

What's the bigger aspiration that you want to work on together that you can't do now alone?

change funding  
structures

cross regional  
cooperation/collaborati  
on

Collaboration to make  
access to services easier to  
navigate for youth and  
families - no wrong door

food / shelter and safety  
youth focus and  
directed

stop talking and start  
doing

safety - relevant,  
responsive, connected

Increase social-emotional  
learning/skills for the  
developing generation

bridging the cracks/siloes  
between parts of what  
should be a system of care



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major organizations coming together with courage to act on the evidence; too much cowardice currently

Need to come together to refuse govt funding/RFPs that reinforce silo-ing and non-collaboration

We have to have courage and bravery against the current political climate to advocate for public health basics like harm reduction (safe injection, govt supply) despite fears/anger against the same.

School support groups for "use and addictions" - in the same way we have SOGI groups, diaspora support groups, etc. This can be for youth experiencing substance use directly, or impacted via familyetc

Coordinated efforts of CARE

Closer collaboration and coordination is universally being asked for, as a means of addressing complex problems. But who is in charge of putting together the big picture? What is the plan?

work on harm reduction stigma, share in positive programming an funding that could be used elsewhere, develop a continuum of care, break down barriers between services, consistent guidelines

Need to collectively agree to no-wrong-door, no-wrong-time models of care



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Help organizations review their policy and procedures do they support a harm reduction approach with youth or do they create barriers.

That the needs of children and youth with disabilities are present and taken into account in every conversation, collaboration, etc.

In terms of better care pathways, align mandates (age range), transform data and information sharing abilities

We're trying to start an Indigenous Lead Youth Treatment Centre in the North, but we've faced multiple barriers including capital expenditure challenges, limited partnering opportunities, policy issue

alter the system to suit youth needs rather than adults

Bureaucratic breakdown of systems

licensing for social workers so that they can do continued training throughout their career

To advocate for prevention funding that is long term and sustainable. While understanding that intervention is still needed. Both are necessary.



## What's the bigger aspiration that you want to work on together that you can't do now alone?

focus on the toxic drugs

stop fragmentation of services

As social support sector we want to see RCY use her voice and position with the Province to bring our voices into drug policy discussions

I wish that we would be able to have the societal conversation necessary rather than allowing it to be "punted" into buckets like "treat their mental health". I treat mental health and I need help!

A loud collective voice for change

We need peer recovery group and addictions awareness offered in our high schools and middle schools.

To support removing segregation of care

frame the bigger challenge and risks for young people including injuries, harms - if all we are concerned about is kids not dying then that is a very low bar



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seamless  
transition/access to  
services

Cannot conflate the two questions posed, i.e. 1. impacts of substance use, 2. toxic drug crisis. Are we bringing youth voice into the drug policy conversation? That is different than the broader q1.

What can "recovery communities" look and feel like? How do we engage communities to hold healing space for youth returning from care, outside of their community (and how do we get care IN community)

bring together healthcare providers to have a shared vision of how to address youth using substances, to prioritize it, and motivate them to learn and take it on.

De-normalize substance use amongst adolescents (while still completely accepting and supporting those who are using). Differentiate between the persons and the behavior.

Who is going to speak the truth

funding that does not restrict ability of providers to provide the service that is needed at the time (i.e. can provide HR services onsite not just supplies and tell youth to leave)

all hardworking well intentioned individuals/experts - but can't do it alone



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Youth NEED to be involved

clearly define how the issues of toxic drugs and youth intersect as they are two different issues

Who will be a champion for change and who will listen

Are organizations able to support Harm reduction with all substances- alcohol to zopiclone. Or is it just the ones that the organization/ staff feel comfortable supporting

Children and youth - specific services

Lets build the youth version of the Coroners' report!

That families raising youth with disabilities can have access to information and support that considers the intersection of their circumstances.

involving front line workers and youth addicts in direct ministry planning



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value of youth voice

Improve access to timely qualified and skilled trauma therapies

Need to ensure SDOH and Basic Needs are a right for kids. Have to come together to expose root cause to prevent criminalization.

how to create/alter services that come to the youth, rather than expecting them to travel and navigate how to get what they need....

I want to address parents' fears about their children without cowering to them. We have to hear what they're worried about while directing it to techniques to work!

How RCY can use it's power and access to advance youth voice in drug policy

culturally safe services that are decolonized

Are we supporting staff to do this work- its a different approach to many cant just change policy and have a training- repeated engagement, help walk through moral distress.



# What's the bigger aspiration that you want to work on together that you can't do now alone?

moving away from  
abstinence only models to  
supporting continuum of  
care

More early/timely  
mental health services

safe supply - reducing  
stigma and resistance when  
youth are involved

More prevention and  
education

Fragmented system- we can  
navigate it how is a patient or  
their family. The split of CYMH,  
Health Authority Foundries  
doesn't create cohesive  
supported approach and info  
sharing

Bigger aspiration: address the  
toxic supply of drugs. Having a  
system where there are no  
health and safety  
regulations/oversight on the  
production and distribution of  
drugs is causing harm for youth

Why are we not doing  
more to ensure the drug  
supply is not toxic?

build network to have  
collective voice



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youth voices integrated  
in

More harm reduction for  
children and youth

Toxic drugs is a different  
conversation than  
addiction!!!

Interrupt the lethal triad of  
traumas (including  
attachment), limited  
social/emotional skill  
development and  
normalization (and access to)  
of substance use in the  
developmental (youth) years

support and care for  
families