

SHARING TOGETHER

REPORT IN SHORT

A photograph of four people (three men and one woman) sitting around a glass conference table in a meeting room. They are engaged in a discussion, with papers and water glasses on the table. The background shows a brick wall and window blinds.

Developing an evidence priority agenda for Ontario's mental health, substance use, and addictions system

DECEMBER 2017



Evidence Exchange Network (EENet) is a province-wide knowledge exchange network. We connect stakeholders of Ontario's mental health and addictions system with each other and with the evidence they need to make decisions. Located in the Provincial System Support Program (PSSP) at the Centre for Addiction and Mental Health (CAMH), the network includes researchers, clinicians, service providers, system planners, policymakers, persons with lived experience, and families.

PSSP at CAMH works together with communities and service providers across Ontario to move evidence to action. PSSP works to create sustainable, system-level change and to mobilize implementation support for Ontario's Comprehensive Mental Health and Addictions Strategy. With offices in Toronto and across the province, PSSP is on the ground, collaborating with stakeholders to build a better system through our work in implementation, health equity and engagement, knowledge exchange, evaluation and information management.

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BACKGROUND

Sharing Together is an Evidence Exchange Network (EENet) initiative that aims to promote the use of evidence to improve the health care experience, quality of care, and overall health and wellbeing of all Ontarians.

Stakeholders shared their perspectives and identified the evidence that needs to be made available and made easier to understand, so they can better do their work and navigate the mental health, substance use, and addictions system.* These stakeholders from diverse sectors included persons with lived experience, family members, caregivers, direct service providers, agency leaders, policymakers, researchers, and system planners. Stakeholders also represented a range of marginalized populations.

*Based on feedback received during early planning consultations for Sharing Together, the terms “substance use” and “addictions” were included throughout the Sharing Together process, when referencing the system. Use of both terms acknowledges the full continuum of experiences of individuals who use substances, including recreational use, problematic use, dependency, or addictions.

OBJECTIVES

The specific objectives of Sharing Together are to:

- identify priority evidence needs related to mental health, substance use, and addictions in the areas of health promotion and prevention, early identification, treatment, and recovery across the lifespan;
- engage stakeholders to co-create an evidence priority agenda** for Ontario's mental health, substance use, and addictions system;
- inform EENet's and partners' knowledge exchange activities; and
- support transformation of Ontario's mental health, substance use, and addictions system.



***An evidence priority agenda identifies areas of opportunity and need that can be addressed by providing access to evidence or creating evidence.*

Sharing Together builds on the work of a 2011 EENet initiative, Creating Together, which identified research priorities needed to improve the mental health, substance use, and addictions system with the participation of diverse stakeholders and sectors.

The Sharing Together initiative looks beyond research and considers all forms of evidence. EENet's definition of evidence includes research evidence; practice-based evidence; the voices of people with lived experience, family members, and caregivers; and cultural knowledge.

PROCESS

To support the co-creation of the evidence priority agenda, the Sharing Together team scanned policy and planning documents related to Ontario's mental health, substance use, and addictions system. The results of this scan helped to spark discussions at group dialogues held across the province.

Eight dialogues were held between January and April 2017. Seven were in person (Thunder Bay, Barrie, London, Sudbury, Toronto, and Ottawa) and the eighth dialogue was hosted by web conference with representatives from several of the Local Health Integration Networks (LHINs). One of the Ottawa dialogues was held in French.

After the dialogues, an online survey was used to prioritize the evidence needs already identified and to obtain input from stakeholders who were unable to attend these events.

In total, over 550 individuals from diverse stakeholder groups and sectors came together to share their experiences and knowledge, and prioritize their evidence needs.



Detailed information on the Sharing Together process is included in the full report available here:

http://eenet.ca/sites/default/files/ST_Report_ENGLISH_JAN2018_FINAL.pdf

FINDINGS

During the Sharing Together dialogues, participants discussed the evidence they need related to 10 evidence themes. Within each of the 10 evidence themes, Sharing Together participants prioritized two evidence needs. In the full report, these are discussed in the evidence priority agenda, including a summary of why this evidence is needed to improve the system.

Overall, the evidence priority agenda identified by the stakeholders highlights the range of opportunities to develop and use evidence for system transformation.



THE 10 EVIDENCE THEMES AND PRIORITIZED EVIDENCE NEEDS ARE:

ACCESS TO SERVICES



- Waitlist management strategies, including effective interim supports for individuals on waitlists
- How to engage individuals who are hard to reach in service delivery (such as those from marginalized populations and rural communities)

CHILDREN AND YOUTH, INCLUDING TRANSITION-AGE YOUTH



- Strength-based and trauma-informed interventions for children and youth that integrate mental health, substance use, and addictions
- How to best support vulnerable and at-risk youth

CONTINUUM OF HOUSING AND HOMELESSNESS



- Effectiveness of different approaches across the continuum of housing and homelessness
- Transitional housing models and services for different populations

CULTURALLY SAFE AND COMPETENT CARE THAT REFLECTS CULTURAL KNOWLEDGE



- How to provide core services that are accessible, culturally safe, and trauma-informed
- How to define culturally safe and culturally competent care in service delivery

EFFECTIVENESS OF SERVICES



- How to define effectiveness of services from the perspective of service users, family members, and caregivers
- How to address service provider burnout and compassion fatigue at the organizational and system level

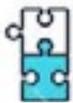
THE 10 EVIDENCE THEMES AND PRIORITIZED EVIDENCE NEEDS (CONTINUED)

HARM REDUCTION



- Effective harm reduction approaches for harmful behaviours, substance use, and various types of addictions
- How to reduce stigma and increase awareness of harm reduction

INTEGRATED HEALTHCARE



- Best practices, protocols, and policies that increase collaboration and information sharing between service providers
- Integrated healthcare approaches for rural and underserved areas, and marginalized populations

PREVENTION AND PROMOTION, INCLUDING SUICIDE PREVENTION



- Coordinated mental health, substance use, and addictions prevention and promotion strategies, across the lifespan
- School-based interventions for prevention, promotion, and early intervention (including suicide prevention)

STANDARDIZED CARE



- Factors that make standardized care effective, efficient, and appropriate
- Standardized care pathways (for example, acute care to community, or primary care to specialty care)

SUPPORTING THE VOICES OF PERSONS WITH LIVED EXPERIENCE, FAMILY MEMBERS, AND CAREGIVERS



- How to effectively and meaningfully engage persons with lived experience, family members, and caregivers in decision-making, and outcomes of integrating their experiences in organizational processes and system-level initiatives
- Strategies to build trust and reduce stigma that are informed by service users, including peer support models

PROVINCIAL ALIGNMENT



The findings of Sharing Together align with and support the objectives of provincial initiatives aimed at improving Ontario’s mental health, substance use, and addictions system.

This includes the key recommendations proposed by the Mental Health and Addictions Leadership Advisory Council (*Better Health Means Better Mental Health – 2016 Annual Report*. Available from: ontariominds.ca). For example, through the Sharing Together process, stakeholders identified the need to better engage with, and consider the expertise of, marginalized populations, including remote communities and Indigenous stakeholders, to improve access to culturally safe and appropriate services. This aligns with the Council’s focus on health equity considerations to support system transformation.

Sharing Together also aligns with the goals outlined in the Ministry of Health and Long-Term Care’s *Patients First: Action Plan for Health Care* (2015) which highlights the need to help people make evidence-informed decisions about their health, improve access to care, and strengthen coordinated and integrated care.

NEXT STEPS

EENet and other stakeholders across the province will work to address the needs identified through Sharing Together. We know that evidence already exists that would respond to some of the evidence needs. This evidence may come from research, cultural knowledge, or the lived experiences of people with mental health, substance use, or addictions concerns, and their families and caregivers. It may also come from the outcomes of current initiatives or from practices already in place across Ontario. We also know that new evidence may need to be created and collected from various sources.

EENet's next steps include leveraging the support of system partners, sharing existing evidence, and co-creating new evidence to respond to the identified evidence needs. EENet will do this in partnership with:

- persons with lived experience;
- family members and caregivers;
- members of marginalized groups;
- system planners;
- policymakers;
- service providers; and
- researchers.

To move Ontario's mental health, substance use, and addictions evidence priority agenda forward, it is essential to improve access to - and facilitate the use of - evidence.

TAKING ACTION ON THE FINDINGS OF SHARING TOGETHER CAN:

- help service users, family members, and caregivers to better navigate services and supports, and participate in their own recovery;
- equip service providers to offer evidence-based, culturally safe, and trauma-informed care that responds to the needs and feedback of service users;
- help system planners and policymakers make existing services and supports more accessible and effective;
- identify areas and populations that researchers and peer researchers can explore further; and
- validate and integrate cultural knowledge and the voices of lived experience into the system.

SHARING TOGETHER

FULL REPORT



The full report includes the co-created Evidence Priority Agenda, Next Steps, References and Appendices.

http://eenet.ca/sites/default/files/ST_Report_ENGLISH_JAN2018_FINAL.pdf