



Transforming Mental Health and Substance Use Crisis Response in Ottawa: The Strategy



2023 – 2026

**Ottawa Guiding Council for
Mental Health and Addictions**

www.ottawagcmha.ca





Commitment

This strategy is dedicated to the community members we have lost through mental health and substance use crises. Each person was a member of a family and a community – they belonged to us as a community. We need to learn the lessons from their lives and deaths.

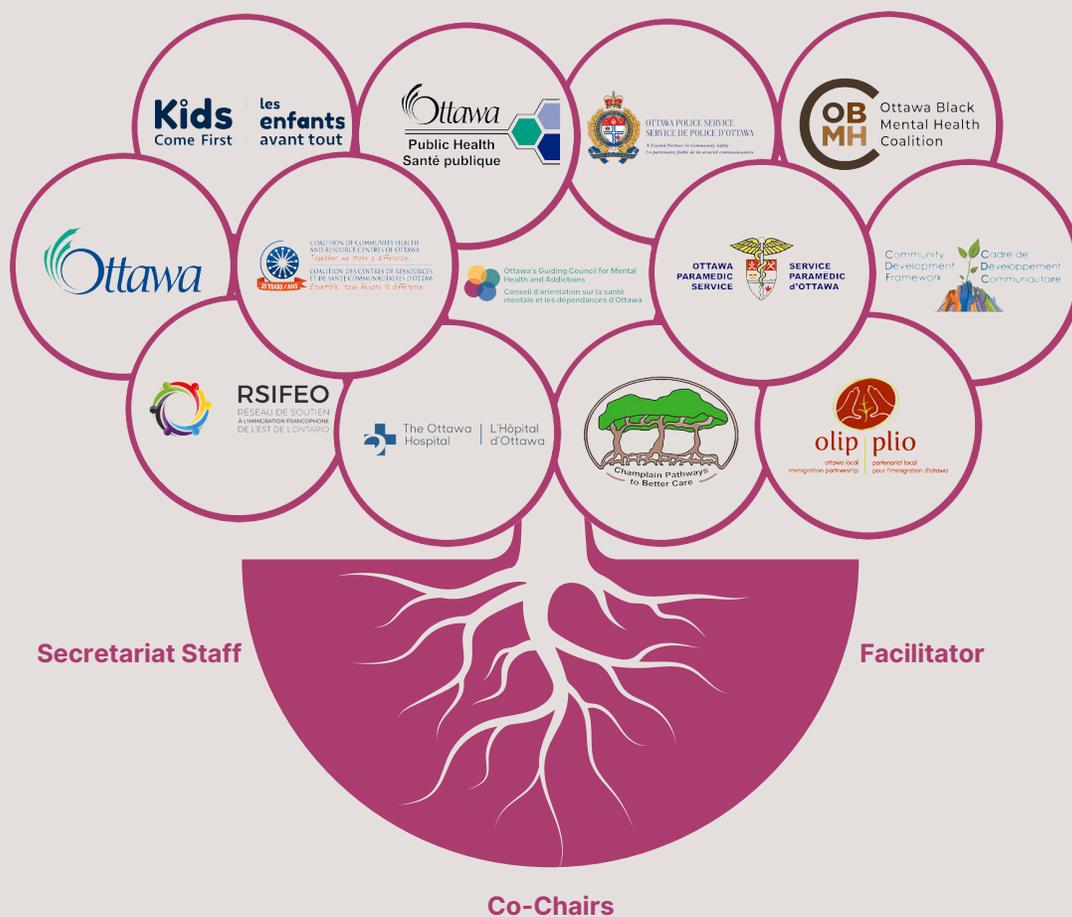
The members of the Ottawa Guiding Council for Mental Health and Addictions (“Guiding Council”) are members of the Ottawa community. All of us work in helping roles in the community. Many of us have been personally and professionally impacted by the experience of mental health and substance use. As a community we have a collective responsibility to find ways to support community members who experience a mental health or substance use crisis. We know we can do better. And we are all committed to being part of the solution.



Guiding Council member organizations

The Guiding Council is made up of representatives from Ottawa community, health and social services networks, coalitions working to respond to address mental health and substance use crises and public institutions that have mandated responsibilities to address such crises.

These include mental health, substance use, housing, newcomer (settlement), youth and community services, and public health, hospitals, police, and paramedics. The Guiding Council members represent 150 organizations working in Ottawa and have been meeting regularly since 2021.



One of the networks invited to be part of the Guiding Council in 2021 was the Ottawa Aboriginal Coalition (OAC) which is made up of 10 Indigenous service organizations that serves 20,000 of the 40,000 Indigenous community members in Ottawa. The OAC made the decision to not participate in the Guiding Council as they were working on a specific Indigenous Mental Well Being Strategy. The strategy is available on the Ottawa Aboriginal Coalition website at: www.ottawaaboriginalcoalition.ca

The OAC strategy is based on the results of the COVID research project and the knowledge of Indigenous community about what restores balance and sustains healthy Indigenous people, family and urban communities.

A. Introduction

In 2021, in the midst of a global pandemic, a group of individuals from various organizations and networks in the city of Ottawa came together to respond to an initial request from the Ottawa Police Service to work toward a city-wide alternative response from police answering mental health and substance use crisis calls in Ottawa.

This demand came from specific Ottawa communities that had witnessed the failure of the 24/7 crisis response system in the city of Ottawa, most visibly shown through the deaths of Abdi Abdirahman (a Somali Black community member), Greg Ritchie (an Indigenous community member) and Anthony Aust (a 23 year old Black man). All of these deaths involved the Ottawa Police Service. Through two motions, one by the Ottawa Police Services Board in early 2021 and the other by City Council in December 2021, the work of the Guiding Council began.

Since 2021, the group of 20 people representing 150 organizations in the City of Ottawa met 40 times in two years to develop a strategy that will respond to the needs of Ottawa community members, starting with a community based mental health and substance use crisis response. The work is linked to the City-wide Community Safety and Well Being Plan. The plan clearly makes the connections between mental health, addictions, poverty inadequate housing and homelessness, food insecurity and racism.

ottawa.ca/en/family-and-social-services/community-safety-and-well-being-plan



B. The process to develop the Strategy

Ottawa's Guiding Council for Mental Health and Addictions ("Guiding Council") was first convened in response to a [motion](#) (January 25, 2021) by the Ottawa Police Services Board. In a further motion by Ottawa City Council (December 8, 2021) the City mandated the Guiding Council to develop a culturally appropriate, trauma-informed enhanced or new mental health and substance use crisis response system to improve outcomes for Ottawa residents experiencing such crises.

"...to create a strategy to support an enhanced or new mental health and addiction crisis response system that will improve the outcomes for those experiencing crises related to mental health and substance use, which is to be achieved through relationship building and engagement with key stakeholders, including Ottawa Police, coordination and strategy development, and specific actions such as pilot projects."

In 2022 the Guiding Council established a Secretariat of four staff that designed and delivered a community-based consultation process that included:

- A total of 1,194 participants were engaged through three methods:
 - 100 one-on-one interviews,
 - 50 focus group discussions with 747 participants

- two online survey with 347 respondents

- Three commissioned research studies; and
- A literature review and environmental scan

[See the Secretariat's research report: Transforming Mental Health and Substance Use Crisis Response in Ottawa for more information](#)

All of the work was informed by a Reference Group of 11 People with Lived and Living Experience.

The Guiding Council has met every two weeks since April 2021. In the first year the Council developed the Terms of Reference, developed an administrative arm of the Guiding Council, hired the two Directors, established a Secretariat, and commissioned the research. Throughout the two years they contributed to key conversations about what is happening in Ottawa around the mental health and substance use crisis and participated in ongoing learning around best practices, research and local initiatives.



C. What is the crisis in Ottawa?

There is a convergence of crises. In the last few years, we have lived through a global pandemic that has exposed another epidemic. The number of people who are experiencing mental health and substance use crises. Twenty individuals in Canada die every day as a result of an overdose. In 2023, those numbers are increasing. In Canada, suicide is the second leading cause of death for young adults aged 15-34. The majority of these youth are young men. (Statistics Canada)

We have multiple social crises that are linked to mental health and substance use crises:

- The suffering of community members who are experiencing mental health and substance use crises. Like the rest of Canada, there continues to be an increase in community members dying of opioid overdose and suicide, or in other cases, the situation is not getting better.
- The primary investment for mental health and substance use crises relies on 911 to be the primary response as they function 24/7. The system response of using police for mental health and substance use support has led to inappropriate responses, stigmatization, harm and death in some cases.

“Across Ottawa, the police, paramedics and mobile crisis teams are the primary providers of an in-person response to mental health crises.” (City of Ottawa Alternative Response to Mental Health Crises, MNP, 2022)

- The historical deinstitutionalization of mental health supports, insufficient resources being placed in community services to respond to mental health needs, substance use health and addiction needs in the community and the chronic gaps in appropriate programs, services and response strategies for Indigenous, Black and racialized community members has led to significant holes in community-based services.



- The result of the absence of community-based services is a heavy reliance on family and friends to support people going through a crisis.
- The criminalization of mental health and substance use, strongly reflected in the homeless community, the Indigenous community and in the Black community.

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"Homelessness, poverty, addiction issues, mental health issues ... we should be supporting those so they don't end up in police outcomes at the end. That's the failure," Former Ottawa Police Services Board Chair Diane Deans. (October 2020)
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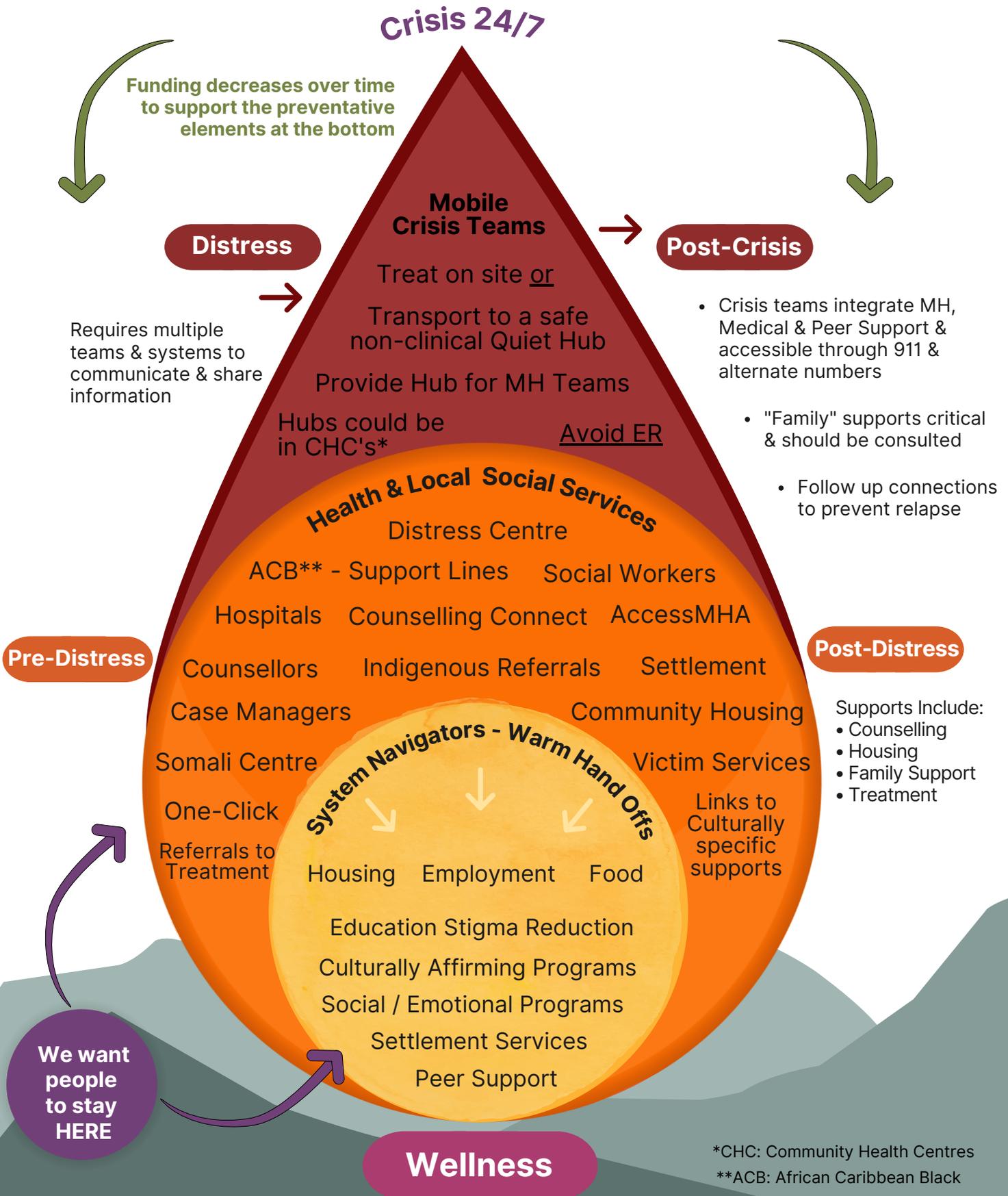
- While a great deal of focus has been on the role of the police in our current system’s response, there was also a recognition and humility that all of our systems’ responses have embedded biases including systemic and institutionalized racism as part of our current responses. The report released by Wabano Aboriginal Health Centre in 2022 entitled Racism in the Health Care system, showed that racial biases existed throughout the systems.
- Beyond Ottawa and the global COVID pandemic, the deaths of George Floyd, Breanna Taylor and other Black community members, primarily in the United States, brought to the forefront the costs and risks of relying on the police as a system that can respond to mental health and substance use crises. Black Lives Matters, as a global movement, became part of the Ottawa conversation.
- The articulation of the defund the police movement, in part led in Ottawa by the Justice for Abdi Coalition, was one of the solutions being promoted.

The crisis is not one crisis but rather multiple crises converging together.

“
[A] broad based strategy being taken up as part of a wider struggle to end endemic anti-Black racism and anti-Indigenous racism. This movement emerges both from the current moment of Black-led multiracial protests and emerges from previous generations of Black struggle against the racial violence endemic to policing. (Robyn Maynard, Building the World We Want: A Roadmap to Police Free Futures, 2021)
 ”



D. Responding to the crisis – Building a new system of response



The diagram helps conceptualize the scope of the work that the Guiding Council has embarked upon. Ultimately, the strategy will focus on supporting Ottawa community members to live their lives in a place of wellness. The bottom half of the diagram identifies the different systems and programs that need to be invested in to support an effective wellness framework.

The centre part of the diagram shows the services, programs and community-based supports required when people need supports prior to a crisis. The services and programs function as a coordinated system and there are system navigators that can support people to move between different organizations to support their needs.

The top of the diagram is the focus of this current strategy – how do we respond when people are going through a mental health or substance use crisis?

The 24/7 crisis response recognizes that mental illness and substance use is part of some community member’s life journey; we individually and collectively have a responsibility to support people to restore mental health. The research confirmed what we knew – people primarily go to family, friends and peers when in a crisis.



*Who do people call for help during mental health and substance use crises?** (from focus group consultations and interviews)

In the consultations the Guiding Council explored a number of questions including: Where do people go to access mental health and substance use crisis services and supports? What are peoples' experiences when accessing these services and supports? What do people recommend for an improved and enhanced alternate response to mental health and/or substance use crises?

A number of key themes came out of the consultations, other research and were part of the deliberations at the Guiding Council:

Systemic Change

The way we have designed the current system to respond to mental health and substance use crises is a systems failure. An effective system response requires multiple responses from multiple partners and appropriate to the community member. While there was a great deal of attention on the interventions by the police, the strategy is not talking about fixing one organization or shifting some practices. The ongoing work requires a rethinking of our overall response to mental health and substance use crises by every part of the system.

The right to a compassionate, empathic service response

Every service response by every helper, regardless of their role or profession needs to have the capacity to respond to the person in crisis in a way that is culturally safe, trauma-informed, community specific and anti-racist.

Race Analysis

Currently, there are differentiated service responses experienced by specific members of our community, particularly members of the racialized, Indigenous and Black communities. The Guiding Council was informed by a critical race theory analysis. Community members require service responses within systems that are actively working to decolonize and eliminate any racialized bias in their practices.

Trauma Informed

Some community members have experienced trauma situations but also trauma within the systems they reached out for support. In some cases, the trauma has been aggravated or made worse when accessing services. We are building credibility and trust within an entire system by building on what community members and their families need to access and receive services.

Articulating wellbeing goals as a city

Everyone in our city has a role to play in addressing mental health and substance use crises. This starts with our own education. What is the continuum of mental health and mental illness and mental wellness? How do we avoid stigmatizing people? What investment does the city of Ottawa want to make in mental wellness?

Balancing investments – Community responses require immediate investments

What we invest in as a community defines the type of response we will get. If we have no community-based service organizations that are equipped or funded to work 24/7, we will continue to rely on 911 to respond to mental health and substance use responses. Community based responses are cost effective, often better able to respond within a culturally safe framework and rooted in collaborative practice.

E. The Recommendations from the consultations

The report had five key recommendations that has shaped the strategy.

1. Centre racial equity in Mental Health Substance Use crisis response

- Easier access to more Black and racialized professionals
- Expand safer spaces
- Mental Health Substance Use crisis centres for African, Caribbean and Black communities
- Culturally appropriate services
- Address racism through organizational policies/processes
- Improve social determinants of health for racialized populations

2. Centre equity for specific communities in Mental Health Substance Use crisis response

- Expand safer spaces for street-involved community members and people experiencing homelessness
- Establish new and expand existing services to people in rural areas

3. Increase collaboration, communication and coordination across Ottawa's mental health and substance use crisis response system

- Establish a "no wrong door" approach
- Develop and implement a community-based model for crisis response
- Continue to support the Ottawa Mental Health and Well-being co-response pilot (paramedics/the Ottawa Hospital)
- Coordinate effective and timely follow-up resources and referrals after a crisis
- Improve marketing and communications about available services

4. Increase funding to support and expand the services that community organizations are already providing

- Strengthen existing community-based services by increasing capacity
- Expand existing programs
- Establish and expand existing staff training programs
- Invest in peer support programs
- Provide comprehensive support to staff responding to crises

5. Address structural stigma in first responder organizations and healthcare institutions

- Involve people with lived and living experience
- Adopt client-centered model of care
- Provide resources for Mental Health Substance Use on par with physical health
- Establish mechanisms to monitor structural stigma



F. The vision for the Strategy



The City of Ottawa fosters good mental health and well-being.

Community members in Ottawa have a compassionate, culturally safe crisis response regardless of who they call in Ottawa.



G. Principles

Principles of Ottawa's 24/7 Mental Health and Substance Use Crisis Response System



Anti-stigma, anti-racist, anti-colonial, anti-oppression approach
Awareness of intersectionality



Ottawa's Guiding Council for Mental Health and Addictions
Conseil d'orientation sur la santé mentale et les dépendances d'Ottawa

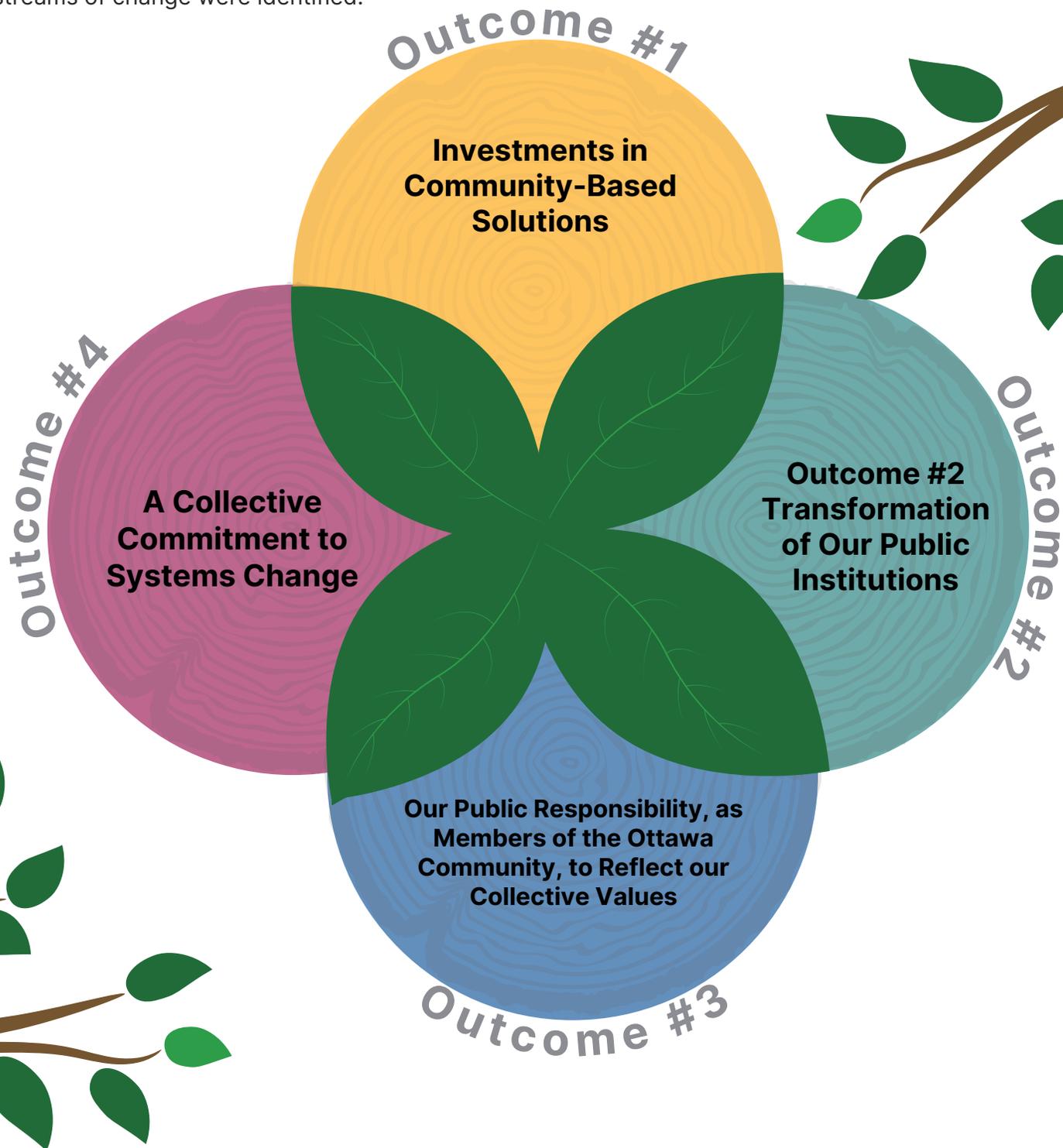
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H. Solutions – Four streams of response for an alternative 24 -7 crisis response in Ottawa

Based on the consultations, research and our collective experience and knowledge, the Guiding Council concluded that change happens in our city through multiple approaches that unites different parts of our community and ultimately leads to systems change.

Four streams of change were identified:



Outcome 1 - Investments in community-based Solutions

a) Expansion of community-based responses in Ottawa

- a. A multidisciplinary crisis response team.
- b. Peer support workers who are part of the multidisciplinary team and also can be part of existing outreach teams (including police and paramedics)
- c. Other mental health community-based services designed for specific communities.

b) Well-publicized alternative response line that is not 911

- a. Targeted communication strategy to reach communities that do not want to call 911.

Outcome 2 – Transformation of our public Institutions

a) Changes and improvements to 911 – Police response

The Ottawa Police Service is establishing improvements to the 911 police line. Two mental health workers will support 911 calls and also support 911 workers who are responding to mental health calls. The OPS will continue to build on their trauma informed training to look at how trauma manifests in different communities and approaches to care.

b) Changes and improvements to 911 - Ottawa Paramedic Mental Well Being Response Team

The team is designed to provide more appropriate care in the community for emergency calls that are non-violent and non-criminal, where mental health and substance use are the contributing factors. That includes crisis intervention and referrals to community organizations, as well as next-day follow-up by The Ottawa Hospital's mobile crisis team, in some cases.

In 2023 this pilot became a permanent program and diverts calls from hospitals to community-based services. The Ottawa Paramedics will continue to do training and working towards best practices in trauma informed approaches of care.

Outcome 3 – Our public responsibility, as members of the Ottawa community, to reflect our collective values

a) Anti-stigma campaigns

As a community we do not always understand the impact our actions are having on people experiencing mental health and substance use challenges. Stigma can cause feelings of shame, hopelessness and isolation. It can lead to a reluctance to ask for help or to get treatment and fewer opportunities for employment or social interaction. Stigma can lead to recurring crises. Our interactions with one another can be one of the interventions to support wellness. There is evidence that traditional campaigns are not as effective as anticipated. Our campaigns would be based on best practices which includes relationship building and contact-based education embedded in organizations (any kind of organization - could be workplace or community organizations) is proven to be more effective.

Outcome 4 – A collective commitment to systems change

a) Building a consistent framework for a consistent response

- a. Joint training and shared training across multiple services.
- b. Appropriate protocols between services including protocols for co-responder models.
- c. Development of collaboration models and communities of practice that support the knowledge base that ensures culturally safe and trauma informed training.
- d. Policies and processes are changed in organizations to support collaboration, systems change and reducing structural stigma within organizations.

I. Alignment with other strategies

The City of Ottawa Community Safety and Well Being Plan:

The goal of “improved access to mental well-being and substance use supports and strategies “in the CSWB plan is consistent with the goals of the Strategy.



The Ontario Big City Strategy is intended to have an immediate impact on the mental health and addictions crisis we are experiencing as it relates to Housing and Homelessness. (May, 2023)

1. Centralized and integrated intake and dispatch process:

An intentionally designed and consistent triage, warm transfer, and dispatch process operating 24 hours a day, 7 days a week year-round by a multidisciplinary, multi agency team, that is well resourced, low/no barrier, trauma and violence informed, culturally aware and flexible to meet the needs of individuals across a range of circumstances and levels of acuity. Inputs to this process could include Community Outreach and Support Teams (COAST), local service providers, and businesses.



2. More provincial investment in low barrier hubs

Residents need more options for 24/7 low barrier drop-in services with basic rules and a pathway into stabilization options with experienced staff with mental health and addictions expertise.

J. The Next three years

The Guiding Council will continue to develop the next stages of Ottawa's Mental Health, Substance Use and Addictions Strategy while advocating to support four key investments:

Increase the investments in the community-based services. The first priorities are:

- Establish a separate crisis line (not 911 and not to police).
- Investment in a multi-disciplinary team that is mobile, civilian based and includes mental health professionals and peer support workers.
- Investment in peer support programs.
- Link those peer support programs to other 24/7 crisis response teams, including the Ottawa Paramedic Mental Well Being program.

No wrong door approach - (Systems Change approach)

- Continue to support the capacity of the police and paramedics to deliver culturally safe and trauma informed service responses.

Advocate for an increase in investment in community-based services:

- Our model calls for an increase in community-based services and system navigators to support the crisis needs of specific communities. This includes supporting Black led and Indigenous led approaches and funding allocations.

Develop an outcomes and evaluation framework for all of the investments that measures not only outcomes but systems change.

K. In closing

“We are reclaiming our ability to care for each other”

Michelle James, co-chair

While the mental health and substance use crisis may be the focal point of this initial strategy, what is before and after each person’s mental health and substance use crisis will require focus and investment as well. The strategy will expand to address further needs using a systems lens and in our next work we will seek to look at:

- How do we support individuals and families so that they don’t reach a point of crisis?
- How do we build a city that recognizes that the level of mental health distress and the substance use that is manifesting is partly a result of the way we organize day-to-day life? What do people need to stay on a healthy path in their lives? What needs to be in place in day-to-day living to support people to restore their balance?
- How do we ensure people know about the range of services in their community? How do we ensure the barriers and restrictions in those services are removed to the greatest extent possible?

- What is the impact of racism and colonization on people who have to navigate them every day of their lives? Living with racism has been described as a form of trauma that can lead to PTSD- what does it do to people’s mental health?
- How do we continue to increase investments into the community services and programs that support overall well-being?

Originally the work of the Guiding Council was to offer thoughtful input into a strategy to support financial investments and policy development in the City of Ottawa. It has moved to a greater understanding that we will not meaningfully address the mental health and substance use crises in our city without being strong advocates for not only systems change but also community change. In this work, we are ultimately reclaiming our ability to care for each other.

