
CONFERENCE ABSTRACT

Design to Action: Community Capacity Building for Opioid Response

1st North American Conference on Integrated Care, Toronto, 4 - 7 October 2021

Maryam Mallakin¹, Kate Sellen, Christina Dery, Triti Khorasheh, Caroline Bennett
Abuayyash, Emily Taylor, Robert Schwartz, Pamela Leece

1: OCAD University, Canada

Introduction

In response to the opioid crisis, communities across Ontario have developed individual opioid action plans to address issues at the local level. Public Health Ontario (PHO) has led the Community Opioid / Overdose Capacity Building (COM-CAP) project, which aims to reduce opioid-related harms at the community level by working with communities to identify, develop, and evaluate supports for local needs around opioid /overdose planning. A co-design approach was used to engage stakeholders in identifying capacity building supports to meet specific communities' needs for improving opioid/overdose knowledge and services at the local level.

Aims Objectives Theory or Methods

A co-design workshop was used to identify community-level challenges, gaps in opioid/overdose plans, and planning. The workshop included 4 activities with 52 participants (representing 7 sectors or groups involved in plans, including 10 people with lived/living expertise of drug use). These four activities were: identifying priority challenges (scenarios & personas); identifying potential support areas & delivery methods (using a capacity building matrix); prioritizing top challenges, priority supports, delivery methods (dot voting); and discussion on project evaluation (evaluation matrix). The activities were tailored to identify capacity building needs with data from prior work (Situational Assessment (SA)).

Highlights or Results or Key Findings

The co-design workshop provided an opportunity to gain a deeper understanding of challenges, gaps, and needs around capacity for opioid/ overdose action and planning experienced at the local level. The results achieved from the co-design workshop enabled the project team to identify and prioritize the main support areas to be considered in the development of COM-CAP project tool(s). The key findings of the workshop were summarized and categorized under five major groupings, each consisting of 5 to 11 specific support requests. The five groupings were 1) Stigma & equity as a cross cutting theme, 2) Trust-based relationships, consensus building & on-going communication, 3) Knowledge development & on-going access to information & data, 4) Tailored

strategies & plan adaptation to changing structures & local context, and 5) Structural enablers & responsive governance.

Conclusions

The co-design approach provided a space for sharing and generating knowledge to identify areas for capacity building supports, provide an opportunity to achieve shared understanding, and identify specific information on possible supports. Additionally, employing highly tailored co-design techniques enhanced the effectiveness of large-scale workshop activities on this public health issue.

Implications for applicability/transferability sustainability and limitations

Findings from the workshop have applicability for initiatives aimed at capacity building to address the opioid crisis at the community level. This work identified specific areas for implementation and sustainability supports for local opioid planning including plan adaptation (structural & contextual) and ongoing evaluation.