

The
TORONTO
Drug Strategy
STATUS REPORT
2010



The Toronto Drug Strategy Status Report 2010

This report was prepared by the Toronto Drug Strategy Secretariat, and approved by the Toronto Drug Strategy Implementation Panel.
City of Toronto, Ontario, May 2010

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L e t t e r f r o m t h e C h a i r

I am pleased to present the *Toronto Drug Strategy Status Report 2010* on behalf of the Toronto Drug Strategy Implementation Panel. This report is part of our accountability to Torontonians on action taken to implement the Council-approved recommendations in the Toronto Drug Strategy.

An important achievement of the Toronto Drug Strategy has been the bringing together of diverse groups and individuals from across the spectrum of prevention, harm reduction, treatment and enforcement, many of whom have never sat with each other at the same table, to find more effective ways of addressing substance use issues in Toronto.

I would like to thank the members of the Toronto Drug Strategy Implementation Panel and the TDS working groups and ad hoc committees for your commitment of time, expertise and creative thinking. Thanks also to the many researchers, policy experts, service providers, and community members who have so generously given of their time and expertise to help implement the Toronto Drug Strategy.

I would like to take this opportunity to acknowledge the contributions of Councillor Kyle Rae and Liz Janzen, Director of Healthy Living in Toronto Public Health. Kyle is leaving municipal politics after many years on Toronto City Council, and Liz recently retired after a long career in Toronto Public Health. The leadership of both Kyle and Liz was instrumental to the success in developing and implementing the Toronto Drug Strategy.

I look forward to continuing our collective efforts to improve the lives of individuals, families, neighbourhoods and communities in Toronto impacted by alcohol and other drug issues.

Sincerely,

A handwritten signature in black ink that reads "Gord Perks". The signature is written in a cursive, flowing style with a long horizontal stroke extending to the right.

Councillor Gord Perks
Chair, Toronto Drug Strategy Implementation Panel

Toronto Drug Strategy Implementation Panel

Gord Perks, (Chair), *Toronto City Council*

Kyle Rae, *Toronto City Council*

Joyce Bernstein, *Research Group on Drug Use*

Chris Brillinger, *Social Development, Finance & Administration, City of Toronto*

Diane Buhler, *Parent Action on Drugs*

Frank Crichlow and Jenny Autzen, *Toronto Drug Users Union*

David Collins, *Toronto Harm Reduction Task Force*

Lisa Campbell Salazar and Kai'enne Tyrmerik, *TRIP!*

Gail Czukar, *Centre for Addiction and Mental Health*

Rose D'Alimonte, *Toronto Catholic District School Board*

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For a membership list of all Toronto Drug Strategy working groups and ad hoc committees, please see Appendix A.

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I n t r o d u c t i o n

City Council approved the Toronto Drug Strategy (TDS) in December 2005. The TDS provides a comprehensive approach to alcohol and other drug¹ issues based on the integrated components of prevention, harm reduction, treatment and enforcement.

This report provides an update on the status of implementing the TDS, with a primary focus on progress achieved over the last two years since the last status report was issued in May 2008. It is important to note that the drug strategy does not have a dedicated project budget; efforts have been supported by leveraging existing resources and securing external funding. Results achieved thus far are thanks to the collective effort and commitment of many groups, organizations and individuals across Toronto, often provided on an in-kind or volunteer basis.

S u m m a r y o f h i g h l i g h t s

Details on the progress of implementing TDS recommendations over the last two years are described throughout this report; some of the highlights include the following:

- Provided leadership on alcohol and other drug issues in Toronto.
- Advocated against federal legislation on mandatory minimum sentencing for drug crimes.
- Advocated on key actions for inclusion in the provincial Mental Health and Addictions Strategy.
- Supported expanded delivery of the Centre for Addiction and Mental Health's (CAMH) *Strengthening Families for the Future* program in Toronto's 13 priority neighbourhoods.
- Secured funding to adapt and deliver *Strengthening Families for Parents and Youth (12-16)*.
- Secured funding to develop and implement a *Youth Worker Training Initiative*.
- Advocated for more treatment in Toronto, including residential treatment for youth and withdrawal management services.
- Developed a model for a 24-hour service for people experiencing substance use-related crises, and worked with partners to submit a proposal to the Toronto Central Local Health Integration Network, which in June 2010 released a proposal call for a one-year pilot for just such a service.
- Secured funding to implement the *Neighbourhoods Project* in two distinct Toronto neighbourhoods.
- Held risk management workshops for bars and clubs, and promoted the CAMH Safer Bars program.
- Developed and hosted *Build on Your Strengths* prevention workshops for frontline service providers that work with youth.

¹ The term "drugs" refers to the full range of psychoactive substances the TDS is concerned with including, alcohol, illegal drugs, prescription drugs and solvents and inhalants.

-
- Advocated for reinstatement of addiction as a disability under the Ontario Disability Support Program.
 - Co-ordinated roles and responsibilities regarding collection and disposal of discarded sharps and other drug use equipment on public and private property.
 - Initiated a needs assessment on the impact of stigma and discrimination on people who use alcohol and other drugs as the first step in developing an anti-stigma initiative.
 - Expanded delivery of overdose prevention initiatives, and training on providing effective health care to people who use alcohol and other drugs.
 - Co-founded the first Municipal Drug Strategy Co-ordinator's Network in Ontario, and participated in the development of the Canadian Drug Policy Consortium.

Progress on priority recommendations

The Toronto Drug Strategy (TDS) is a long-term, comprehensive plan to address alcohol and other drug issues in Toronto. Of the strategy's 68 recommendations, 17 were designated as priorities for implementation. Some recommendations depend on action to be taken by provincial and federal governments; others by institutional or community stakeholders. This section of the report documents progress implementing the priority recommendations with a main focus on action taken since the last status report, which was issued in May 2008. The TDS Status Report 2008 and all other TDS reports are available at www.toronto.ca/health/drugstrategy.

1. Leadership & Co-ordination

Leadership and co-ordination is critical for improving our collective response to alcohol and other drug issues. Through the Toronto Drug Strategy, the City of Toronto has taken this leadership role recognizing that success depends on effective collaboration and co-operation among all stakeholders.

Providing leadership

[Recommendation 1]

The Toronto Drug Strategy Implementation Panel is an intersectoral group that provides leadership and oversight to the implementation of the Toronto Drug Strategy. The Panel is chaired by Councillor Gord Perks, as the Mayor's designate, and has a diverse membership with expertise in the areas of prevention, harm reduction, treatment and enforcement as well as youth and people who are former and/or active users of alcohol and other drugs.

The Panel set up working groups to implement specific priority recommendations. Details on the status and progress of each group are summarized throughout this report. The working groups include the Prevention Working Group, Crisis Model Working Group, Neighbourhood Strategies Working Group, and the Supervised Consumption Site Study Reference Group.

A key role for the Panel is to champion TDS priorities that require federal and provincial action, and to advocate on relevant drug policy issues that impact people in Toronto. Over the last two years, an important issue for the Panel has been advocating against new federal legislation to impose mandatory minimum sentencing for drug crimes (Bill C-15).² Key among the concerns related to this legislation is the lack of evidence that mandatory minimum sentences reduce crime, and the disproportionate effect this legislation will likely have on youth, and other vulnerable groups. Other jurisdictions, in particular the United States, that have had mandatory minimum sentences for many years are now repealing these laws and replacing them with treatment and other initiatives.

Councillor Perks presented a formal submission to the House of Commons Standing Committee on Justice and Human Rights on behalf of the TDS Implementation Panel. This submission was also forwarded to the Senate of Canada Standing Committee on Legal and Constitutional Affairs during their review of the bill. Both submissions are available on the Toronto Drug Strategy website at www.toronto.ca/health/drugstrategy.

When parliament was prorogued in January 2010, Bill C-15 was dissolved as a piece of legislation. However, the federal government re-introduced this legislation at the Senate in May 2010 as Bill S-10. The TDS Implementation Panel will continue its advocacy efforts against this proposed legislation.

The TDS Implementation Panel also advocated against privatization of the Liquor Control Board of Ontario (LCBO). Following from the recent financial crisis, the provincial government commissioned CIBC World Markets and Goldman Sachs to review the option of selling some of its Crown Corporations, including the LCBO. Research clearly shows that public control over alcohol sales and distribution is one of the most effective and important tools available to curb deaths, injuries, illness and social costs that result from alcohol misuse.

Additional actions taken by the TDS Implementation Panel as they relate to specific Toronto Drug Strategy recommendations are discussed throughout this report.

Dedicating support for implementation

[Recommendation 2]

The TDS Secretariat, situated in Toronto Public Health, consists of a manager, policy analyst and support assistant. This team provides project management, policy, research and administrative support to all TDS committees, and leads implementation of non-working group related recommendations. A key role of the Secretariat is to foster relationships and collaboration with the broad range of community, institutional and government stakeholders needed to advance the TDS.

“The [Panel] is concerned that Bill C-15 will not reduce crime, that it will be very expensive for the Canadian taxpayer, and will create significant health, social and economic harms...we are particularly concerned about the disproportionate impact [Bill C-15] will have on youth, women, aboriginal, and ethno-cultural communities.”

² The Toronto Police Service was not in support of this TDS Implementation Panel submission.

The Secretariat continues to build and strengthen networks at local, provincial, national and international levels to reinforce efforts to promote evidence-based and comprehensive approaches to alcohol and other drug issues. This action includes co-founding the Municipal Drug Strategy Co-ordinators Network of Ontario, believed to be the first of its kind in Canada. More information on this network is provided later in this report. TDS staff were also involved in the development of the Canadian Drug Policy Consortium, a civil society organization committed to facilitating changes in Canadian and international drug policy and legislation.

The Secretariat has fostered an active learning environment by offering practicum placements for graduate students from the Masters of Social Work, Masters of Health Promotion, and Masters of Epidemiology programs at the University of Toronto and Ryerson University. These interns have made significant contributions to the implementation of TDS recommendations.

Advocating for a provincial drug strategy

[Recommendation 5]

The TDS Implementation Panel has advocated strongly for a comprehensive drug strategy for Ontario that includes prevention, harm reduction, treatment and enforcement. Advocacy efforts have included meetings with the Minister of Health and Long-Term Care, and representatives from the Ministry of Health Promotion.

In 2008, the Minister of Health and Long-Term Care announced that the Province would develop a 10-year Mental Health and Addictions Strategy for Ontario that would be led by a diverse Minister's Advisory Panel. The TDS Implementation Panel made a submission to the Minister's Advisory Panel on Mental Health and Addictions that included feedback on their *Every Door is the Right Door* discussion paper, and highlighting key TDS actions the Panel recommend be incorporated into the provincial strategy. This submission is available on the Toronto Drug Strategy website at www.toronto.ca/health/drugstrategy.

“The [Panel] welcomes provincial leadership on these important health issues for our community, and looks forward to a progressive and ambitious strategy that will significantly improve our collective response to mental health and addictions in Ontario.”

In addition, TDS Secretariat staff participated in one of the theme groups (Healthy Communities) set up to provide input into key aspects of the provincial strategy. The final report of the Mental Health and Addictions Strategy for Ontario is expected to be released in fall 2010.

TDS and other Toronto Public Health staff also participated in the Health, Education and Enforcement (HEP) Planning and Advisory Committee, chaired by the Centre for Addiction and Mental Health, with a mandate to work with a province-wide network to develop a provincial drug strategy. Given the direction taken by the provincial government to focus more broadly on a strategy for mental health and addictions, the HEP initiative dissolved.

2. Children & Families

A key priority for the Toronto Drug Strategy is a focus on early intervention and prevention with children and their families. Fostering strong, resilient children is the best way to prevent alcohol and other drug issues later in life. Recent efforts to expand comprehensive prevention programming for children and families are described below.

Supporting delivery of Strengthening Families

[Recommendation 7]

Strengthening Families for the Future (SFF) is a prevention program for families with children between the ages of 7 and 11 who may be at-risk for substance use issues, depression, violence, delinquency and school failure. SFF has been cited by Health Canada and others as one of the best interventions of its kind. The Centre for Addiction & Mental Health (CAMH) secured funding to expand delivery of this program in Toronto, and elsewhere in Ontario.

The TDS Secretariat supported CAMH in finding community partnerships to deliver SFF with a focus on the City of Toronto's thirteen priority neighbourhoods. In addition, Toronto Public Health staff are facilitating some of the SFF sessions. Each session accommodates about eight families. SFF programs were delivered in the following Toronto communities:

- Lawrence Heights in 2007 and 2008
- Eglinton East/Kennedy Park in 2008
- Kingston/Galloway in 2008 and 2009
- Black Creek community in 2009
- Dufferin/Bloor (with Portuguese-speaking families) in 2008 and 2009
- Jane/Finch (with Spanish-speaking families) in 2009
- CAMH Russell Street site in 2009
- Parkdale in 2010

“My father says my son is not the same child anymore! He is much more co-operative at home. I think I am doing a better job too. I don't feel as stressed and we are not spending all of our time yelling at one another.”

~Parent

CAMH partnered with the Jean Tweed Centre to deliver four SFF programs to their clients involved with the child welfare system between 2007 and 2010, as well as to clients of the Children's Aid Society of Toronto in both 2008 and 2009. CAMH and Jean Tweed also partnered with Native Child & Family Services to run a program for this agency's clients in 2007, 2008, and 2010.

3. Youth

The Toronto Drug Strategy recommends several actions related to prevention, harm reduction, treatment and enforcement initiatives for youth. A summary of recent progress on youth-specific priorities is described below.

Prevention Working Group

[Recommendations 7 and 10]

The Prevention Working Group is a subcommittee of the TDS Implementation Panel, and has been meeting regularly since December 2006 to develop strategies to expand comprehensive prevention initiatives for children, families and youth. The group is diverse and includes representatives from the areas of prevention, harm reduction, treatment and enforcement, as well as the community at large (see Appendix A for membership). The main focus of the group's work plan is to promote resiliency in children and youth. Highlights of recent progress achieved by the Prevention Working Group are described in this section of the report.

Youth Worker Training Initiative

[Recommendation 10]

The Prevention Working Group, with leadership from the Canadian Training Institute, developed a collaborative proposal for a Youth Worker Training Initiative (YWTI) that was funded by Health Canada's Drug Strategy Community Initiatives Fund. This two-year project involves the development and implementation of evidence-based training on drug prevention for frontline staff that work with youth between the ages of 13 and 24. The project has a diverse advisory committee, including representatives from the Prevention Working Group and the TDS Secretariat.

The training is focused on giving workers the necessary knowledge and skills to engage youth in conversations about illicit drugs. The training content includes the following:

- Examining the role of illicit drugs in youth culture;
- Learning about the effects, signs, symptoms and consequences of drug use;
- Learning strategies to enhance resiliency and protective factors in youth;
- Understanding the "Stages of Change" as it applies to adolescence;
- The continuum of drug use, and understanding dependence;
- How and where to make referrals to services in the community with expertise in drug issues; and
- Resources and tools for youth workers.



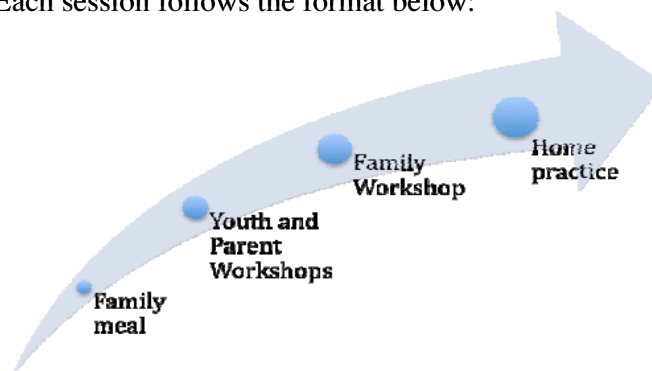
The training is free and is offered as one full or two half-day sessions tailored to meet the needs of each group. Sessions are interactive and allow opportunities for participants to practice the skills and apply the knowledge gained throughout the workshop.

Full implementation of the training began in February 2010 with a diverse range of organizations across Toronto. Trainings have been scheduled for over 400 youth workers by the end of June 2010. The goal of the program is to deliver training to 1000 youth workers by the end of March 2011. An evaluation plan has been developed to ensure the efficacy of the program is assessed and documented. It is anticipated that this project will be of interest to other jurisdictions.

Strengthening Families for Parents and Youth [Recommendations 7 and 10]

The Prevention Working Group, with leadership from Parent Action on Drugs, developed a collaborative proposal for *Strengthening Families for Parents and Youth (aged 12-16)* that was funded by Health Canada's Drug Strategy Community Initiatives Fund. The goal of this project is to adapt the existing 14-week program to eight weeks and to a Canadian context as the program was developed in the United States. The project has a diverse advisory committee, including representatives from the Prevention Working Group and the TDS Secretariat.

The program adaptation from 14 to eight weeks has involved youth, parents and professionals working with youth. Each session follows the format below:



Strengthening Families for Parents and Youth 12-16 aims to increase family cooperation, communication and organization. Weekly sessions start with a family meal followed by one-hour separate sessions for parents and youth, culminating in a one-hour joint session that brings the family back together to practice what they have learned. Sessions are delivered by trained facilitators and involve an active curriculum of skills-building designed to increase protective factors, such as parent-child communication and empathy, consistent parental monitoring and positive discipline, and strategies to improve family organization and cohesion. Sessions for youth are designed to be fun, active and helpful in relation to both parents and peers.

The program trials for the evaluation of this project have begun. A total of eight sessions will be held in a variety of settings including: a community mental health agency, an adolescent medical facility, a school, and two different community agencies. Approximately 64 families are expected to participate before project completion in March 2011. It is anticipated that this project will be of interest to other jurisdictions as *Strengthening Families* programs are delivered around the world. If effective, this shorter version of the program may be more attractive to families.

Girl Talk**[Recommendations 7 and 10]**

TDS Secretariat staff participate on an advisory committee for the *Girl Talk Project*, which is a partnership between the Jean Tweed Centre, Parent Action on Drugs, and Breakaway. This project was funded by the Health Canada Drug Strategy Community Initiatives Fund, and was highlighted as supporting implementation of the Toronto Drug Strategy's prevention recommendations.

Girl Talk is a three-year project to help prevent or delay substance use and associated health and social impacts among women 13 to 21 years who attend alternative schools in Young Parent Resource Centres in Toronto. The project involves training a group of young parents as facilitators to deliver training on drug prevention to their peers in these classroom settings. A comprehensive needs assessment and literature review was also completed to inform the project, which is in its first year of implementation.

Advocating for residential treatment for youth**[Recommendation 17]**

The TDS Implementation Panel continues to advocate for residential treatment for youth in Toronto. This longstanding issue was highlighted in a meeting with the Minister of Health and Long-Term Care, and in the Panel's submission to the Minister's Advisory Panel regarding actions to include in the provincial Mental Health and Addictions Strategy.

On a positive note, the Centre for Addiction and Mental Health will open 12 in-patient beds for youth with concurrent disorders (substance use and mental health issues together) as part of the CAMH redevelopment project. While in-patient services for youth with complex concurrent disorders is needed, this unit does not replace the need for residential treatment services for youth in Toronto. In that regard, Toronto Public Health staff are working with a coalition of community agencies to obtain funding for a project to create residential treatment beds for youth that would include a range of onsite services delivered by partner agencies.

4. People who use substances

In addition to actions targeted specifically to children, families and youth, the Toronto Drug Strategy recommends a broad range of prevention, harm reduction, treatment and enforcement actions more generally. This section documents progress made in this area over the last two years.

Developing a 24-hour crisis service

[Recommendation 27]

The Crisis Model Working Group has fulfilled its mandate to develop a model for a 24-hour service for people experiencing substance use-related crises (see Appendix A for membership). The development of this model included a comprehensive literature review, an inventory of existing crisis-related services in Toronto, 140 surveys of people who use alcohol and other drugs, and 334 surveys of service providers from 11 sectors including police, ambulance, drop-in centres and withdrawal management services (detox).

Consultations have been done with people who would potentially use such a service to get their input on the proposed service model. A diverse range of service providers will also be consulted. TDS Secretariat staff have presented the draft model to networks and coalitions in Toronto, as well as to the national *Issues of Substance 2009* and Ontario Public Health Association conferences.

“We need a place police can take these people and know that they will be cared for.”

~ Police officer

On a positive note, in early June 2010, the Toronto Central Local Health Integration Network released a Call for Proposals for a one-year pilot for just such a service in Toronto. TDS staff engaged community partners in supporting the Gerstein Crisis Centre to submit a proposal for this pilot project to provide crisis support via telephone, mobile response and short-term residential beds.

Advocating for more treatment

[Recommendations 30 and 36]

As noted earlier in this report, the TDS Implementation Panel met with the Minister of Health and Long-Term Care to highlight a number of key issues they would like to see integrated into the new provincial Mental Health and Addictions Strategy. Key among these actions is the need for a 24-hour service for people experiencing crises related to substance use, expanding treatment options and dedicated case management supports for people with substance use issues, and addressing stigma and discrimination, which often creates barriers to accessing services.

The TDS Implementation Panel also partnered with the Toronto Harm Reduction Task Force and the Centre for Addiction and Mental Health to host *Prescription for Addiction: Addressing stigma, myths and methadone*. This forum was in high demand with registration filling up quickly. Over 120 health and social service providers attended this forum that included a screening of the documentary *Prescription for Addiction* about addiction to prescription opioids and the role of methadone treatment.

At this forum, a pharmacist gave an overview of methadone treatment, and a community panel shared their experiences with methadone treatment and the role it played in stabilizing their lives. The panel also highlighted challenges including experiences of stigma and discrimination. The workshop helped participants develop a more comprehensive understanding of the role of methadone in the continuum of treatment options needed to support people with opioid addictions. Participants rated the session very highly in the evaluations.

“I work with people who are homeless and this was extremely helpful. I think doctors and dentists need to be better educated about addiction.”

~ Forum participant

TDS Secretariat staff also participate in the Toronto Withdrawal Management Services Advisory Committee, which is a group of service providers and community representatives that provide advice and input into issues associated with the withdrawal management system. This group recently developed a project to provide critical case management supports to people who are frequent users of the withdrawal management (detox) system. This Toronto Community Addiction Team (TCAT) is led by St. Stephen’s Community House and St. Michael’s Hospital, and is funded by the Toronto-Central LHIN on a pilot basis.

Developing a drug surveillance system and alert protocol [Recommendation 25]

Surveillance systems collect data from different sources for health authorities to ensure they have complete, up-to-date information to guide decision-making about possible threats to health. The TDS Secretariat is continuing to explore options for a viable surveillance system in Toronto to collect data about drug-related health issues, such as contamination of drugs. This information could provide a basis for systemic alerts to be issued to warn people about particular issues.

Community agencies and/or Toronto Public Health sometimes issue alerts to inform people who use drugs and agency staff of potential hazards. Emerging issues are often identified by the Research Group on Drug Use, which is chaired by Toronto Public Health, with diverse community and institutional representation. Toronto Public Health staff, including from the TDS Secretariat, participate in the Canadian Community Epidemiology Network on Drug Use (CCENDU) to learn how other cities monitor substance use issues and manage data.

In 2010, several people became severely ill from cocaine contaminated with levamisole, a veterinary dewormer. Toronto Public Health issued alerts to medical services and community agencies about this issue including symptoms to watch for, and stressing the need for immediate medical treatment. Several groups, including TRIP! and the Canadian Harm Reduction Network, developed an outreach strategy and website to alert people to the dangers of levamisole in cocaine (www.levamicoke.info). Toronto Public Health is working with community partners to take further action on this issue. Links are being made with health professionals locally and across Canada so that information may be shared about this emerging threat.

Expanding strategies for people who smoke crack cocaine [Recommendation 26]

In May 2006, *The Works* (needle exchange program) in Toronto Public Health began delivering the Safer Crack Use Program. The program is offered through a fixed location, mobile service, street outreach, and to increase the reach of this program, through contractual arrangements with 24 community-based agencies across Toronto. The program has four key components: the distribution of new equipment to reduce sharing and the potential for crack smoking-related injuries and disease transmission; education and counselling about reducing risk behaviours associated with smoking crack; referrals to health and social services; and, capacity building with service providers to identify and respond to crack smoking-related issues faced by their clients and within their neighbourhoods.

In an effort to increase awareness about the Safer Crack Use Program, Toronto Public Health, in conjunction with the Toronto Police Service, developed and provided in-service training to front line officers in Divisions with high rates of crack smoking. In order to ensure that the program is meeting its goals, an evaluation of the Safer Crack Use Program is in the final stages of preparation. Program-related recommendations arising from the evaluation have begun to be implemented.

5. Neighbourhoods & Communities

The Toronto Drug Strategy is concerned with the impact of alcohol and other drugs on neighbourhoods and communities across the city. Several TDS priority recommendations focus on addressing negative impacts in neighbourhoods; recent progress is discussed below.

Neighbourhoods Project [Recommendation 45]

The Neighbourhood Strategies Working Group has fulfilled its mandate to develop local strategies to reduce alcohol and other drug-related disorder at the neighbourhood level (see Appendix A for membership). The group wanted to ensure that initiatives were driven by the people who live and work in a neighbourhood. They recommended a project which dedicates staff to work with local stakeholders on issues related to community health, well-being and safety specific to their communities. The group identified two neighbourhoods for the project affected differently by drug-related crime and disorder, both of which were keen to participate. One neighbourhood (Bloor-Lansdowne) has several local service agencies, and is located in the inner city of Toronto. The other neighbourhood (Jane-Falstaff) is relatively underserved, and is located in the mid-outer city.

In 2009, the John Howard Society of Toronto led the development of a collaborative proposal for this project, “Neighbourhoods Step Up”, and obtained three years of funding from the Ontario Trillium Foundation. A project coordinator works with an advisory committee in each neighbourhood, made up of diverse local stakeholders to implement meaningful action plans. The Jane-Falstaff area is particularly concerned about youth, with gun violence and employment being of particular concern. The Bloor-Lansdowne area has been concerned about street-level drug dealing and sex trade, however, a key concern is also youth engagement. Both groups want to work on bringing diverse local groups together to build stronger, more cohesive neighbourhoods. The John Howard Society of

Toronto, with support from the TDS Secretariat, have also identified researchers interested in evaluating this project and efforts to secure funding are underway.

Safer bar initiatives

[Recommendation 50]

The TDS Secretariat partnered with the Alcohol and Gaming Commission of Ontario (AGCO), the Toronto Police Service, Toronto Public Health, the City’s Community Safety Secretariat, and CAMH on a number of safer bar initiatives with an initial focus on the Entertainment District. Actions included bringing in Larry Grand from CAMH to deliver several sessions of their “*Risk Management Workshop for Licenced Establishments*.” This workshop provides concrete information on how to develop and enforce bar policies for staff and patrons. The workshops also promote the CAMH Safer Bars program, which is an evidence-based violence prevention initiative geared to licenced establishments.

Participating owners, managers and security staff rated these workshops highly indicating they will use the information presented and would recommend the workshops to other licenced establishments. Over 190 bar owners, managers and staff participated in these workshops between 2008 and 2009. The workshops have also produced a spin-off effect as some Toronto businesses followed up by bringing in Larry Grand to do in-house workshops with their full staff complement.

“This was an excellent experience. I learned a lot. This will allow me to provide a much safer environment for my staff and patrons. I didn’t realize how serious these issues can be.”

~ Workshop participant

In November 2008, CAMH, the TDS Secretariat, the Alcohol and Gaming Commission of Ontario, the Toronto Police Service, Toronto Public Health and the Entertainment District Business Improvement Area partnered together to host *Raising the Bar: A Toronto Summit on Nightlife, Drinking and Violence*. This forum was attended by over 125 people from a wide range of sectors. The focus of the session was current research on alcohol-related violence, as well as violence prevention strategies and solutions for licenced establishments.

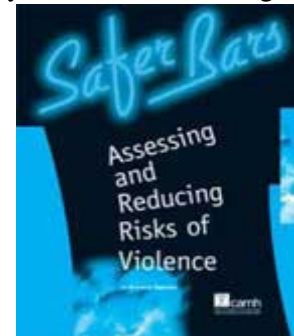
The TDS Secretariat is also a member of the *Ontario Safer Bars Partnership*, which is a province-wide network of individuals, groups and coalitions working on safer bar initiatives in their communities. The network provides an opportunity to learn about effective strategies from a broad variety of jurisdictions, as well as to identify areas for joint advocacy.

Safer Bars as a mandatory program

[Recommendation 50]

The TDS Implementation Panel followed up on the TDS recommendation calling on the City of Toronto to consider including the CAMH Safer Bars program as a mandatory element of municipal licensing. In February 2009, the Panel submitted a motion to City Council asking the Municipal Licensing and Standards Division to report on regulatory and non-regulatory mechanisms (including requiring Safer Bars training) within the City of Toronto’s jurisdiction to reduce alcohol-related violence and improve community safety.

The Municipal Licensing and Standards Division reported back in February 2010 but did not recommend adding the Safer Bars program as a mandatory element of the City's business licensing system. This action was viewed as beyond the scope of the City's mandate and that it should be left to the Alcohol and Gaming Commission of Ontario to implement, if deemed appropriate. The TDS Implementation Panel has advocated with the AGCO to include the Safer Bars program as part of their authorized list of training programs that can be imposed as conditions on licenced establishments as part of their new risk-based licensing system. The AGCO is reviewing this request.



Municipal Licensing and Standards did commit to working with stakeholders to implement strategies such as the Entertainment District BIA's nightlife establishment best practices, and to monitor issues under its jurisdiction and recommend any necessary measures to deal with violence and nuisances in licenced establishments in Toronto.

Toronto Safer Nightlife Committee

[Recommendation 50]

In late 2009, the TDS Safer Bars Group and the Toronto Summit on Nightlife, Violence, and Youthful Drinking planning committee merged into a new group called the Toronto Safer Nightlife Committee, and expanded its membership. This group is chaired by the Manager of the TDS Secretariat and includes municipal, provincial, business and community representatives (see Appendix A for membership). The mandate of the committee is to develop and implement city-wide strategies to prevent alcohol- and other drug-related violence and harms with a view to improving the safety and well being of patrons and staff in licenced establishments, and members of the local community.

A key initial focus of this group is to get input from young people about what they see as safety issues in the nightlife scene in Toronto. On behalf of the committee, TRIP!, a community outreach program that works in the nightlife community, is conducting a survey of youth that explores their drinking practices (including predrinking), as well as their positive and negative experiences related to safety issues in Toronto bars and clubs. The survey feedback will be used to inform initiatives the committee can undertake.

6. Awareness, Education & Training

People want to know what resources are available in the community to help with alcohol and other drug issues. There is also a need for more evidence-based education and training on issues related to substance use. Recent efforts in this regard are described below.

Providing information on where to go for help

[Recommendation 56]

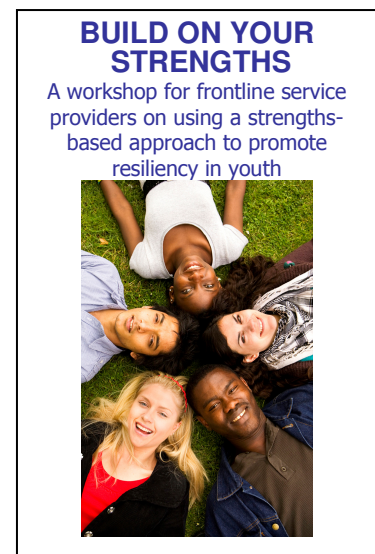
The TDS Secretariat continues to update the resource guide on alcohol and other drug related services available in Toronto. This information is available on the Toronto Drug Strategy website at www.toronto.ca/health/drugstrategy via a “Need Help?” button that links to community resources.

Build on Your Strengths workshops

[Recommendations 10 and 56]

The Prevention Working Group developed an innovative workshop geared to frontline service providers that work with youth on how to use a strengths-based approach to promote resiliency in youth. The workshop was piloted in January 2010, and with some revisions based on participant feedback, was offered again in May 2010. These workshops proved very popular and registration for both sessions filled up quickly. Over 100 service providers have participated in this training to date.

This free half-day workshop included interactive presentations on resiliency models and how they can be used with youth, their peers, families and communities. A diverse range of service providers shared concrete examples of how they use a strengths-based approach in their work. The sessions began with a screening of *The Resiliency Project*, a short video of youth speaking about what helps them be resilient, which was created for the workshop by the Regent Park Focus Youth Media Arts Centre. The video can be viewed on the Toronto Drug Strategy website at www.toronto.ca/health/drugstrategy. The workshop also included facilitated small group discussions for participants to learn and share strategies for applying a strengths-based approach to their work with youth.



The Prevention Working Group is exploring future opportunities for this workshop initiative, with the possibility of tailoring sessions to other audiences such as managers and supervisors. Funding for the workshops may be pursued as to date they have been delivered through in-kind and volunteer contributions of time by workshop organizers, presenters and facilitators, and this is not sustainable over the long-term.

7. Research & Evaluation

The Toronto Drug Strategy emphasized the need for ongoing research to expand the evidence base on how best to address the harms of alcohol and other drugs. Recent progress related to priority recommendations in this area is discussed below.

Research on supervised consumption site(s) for Toronto [Recommendation 65]

Dr. Carol Strike (Centre for Addiction and Mental Health) and Dr. Ahmed Bayoumi (St. Michael's Hospital) are leading a feasibility study to determine if Toronto and Ottawa might benefit from one or more supervised consumption sites. The research team has four advisory panels that help guide the project: Two advisory groups of people who use illicit drugs, one in Toronto and one in Ottawa; a sub-committee of the Toronto Drug Strategy Implementation Panel; and, the Injection Drug Use Joint Action team in Ottawa.

The study has three main questions:

- Would a supervised consumption site reduce drug use? The team is also investigating the impact on overdoses, hepatitis C and HIV.
- What do people think about a supervised consumption site? To estimate the demand for such sites from people who use drugs and other key stakeholders and the impact of concerns on a site's effectiveness, the team is speaking with a variety of stakeholders (e.g., residents, business owners, police, emergency medical services, fire services and health care professionals).
- Where could a supervised consumption site be located and how many should there be? Sophisticated disease modelling approaches are being used to estimate the optimal number and location of supervised consumption sites in Toronto and Ottawa. The team is also examining how much supervised consumption sites would cost to operate, and if they would improve the health of people who use drugs and the broader community.

The research team completed data collection with key stakeholders in January 2010, and are analyzing results from these discussions as well as finalizing the disease modelling. Reports for each city will be released later this year. This study was funded by the Ontario HIV Treatment Network.

As noted above, the Supervised Consumption Site Study Reference Group, which is a subcommittee of the TDS Implementation Panel, is providing input into this research (see Appendix A for a list of members).

Progress in other areas

Advocacy to reinstate addiction as a disability under ODSP [Recommendation 40]

In 1995, the provincial government made significant changes to Ontario's social assistance programs, including no longer allowing people with addictions to receive benefits through the Ontario Disability Support Program. This policy change has been challenged in the courts as discriminatory, an assessment that was upheld by the Ontario Divisional Court in 2009. Following this decision, the ODSP agreed to abide by the court's decision and began adjudicating applications for ODSP by people who have an addiction, however, they also initiated an appeal of this decision.

The TDS Implementation Panel and the City of Toronto have advocated for reinstatement of addiction as a disability under ODSP for many years. Following the Ontario Divisional Court decision, the Panel wrote to the Director of the ODSP registering its disappointment in their decision to appeal the court's ruling, and to urge consultations with people who have addictions as part of their development of the new eligibility criteria for ODSP. This action was spearheaded by a drug user representative on the Panel. In January 2009, Panel representatives were granted a meeting with the ODSP Director and several community advocacy groups to discuss concerns about barriers for people with addictions in accessing ODSP, and possible solutions.

Increasing access to affordable housing [Recommendation 43]

The TDS Implementation Panel has continued to advocate for more affordable housing. Safe, stable and affordable housing plays a key role in helping people with substance use issues stabilize their lives. In July 2009, the Toronto-Central LHIN announced \$1.4 million for 104 housing units in Toronto as part of a provincial program to provide 1000 units of housing for people with substance use issues. The housing will be targeted to people who are homeless or at risk of homelessness, who are repeat users of substance use treatment systems, and have complex substance use problems or a concurrent disorder (substance use and mental health issues together). While this new housing stock is welcome news, it will not meet the current demand for affordable housing.

Reducing drug related litter [Recommendation 49]

The Toronto Discarded Sharps Co-ordinating Committee was struck in 2007 with a mandate to co-ordinate policies, procedures and communications regarding the collection and disposal of discarded sharps and other drug use equipment on public and private property (see Appendix A for membership). This committee, which is chaired by the Manager of the TDS Secretariat, has clarified roles and responsibilities in this regard, and shared this information with Toronto 311 so that enquiries to the City of Toronto can be addressed.

The committee recommended and had approved changes to the City of Toronto's Communicable Disease Policy to include more comprehensive information on safe collection and disposal for City of Toronto employees who do these activities in the course of their work.



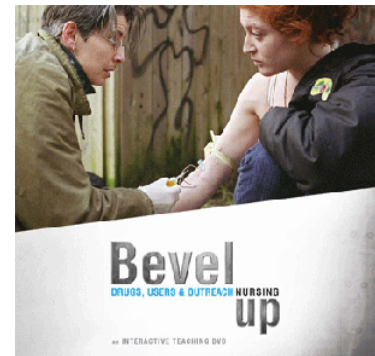
The group also developed a poster geared to children on what to do if they see a needle. This poster is produced in English and French. The poster has been distributed through the committee members to all school boards, Parks, Forestry and Recreation programs, and others. The poster will also be posted on the Toronto Public Health website at www.toronto.ca/health.

Educating the community on substance use issues

[Recommendation 54]

The TDS Secretariat delivered 40 presentations on the drug strategy and substance use issues to about 1,500 people over the last two years. This included presentations to a wide variety of health and social service providers, police, politicians and government representatives, business and residents groups, university students, as well as other municipalities interested in developing local drug strategies for their communities. The TDS also presents regularly at the two-day Harm Reduction Training delivered by the Sexual Health Team in Toronto Public Health. These popular trainings provide information on strategies, services and resources to reduce harm for individuals and the community.

In June 2008, the TDS Secretariat co-hosted a screening and discussion of *Bevel Up: Drugs, Users & Outreach Nursing*, in partnership with the BC Centre for Disease Control, The Works (Toronto Public Health), the Toronto Harm Reduction Task Force, Street Health and a Community Medicine Resident from the University of Toronto. *Bevel Up* provides concrete strategies for providing health care to people who use drugs. The purpose of the event was to create awareness about this new educational resource and discuss strategies for its use across the diversity of sectors that work with people who use drugs. The session was well attended and garnered considerable interest. The organizing group also held a short screening and discussion group with nurses during Grand Rounds at St. Michael's Hospital. For more information about *Bevel Up*, go to www.nfb.ca.



In 2009, the Toronto Harm Reduction Task Force organized 10 sessions based on the *Bevel Up* modules for frontline service providers and peer workers. Topics included working with pregnant/parenting women, street-involved youth, people with concurrent disorders, people with Fetal Alcohol Spectrum Disorder, First Nations communities, sex workers, and grief and trauma. The sessions included presentations from workers in Toronto with expertise in these areas to inform participants on the range of resources available in our community. Over 400 people, including health and social service providers, former and active users of drugs and post-secondary students, attended these workshops reporting the documentary and discussions as invaluable to their work.

Addressing stigma and discrimination

[Recommendation 55]

The Toronto Drug Strategy Implementation Panel is concerned about the stigma and discrimination experienced by people who use alcohol and other drugs, which often creates barriers for people to access the supports and services they need to improve the quality of their lives. As a beginning point, a subcommittee of the Panel is undertaking a needs assessment to hear directly from people who use alcohol and other drugs about their experiences with stigma and discrimination, the impact it has had on their lives, and ideas for strategies to reduce the negative aspects of stigma and discrimination.

“When you hear it [crackhead] over and over...you start to believe this is what you are, this is all you are, and that you're worthless.”

~ Focus group participant

Input is being collected through focus groups held with a diverse range of people at community services across Toronto. The information collected through the focus groups will be used to develop anti-stigma/discrimination initiatives to be implemented as part of the Toronto Drug Strategy.

Expanding overdose prevention efforts

[Recommendation 57]

Toronto Public Health (The Works) continues to partner with the Toronto Harm Reduction Task Force to deliver a peer-based training initiative on overdose prevention. To date, 250 people, including 125 people who are former or active users of drugs, have been trained in overdose prevention and CPR. Front line service providers, peer workers and people who use drugs have found this training to be invaluable, noting that several lives have been saved due to their efforts.

Municipal Drug Strategy Co-ordinator’s Network of Ontario

Staff in the TDS Secretariat co-founded the Municipal Drug Strategy Co-ordinator’s Network of Ontario. This network is believed to be the first of its kind in Canada. To date, 16 municipalities and communities participate in the network from across the province of Ontario. Drug strategy co-ordinators and leaders meet regularly by teleconference to collaborate on advocacy efforts, share best practices and strategies as well as key learnings that can be applied to other communities. The capacity-building that has resulted from this sharing process is a key strength consistently recognized by network members.

A key challenge of the network is the ability to meet face-to-face due to geographical and budget constraints. The network has secured a small grant to develop a proposal for a provincial conference about comprehensive municipal drug strategies. The network will then use the proposal to secure funding and support for this provincial initiative.

M o v i n g f o r w a r d

The Toronto Drug Strategy represents an important collective commitment to a balanced, evidence-based approach to alcohol and other drugs with the goal of reducing harms for individuals, families, neighbourhoods and communities in Toronto. The TDS provides a policy framework for City decision-making on substance use issues and also functions as a catalyst for action in the community. Just as the City of Toronto needs complementary drug policies at the provincial and federal levels, the community sector needs supportive drug policies at the municipal level. The TDS provides this important policy anchor.

Over the last two years, the collective effort of so many individuals, groups and organizations participating in TDS working groups, committees and other initiatives has produced results. Resources have been leveraged to implement new initiatives, and funding has been secured to expand the delivery of substance use programming in Toronto, especially in the area of prevention, which historically has been a neglected area of focus. Dedicated project funding would increase the scope and reach of these efforts, and future funding opportunities will continue to be pursued.

The TDS Implementation Panel has taken leadership on alcohol and other drug issues, including advocacy with provincial and federal governments, and these efforts will continue. The TDS team will also continue to pursue opportunities for partnership and collaboration at the community, municipal, provincial and national level.

As part of the next steps in moving forward, the TDS Implementation Panel will refresh its work plan. A number of the original 16 priority recommendations have been completed or are well on their way to being implemented. As a result, it is time to focus on additional TDS recommendations that require action building on the considerable work that has been done to this point.

Alcohol and other drug issues are complex and solutions require sustained investment and commitment over the long term. The TDS implementation team will continue this work as part of its commitment to improving the quality of life for all Torontonians impacted by substance use.

A p p e n d i x A :

T D S C o m m i t t e e M e m b e r s h i p

T D S c o m m i t t e e m e m b e r s h i p

Toronto Drug Strategy Implementation Panel

- Mayor's Designate
- Toronto City Councillor
- Medical Officer of Health's Designate
- Deputy City Manager, Cluster A
- Deputy Chief of Police
- Executive Vice President, Centre for Addiction and Mental Health
- President, Toronto Harm Reduction Task Force
- Social Worker, Toronto Catholic District School Board
- Executive Director, Breakaway
- Executive Director, Parent Action on Drugs
- Executive Director, John Howard Society of Toronto
- Drug User Representative, Finally Understanding Narcotics
- Representative, TRIP!
- Peer representative, Toronto Harm Reduction Task Force
- Resident Association Representative, 51 Division Community Police Liaison Committee
- Program Director, Inner City Health Program, St. Michael's Hospital
- Chair, Research Group on Drug Use
- Representative, Toronto Drug Users Union
- Chair, Supervised Consumption Site Study Reference Group

Prevention Working Group

- Toronto Public Health
- Griffin Centre
- Parent Action on Drugs
- Hospital for Sick Children
- JACS Jewish Support Services
- Community member
- Youthlink, Youth Skills Zone
- Toronto Catholic District School Board
- YMCA Youth Substance Abuse Program
- Finally Understanding Narcotics
- Aboriginal Legal Services
- LOFT Community Services
- Centre for Addiction and Mental Health
- Parks, Forestry and Recreation, City of Toronto
- Toronto Police Service
- Canadian Training Institute

Crisis Model Working Group

- Breakaway
- Central Toronto Community Health Centre/Safer Crack Use Coalition
- Dixon Hall
- Emergency Medical Services, City of Toronto
- Toronto Police Service
- Interested Individuals (2)
- Fred Victor Centre
- Centre for Addiction and Mental Health
- 416 Drop-in
- Ontario Works Branch, Province of Ontario
- Aboriginal Legal Services
- Syme-Woolner Neighbourhood and Family Centre
- Centre for Addiction and Mental Health, Empowerment Council
- Shelter, Support and Housing Division, Hostel Services, City of Toronto
- University Health Network
- Toronto Public Health
- Toronto East General Hospital, Withdrawal Management
- Jean Tweed Centre
- Shelter, Support and Housing Administration, Streets to Homes, City of Toronto
- Parkdale Activity and Recreation Centre
- Eva's Satellite

Neighbourhood Strategies Working Group

- 519 Church Street Community Centre
- Garden District Residents Association
- 51 Division Community Police Liaison Committee
- Community Development, City of Toronto
- Shelter, Support and Housing Administration, Streets to Homes, City of Toronto
- Mainstay Housing
- North/West Toronto Resident
- Substance Abuse Program for African Canadian and Caribbean Youth (CAMH)
- John Howard Society of Toronto
- Toronto Police Service
- Elizabeth Fry Society of Toronto
- Seaton House, City of Toronto
- South Riverdale Resident
- St. Michael's Hospital
- South Riverdale Community Health Centre
- Finally Understanding Narcotics
- Scarborough Addiction Services Partnership
- Safer Crack Use Coalition

Supervised Consumption Site Study Reference Group

- St. Michael's Hospital
- Emergency Medical Services
- Safer Crack Use Coalition/South Riverdale Community Health Centre
- Canadian Harm Reduction Network
- College of Physicians and Surgeons of Ontario
- Community member
- Toronto Drug Treatment Court
- Toronto Harm Reduction Task Force
- 51 Division Community Police Liaison Committee
- Parkdale Business Improvement Area
- Ontario Aboriginal HIV/AIDS Strategy
- Canadian HIV/AIDS Legal Network
- Seaton House, City of Toronto
- Street Health

A d d i t i o n a l T D S - r e l a t e d c o m m i t t e e s

Supervised Consumption Site Study Research Team

- Centre for Addiction and Mental Health
- St. Michael's Hospital
- University of Western Ontario
- University of Toronto
- Toronto Drug Strategy Secretariat
- Toronto Public Health (The Works)
- University of Victoria
- University of Ottawa
- Hospital for Sick Children

TDS Safer Bars Group

- Toronto Drug Strategy Secretariat
- Toronto Public Health
- Toronto Police Service
- Alcohol and Gaming Commission of Ontario
- Community Safety Secretariat, City of Toronto
- Centre for Addiction and Mental Health

Toronto Safer Nightlife Committee

- Toronto Police Service
- Young adult representatives
- Centre for Addiction and Mental Health

- Municipal Licencing and Standards, City of Toronto
- Alcohol and Gaming Commission of Ontario
- Social Development, Finance and Administration, City of Toronto
- Parkdale Village Business Improvement Area
- Injury Prevention/Substance Abuse Prevention, Toronto Public Health
- Toronto Entertainment District Business Improvement Area
- Youth Leader, City of Toronto
- Toronto Area Business Improvement Areas, Crime and Safety Committee
- TRIP!

Toronto Discarded Sharps Co-ordinating Committee

- Toronto Public Health (Toronto Drug Strategy Secretariat, The Works, Healthy Environments, Toronto Health Connection, Sexual Health Hotline)
- Solid Waste Management Services, City of Toronto
- Parks, Forestry and Recreation (Parks, Recreation and By-Law Enforcement)
- Municipal Licensing and Standards Division, City of Toronto
- Facilities and Real Estate Division, City of Toronto
- Toronto District School Board (Employee Services)
- Toronto Catholic District School Board
- Toronto Police Service

