

Community Report

# Alternate Neighbourhood Crisis Response (ANCHOR)

**A Safer Alternate Response to Mental Health  
and/or Substance Use Crisis**





In July 2023, Ottawa City Council approved a Safer Alternate Response for Mental Health and Substance Use Crises Prototype. This safer alternate response approach includes the creation of a non-911 number to triage mental health and/or substance use crisis related calls and the implementation of a 24/7 community-based mobile crisis team.



# Introduction

Ottawa City Council's decision was guided by robust research led by the Ottawa Guiding Council for Mental Health and Addictions (the Guiding Council) that included:

- Research on the current 911 system in Ottawa and alternate responses in other cities that do not focus on a police response.
- A literature review to examine the role police response and use of force training have played in mental health crisis response and best practices to respond to mental health calls.
- Establishment of a Reference Group of people with lived and living experience of mental illness and/or substance use to further inform the development of the final mental health and substance use crisis response.
- Community consultations with nearly 1200 individuals through focus groups, interviews and surveys.

The implementation of a safer alternate response represents the Guiding Council's strong leadership and vision for a non-police, community based, anti-racist, anti-colonial, culturally appropriate and trauma-informed response for individuals experiencing mental health and/or substance use crises.

The City of Ottawa is a proud member and funder of the Guiding Council and is committed to continue working with community partners to design and deliver services that are responsive to individuals who experience the greatest barriers, particularly individuals who are Indigenous, Black or racialized who have experienced disproportional trauma through existing systems.

**In March 2024, the Safer Alternative Response for Mental Health and Substance Use Prototype was renamed the Alternate Neighbourhood Crisis Response (ANCHOR) by the Guiding Council based on a voting process.**

The implementation of ANCHOR aligns with larger movements nationally and internationally that call for a new approach to mental health and/or substance use crisis response that is person-centred and culturally appropriate.

The implementation of a safer alternate response is the first of three strategies in the Mental Well-being pillar of the Community Safety and Well-Being (CSWB) Plan and is included as a strategic objective in the City of Ottawa's Strategic Plan 2023-2026, which aims to promote and support proactive mental health supports, strategies and community-led crisis mental health response models.

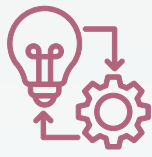


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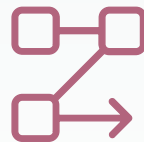
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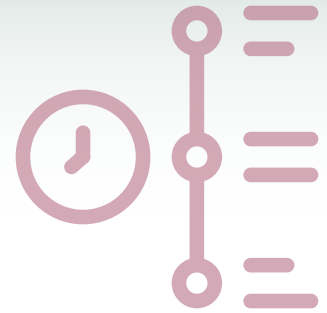
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# 1

## Timeline

### Progress Towards the Implementation of a Safer Alternate Response

#### Planning

##### January 2021 – December 2021

- The Guiding Council was established by motion, by the Ottawa Police Services Board, to **examine alternatives to a police response** for mental health and substance use crises.
- City Council approves the Community Safety and Well-Being Plan. Mental Well-Being is one of the **six priorities**.
- City Council directs staff to work with the Guiding Council to **develop an alternate for mental health crises response** and through motion, allocates funding to support work.

#### Development

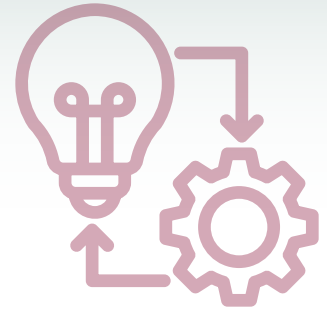
##### March 2022 – June 2023

- The Guiding Council establishes a Secretariat to conduct consultations and gather input to be used to **develop a 24/7 crisis response strategy** for implementation in Ottawa.
- The Guiding Council Secretariat **undertakes an evidence-informed approach**, including literature review, environmental scan, and data and audio analysis from several crises phone lines.
- The Guiding Council Secretariat **leads in the design, implementation, data collection, and analysis** for public consultation sessions, which include virtual and in person focus groups, surveys, and interviews.

## Implementation

### June 2023 – July 2024

- The Guiding Council **presents research findings** to Community Services Committee and recommends an anti-racist, trauma informed, culturally appropriate alternate crisis response project prototype approach.
- **City Council approves \$3M in funding** for service delivery to implement the first phase of a Safer Alternate Response for Mental Health and Substance Use Crises Prototype in one geographic location of the city.
- The City of Ottawa and the Guiding Council leads a detailed, evidence informed, and data driven process to selection of the **geographic location for the launch of the Prototype**. Centretown is selected as the first phase geographical area.
- Centertown Community Health Centre, in collaboration with Somerset West Community Health Centre is selected to **lead the Response Service Delivery of the Prototype**.
- Community Navigation of Eastern Ontario/211 East Ontario (CNEO/211) is selected to **lead in the call diversion** (non-911 number) function.
- The Community Safety and Well-Being Office initiates an **Implementation Project Team** and serves as the backbone organization, working in partnership with proponents to provide program management support.
- By vote, the Guiding Council named the Safer Alternate Response for Mental Health and Substance Use Prototype the **Alternate Neighbourhood Crisis Response** (ANCHOR).



## 2

# Background on the Initiative

Recent incidents and tragedies faced particularly by Indigenous and Black individual in crises in the city of Ottawa highlight the need to examine alternate models of community safety response to mental health and substance use crises, with particular focus on models that do not engage the police.

In January 2021, the Guiding Council was first convened in consequence of a motion (January 2021) by the Ottawa Police Services Board to respond to pressure from Ottawa community members to examine alternatives to a police response for mental health and substance use crises that incorporates a diversity, race, and inclusion lens. The Guiding Council is made up of 11 networks that represent 150 organizations throughout Ottawa.

While the Guiding Council was being formed, City Council approved Ottawa's first Community Safety and Well-Being Plan in October 2021. The Plan includes six priorities identified through comprehensive community engagement, one of which is Mental Well-Being. One of the strategies within the Mental Well-Being priority is to work with partners to explore safer alternates for mental health crises response.

To improve coordination related to mental health efforts within the Community Safety and Well-Being Plan and those being led by the Ottawa Police Services Board, City Council directed action on May 26, 2021, which resulted in the Guiding Council expanding its mandate to encompass the mental well-being priority under the Community Safety and Well-Being Plan, with a primary focus on the development of the alternate response. The Guiding Council Secretariat was formed to lead efforts on behalf of the Guiding Council to develop an implementation plan for an alternate crisis response.

In March 2022, the Guiding Council Secretariat started working on a strategy ([ottawagcmha.ca/report](http://ottawagcmha.ca/report)) to establish a safer alternate response to mental health and substance use crises. The Guiding Council Secretariat undertook an evidence-informed and community development approach to capture the voices of those directly affected by the current mental health system.

The Guiding Council Secretariat's research laid the foundation for the design of Ottawa's safer alternate response and City Council's funding enabled the implementation of a community-led crisis response model. Together, these actions highlight the community centered approach Ottawa has taken to prioritizing a new response for individuals experiencing mental health or substance use crises.



“

When you're in crisis, you just need to feel heard by someone, not solutions.”





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## What We Heard Community Voices

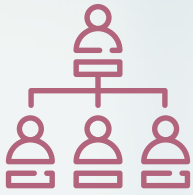
Key findings from “What we heard – Ottawa Guiding Council for Mental Health and Addictions Report”



People have the same right to be helped as anyone, regardless of their situation.”



## How People Were Engaged



**50**

**organizations**

The Guiding Council Secretariat connects and build relationships with over 50 organizations.



**11**

**people**

Established a reference group of 11 people with lived and living experience to give advice and to review and provide insights on research.



**100**

**interviews**

Conducted 100 one-on-one interviews.



**50**

**focus groups**

**747**

**participants**

Held 50 focus group consultations with 747 participants.



**2**

**online surveys**

**347**

**respondents**

Launched two online surveys with 347 respondents.



## Positive Experiences With Mental Health / Substance Use Crisis Services

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- Responses that involve community-based and collaborative teams. In these responses, de-escalation and sometimes a calm space can be provided to individuals in crisis.
- Social workers, community outreach, and frontline responders that provide service navigation and supports via community health centres, crisis lines.



**The mobile crisis team does good work and know more resources than many emergency services.”**



## Negative Experiences With Mental Health / Substance Use Crisis Services

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- Many participants from African Caribbean Black, Racialized, Street-Involved, and Newcomer communities faced discrimination and racism by first responders and service providers. As a result, these participants are scared of harm or criminalization, which prevents them from asking for help.
- When being seen at a hospital or calling a crisis line, people experienced hopelessness and dissatisfaction with the help given (e.g., no follow up; made things worse). This was also seen as a barrier to recovery, as when a crisis does not get resolved, it is more likely that the same crisis will happen again.



**The way people speak to me is in a condescending manner – comes down to accent – they think they can mistreat you because of that.”**

## Recommendations for an Ideal Crisis Response System

### Culturally Safe

#### Findings

- Services need to have more representation from diverse cultures.
- Services, staff and approaches attend to the specific needs of each cultural group.
- “When you are in a mental health crisis, it is too much to manage your emotions and try to translate what you are experiencing into your second language.”
- “We need more mental health professionals who are from the same community – they will understand better how to meet [client] needs and expectations.”

### Relationships

#### Findings

- People want to have a human-centered approach to crisis response.
- They want service providers to acknowledge trauma, and the validity of their experiences while in crisis. Participants want to feel heard, trusted, safe, and not left alone.
- “It makes it worse to fight people to do what you want – you will benefit much more from building rapport.”
- “When you’re in crisis, you just need to feel heard by someone, not solutions.”

### Reduction of Stigma

#### Findings

- Concerted targeted efforts to decrease stigma and its resulting discrimination among service providers who respond to mental health and substance use crises.
- “A crisis service devoid of discrimination with equity in care.”
- “People have the same right to be helped as anyone, regardless of their situation.”

### Collaboration

#### Findings

- Increase connections, coordination and information sharing when it comes to hospitals vs. community vs. police responses.
- Invest in existing community-based resources.



# 4

## Geography

### Rationale for Geographic Location: Centretown

This community-based service will be initially operated in an area of the Ottawa where there is a proven need, and a high volume of crisis calls.

Through a detailed, evidence informed, and data driven process Centretown was selected as the first phase geographical area. The analysis leverages the “best data available”, while acknowledging that data about population mental health and addiction support is scarce and even more so in smaller geographies. It is recognized that there are gaps and limitations of the current data including a lack of race and equity data. While there are demographic data from Statistics Canada of people who formally reside there, it is not representative of people who are transient.

#### High Community Need

Data on mental health and substance use-related police calls and emergency department visits underscored a significant need in the chosen geography. In addition, data on the number of emergency shelter beds, encampment locations, and needle pick-up.

#### Sociodemographic Data

Leveraging data from the Neighborhood Equity Index’s Socio Economic and Equity Indicators as well as sociodemographic Census data from Statistics Canada, specifically those that identify as racialized or Black.

#### Best Practice Alignment

This approach aligns with best practice advice from municipalities who have implemented similar community-based response models. Starting in a small but densely populated area and expanding as the team demonstrates impact is a recommended strategy.

#### Existing Social Services

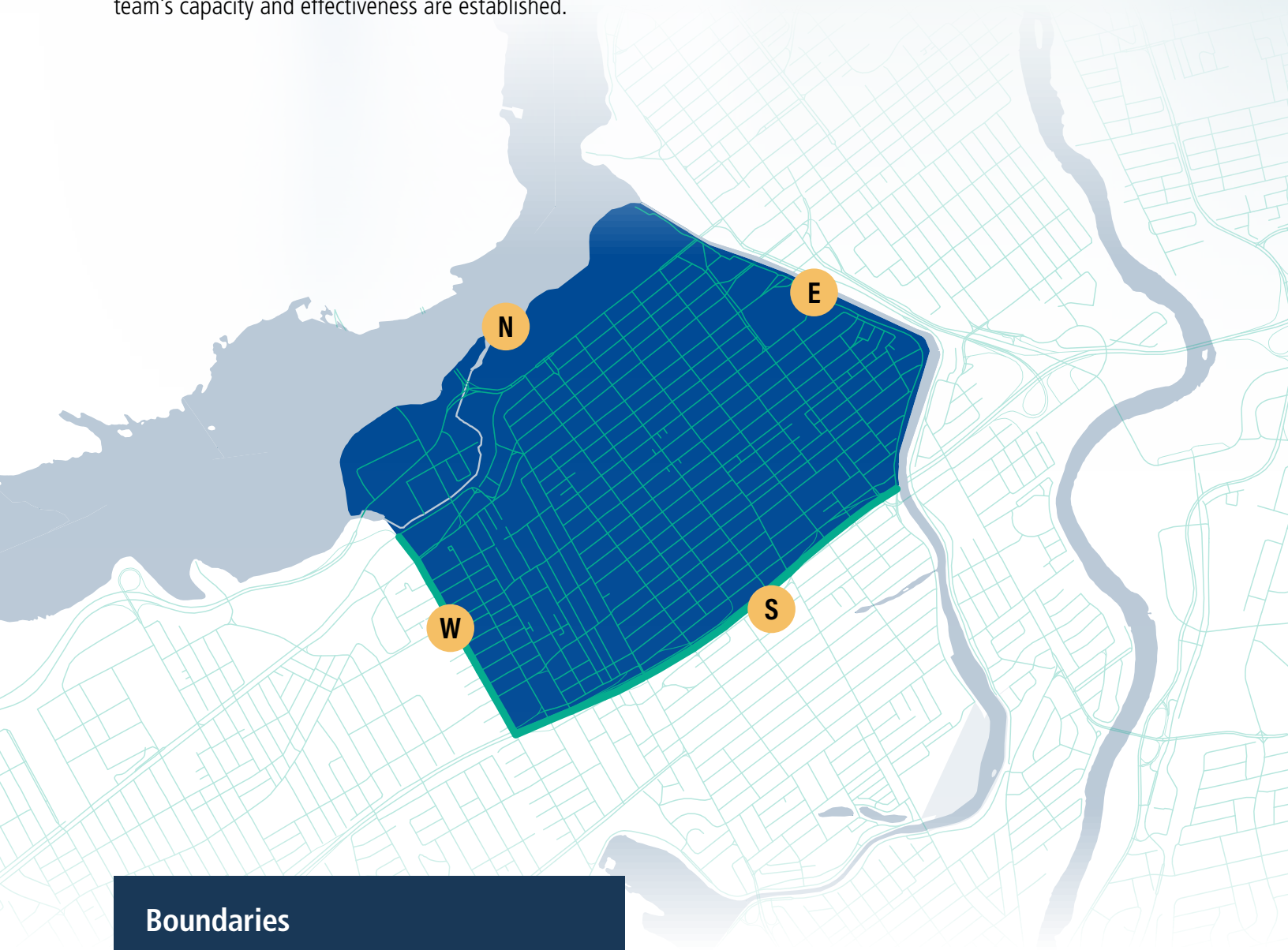
Identifying the presence of other human and social services within the selected geography provides an opportunity for comprehensive support. This approach addresses not only mental health or substance use crises but also compounding stressors, including housing support, social inclusion, employment support, and basic needs.

## Central Location

The central location of the geography offers the advantage of adding adjacent streets which are also identified as high needs areas as the response team's capacity and effectiveness are established.

## Urban Accessibility

Geography allows for the crisis response team to connect with clients.



### Boundaries

- North: Ottawa River
- East: Rideau Canal
- South: Trans-Canada Hwy/ON-417
- West: Preston Street



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## Safer Alternate Response Model

### Key components:

1.

#### “No wrong door” approach

For mental health and/or substance use crises, Ottawa residents will be able to access a range of response services of their choosing that feel safe and meet their individual needs.

2.

#### Multidisciplinary Crisis Response (MCR)

A coordinated, community-based, multidisciplinary and culturally appropriate crisis response system will be created to better meet the needs of Ottawa residents.

3.

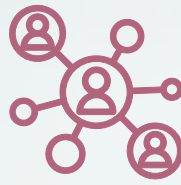
#### Peer support and wrap-around system

Establishment of a network of supporting community agencies that operate within the geographic area that can support clients on an ongoing basis to provide stability, system navigation and follow up support.

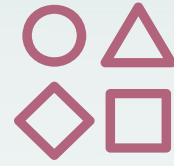




**Mental health professionals, outreach workers and peer workers available 24/7**



**Connections to community-based response centres**



**Reflect specific and diverse communities**



**Engaged with people with lived and living experience**



**Designed to include wraparound services including follow-up**





# 6 ANCHOR In Action

ANCHOR is a non-police, community-led, culturally sensitive, trauma informed, and equity-centered service that dispatches skilled crisis teams to people in mental health and/or substance use crises.

### Mobile Teams

A community-based, multidisciplinary team of professionals and peers.



### Guiding Council

Supports alignment of pilot with Ottawa's mental health and substance use strategy.



### Health Partners

Somerset West and Centretown CHCs provide service anchored in a person-centred, trauma-informed, anti-racist and anti-oppressive approach.



### City of Ottawa

Phase one funder and backbone support, creating capacity for proactive and community led crisis response.



### Access & Intake

CNEO/211 serves as an alternate call intake, triage, and dispatch system for mental health and/or substance use calls.



### Crisis

## 2-1-1

Call 211 when you or someone else is experiencing a crisis related to mental health and/or substance use. Service available 24/7 all year round.



## 2-1-1 Completes Assessment



Trained call takers listen, assess and provide support and service, including referrals or mobile crisis response.

## Dispatch Mobile Crisis Teams

Community-based mobile crisis team of mental health professionals and peer support workers is dispatched.



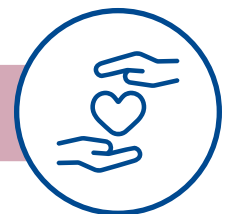
## Mobile Team Arrives On Scene



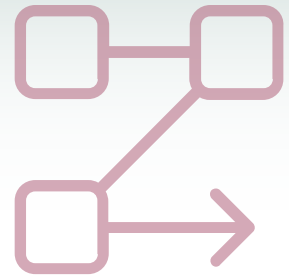
Mobile team meets the individual where they are at, supports them through the crisis and offers referrals to wrap-around services as needed.

## Follow-Up & Resource Navigation

Timely follow-up with individuals who need more support, proving a continuity of care and referral pathway.



### Wrap-Around Support System



# 7

## Next Steps

**Alternate Neighbourhood Crisis Response (ANCHOR) will be implemented in phases to ensure that the service is efficient, consistent, and reliable.**

Limiting the first phase to a select geographic region will allow the project team to test, evaluate, and strengthen a community-based crisis response before implementing it at a larger scale. This approach is aligned to best practice learnings from other cities who have launched similar teams.

Community Navigation of Eastern Ontario/211 East Ontario (CNEO/211 East) is a sector leader in information and referral services and acts as the front door into the community social services system in Ottawa. CNEO/211 East will be the community dispatch partner for ANCHOR and take on that critical role of crisis call navigation and ensuring people are connected to the services they need, when they need them.

ANCHOR will be available in Ottawa’s Centretown community and the mobile crisis service will be delivered by partnered Community Health Centres invested in ensuring trauma-informed and culturally appropriate practices in crisis management and ongoing follow-up support for service users.

Both Centretown Community Health Centre (CCHC) and Somerset West Community Health Centre (SWCHC) bring extensive experience in working with diverse communities, including Black and racialized populations, and those experiencing homelessness. They employ a person-centered, harm reduction, anti-racist, and anti-oppressive approach, with a strong emphasis on building trust and maintaining relationships with clients, their families, and the broader community.

A collaborative Evaluation Framework will provide a structured approach for assessing ANCHOR’s effectiveness, efficiency and impact. It will outline key elements to be evaluated, criteria for success, data collection methods and metrics used to measure outcomes. The primary objectives of this safer alternate response approach is to have fewer mental well-being and substance use crisis situations handled by the Ottawa Police Service, and improved social and health follow-up connections made for ongoing support.

Ongoing monitoring and evaluation will be used to determine funding requirements for future years and will be used to assess whether there is an opportunity to scale the program beyond current capacity.

The Guiding Council remains a leader in the roll out of this community-based crisis response. The City, safer alternate crisis response service delivery partners, and the Guiding Council will continue to seek opportunities to engage with the community and people with lived

and living experience to improve outcomes for people experiencing mental health and substance use crises.

[Transforming Mental Health and Substance Use Crisis Response in Ottawa: The Strategy](#)

## Calls to Action:

Sign up for Guiding Council newsletter

Sign up for CSWB Plan newsletter

Spread the word about the service in Centretown

Regularly check CSWB Plan website for updates  
[ottawa.ca/cswbp](http://ottawa.ca/cswbp)

### Other supports available for people experiencing a mental health crisis and looking to connect with someone, including:

If you are experiencing thoughts of suicide

**988**

Distress Centre of Ottawa and Region

**613-238-3311**

Mental Health Crisis Line

**613-722-6914 or 1-866-996-0991**

Mental health, addictions and substance use health resources

**[OttawaPublicHealth.ca](http://OttawaPublicHealth.ca)**



# 8

## Key Terms Glossary

**Community Safety and Well-being:** Refers to the ideal state of a sustainable community where everyone is safe, has a sense of belonging, opportunities to participate, and where individuals and families are able to meet their needs for education, health care, food, housing, income, and social and cultural expression (Government of Ontario; Ministry of the Solicitor General, 2018).

**Cultural Sensitivity:** A process of self-reflection to understand personal and systemic biases and to develop and maintain respectful processes and relationships based on mutual trust. It is a basic knowledge of the diversity, world views, spiritual, and cultural values of different peoples, and the historical and contemporary issues that influence them (UBC Equity and Inclusion Office, 2020).

**Cultural Safety:** Term describing a physically, socially, emotionally, and spiritually safe environment where there is recognition of, and respect for, the cultural identities of others, without challenge or denial of an individual's identity, who they are, or what they need. Cultural Safety is a concept that originated in the healthcare domain to

acknowledge the power imbalance inherent in the patient-practitioner relationship (UBC Equity and Inclusion Office, 2020).

**Discrimination:** Differential treatment on the basis of personal characteristics such as race, ancestry, place of origin, colour, ethnic origin, citizenship, creed (religion), sex, sexual orientation, gender identity, gender expression, age, marital status, same-sex partnership status, family status, or disability that results in disadvantages in the provision of housing, health care, employment, and access to goods, services, and facilities (City of Ottawa; Women and Gender Equity Strategy, 2021).

**Equity:** Equity, unlike the notion of equality, is not about sameness of treatment. Equity denotes fairness and justice in process and in results. Equitable outcomes often require differential treatment and resource redistribution so as to achieve a level playing field among all individuals and communities. This requires recognizing and addressing barriers to provide opportunity for all individuals and communities to thrive (McGill University; Equity at McGill 2024).

**Equity-Deserving Groups:** As explained by Professor Tettey "... those on the margins of our community, [...], deserve equity as a right. They should not be given the burden of seeking it and they should not be made to feel that they get it as a privilege from the generosity of those who have the power to give it, and hence the power to take it back" (Tettey, 2019).

**Evidence-based:** Policies, programs and/or initiatives that are derived from or informed by the most current and valid empirical research or practice that is supported by data and measurement (Government of Ontario; Ministry of the Solicitor General, 2018).

**Marginalization:** Refers to a long-term, structural process of systemic discrimination that creates a class of disadvantaged minorities. These groups become permanently confined to the margins of society; their status is continually reproduced because of the various dimensions of exclusion particularly in the labour market, but also from full and meaningful participation in society (Government of Ontario, 2021).

**Person Experiencing a Mental Health and/or Substance Use Crisis:** A person who either identifies or whose behaviour indicates they are experiencing or may imminently experience a crisis related to their mental health and/or substance use, and would benefit from a community-based, culturally sensitive and equity-centered response and connections to care within the mental health system to reduce criminal justice intervention and/or use of emergency services. This includes persons who may require assessment under the Mental Health Act, R.S.O. 1990, c. M.7.

**Racialized (People):** Persons from a rich mix of ethnic origins, cultures and nationalities, grouped together simply for being non-white (Social Planning Council of Ottawa 2008). The term racialized is preferred over visible minorities because it acknowledges the fact that barriers are rooted in the historical and contemporary racial prejudice of society and are not a product of one's identity or shortcomings (City of Ottawa; Diversity Snapshot Racialized People – Equity and Inclusion Lens A City for Everyone, 2016).

**Safer Alternate Response:** A safer alternate response is a non-police, community-led service that dispatches skilled crisis teams to people in mental health and substance use crises. A safer alternate response addresses the needs of the whole person and any underlying factors; in the moment and longer term through ongoing follow-through and connections.

**Trauma Informed Approach:** "Trauma and violence-informed approaches are policies and practices that recognize the connections between violence, trauma, negative health outcomes and behaviours. These approaches increase safety, control and resilience for people who are seeking services in relation to experiences of violence and/or have a history of experiencing violence." (Government of Canada; Public Health Agency of Canada Services health-risks-safety, 2018).

