

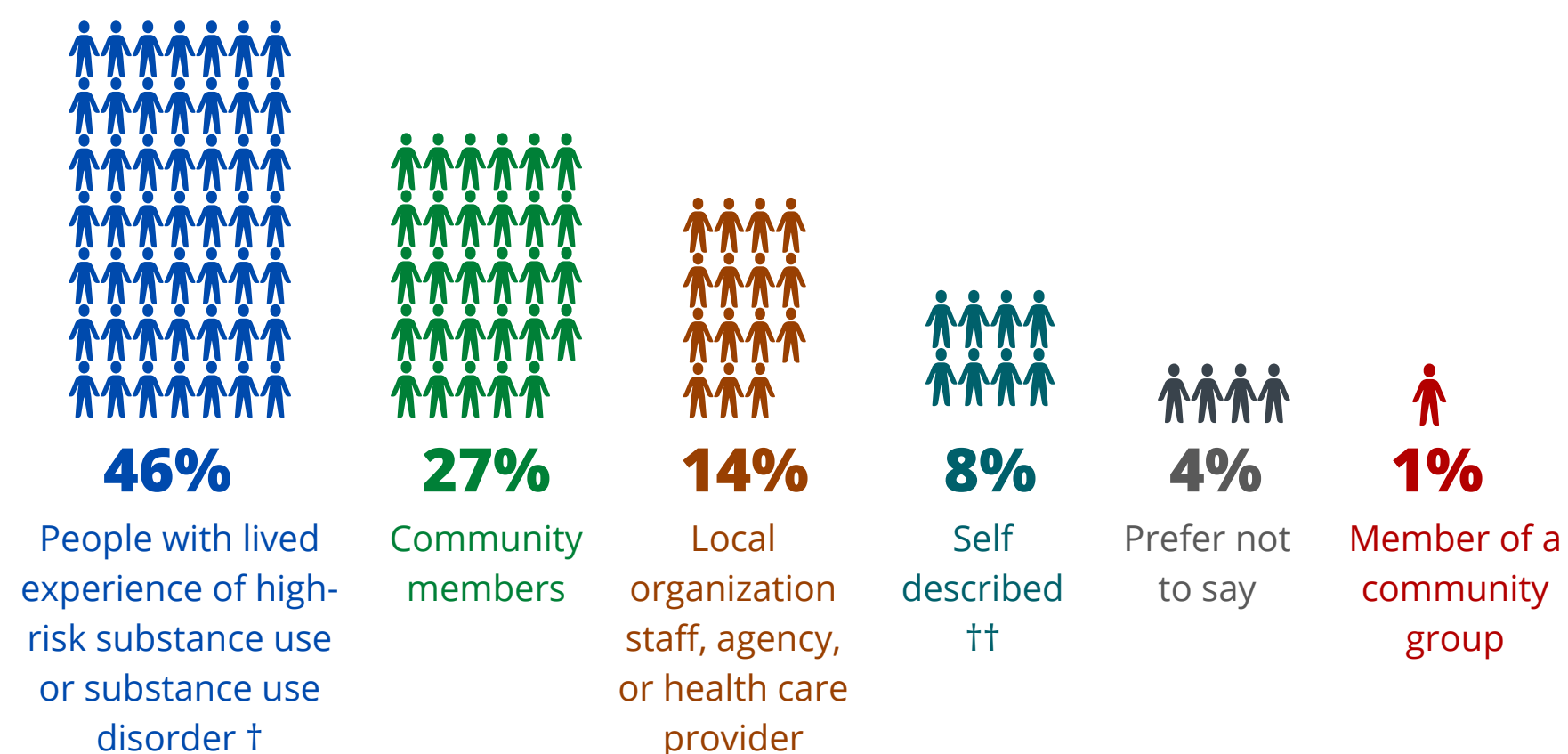
Timiskaming Drug and Alcohol Strategy Community Consultation Results

What We Heard

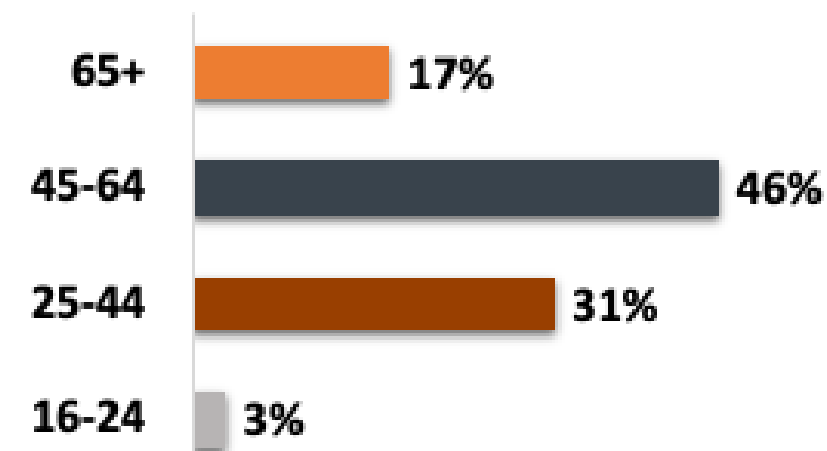
Who we heard from

112 Timiskaming community members responded to this survey.

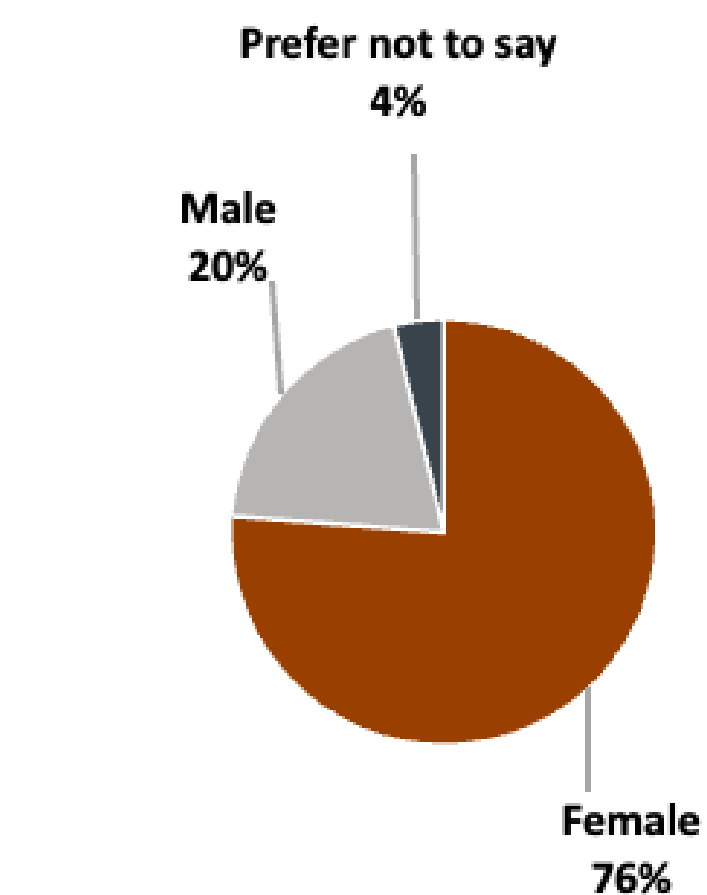
Category



Age



Gender



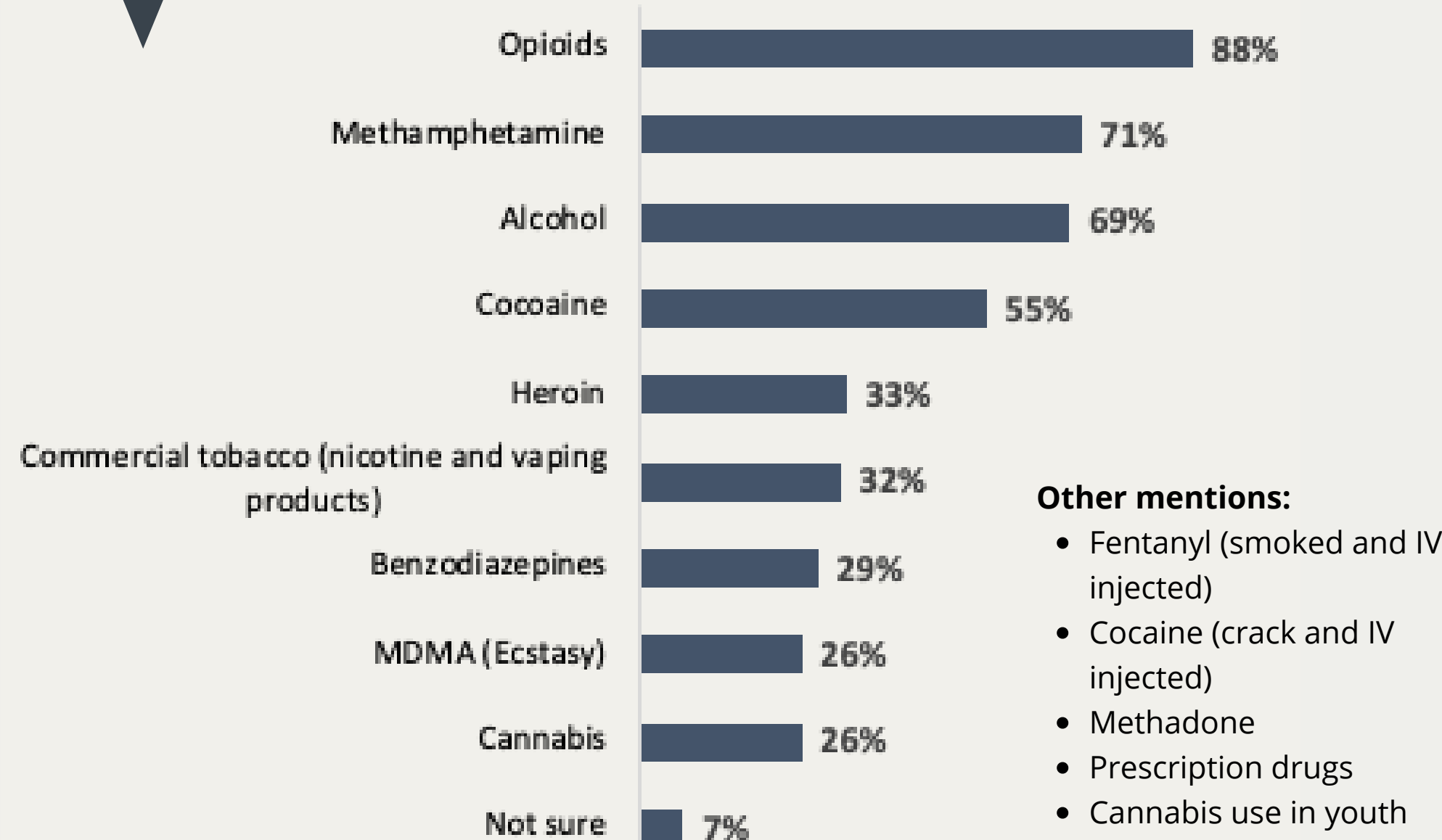
† This includes individuals who have used substances in the past, who currently use substances, and the family and friends of those who used/use substances.

†† This included answers such as: being a parent, being in more than one category stated above, worker in prison guard, and/or family or friend of those who used substances.

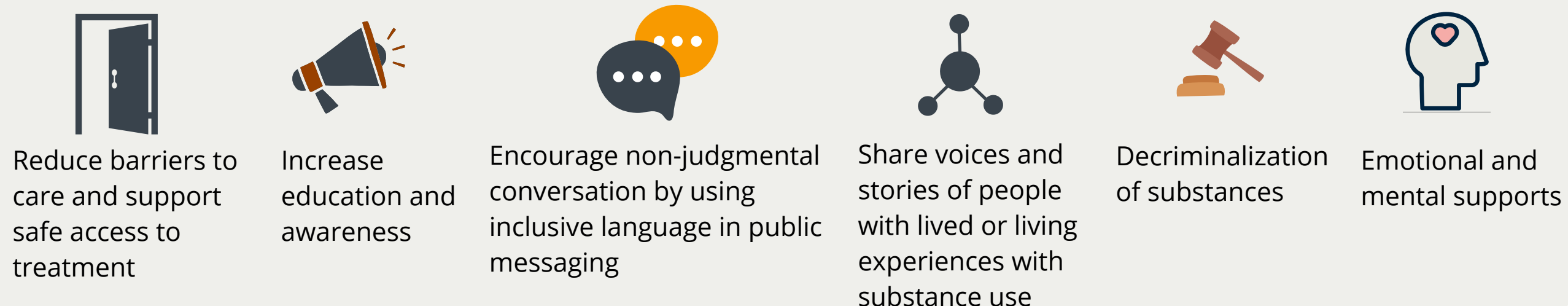
Many local organizations and community members with lived experience have partnered in the development of a drug and alcohol strategy. Since forming in early 2021, Timiskaming Drug and Alcohol Strategy (TDAS) members have worked to gather and assess information to inform a strategy that will improve the current situation in Timiskaming* related to substance use. From June 13th until July 13th, 2022, TDAS held a public consultation to get feedback and advice on its draft plans. Below is what we heard from you. This information will be used to create the final drug and alcohol strategy.

*Inclusive of the Municipality of Temagami

We asked you: what substances do you see as causing the most harm in Timiskaming? You said...




We asked you: how can we best act to reduce all forms of stigma in Timiskaming? You said...




We asked you: **what factors or sorts of circumstances do you think the Timiskaming Drug and Alcohol Strategy should focus on?** Your responses are summarized by the categories below...


- Comments that related to more than one action area:**
- Education and awareness
 - Take an equitable and trauma informed approach
 - Address mental health needs and increase supports
 - Address and reduce stigma
 - Challenge social norms related to substance use

 **Harm reduction:**


- Drug testing kits to detect poisoned substances
- Safe injection sites, supervised consumption sites, safe locations to use substances
- Safe handling of needles - needle exchange programs and more disposal areas

 **Treatment:**

- More treatment and recovery services, such as detox centres, rehabilitation, residential treatment, recovery beds, methadone clinics, Opioid Agonist Therapy, Alcoholics and Narcotics Anonymous
- Decrease long wait-times for programs and services
- Addiction and mental health counselling and supports

 **Prevention:**


- Support positive family relationships
- Increase youth-focused prevention programs and campaigns
- Restrict access to substances
- Access to more positive community activities (recreation and leisure)
- Review physician prescribing practices

 **Community Safety:**

- Target illicit selling of substances
- Harsher sentences for drug related offences
- Justice system diversion programs for drug-related offences instead of incarceration
- Help vulnerable people escape exploitation

Living and working conditions that influence substance-use health outcomes (socio-economic factors):

- Increase availability and affordability of housing
- Reduce rates of poverty
- Increase food security
- Increase job opportunities

Responses to this question aligned with actions to address socio-economic factors and these 4 areas: 

Harm Reduction
Reducing the negative effects of substance use.

Treatment:
Supporting innovative approaches to treatment and rehabilitation.

Community Safety:
Responding to criminal activity and community safety issues associated with substance use.

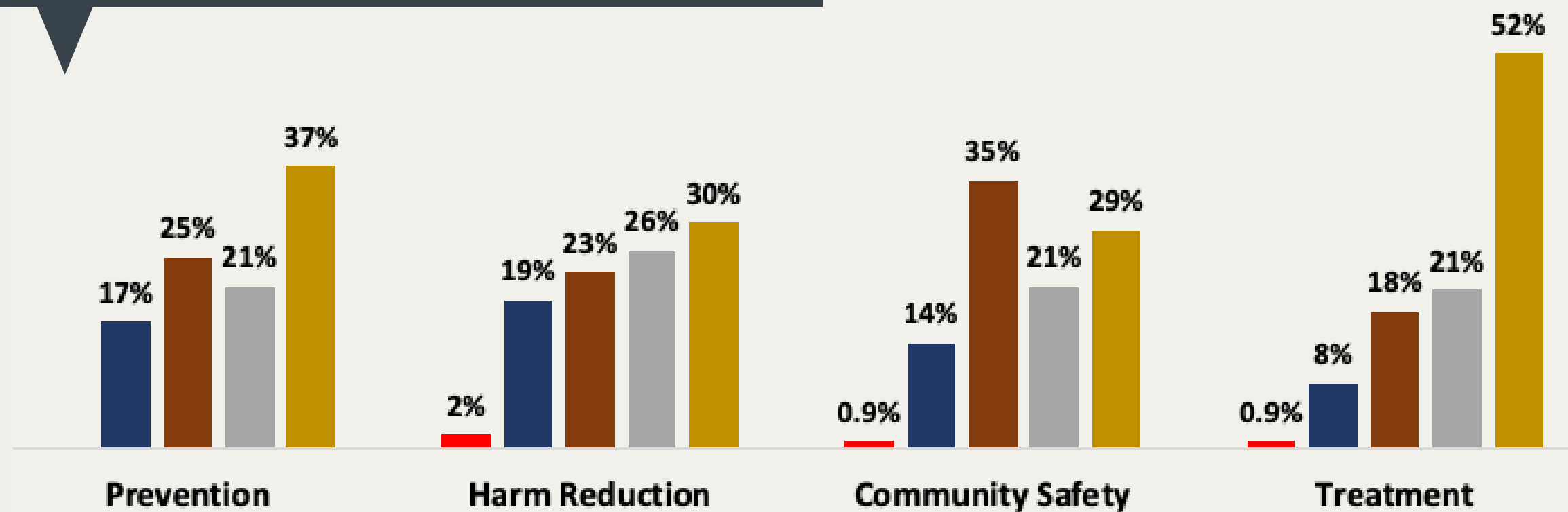
Prevention:
Preventing high-risk drug and substance use.

 **Number of mentions**

Treatment had the most mentions with **40**, followed by **Prevention** with **34**, **Harm Reduction** with **10** and **Community Safety** with **9**. **Education and awareness** and **mental health** were also strong themes. **Socio-economic Factors** had **9** mentions.

“ Our area is desperately lacking in access to detox beds, medical detox and residential Trx [treatment]. During Covid, this was extremely problematic. Video consultations should be available for people going for treatment rather than travelling for ASSESSMENT interviews.
- Survey Respondent

We asked you: **how satisfied are you with programs and services that are currently available for preventing and reducing substance-use related harms in Timiskaming?**
You said...



■ Very satisfied ■ Somewhat satisfied ■ Neither satisfied nor dissatisfied ■ Somewhat dissatisfied ■ Very dissatisfied

Overall, there is a lot of dissatisfaction with programs and services across all four categories listed above. Treatment has the largest number of survey respondents very or somewhat dissatisfied with programs and services, followed by prevention, harm reduction, and then community safety.

We also asked you to **provide any feedback on the existing programs and services. The most reported feedback was...**



There needs to be more awareness raised of what programs and services exist in Timiskaming



More education about substance use, the risks, and harms is needed, particularly targeting stigma



There are not enough programs and services available, and those that do exist are ineffective in reducing the harms of substance use



Programs and services need to address other factors such as mental health, income, housing, and unemployment



Accessibility barriers exist, such as long wait times, proximity, and stigma

We asked you: **are there any other existing programs and services, in addition to those in the consultation report, that you feel should have been featured?**

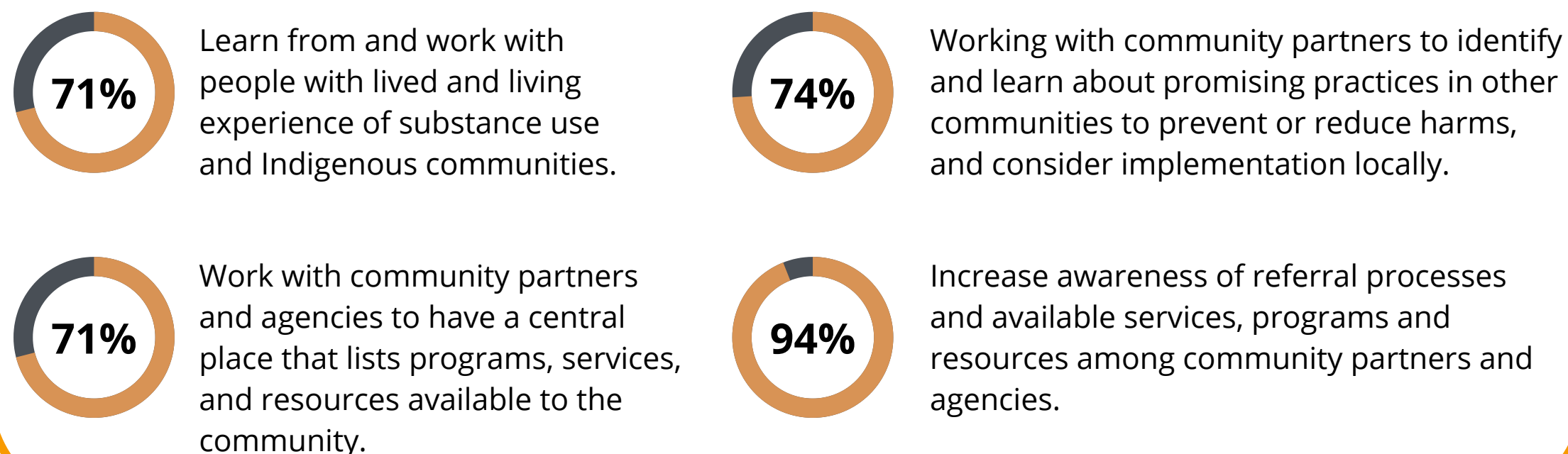
63% said **no** Other programs and services that already exist that you said should be featured:
37% said **yes** • 12-Step Programs - Alcoholics Anonymous and Narcotics Anonymous

Some of the responses to this question highlighted the programs and services that Timiskaming still needs. Responses include a need for better treatment and withdrawal support such as residential centres, secondary prevention programs to support healthy lifestyles, better housing options, efficient and easy access to treatment, and school-based programs.

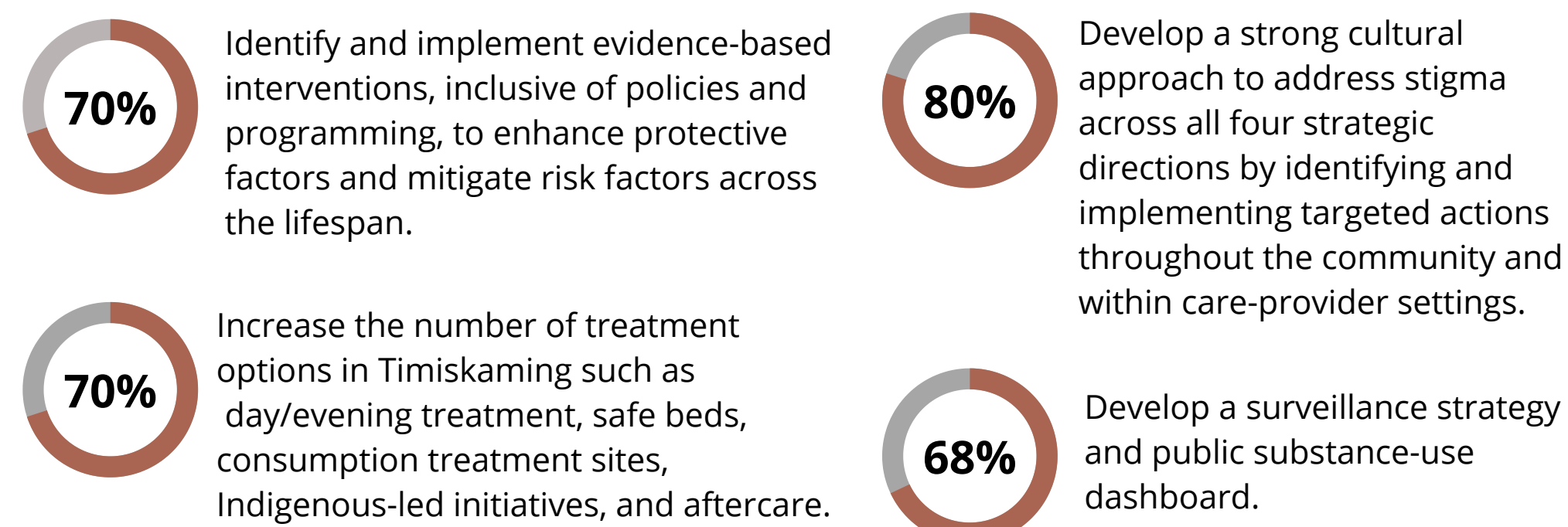
“While there are programs, the lack of front line outreach is appalling. Many people aren't open about substance abuse, and those who use substances may not want to go to these services because of stigma.”
- Survey Respondent

We asked you to tell us how much you agree that the actions in the report will achieve the TDAS goal, which is to prevent and reduce the harms associated with drug and alcohol use in Timiskaming. Most agreed with the actions listed - the percentage of agreement is shown below beside each action.

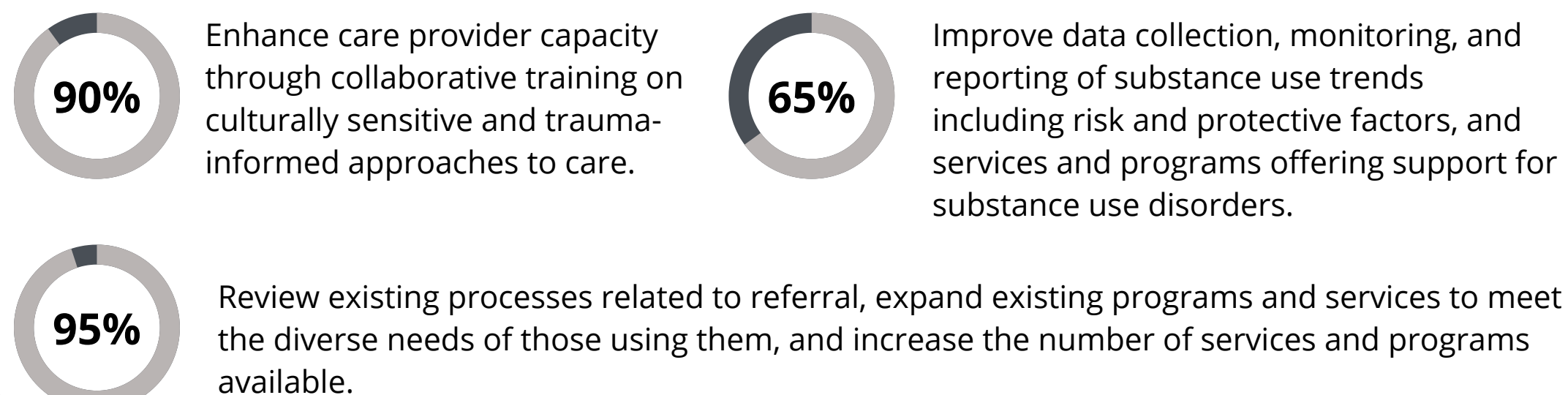
When asked about enhancing collaboration and building or strengthening relationships, results show...



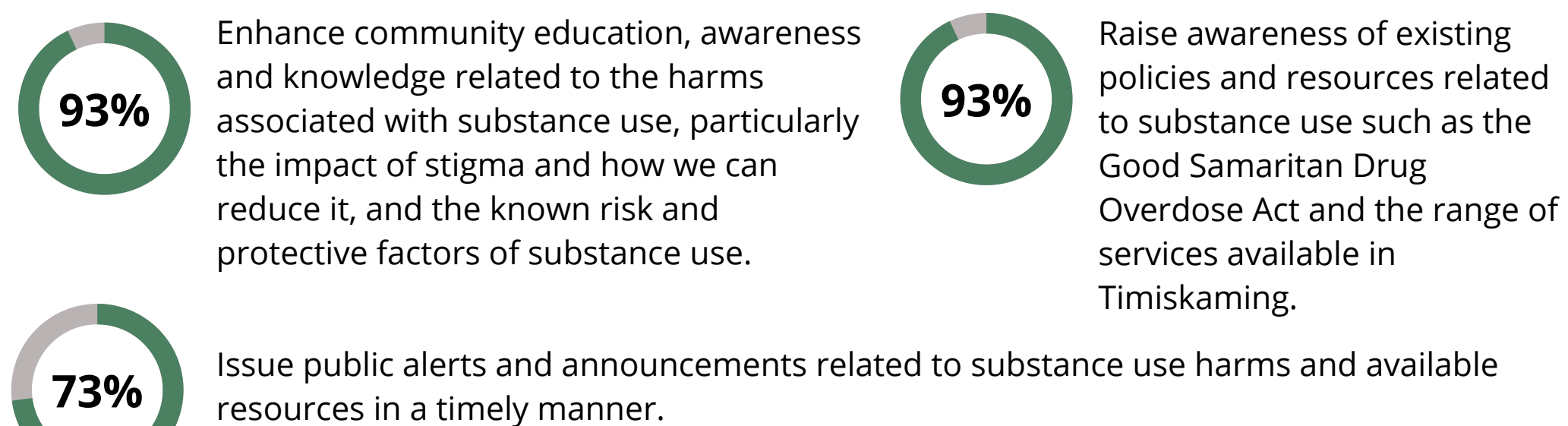
When asked about creating and demonstrating an impact, results show...



When asked about increasing capacities, results show...



When asked about fostering engagement, education, and awareness, results show...



We asked you: are there any other steps the local drug and alcohol strategy can take to better address substance use related harms in Timiskaming? You said...



Better collaboration and communication between community partners, organizations and agencies



Increase local resources such as group meetings, residential treatment centres, detox centres, treatment beds, harm reduction tents, housing and shelters



Increase in local mental health services



Teen targeted prevention programs, awareness campaigns, and resources, especially for high-risk groups



Reducing risk of stigmatization, marginalization and isolation among those suffering with substance use disorder



Increase online advertising and messaging of available resources



Increase community education and awareness of substances and high-risk use



Parent-targeted or home based interventions



Stricter consequences for local sellers

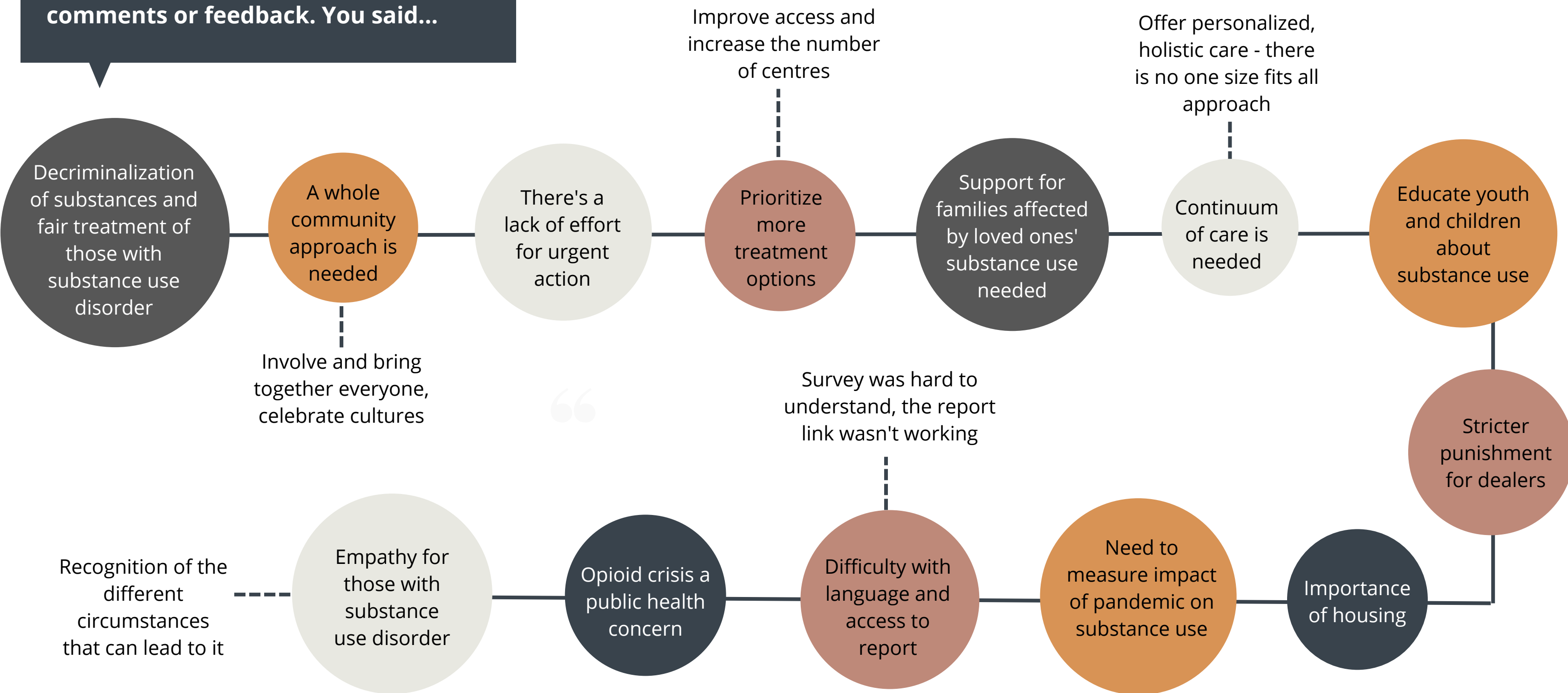


Learn from and work with people with lived experience



Improve quality of care in hospitals for substance use disorder

We asked you **if you had any final comments or feedback. You said...**



“ Use a community development approach to increase capacity. We all want to be living in a community that cares with a whole person approach. Involve the youth. Involve the seniors. Celebrating cultures being included supports everyone! People are hurting. People are suffering from a very complex issue. Remove the barriers and our community will thrive. ”
 - Survey Respondent

What's next?

There is a lot of work happening to finalize TDAS. The information we have from this consultation, data related to substance use and the harms linked to it, and the success of programs and services in other communities will all contribute to it. We want to keep the conversation open and keep you aware of how our work is progressing, and will do that by email, through our webpage, and in media releases (including social media).

Want up-to-date information on the status of TDAS?

- ✉ Email us at TDAS@timiskaminghu.com with your first and last name to join our email list
- 🌐 Check our webpage at <https://www.timiskaminghu.com/90558/timiskaming-drug-and-alcohol-strategy-tdas> for updates on our work
- 📞 Call 705-465-4895 if you have questions

Limitations of this consultation

- The survey and consultation report used technical language which might have impacted the responses received and the validity and reliability of them
- Despite the effort to make providing feedback accessible (via survey, email, written, or called in methods), not everyone in the population had an equal chance of participating
- The results of this survey are not generalizable to the entire Timiskaming population