 deaths in 2022, 592 deaths in 2021, 551 deaths in 2020).¹ In 2023, there were also 4,514 non-fatal calls for suspected opioid overdoses attended by Toronto Paramedic Services.² With access to a full continuum of healthcare supports, fatal and non-fatal overdoses can be prevented.

Drug toxicity deaths are in large part caused by the unregulated drug supply, where highly potent opioids are often combined with more unexpected and concerning substances. Between 2018 and 2023, the opioid fentanyl has directly contributed to the highest percentage of accidental opioid toxicity deaths in Toronto. The unregulated fentanyl supply contains varying concentrations of fentanyl, as well as unexpected drugs that include other central nervous system and respiratory depressants. <u>Toronto's Drug Checking Service</u> continues to confirm worsening contamination and unpredictability of the unregulated opioid supply.

In addition to opioids, there are a number of other substances also contributing to drug toxicity deaths in Toronto. In Toronto, from January 1 to December 31, 2023:³

- Fentanyl and its analogues contributed to 86 percent of deaths.
- Cocaine contributed to 56 percent of deaths.
- Benzodiazepines contributed to 39 percent of deaths.
- Methamphetamines contributed to 32 percent of deaths.
- Ethanol (alcohol) contributed to 14 percent of deaths.

Harms from Regulated Substances

In addition to unregulated substances, alcohol, tobacco and cannabis are also leading to harmful health outcomes and pressures on the healthcare system.

Alcohol:4*

- There was an increase in ED visits for conditions entirely caused by alcohol in Toronto among those 15 years and older from 606.1 per 100,000 people in 2022 to 615.4 per 100,000 people in 2023.
- There was an increase in hospitalizations for conditions entirely caused by alcohol in Toronto among those 15 years and older from 194.6 per 100,000 people in 2022 to 221.0 per 100,000 people in 2023.

Cannabis:5*

- There were 93.6 ED visits per 100,000 people in Toronto for cannabis-related harms in 2022. This was a decrease from 2021 with 105.6 visits per 100,000 people, but an increase from 77.7 ED visits per 100,000 people in 2019.
- There were 38.1 hospitalizations per 100,000 people in Toronto for cannabisrelated harms in 2022. This was a decrease from 2021 with 43.1 hospitalizations per 100,000 people but comparable to 2019 with 35.7 hospitalizations per 100,000 people.

Smoking:67

- According to Health Canada, commercial tobacco use remains the leading preventable cause of premature death in Canada with approximately 46,000 people dying from tobacco-related illnesses every year. This data represents deaths attributed to primary tobacco use such as cigarette smoking and exposure to second-hand tobacco smoke.
- In an average year in Toronto, approximately 2,564 deaths were attributed to tobacco smoking, in persons aged 35 and older, according to data from 2014 to 2018.
- In an average year in Toronto, approximately 11,160 hospitalizations and 15,840 emergency department visits were attributed to tobacco smoking, among people 35 years and older, according to data from 2015 to 2019.

Mental Health

Mental health is a critical component of overall health and well-being. Mental health in Canada, including Toronto, has been an increasing concern in recent years:⁸

- The percent of adults in Toronto who rated their mental health as very good or excellent decreased from 73.4 percent in 2015 to 55.0 percent in 2021.⁹
- In 2019, only 44.3 percent of Toronto youth (grades 7-12) reported very good or excellent mental health, while 16.7 percent of Toronto youth reported seriously contemplating suicide in the past year.
- The percent of adults in Toronto who reported being very satisfied with their life in general decreased from 39.5 percent in 2015 to 29.8 percent in 2020.
- There was an increase in intentional self-harm ED visits in Toronto among those 10 years and older from 86.9 per 100,000 people in 2013 to 100.3 per 100,000 people in 2022.*

Provincial Policy Landscape

Over the last year, the Government of Ontario has announced several policy changes and investments in mental health and addictions treatment services. These investments aim to expand access to mental health care, improve the availability of substance use treatment, and increase access to wrap-around services. Recent examples of investments in mental health include:

- The ongoing expansion of Youth Wellness Hubs across Ontario. The Ontario government has launched 22 Youth Wellness Hubs since 2020, including a <u>new</u> <u>Hub</u> in 2024 to serve the west-end of Toronto and surrounding areas.
- <u>\$19 million</u> to expand access to the provincial Early Psychosis Intervention program, in partnership with the Centre for Addiction and Mental Health.
- <u>\$12.5 million</u> to connect Black children, youth and their families, as well as 2SLGBTQIA+ youth to mental health services across the province.

Most recently, on Tuesday <u>August 20, 2024</u>, the Government of Ontario announced changes to supervised consumption and harm reduction services in Ontario. The province plans to introduce legislation in fall 2024 to prohibit supervised consumption sites located within 200 metres of schools and licenced childcare centres. The planned legislation would prohibit any new supervised consumption sites or safer supply programs from opening and would prevent municipalities from requesting a federal exemption to decriminalize unregulated drugs. If passed, this will result in the closure of five Supervised Consumption Sites (SCS) and Consumption and Treatment Services (CTS) in Toronto, including The Works which is operated by Toronto Public Health (TPH) and is currently located at 277 Victoria St.

The province also announced a \$378 million investment for 19 new <u>Homelessness and</u> <u>Addiction Recovery Treatment Hubs (HART Hubs)</u> across Ontario. HART Hubs are three-year demonstration projects that aim to support the treatment and recovery of individuals with complex needs. The City of Toronto and Toronto Public Health have applied to operate a HART Hub and continue to work with partners and plan for the anticipated closure of supervised consumption sites across the city. The City of Toronto and Toronto Public Health are supporting partners who are applying to become a HART Hub by providing required endorsement letters from the Municipal Service Manager and recent data related to the drug toxicity epidemic in Toronto.

The Board of Health has requested the Government of Ontario to continue to fund and permit the operation of all currently operating Supervised Consumption Services and Consumption and Treatment Services Sites beyond March 31, 2025. The Board of Health also requested the Government of Ontario to permit the co-location of Homelessness and Addiction Recovery Treatment Hubs (HART Hubs) and Supervised Consumption Services and Consumption and Treatment Services sites to provide for life-saving medical services, primary care, and increased pathways to treatment services. City Council has requested the Government of Ontario to consider the inclusion of Supervised Consumption Services in their new Homelessness and Addiction Recovery Treatment program proposals that demonstrate outcomes for life-saving medical services, primary care, and increased pathways to treatment services that include mandatory neighbourhood and operational safety plans.

Our Health, Our City: An Implementation Update

Our Health, Our City (OHOC) is a five-year strategy that includes a number of recommended actions across seven strategic goals. This report provides an update on the first-year priorities, and additional actions taken by City Divisions to advance the seven strategic goals.

Year 1 Priorities

1. Shelter Services, Supportive and Affordable Housing

Housing is a key social determinant of health and plays an important role in both the mental health and drug toxicity crises. The housing and homelessness crises require ongoing and sustained action, and housing will remain a core priority of Our Health, Our City.

In the first year of the strategy, the City of Toronto focused its efforts on advocating for ongoing and sustainable funding for shelter services, and to increase funding for supportive housing to help individuals experiencing homelessness. The City also aimed to create more affordable housing, including supportive housing for people with complex mental health and/or substance use related needs.

After significant advocacy efforts to the provincial and federal government, in 2024 funding began through Toronto's New Deal, which provided \$200 million (\$600 million over three years) in additional operating support for shelters and homelessness, conditional on federal support for refugee and asylum claimants. Through the HousingTO 2020-2030 Action Plan ("HousingTO Plan") and the Housing Action Plan (2022-2026) the City of Toronto and partners are working to address the housing and homelessness crises in Toronto.

The City has also seen advances on affordable and supportive housing. One example is the recent opening of Dunn House (formerly 90 Dunn Avenue). Dunn House is Canada's first-ever social medicine supportive housing initiative – operated by Fred Victor. This new four-storey modular building will provide homes for approximately 51 people and support their health and well-being. The Social Medicine Initiative at Dunn House is the first project of its kind in Toronto. This project is led by the City of Toronto and the University Health Network's Gattuso Centre for Social Medicine and delivered in partnership with all orders of government, and the United Way of Greater Toronto. It will demonstrate the value of all orders of government, healthcare services and community support providers working together to deliver innovative and cost-effective supportive housing that connects residents with a range of health and social services delivered onsite.

2. Substance Use Crisis Stabilization Support in Toronto

A key priority of Our Health, Our City is to work with community partners and the provincial government to implement low-barrier crisis stabilization spaces for people with mental health and/or substance use related issues that operate 24 hours per day, seven days per week across the city as part of a full continuum of evidence-based services, treatment options and wrap around supports.

In 2021, the Downtown East Toronto Ontario Health Team and the Gerstein Crisis Centre convened a working group with partners across the health and social service sectors and developed a proposal for a 24-hour crisis stabilization center for people who use drugs in Toronto. The proposal has been shared with Ontario Health for consideration and would build upon the current Gerstein Crisis Centre Substance Use Crisis Service. The model would include 24/7 respite and stabilization, crisis intervention, short-term crisis beds, peer supports and follow-up services, including linkages to addiction medicine, treatment, mental health supports, and primary care. It is recommended that the Board of Health reiterate its request to the Government of Ontario to fund the proposal submitted to Ontario Health for the Substance Use Crisis Centre - Toronto (SCC-T).

3. First Responders and Hospitals Transfer

Our Health, Our City also calls for increased collaboration between first responders and hospitals to improve the process of transferring individuals experiencing a mental health and/or substance use crisis to the most appropriate services.

An example of progress towards implementing this priority is a new pilot project launched by the Toronto Police Service and health system partners. On <u>September 16</u>, <u>2024</u>, Toronto Police Service launched a one-year pilot project in collaboration with the University Health Network, Unity Health Toronto and Humber River Health, to expedite the transfer of care of patients to emergency room staff and reduce wait times for front-line police officers. Participating hospitals include Humber River Health in 31 Division, Toronto Western Hospital in 14 Division, and St. Michael's Hospital in 51 Division. This program operates 18 hours a day, seven days a week and will be evaluated.

4. Expand Toronto Community Crisis Service

The Toronto Community Crisis Service (TCCS) is a non-police, community-led mobile crisis service that responds to mental health crisis calls and wellness checks. It launched as a pilot project in 2022 and serviced four areas of the city where mental health apprehensions were the highest.

On <u>November 08, 2023</u>, City Council endorsed the city-wide expansion of the Toronto Community Crisis Service as Toronto's fourth emergency service. On July 8, 2024, the Toronto Community Crisis Service TCCS was expanded city-wide. <u>On September 26, 2024</u>, TCCS was formalized as the city of Toronto's newest and fourth emergency response service, alongside Toronto Fire Services, Toronto Paramedic Services and Toronto Police Services.

The one-year outcome evaluation of the TCCS indicated that TCCS has successfully diverted 78 percent of calls received from 911 with no police involvement and only 8 percent of calls resulted in a visit to a hospital emergency department.¹⁰ The TCCS was one of the diversion efforts that helped lower person in crisis calls to Toronto Police Services by 4.5 percent in 2023. Between March 31, 2022, and September 30, 2024, the TCCS has responded to approximately 18,953 calls for service with teams dispatched nearly 17,000 times. The expansion of the TCCS will continue to build on these positive results and continue to improve mental health and well-being across the city.

2024 Updates on the OHOC Seven Strategic Goals

The following section includes some examples of the many actions taken across the City of Toronto to advance each of the seven strategic goals in the strategy. Full details can be found in Attachment 1: Our Health, Our City Status Overview 2024.

1. Promote mental health and wellbeing across the lifespan.

- Toronto Paramedic Services expanded the Community Paramedic-Led Clinic (CPLC), where the Toronto Paramedic Services Community Paramedicine Program offer wellness clinics in subsidized housing buildings, naturally occurring retirement communities, and shelters. In 2024, the clinic launched a new location at Lawrence Square in partnership with Toronto Employment and Social Services.
- Children's Services implemented First Steps to Success, a pilot program for staff that focuses on the social emotional development of infants.
- Senior Services and Long-Term Care continues to implement community-based programs for seniors that combat loneliness and social isolation, this includes the Seniors Supportive Housing Program, Homemakers and Nurses Services Program and Adult Day program.

2. Prevent and reduce harms and deaths related to substance use across the lifespan.

- The Toronto Transit Commission (TTC) has improved access to naloxone to help prevent and respond to drug overdoses in the transit system. Effective January 17, 2024, Fare Inspectors are now carrying naloxone and the administration of naloxone by TTC employees was expanded to operations supervisors.
- Toronto Public Health Enforcement staff refer unlicensed tobacco and vapour product retailers to Municipal Licensing and Standards (MLS), to bring them into compliance with the City's Licensing Bylaw, Chapter 545.
- Social Development Finance and Administration Division, Economic Development and Culture and the Downtown Yonge Business Improvement Area (BIA) are advancing the SafeTO BIA program to pilot several initiatives to address community safety and well-being challenges experienced by businesses. SafeTO BIA is partnering with Toronto Public Health and community health centers to train businesses on harm reduction and overdose prevention strategies including the administration of naloxone.

3. Expand access to the full continuum of high-quality, evidence-based and clientcentred services to address mental health and/or substance use issues, including prevention, harm reduction and treatment supports.

 Toronto Employment and Social Services has implemented several Innovative Case Management (ICMs) pilots, with funding from the City's Poverty Reduction Strategy Office (PRSO). These pilots are in partnership with Maggie's Toronto, the Call Auntie Clinic, and COSTI Immigrant Services and provide support for longer-term Ontario Works clients, including addressing issues such as social isolation, mental health challenges, and housing. Taken together, these initiatives will have served over 660 clients in 2024.

- Toronto Public Library (TPL), in partnership with Gerstein Crisis Center, extended TPL's Social Service Team initiative in 2024 which launched in 2023 as a pilot. The initiative provides low-barrier mental health and crisis support to vulnerable individuals accessing the library as well as builds the capacity of the library system to support vulnerable persons.
- Social Development Finance and Administration, Toronto Shelter and Support Services and Toronto Police Services are partnering with the Ministry of Attorney General and the Ontario Court of Justice on the implementation of two Justice Centre programs in Toronto. The Toronto Downtown East (DTE) Justice Centre focuses on preventing high-needs individuals at the intersection of poverty, homelessness, isolation, mental health and addictions from cycling through the criminal justice system by addressing criminogenic risk factors with on-site, wraparound psychiatric, primary care and addictions medicine and development disability supports.

4. Advance community safety and wellbeing for everyone.

- Toronto Paramedic Services provided a service-wide education module on the principles of harm reduction, as it pertains to their role as Paramedics responding to 911 calls in the community. The content was delivered to Toronto Paramedics from February to July 2024 as part of the service's continuing medical education.
- Social Development Finance and Administration launched Violence Prevention Toronto (VPTO), an integrated office that consists of embedded staff from the City of Toronto, Toronto Police Service, Toronto Community Housing, Toronto District School Board, Toronto Transit Commission and dedicated leads from several institutions and funded community partners and programs who are working collaboratively guided by a trauma informed and responsive, public health approach to violence prevention, intervention, response and recovery. SafeTO Violence Prevention Symposium was held in September 2024 and had over 200 participants. The symposium was held to showcase innovative practices that enhance community safety and wellbeing.
- The Community Crisis Response Program (CCRP) works across Toronto to provide direct and immediate resources to communities impacted by violent and traumatic incidents and support the healing and recovery process.
- Toronto Public Health and Toronto Police Service (TPS) announced the Downtown Community Outreach Response and Engagement (CORE) Team in June 2024, a one-year pilot which aims to support vulnerable groups in the downtown core. The team is led by a specialized team of public health nurses and supported by a nurse practitioner, the program will provide short-term case management, health and social service referrals, as well as overdose and substance use responses. TPS officers will support these efforts to ensure safety for the team, members of the public and those receiving support.
- Social Development, Finance and Administration, Toronto Police Service and The United Way continue to operate Furthering Our Community by Uniting Services (FOCUS) Toronto's collaborative risk-driven model that brings together the most appropriate community agencies at a weekly situation table in six areas of the City, expanding to seven areas in November 2024, to provide a targeted, wrap around approach to the most vulnerable individuals, families and places that are experiencing heightened levels of risk in a specific geographic location.

From January 1 to September 30, 2024, FOCUS Toronto received a total of 814 situations, responding as FOCUS to 804, with 83 percent of risks reduced for those situations.

 Social Development, Finance and Administration also coordinates the Specialized Program for Inter-Divisional Enhanced Responsiveness to Vulnerability (SPIDER), in collaboration with several other City divisions. SPIDER ensures coordinated and enhanced City and community services delivery to meet the needs of vulnerable Torontonians and support them in managing situations of Acutely Elevated Risks (AER) associated with chronic health conditions, social isolation, diminished capacity, mental health challenges, cognitive decline, precarious housing, and more. From January 1 to September 30, 2024, SPIDER responded to a total of 62 situations, with 31 as SPIDER situations, with 71 percent resolved to date. Situations not deemed appropriate for SPIDER are referred to traditional intervention methods by direct referrals.

5. Improve access to housing and other social determinants of health.

- Toronto Public Health partnered with Toronto Community Housing Corporation (TCHC) to support implementation of the TCHC harm reduction policy across its housing portfolio. This includes harm reduction training for TCHC staff and working with anchor agencies embedded within TCHC to adopt a harm reduction approach.
- Parks, Forestry and Recreation continued to implement and evaluate the FitnessTO program in 2024 which launched in September 2023. The program delivers affordable and flexible fitness membership options to suit people's lifestyles, fitness levels and goals.
- Economic, Development and Culture owns and continues to operate ten museums across Toronto. Eight of the City of Toronto's History Museums feature grounds that are free for visitors to enjoy, providing residents access to public green space.

6. Support mentally healthy workplaces and optimize the mental health of workers.

- Toronto Public Library (TPL) approved a Workplace Psychological Health and Safety Policy in May 2024 to continuously improve psychological safety and support mental health in Library workplaces.
- Toronto Shelter and Support Services (TSSS) and community partners provided support and funding to a study conducted by the Centre for Addiction and Mental Health (CAMH) looking at the issue of safety in the shelter system for staff and service users. TSSS is developing a Shelter Safety Action Plan to continue to advance safety within the shelter system for staff and clients, and will provide an update to the Economic and Community Development Committee on November 26, 2024
- Toronto Fire Services continue to prioritize implementation of the Road to Mental Readiness (R2MR) training program in 2024 which provides resilience and mental health training for first responders.

7. Proactively identify and respond to emerging mental health and substance use issues.

- Toronto Public Health launched two new <u>Population Health Status Indicators</u> <u>dashboards</u>: Mental Health & Substance Use and Adult Health Behaviours & Risk Factors in 2024. The refreshed dashboards provide data summaries on 33 indicators including tobacco smoking, second-hand exposure to smoke, cannabis use, alcohol use, access to health care providers, and 11 indicators on mental health and well-being.
- Toronto Shelter and Support Services conducted the Street Needs Assessment in October 2024 which collects data on the prevalence of health, mental health and substance use challenges among people experiencing homelessness. The final report will be published in the second quarter of 2025.

Cannabis, Vaping and Smoking for Youth

In <u>July 2024</u>, City Council requested the Medical Officer of Health to report back to the Board of Health as part of the Our Health, Our City Strategy annual report with a review of existing and planned actions to reduce harms associated with cannabis, vaping, and smoking for youth, through outreach and education initiatives for and with schools.

Preventing and reducing the harms associated with substance use across the lifespan is one of the seven priority goals included in Our Health, Our City. This includes taking actions to reduce the harms associated with cannabis, vaping and smoking for youth. As mandated by the Province, TPH has responsibility for enforcing the *Smoke-Free Ontario Act, 2017* and for the provision of health promotion and vaping prevention and education services to reduce the harms associated with youth vaping. In addition to these specific actions, TPH also provides input on legislation and monitors epidemiological trends in youth and adult substance use.

According to the Ontario Student Drug Use and Health Survey (OSDUHS) 2023, 13.4 percent of Ontario youth 12-18 reported vaping in the past-year and 25 percent reported vaping in their lifetime.¹¹ Although the long-term health impacts associated with vaping are still emerging, vaping has been shown to increase the likelihood that youth will go on to take up tobacco smoking as young adults. Currently, 3.2 percent of Ontario youth ages 12-18 used tobacco cigarettes in the past year, and 9.3 percent have used them in their lifetime.¹² Overall tobacco smoking rates among Toronto adults 18 and older have declined in recent years, 9.6 percent of Toronto adults reported being a current smoker in 2020, a decrease from 16.9 percent in 2015. Despite these lower smoking rates, tobacco smoking continues to be the leading preventable cause of premature death in Ontario and is a significant burden on the health care system.

Toronto Public Health Inspections & Actions

The TPH Tobacco, Vapour and Cannabis Enforcement Team is responsible for enforcing the *Smoke-Free Ontario Act, 2017* (SFOA, 2017), which regulates the sale, supply, display and promotion of tobacco and vapour products at retail. The SFOA, 2017 also prohibits the smoking of tobacco, vaping any substance and the smoking of cannabis in enclosed workplaces and enclosed public places, as well as some other designated places in Ontario, to protect workers and the public from second-hand smoke and vapour. Toronto Public Health Inspectors also enforce the City of Toronto Smoking Bylaw (Municipal Code Chapter 709), which prohibits smoking within 9 metres of entrances and exits to buildings where the public or employees have access.

As of September 30, 2024:

- There were over 1748 tobacco retailers and 1521 vapour product retailers in Toronto, with most selling both products. On average, five new vapour product retailers are added every week.
- TPH inspectors conduct annual mandated inspections of retailers, including the use of youth test shoppers, and additional inspections in response to complaints.
- TPH continues to work closely with Municipal Licensing and Standards (MLS), to focus inspection resources on new retailers.

Toronto Public Health Efforts to Address Vaping with Schools and School Communities

Toronto Public Health's School Liaison Public Health Nurses work specifically with school staff, administration, parents/guardians, adult allies and youth and provide curriculum support, student engagement and leadership initiatives, and resources based on a comprehensive school health approach to build youth resiliency, healthy decision making and mental health and wellness. Specific actions to address vaping as part of comprehensive school health included:

- Creation of an online <u>Vaping Hub</u> on the TPH School Health webpage that provides universal, accessible, multilingual (i.e., French), and culturally responsive resources and programming on smoking/vaping prevention and cessation.
- Provided training on vaping prevention and cessation to 50 grade 7/8 educators at the Toronto Catholic District School Board.
- Collaboration with other Ontario Public Health Units and community organizations to develop strategies and resources to address youth health and substance use.

Toronto Public Health Input on Federal Legislation

Over the past 12 months, TPH has made over 14 recommendations in response to Health Canada's requests for comment on proposed amendments to the Federal Tobacco and Vaping Products Act (TVPA), such as:

- Increase taxes on tobacco and vaping manufacturers to match the social and economic burden of illness.
- Prohibit flavours and fast-track labeling and plain-packaging requirements for vapour products.
- Restrict vaping and smoking imagery in online gaming, streaming tv shows, film and social media platforms.
- Regulate new/emerging nicotine pouches in the same ways as a tobacco/vaping product.

In addition, Toronto Public Health has expressed support for proposed TVPA amendments, including:

• Federal penalties for retailers who sell vaping products to minors.

- The implementation of an annual cost recovery charge for tobacco manufacturers, which would fund federal tobacco enforcement actions.
- Restrictions on nicotine pouches, moved from convenience store shelves to behind pharmacy counters.

Over the next twelve months TPH will continue to fulfill its mandated inspection and enforcement requirements and to provide schools and school communities with up-todate vaping education, prevention and cessation resources, such as the <u>TPH Vaping</u> <u>Hub</u>.

Indigenous Health and Wellness

Indigenous Wellness Table

In April 2023, the Board of Health recommended that the Medical of Officer of Health work with Indigenous service providers to co-develop an Indigenous mental health, substance use, and addictions strategy. In October 2023, Toronto Public Health worked with Toronto Aboriginal Support Services Council (TASSC) to co-host a two-day Indigenous wellness roundtable with Indigenous service providers in the city. A key recommendation that emerged was the need for Indigenous people to lead, develop, and deliver their own health and social services to support the right to Indigenous self-determination, and a request for Toronto Public Health to establish an Indigenous Wellness Committee that includes all Indigenous-led service providers in the city, with the goal of co-developing an action plan to advance Indigenous wellness. The Indigenous Wellness Committee was established in early 2024 and to date has held six meetings which are guided by an Indigenous facilitator and grounded in Indigenous frameworks and worldviews. The committee continues to meet to co-develop the Indigenous Wellness Action Plan in partnership with TASSC and Indigenous service providers in the city.

Indigenous Harm Reduction Circle

Since 2022, Toronto Public Health has been working closely with Indigenous service providers to establish a collaborative approach to advancing Indigenous harm reduction. In partnership with Ontario Aboriginal HIV/AIDS Strategy (OAHAS), an Indigenous Harm Reduction Circle was officially formed in February 2023. The Circle's mandate includes co-developing culturally appropriate solutions for Indigenous harm reduction and identifying strategies to address the health and wellness needs of Indigenous people who use substances. Over the course of 2024, the Circle has successfully co-developed an Indigenous Harm Reduction Circle Orientation Package for Peer Workers and conducted a comprehensive scan and analysis of the current Indigenous harm reduction landscape in the Urban Indigenous Community. As of this report, the participating organizations in the Indigenous Harm Reduction Circle include the Native Canadian Centre of Toronto, Niiwin Wendaanimak (Four Winds at Parkdale Queen West Community Health Centre), TASSC, OAHAS, 2-Spirited People of the 1st Nations, and Les Femmes Michif Otipemisiwak.

Next Steps

Our Health, Our City represents a collective response to substance use and mental health issues in the city. Over the last year, significant progress has been made on a number of recommendations, while the provincial landscape continues to shift.

The Our Health, Our City Implementation Panel (approved by the Board of Health on September 09, 2024, and met for the first time on October 31, 2024) will provide ongoing input and guidance on further implementation efforts, ensuring that the strategy remains dynamic and responsive to the city's complex needs. This will include reviewing the current status of recommendations outlined in the strategy and exploring future priority areas of action, such as workplace well-being, especially for staff who support clients in the health and social service systems. Frontline staff work tirelessly to provide life-saving support to clients. The mental health and drug toxicity crises have highlighted their remarkable dedication, skills, and resilience. It is important to support the mental-health and well-being of front-line staff and ensure they have the supports and resources needed to thrive personally and professionally. It is recommended that the Board of Health urge the Our Health, Our City Implementation Panel to provide advice on the next set of priority actions, and to especially consider recommendations related to alcohol and tobacco.

Work remains ongoing on all recommendations, and it is recommended that the Board of Health continue to commit to actions that are evidence based and needed to promote community safety and wellbeing, and are aligned with the Our Health, Our City Strategy.

Toronto Public Health Strategic Impact

This report provides a progress update on the first-year priorities and recommended actions included in the Our Health, Our City Strategy which aims to promote mental health and reduce substance use harms in Toronto. This report advances the following priorities of the <u>Toronto Public Health Strategic Plan 2024-2028</u>:

1. Strengthen health protection, disease prevention and emergency preparedness, including meeting the objective of effectively communicating with the public about how they can protect their health.

2. Promote health and well-being across the lifespan, including meeting the objective to reduce the burden of chronic and infectious diseases across the lifespan.

3. Promote the conditions to support positive mental health and reduce the harms of substance use, including meeting the objectives to deliver public health interventions that respond to the drug toxicity epidemic, reduce harms associated with the use of alcohol, cannabis, tobacco and vapour products, strengthen public health services that are trauma-informed and reduce stigma, and deliver public health interventions that promote mental health.

4. Advocate to advance health equity, including meeting the objective to assess and report on health inequities and population health needs, collaborate with partners

across multiple sectors to address local health needs, and share evidence, advocate, and collaborate to influence actions that impact population health.

CONTACT

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SIGNATURE

Dr. Eileen de Villa Medical Officer of Health

ATTACHMENTS

Attachment 1: Our Health, Our City Status Overview 2024

* Rates have been age standardized. Age-standardization is a technique based on weighted averaging that removes the effects of the distribution of age when comparing over time and geography.

1. Toronto Overdose Information System. Number of deaths from opioid toxicity'. <u>https://public.tableau.com/app/profile/tphseu/viz/TOISDashboard_Final/ParamedicResponse</u>

2. Toronto Overdose Information System. Paramedic Data. <u>https://public.tableau.com/app/profile/tphseu/viz/TOISDashboard_Final/ParamedicResponse</u>

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6 Health Canada (2023). Tobacco labelling, Tobacco and preventable death. Retrieved from:

https://www.canada.ca/en/health-canada/services/healthconcerns/tobacco/legislation/tobacco-product-labelling/smoking-mortality.html

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10 Toronto Community Crisis Service: One Year Outcome Evaluation Report: <u>https://www.toronto.ca/wp-content/uploads/2023/10/97b8-Toronto-Community-Crisis-Service-1-Year-Outcome-Evaluation-Report.pdf</u>

11. Boak, A., & Hamilton, H. A. (2024). The mental health and well-being of Ontario students, 1991–2023: Findings from the Ontario Student Drug Use and Health Survey (OSDUHS). Toronto, ON: Centre for Addiction and Mental Health. <u>https://www.camh.ca/-/media/research-files/osduhs-mental-health-and-wellbeing-report_2023.pdf</u>

12. Boak, A., & Hamilton, H. A. (2024). The mental health and well-being of Ontario students, 1991–2023: Findings from the Ontario Student Drug Use and Health Survey (OSDUHS). Toronto, ON: Centre for Addiction and Mental Health. https://www.camh.ca/-/media/research-files/osduhs-mental-health-and-wellbeing-report_2023.pdf