



OUUDPC 2019

**Treatment Approaches with
Marginalized Populations in the
Context of Opioid Use Disorder**

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Social Accountability

No man is an island entire of itself; every man is a piece of the continent, a part of the main; if a clod be washed away by the sea, Europe is the less, as well as if a promontory were, as well as any manner of thy friends or of thine own were; any man's death diminishes me, because I am involved in mankind. And therefore never send to know for whom the bell tolls; it tolls for thee.

John Donne



Health Equity and Marginalized Populations



Health equity allows people to reach their full health potential and receive high-quality care that is fair and appropriate to them and their needs, no matter where they live, what they have or who they are

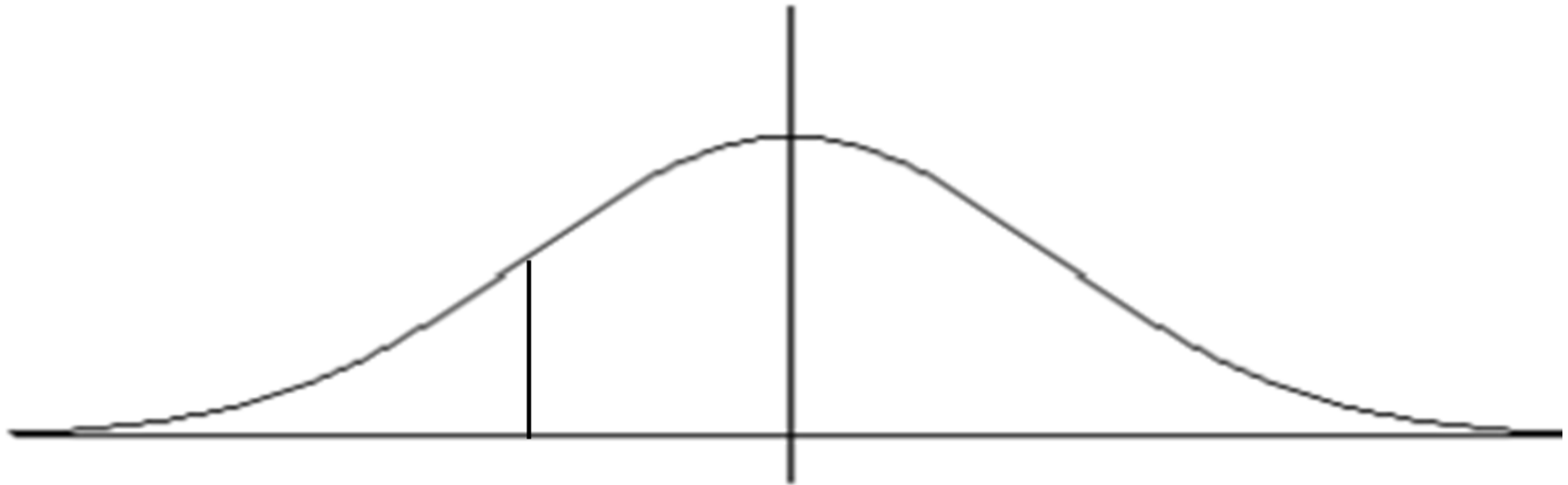


Communities with Differential Impact

- Gender and sexual orientation
- Ethno-cultural differences including linguistic/refugee health
- Indigenous people
- Frail elderly
- Rural & remote residents
- Single-parent families
- Physically disabled
- Mentally ill/drug and alcohol addiction
- Recent immigrants
- The young and the elderly
- Poverty including the homeless

Life Expectancy in Ontario

82.1 years



Life expectancy in Ontario: 2016

Who are our High-Risk, Frequent Users? The Target 5% Experience:

- Lack access to effective care and entitlements
- Receive care that is fragmented, episodic, crisis driven and not integrated
- Vulnerability/isolation /resilience/voiceless
- Poverty



Homelessness in Ottawa

- 7170 individuals



2878 Youth

879/2861
families

967 women

3113 men

The Challenge of Those Living in Poverty & Living with Mental Illness

The right care, at the right place at the right time



Patient Centered Care & New Models of Care

- Define the circumstances of the individual or the nature of the community involved
- What does good health and health care look like to that person or community?
- Consider personal or systems based barriers to health and health care
- Engage individuals and communities in effective solutions
- Care on their terms (right care, right time, right place)
- Build trusting relationships
- Mitigate underlying social factors through partnerships and advocacy
- Define and measure success on their terms



Summary: Inner City Health Programs & Services

Managed alcohol program	21 beds
TED	49 beds + 8 OBS
Special Care for Women	16 beds
Special Care for Men	30 beds
Hospice	21 beds
Primary Care Clinic	
<u>Supportive Housing</u>	
Oaks	55 units
Booth House	20 units
Gardner (HS)	34 units
Kanata	99 units
Carruthers	50 units
MOP	
Safe Supply	
CTS	

Opioids: From Prescription Opioids to 'Purple'



The Consequences of the Opioid Crisis

- Individuals
- Families
- Communities
- Institutions



Managed Opiate Program



Safe Supply



Some Thoughts on Developing Programs that Serve Vulnerable Populations

- Must be built on values
- Must be built around communities' need not providers
- Requires new partnerships/collaborations/community engagement
- Existing policies/procedures can be impediments
- Must be driven by data/evidence/accountability
- We are too risk averse
- In the end it's about changing the culture, finding meaning, letting people be the professionals that they trained to be

What the opioid crisis taught me that I should have known: Caring for the marginalized

- Treatment successes are rare when there is so much chaos: SDH/marginalization
- Effective treatment strategies must include mental health care, trauma informed care, culturally appropriate care
- The role of culture, socialized behaviour, and community in recovery can not be discounted

- I have no right to judge and the solutions have to be theirs. It is my role to support them in achieving their stabilization and recovery
- The opioid crisis is a symptom of a larger social problem. We will not be able to arrest ourselves out of the crisis. It calls for intersectoral collaboration and health/social policy change.
- In addition to the enormous daily suffering there are daily examples of: courage, hope, humour and success

Our Collective Responsibility

- Information for informed health and social policy decisions
- Promote effective health delivery systems for prevention and care
- Promote measures that address the SDH
- Effecting positive social change through healthy public policy
- Advocating for values that are essential for the health of our communities

*The woods are lovely, dark, and deep,
But I have promises to keep,
And miles to go before I sleep,
And miles to go before I sleep*

Robert Frost, Stopping by Woods on a Snowy Evening, 1923





A change for the better

Alcoholics band together, collect pennies to help kids

By NELLY FLAYOHAN

Save some change? You've heard it many times, but chronic alcoholics at a downtown men's shelter are giving the phrase new meaning. They're collecting pennies to help sick kids.

"We're like a family. Our family is working hard to help other people," said organizer Harold Fraser, 46.

Fraser is one of about 25 residents of the Managed Alcohol Program at the Shepherds of Good Hope. Each month, they receive a \$130 personal needs allowance from the city — \$100 goes to the program, the rest is theirs to spend.

About five years ago, Fraser noticed a donation box for CIEFO at a Tim Hortons. It gave him cause to reflect on his family. "I had two daughters. I love them both."

He had seen the girls a decade ago when they were six and seven. Born at CIEFO, they both suffered from spinae dysplasia.

"The day he saw the donation box Fraser decided he would start collecting change."

"I'm doing it for the kids," he said. After collecting change around the coffee shops, he started approaching others. "I need us for meals at the shelter. He'd trade one cigarette for 15 pennies."

"I'm losing but I'm gaining. Every cent counts to fill up those cans," said Fraser, who collected for 15 pennies.

His idea caught on at the shelter, where many residents also have children they've lost touch with. Collecting change makes them feel like they can still help children. In addition to giving their own pennies, they ask for donations.

"They're now rolling the pennies to help other people at CIEFO. After that, they hope to help other people that support children. "I'd love to send them to kids overseas, to kids suffering over there," Fraser said.



Harold Fraser, left, Sharon Slidre and Ron Leland hold some of the pennies they've collected.

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October 31, 2005

Exhibit & Sale
Oct. 31 to Nov. 30, 2005

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Aboriginal Bistro

Dinner Reservations after the show
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108 Murray Street
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Artist Tom Hogan

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