

Brantford-Brant Community

DRUGS STRATEGY ACTION PLAN 2025





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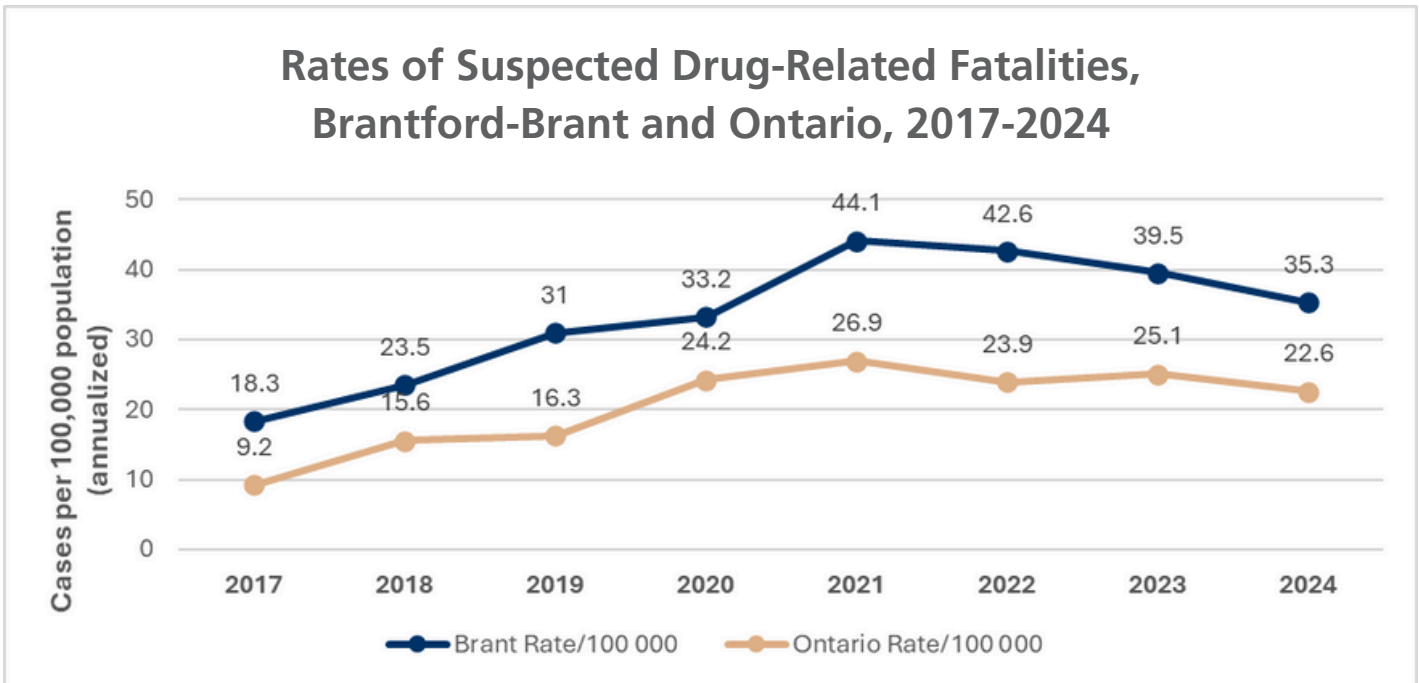


INTRODUCTION

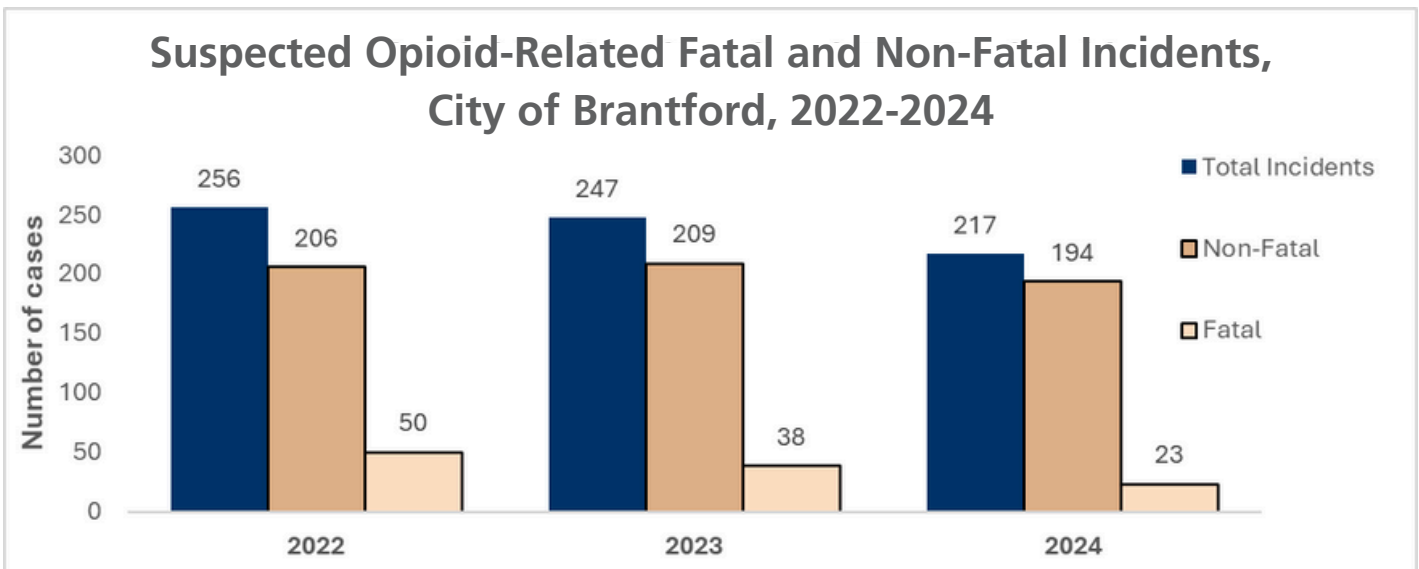
While Brantford-Brant's rate of overdose deaths remained above the provincial average in 2024, there are signs that the work of the Brantford-Brant Community Drugs Strategy and its member organizations is having an impact. Suspected drug-related death rates in both Brantford-Brant and Ontario peaked in 2021 and have been gradually declining since then. Between 2021 and 2024, Brantford-Brant's suspected drug related death rate fell by about 20 percent, slightly faster than the provincial rate.

In 2024, the city of Brantford lost 23 people to suspected opioid-related deaths. Losing even one person is too many. It is encouraging, however, to see that this is less than half of the number of people that the community lost to suspected opioid-related deaths in 2022. Furthermore, the proportion of deaths by living arrangement among homeless individuals has also decreased considerably, dropping from 15.4% in 2021 to 2.1% in 2023. The number of suspected drug-related fatalities (not limited to those involving opioids) also decreased, from 67 in 2022 to 56 in 2024.

The Brantford-Brant Community Drugs Strategy will continue to implement evidence-informed strategies to ensure these positive trends continue. We also work to reduce the impact of drug-related harms not captured in these statistics, such as skin and soft tissue infections, transmission of infectious diseases, and the far-reaching negative effects of stigma on both people who use drugs and their families and friends.



Source: Office of the Chief Coroner for Ontario, 2017-2024. Extracted January 14, 2025.



Source: Brantford Police Service, submitted via the Brant Evidence System Tracker. Extracted January 14, 2025.

REDUCING DRUG-RELATED HARMS

Addressing drug-related harms requires a coordinated societal response, including action at the federal, provincial and local levels. The Brantford-Brant Community Drugs Strategy's goal is to coordinate the local piece of this effort.

From August through November 2024, the Drugs Strategy Coordinating Committee met to take stock of the progress made in 2024 and to identify new initiatives to tackle in 2025. The Coordinating Committee was guided by the 38 recommendations laid out in the original [Brantford-Brant Community Drugs Strategy](#), created in 2016, as well as an assessment of which of these goals were most urgent and feasible for the coming year. The 12 recommendations in this document are the outcome of this process.

The development of this Action Plan was led by the Core Members of the Drugs Strategy Coordinating Committee:

- SOAR Community Services (formerly St. Leonard's Community Services)
- Grand River Community Health Centre (GRCHC)
- Positive Health Network (PHN) (formerly the AIDS Network)
- Child and Family Services of the Grand Erie
- The Brantford Police Service (BPS)
- Grand Erie Public Health (GEPH) (formerly the Brant County Health Unit)
- Brant Community Healthcare System (BCHS)
- Woodview Mental Health and Autism Services
- The County of Brant
- The City of Brantford

It also benefited from input from Advisory Members of the Coordinating Committee, including the Six Nations Integrated Drugs Strategy, the Brantford Brant Norfolk Ontario Health Team (BBNOHT) Mental Health and Addictions Steering Committee, the Brantford Region Indigenous Support Centre (BRISC), Brantford Native Housing, the Brantford Substance Users Network (BSUN), Wilfred Laurier University's Brantford Campus, and Brant-Brantford Paramedic Services.





2024 Year-in-Review

The Brantford-Brant Community Drugs Strategy made significant progress in 2024.

The Brantford-Brant Community Drugs Strategy made significant progress in 2024. We completed many of the short-term initiatives laid out in [the 2024 Action Plan](#), and made considerable progress on multi-year initiatives.

Scaling up the availability of the [PreVenture](#) program was a priority for the Drugs Strategy in both 2023 and 2024. PreVenture is an evidence-based program that aims to promote mental health and delay substance use among youth. In 2024, the PreVenture Working Group developed and implemented a collaborative promotion and referral strategy for the program. Sessions continue to be offered regularly, led by Woodview Mental Health and Autism Services with support from GEPH staff. Woodview continues to look for opportunities to make PreVenture available to more Brantford-Brant youth, including through partnerships with the City of Brantford, the Brant Haldimand Norfolk Catholic District School Board and the Grand Erie District School Board.

When an individual is struggling with their substance use, their families and friends may also be impacted. One of the Drugs Strategy's goals for 2024 was to raise awareness of what resources are available to this group, and make them easier to access by developing a "one stop shop" website. This [website is now live](#), hosted by GEPH, and promotion in the community via social media and other channels is ongoing.

Building relationships between the Drugs Strategy and Indigenous-led organizations, as well as exploring ways to improve the quality of services in the community for Indigenous people who use drugs, was another of our 2024 goals. The Drugs Strategy Coordinator met with staff from BRISC, Brantford Native Housing, De dwa da dehs nye>s Aboriginal Health Centre and Six Nations Mental Health and Addictions Services to build relationships and identify opportunities for collaboration. As a result of these conversations, BRISC and Brantford Native Housing have joined the Drugs Strategy Coordinating Committee as Advisory Members. In addition, the Drugs Strategy Coordinator is completing a review of best practices for providing substance use-related services to Indigenous individuals. The review will be presented to the Drugs Strategy Coordinating Committee in early 2025. Resources related to Indigenous people and substance use were also included in the substance use intersectionality resource library (discussed further below), making them more available to organizations in the community.



The Drugs Strategy also supported the evaluation of Brantford-Brant's safer supply pilot, also known as the prescribed alternatives program. The evaluation found that at the three month follow up, clients reported decreased use of unregulated substances, decreased use of money on drugs, and decreased engagement in criminal activities. More than half of them (58 per cent) reported practicing safer use of drugs compared to before they entered the program. Additionally, participants reported improved mental health and access to health care and social services. Unfortunately, GRCHC was not able to secure funding to scale-up the program.

A recent report from the National Institute on Aging at Toronto Metropolitan University calls for intentional efforts to increase awareness and understanding of opioid use disorder (OUD) among older Canadians. The Drugs Strategy took up this call in 2024, working to expand awareness of and access to naloxone among older adults in Brantford-Brant. A tailored workshop was developed by GEPH staff and promoted among older adult-centred organizations in the community. The workshop was well-received by its audiences, although there were challenges generating interest in hosting the workshop. These challenges speak to the ongoing need for education on the importance of opioid awareness for older adults.

The Drugs Strategy and the BBNOHT Mental Health and Addictions Steering Committee have had a strong working relationship since the Drugs Strategy was relaunched at the start of 2023. In 2024, the Drugs Strategy Coordinator and the BBNOHT Mental Health and Addictions Integration Lead developed a formal collaboration agreement, to ensure that pathways for collaboration are clear, consistent, effective, and sustainable.

In late 2023, GRCHC secured funding to integrate an expanded midwifery care model into their services. One of the goals of this program was to expand access to pre and post-natal care for people who use substances. In 2024, the Drugs Strategy supported this new program as it established itself in the community, including participating in onboarding and helping to establish referral pathways. The program has been successful in expanding access to low barrier pregnancy and reproductive health care among pregnant people with lived or living experience of drug use.



The Drugs Strategy recognizes the need to undertake more work focusing on the specific needs of individuals who use drugs and who also experience intersecting marginalized identities.

As of early November 2024, the program had supported 19 pregnant individuals for prenatal care, as well as with baby and post-partum care, after delivery. In addition, the program made 81 client connections to community supports for episodic sexual health care and initiated a drop-in clinic at Nova Vita women's shelter.

The Drugs Strategy recognizes the need to undertake more work focusing on the specific needs of individuals who use drugs and who also experience intersecting marginalized identities. As a preliminary step in this direction, the Drugs Strategy compiled a library of resources on the intersection of substance use and gender, Indigeneity and 2S-LGBTQIA+ identities, as well as resources focused on youth and those experiencing housing-related issues. This resource library was shared with Drugs Strategy members and will form the foundation of future work on these topics.

The Drugs Strategy also made progress on a number of multiyear projects, including developing a pilot of universal screening for substance use disorder (SUD), reducing stigma against people who use drugs, assessment of withdrawal management clinical pathways, expanding access to drug checking services, expanding access to harm reduction supplies in the County of Brant, and developing a formal process for ensuring that future years' Action Plans are developed with input from people with lived experience of drug use. Work on these initiatives will continue in 2025 and they are discussed in more detail in the 2025 Initiatives section of this document.



While the Drugs Strategy accomplished a great deal in 2024, several of our initiatives encountered challenges.

Opening a consumption and treatment services (CTS) site in Brantford has been a priority for the Drugs Strategy since its inception. The work continued in early 2024, including releasing an [educational video](#) highlighting the importance and necessity of a CTS site in Brantford. The video aims to inform the community about the benefits of CTS sites in reducing harm and providing critical services. Unfortunately, in August 2024, the Ministry of Health announced they will not be funding new CTS sites. We hope that a new pathway for CTS site funding will become available again in the future.

Launching a Drug Treatment Court has also been a longstanding priority of the Drugs Strategy, but the Drug Treatment Court Working Group has struggled to find a judge with the capacity to preside over it. After spending 2024 exhausting all possible options, the Working Group has agreed that in 2025 they will shift gears to exploring alternative diversion models for criminal justice-involved individuals who use substances that could be launched within existing treatment and criminal justice system capacity and would still achieve the goal of increasing access to SUD treatment services for these individuals. Should local judicial capacity expand in the future, the Working Group is prepared to relaunch work on a Drug Treatment Court.

Two initiatives that we hoped to launch in 2024 did not move forward. A grant to fund the peer support community of practice was applied for. Unfortunately, the grant was not received. Unanticipated staffing challenges led to the discontinuation of the initiative to assess support needs of businesses and services providers in downtown Brantford related to drug use. The Drugs Strategy Coordinating Committee will continue to look for opportunities to secure the resources needed for these initiatives to move forward in the future.

2025 Action Plan Overview

- 1.** Build caregivers' capacity to respond to and delay drug use among youth.
- 2.** Implement anti-stigma education among service providers in the community with the goal of ensuring that people who use substances are treated with respect and dignity.
- 3.** Collaborate with the Ontario Health Team's Mental Health and Addictions Steering Committee to implement a pilot of cross-sector screening for substance use disorders.
- 4.** Explore ways to increase access to substance use disorder treatment services for criminal justice-involved individuals who use substances that could be launched within existing treatment and criminal justice system capacity.
- 5.** Develop a program proposal and seek funding to improve unregulated drug market monitoring and reduce overdose risk through expanded implementation of drug checking.
- 6.** Expand access to harm reduction supplies in the County of Brant.

2025 Action Plan Overview

- 7.** Collaborate with the Ontario Health Team's Mental Health and Addictions Steering Committee to assess the current state of the substance use treatment continuum of care, identify gaps, and make recommendations for improvements.
- 8.** Develop a formal process for ensuring that future years' Action Plans are developed with input from people who use drugs and people with lived experience of drug use.
- 9.** Explore interest in enhanced coordination among Brantford-Brant organizations providing mobile or outreach services to people who use drugs.
- 10.** If funding is received, support the integration of Brantford's Homelessness and Addiction Recovery Treatment (HART) Hub into the community's substance use services system.
- 11.** Pilot a program to improve overdose response in rental buildings, with the goal of reducing the number of overdoses that occur when people are alone in private dwellings.
- 12.** In collaboration with the BBNOHT Mental Health & Addictions Steering Committee, explore barriers to primary care providers integrating people with substance use disorders into their practices and identify opportunities to reduce barriers.

2025 Initiatives



1. Build caregivers' capacity to respond to and delay drug use among youth.

Over the past several years, the Brant County Health Unit has led collaborative efforts in the community to build caregivers' capacity to respond to and delay drug use among youth. This has included the in-person miniseries "[Drugs and Youth: What Adults Need to Know](#)" in 2022, followed by the planning of a communications campaign in 2024. In 2025, the Drugs Strategy will support the next phase of this initiative, which will include launching the campaign.

Corresponding Brantford-Brant Community Drugs Strategy Goal(s):

Goal 1: A community that is proactive and prevention focused.

- Increase awareness and education about substance use and mental health for youth and their caregivers.

Goal 8: A community that engages, supports, and empowers youth.

- Encourage enhanced coordination between mental health and addiction services for youth.
- Increase awareness of programs that support youth.
- Seek ongoing engagement from youth.



2. Implement anti-stigma education among service providers in the community with the goal of ensuring that people who use substances are treated with respect and dignity.

The Drugs Strategy will continue work on this multi-year initiative in 2025. In 2023, the Harm Reduction and Anti-Stigma Working Group reviewed evidence for various approaches to reducing stigma, and conducted an environmental scan to identify relevant materials and resources. Based on their findings, the working group developed a plan for implementing comprehensive anti-stigma education tailored to the needs of different organizations and sectors. GEPH was selected as the pilot site for this anti-stigma education initiative, which launched in November 2023 and rolled out over the course of 2024. The pilot was very successful, receiving positive feedback from both GEPH staff and leadership. The focus of this work in 2025 will be to prepare to implement the anti-stigma education program with at least one additional organization. GEPH, with support from the Drugs Strategy Coordinator, will also continue to implement the recommendations from the pilot.

Corresponding Brantford-Brant Community Drugs Strategy Goal(s):

Goal 1: A community that is proactive and prevention focused.

- Increase public awareness of harm reduction principles and its function in community safety.
- Increase public awareness of the realities of substance use, addiction, and stigma for the individual and families.

Goal 2: A community that is responsive to the unique and immediate needs of vulnerable people.

- Increase training opportunities for frontline staff.
- Integrate the experiences and knowledge of individuals with lived **experience**.

Goal 5: A community that values the dignity, expertise and spirit of all people.

- Launch an anti-stigma campaign targeting community members, local institutions, and services.

Goal 7: A community that wants to learn more.

- Offer education opportunities for community members and organizations to learn about harm reduction and stigma around drug use.



3. Collaborate with the BBNOHT's Mental Health and Addictions Steering Committee to implement a pilot of cross-sector screening for substance use disorders.

Many people who may benefit from treatment or other substance use-related support are in contact with healthcare and social service providers, but may not be identified as in need of drug-related services. Routine, standardized screening of individuals for substance use-related needs can increase early identification and clear referral pathways. In 2024, the Drugs Strategy and the BBNOHT's Mental Health and Addictions Steering Committee conducted a feasibility assessment of the possibility of implementing universal screening for substance use disorder in Brantford-Brant and Norfolk. The working group decided to move forward with a small-scale pilot, to be implemented in 2025. While "universal screening" would involve all or nearly all service providers in the community, the pilot will involve a smaller group. For this reason, the working group has chosen to use "cross-sector screening" rather than "universal screening" to describe the pilot phase.

Corresponding Brantford-Brant Community Drugs Strategy Goal(s):

Goal 2: A community that is responsive to the unique and immediate needs of vulnerable people.

- Advocate for coordinated and timely treatment services.

Goal 3: A community that supports the recovery and long-term success of individuals.

- Increase opportunities for coordinated planning with individuals struggling with addiction and mental health issues, including establishing clear pathways to medical and mental health supports for individuals who overdose.

Goal 6: A community that works collaboratively.

- Create cross-training and knowledge exchange opportunities across community service sector.
- Develop a standardized framework for working with individuals with addictions and mental health concerns.



4. Explore ways to increase access to substance use disorder treatment services for criminal justice-involved individuals who use substances that could be launched within existing treatment and criminal justice system capacity.

Brantford-Brant does not currently have the judicial capacity to launch a drug treatment court. However, there continues to be a need for individuals who are involved in the criminal justice system for reasons related to their substance use disorder to have better access to treatment and alternatives to traditional criminal justice sanctions. In 2025, the Drug Treatment Court Working Group will explore alternative ways to increase access to treatment for these individuals that could be launched within existing treatment and criminal justice system capacity.

Corresponding Brantford-Brant Community Drugs Strategy Goal(s):

Goal 3: A community that supports the recovery and long-term success of individuals.

- Increase recovery-focused solutions for individuals involved in the criminal justice system.
- Increase opportunities for coordinated planning with individuals struggling with addiction and mental health issues.



6. Expand access to harm reduction supplies in the County of Brant.

In 2024 the Drugs Strategy began work to expand access to harm reduction supplies in the County of Brant. GEPH completed the onboarding of the County of Brant Public Library branches as naloxone access points, making naloxone available for the first time at fixed site locations outside of pharmacies in Burford, Glen Morris, Paris, Scotland and St. George. GEPH staff, in collaboration with the County of Brant, Positive Health Network and SOAR, also explored how best to expand access to harm reduction supplies beyond naloxone. We heard about the unique challenges of harm reduction supply access in rural areas and small towns such as transportation barriers, sparse service locations, and heightened concerns around privacy and stigma. In 2025, the Drugs Strategy hopes to launch at least one new pathway for accessing harm reduction supplies for residents of the County, tailored to mitigate these challenges.

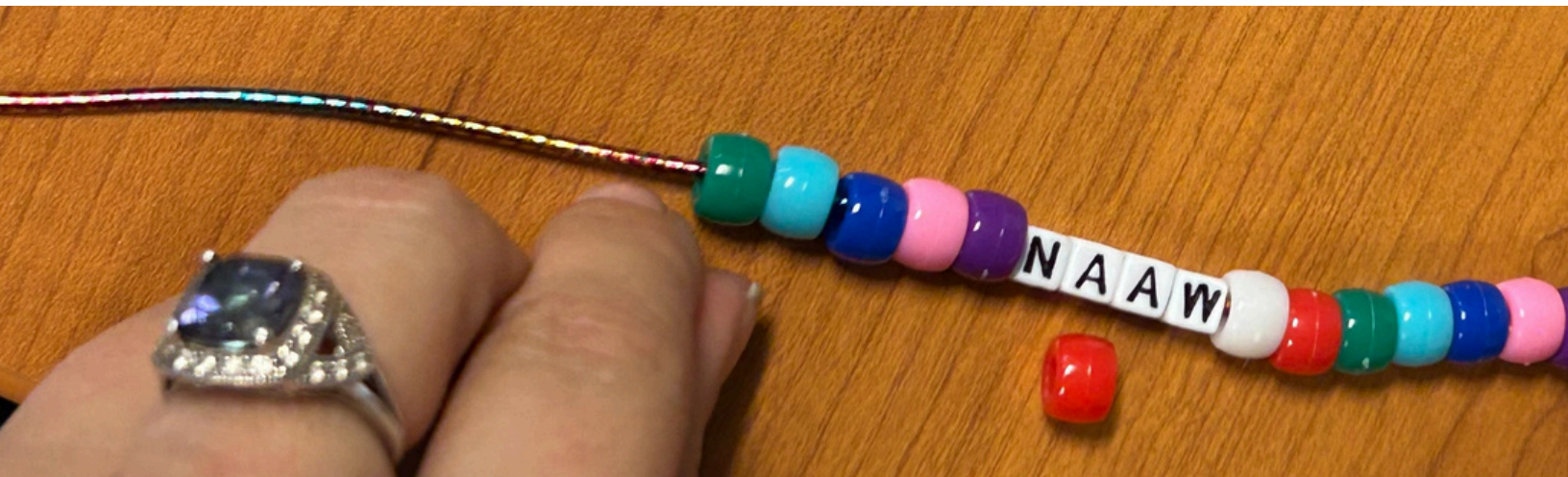
Corresponding Brantford-Brant Community Drugs Strategy Goal(s):

Goal 1: A community that is proactive and prevention focused.

- Improve engagement with rural community.

Goal 4: A community that prioritizes the health and safety of its residents.

- Expand the Needle Exchange Program (NEP).



7. Collaborate with the Ontario Health Team's Mental Health and Addictions Steering Committee to assess the current state of the substance use treatment continuum of care, identify gaps, and make recommendations for improvements.

As part of our 2024 Action Plan, the Drugs Strategy committed to identifying inefficiencies and gaps in current withdrawal management clinical pathways. The BBNOHT and the Drugs Strategy convened a joint working group, and the members of that group made the decision to expand the initiative to include assessing the current state of the entire substance use treatment continuum of care, not just withdrawal management. Significant progress was made on this initiative in 2024, but due to the expanded scope, the project will continue into 2025.

Corresponding Brantford-Brant Community Drugs Strategy Goal(s):

Goal 2: A community that is responsive to the unique and immediate needs of vulnerable people.

- Advocate for coordinated and timely treatment services.
- Increase access to medically supervised mental health and addictions programming.

Goal 3: A community that supports the recovery and long-term success of individuals.

- Increase opportunities for coordinated planning with individuals struggling with addiction and mental health issues, including establishing clear pathways to medical and mental health supports for individuals who overdose.

Goal 6: A community that works collaboratively.

- Develop a standardized framework for working with individuals with addiction and mental health concerns.



8. Develop a formal process for ensuring that future years' Action Plans are developed with input from people who use drugs and people with lived experience of drug use.

In 2024, the Drugs Strategy Coordinator began this initiative by reaching out to Drugs Strategies in other jurisdictions to learn how they incorporate input from people with lived experience of drug use. In 2025, we will build on this work with further research assessing best practices for engaging people with lived and living experience in drug-related work, and implementing our own model based on this research.

Corresponding Brantford-Brant Community Drugs Strategy Goal(s):

Goal 2: A community that is responsive to the unique and immediate needs of vulnerable people.

- Integrate the experiences and knowledge of individuals with lived experience.

Goal 5: A community that values the dignity, expertise and spirit of all people.

- Position people with lived experience central in decision making.



9. Explore interest in enhanced coordination among Brantford-Brant organizations providing mobile or outreach services to people who use drugs.

Mobile and outreach services are an effective approach to engaging with people who use drugs, reducing barriers to access by literally meeting people where they are. Multiple organizations in Brantford-Brant are providing these services, but to date, coordination among them has been largely ad hoc. In 2025, the Drugs Strategy will lead an effort to explore whether there are opportunities to optimize available mobile and outreach services through enhanced coordination among providers.

Corresponding Brantford-Brant Community Drugs Strategy Goal(s):

Goal 2: A community that is responsive to the unique and immediate needs of vulnerable people.

- Focus on client-centered service, including exploring street outreach models.

Goal 3: A community that supports the recovery and long term success of individuals.

- Increase opportunities for coordinated planning with individuals struggling with addiction and mental health issues.
- Expand harm reduction outreach services.

Goal 6: A community that works collaboratively.

- Develop a standardized framework for working with individuals with addictions and mental health concerns.



10. If funding is received, support the integration of Brantford's Homelessness and Addiction Recovery Treatment (HART) Hub into the community's substance use services system.

In the fall of 2024, the Ontario Ministry of Health launched a new demonstration project funding stream for Homelessness and Addiction Recovery Treatment (HART) Hubs. These facilities are designed to serve those with complex service needs, including individuals who are homeless or at risk of homelessness. HART hubs enable access to integrated services, including mental health and addictions services, primary care, and social services, and offer a direct pathway to supportive housing. SOAR applied for funding to launch a HART Hub, with the support of other Drugs Strategy partners. If their application is successful, the Drugs Strategy will support the integration of the Hub into the community's substance use services system.

Corresponding Brantford-Brant Community Drugs Strategy Goal(s):

Goal 2: A community that is responsive to the unique and immediate needs of vulnerable people.

- Advocate for coordinated and timely treatment services.
- Integrate the experiences and knowledge of individuals with lived experience.
- Focus on client-centered service, including ensuring that individuals are knowledgeable and informed about their treatment options.
- Increase access to medically supervised mental health and addictions programming.

Goal 3: A community that supports the recovery and long-term success of individuals.

- Ensure adequate aftercare and continuous supports for individuals leaving day programs, residential treatment and/or detox.
- Increase opportunities for coordinated planning with individuals struggling with addiction and mental health issues.
- Increase access to housing options.



11. Pilot a program to improve overdose response in rental buildings, with the goal of reducing the number of overdoses that occur when people are alone in private dwellings.

The majority of overdose deaths in Ontario occur with no one present to administer naloxone. According to the Office of the Chief Coroner, a bystander was reported to be present in only one in ten Ontario opioid toxicity deaths between 2018 and Q2 of 2024. During the same period, nearly seven in 10 deaths occurred in private residences. Local Brantford-Brant data echo these trends. The Drugs Strategy aims to do more to reduce overdose deaths among people who are using drugs alone in private residences. In 2025 we will explore models used in other communities, with a focus on rental apartment buildings (such as a [successful program](#) in British Columbia), and develop a project plan for local implementation at one pilot site, in consultation with relevant stakeholders.

Corresponding Brantford-Brant Community Drugs Strategy Goal(s):

Goal 1: A community that is proactive and prevention focused.

- Increase public awareness of overdose prevention, especially around fentanyl and other opioids, including the use of naloxone.

Goal 3: A community that supports the recovery and long term success of individuals.

- Broaden access to medications that can reverse the effects of opioids (i.e. naloxone).



12. In collaboration with the OHT Mental Health & Addictions Steering Committee, explore barriers to primary care providers integrating people with substance use disorders into their practices and identify opportunities to reduce barriers.

Once individuals with substance use disorders stabilize with opioid agonist therapy and other supports, it is often appropriate to transition oversight of their ongoing medical needs to a primary care provider. Effective integration of people with substance use disorder into primary care practices can improve treatment system capacity by freeing up specialty providers' time to take on new patients who require higher intensity care. This transition from specialty substance use providers to primary care has been identified as an inefficiency in Brantford-Brant's treatment continuum. In 2025, the Drugs Strategy will work in collaboration with the BBNOHT Mental Health and Addictions Steering Committee to explore barriers to this transition, with the goal of developing recommendations for ways these barriers could be reduced.

Corresponding Brantford-Brant Community Drugs Strategy Goal(s):

Goal 2: A community that is responsive to the unique and immediate needs of vulnerable people.

- Advocate for coordinated and timely treatment services.
- Increase access to medically supervised mental health and **addictions programming.**

Goal 3: A community that supports the recovery and long term success of individuals.

- Ensure adequate aftercare and continuous supports for individuals leaving day programs, residential treatment and/or detox (e.g. transition housing, on-going counselling, peer support groups, etc.)