

ACTION

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Shedding Light on a Complex Relationship

CCSA is publishing *Substance Abuse in Canada: Concurrent Disorders*, the third in this series that highlights key contemporary substance abuse issues in Canada and identifies areas where action is needed.

Concurrent disorders—the co-occurrence of mental health and substance use disorders—are a major health issue in Canada. According to research, more than half of those with an addiction also suffer from a mental illness, and 60% of those diagnosed with a mental illness are also plagued by a substance abuse problem during their lifetime. People with concurrent disorders are some of the most complex and difficult to treat cases, with frequent relapses and crises being the norm. These individuals consume a significant portion of health care services and, consequently, represent a large proportion of the costs of care.

This report examines the latest evidence to help shed light on the complex relationship between addiction and mental illness and provide guidance on areas that require action. Understanding why concurrent disorders exist and how best to treat them is essential if we hope to alleviate the burden on individuals, families, and the health care system.

Concurrent Disorders makes clear that greater collaboration and in some cases an integrated approach between mental

health and addictions systems is needed to effectively treat co-occurring disorders. It also calls attention to the developmental sensitivity of concurrent disorders, as many begin during adolescence where prevention efforts may help ward off the occurrence of problems or lessen the severity and progression of these disorders.

Further research into the underlying mental health conditions and patterns of substance use that contribute to these disorders was identified as an important area for action to better explain both the increasing rates of concurrent disorders and why some therapies work well for some disorders and not for others. A common educational platform with new specialized training programs also needs to be created. This would help achieve a common foundation of understanding and would facilitate greater collaboration or, if necessary, integration of systems services. The report will be available in late January, from our Publications page under the Knowledge Centre tab at www.ccsa.ca. >

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Piloting the National Treatment Indicators



Every day, people across Canada access a broad range of services and supports for substance use issues. However, exactly how many people access what types of services is not known. Although each jurisdiction collects information, the information varies substantially in terms of quality and scope.

The National Treatment Strategy supports data collection as a valuable component of effective system development, and as a result recommends the development of improved national measurement and monitoring capacity. In keeping with this direction, CCSA has been working with the National

Treatment Indicators Working Group—composed of jurisdictional partners across Canada—to launch the collection of National Treatment Indicators.

Data collection began with the identification of nine Green Light Indicators that were items either already recorded at the jurisdictional level or could be captured with some minor revisions. An example of a Green Light Indicator is the ‘total number of treatment episodes in specialized public treatment services for substance use problems’. For each indicator, a number of considerations must be defined within a comprehensive set of data protocols. For instance, when measuring an ‘episode’,

one must determine when a case officially opens (e.g., at first contact, assessment, or program commencement) and when it officially closes (e.g., at the last scheduled appointment, at a 6-month follow-up point, or after a certain period of non-contact).

In October 2009, CCSA launched the first draft of the data collection protocols. This pilot data collection asked the Indicators Working Group to provide any historical data available from 2006–2008 on the Green Light Indicators. As a result, several hurdles were quickly identified—such as the inability of some jurisdictions to slice data according to calendar year. Data collection for the pilot will continue into the new year and lessons learned will be used to inform a revised set of data protocols, which will be launched in spring or summer 2010.

With a challenging task ahead, the Working Group is motivated by the contribution that the National Treatment Indicators will make to monitor trends, inform system planning, and facilitate evaluation. To learn more about the National Treatment Indicators Working Group, please email info@ccsa.ca. To read more about the National Treatment Strategy, please visit www.ccsa.ca and click on Treatment under the Priorities tab. >

New Date for Archibald Lecture on Alcohol

The second David Archibald lecture on *Alcohol: Shared and Competing Values* will be held on March 1st from 6–9 p.m. in the Toronto area. This event originally scheduled for the 2009 *Issues of Substance* conference in Halifax was postponed due to speaker unavailability.

The topic *Alcohol: Shared and Competing Values* explores industry involvement in activities that address alcohol-related harms—an ongoing issue of concern to many organizations

in health-related sectors. Guest speaker Barbara Russell, a Bioethicist at the Centre for Addiction and Mental Health and at the University of Toronto’s Joint Centre for Bioethics, will lead a panel discussion exploring a range of perspectives, followed by a Q&A session.

To learn more about this event and how you can participate, please visit www.ccsa.ca and click on Events under the News and Events tab. >



IOS Surpasses Expectations

According to anecdotal feedback and comments from participants, speakers and poster presenters, Issues of Substance 2009 exceeded expectations for learning, knowledge exchange and networking. Presented by CCSA in partnership with the Atlantic Canada Council on Addictions, Nova Scotia Department of Health Promotion and Protection and the Canadian Executive Council on Addictions, IOS 2009 attracted more than 500 participants to Halifax for the third national conference on alcohol and other drugs. A more formal evaluation of the event is in progress and results are expected in 2010.

Annette Dale-Perera, the Strategic Director, Addictions and Offender Care Directorate, Central and NW London NHS Foundation Trust, opened the event with a dynamic presentation on "The Models of Care journey: sharing successes and disappointments from implementing national drug and alcohol frameworks in England". Her keynote address shared lessons learned from the UK experience of treatment system change and was highly relevant to the *Pathways and Bridges to Change* theme of the conference, which was inspired by Canada's own National Treatment Strategy. Monday closed with an Opening Reception followed by two hilarious skits and improv by the renowned Second City Improv Troupe.



On Tuesday Dr. Franco Vaccarino, Vice-President and Principal of the University of Toronto and a member of CCSA's Scientific Advisory Committee, provided a fascinating plenary presentation on "Neuroscience, Discovery Research and Treatment Implications". This session provided many important insights into how discoveries in neuroscience research will impact future treatment of substance abuse issues and concurrent disorders.

The CIHR Poster Award for best poster in the Professional category was awarded to Doug Beirness and Erin Beasley from CCSA. Carolyn Platter, from the Ontario Addictions Treatment Centre, and Katherine Lang, a student at the University of Saskatchewan, were both awarded first place in the Trainee category.

Prior to his closing keynote address, Christopher Kennedy Lawford was interviewed on Canada AM where he highlighted the need for systematic changes to our national treatment system. Lawford later shared an inspiring message of personal recovery entitled "Moments of Clarity – Recognizing Epiphanies and Enabling Recovery."

Planning for IOS 2011 in Vancouver is currently underway. Stay tuned for more details on the IOS evaluation and upcoming 2011 conference. Please note that presentations provided by Speakers are posted at www.issuesofsubstance.ca under the Presentation tab. >



Youth Strategy Update: Asking the Experts

A cornerstone of *A Drug Prevention Strategy for Canada's Youth* (see Action News, Vol. 17, No. 4) is broad partnership engagement. Accordingly, the work of the Strategy is conducted in large part through consultations with key working groups and select audiences. These activities are essential to ensuring that all initiatives of the Strategy are in keeping with recent evidence and promising practices.

The National Advisory Group on Youth Substance Abuse Prevention (YSAP) held its fourth meeting in October and provided guidance on the Youth Awareness Survey, the Theoretical Framework that underpins the work of the Media/Youth Consortium (MYC), the research basis for the Community- and Family-based Canadian Standards, as well as the consultation process for the Canadian Standards.

The new Task Force charged with the development of the Canadian Standards for Community- and Family-based Youth Substance Abuse Prevention has developed an initial draft of Standards for Community settings. This resource is presently in consultation with key working groups and selected stakeholders and is

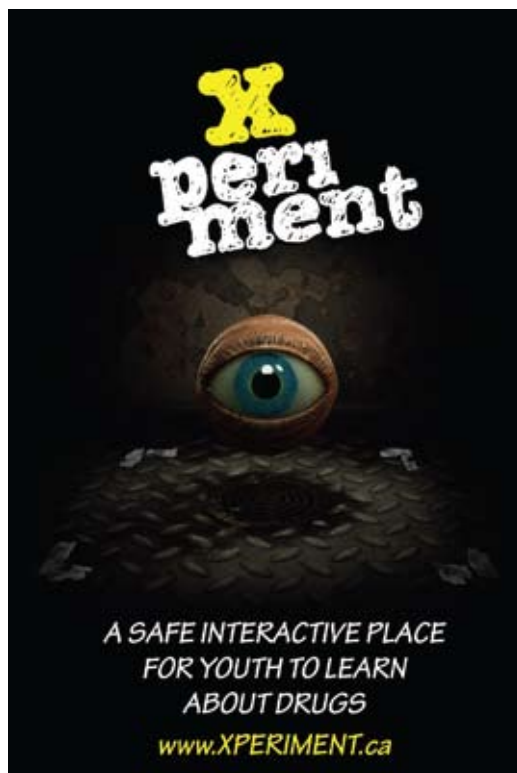
scheduled for release in early spring 2010.

Preliminary revisions to the Canadian Standards for School-based Youth Substance Abuse Prevention, Version 1.0—which include an expanded monitoring and evaluation section—are now complete. These changes were informed by Task Force recommendations and new research and knowledge exchange

activities conducted since the Standards' release in spring 2009. This new draft is being used to gather additional feedback from key stakeholders and is being validated by focus group participants from across Canada. Feedback from these consultations will inform further changes to the document and Version 2 is expected to be released in early spring 2010.

The Media/Youth Consortium Advisory Council (MYCAC) was recently formed to help inform the Media/Youth Consortium's development of positive and effective youth drug prevention messages. This group—composed of academic, communications, marketing, health promotion, substance use prevention and youth representatives—will provide advice and comment on new initiatives and the continuing development of Xperiment.ca, the Strategy's youth drug prevention website. In August an online survey was circulated to individuals who signed up for the website's Newsletter to provide direct input to assist with future website developments.

For more information on the Strategy and its initiatives please visit www.ccsa.ca and click on Youth Drug Prevention under the Priorities tab. >



More Research Needed on Cannabis and Lung Cancer

CSA has just released the fourth report in a series of publications that reviews the effects of cannabis smoking on various aspects of human functioning and development. *Clearing the Smoke on Cannabis: Respiratory Effects of Cannabis Smoking* provides an overview of current research findings on the respiratory effects of smoking cannabis.

The report points out that smoking cannabis is potentially very harmful to a person's respiratory functioning, and significantly contributes to a compromised immune system. In fact, one study cited that a single cannabis cigarette had more than half the potential obstructing effects on the lungs as compared to one tobacco cigarette. Given that cannabis contains many of the same cancer-causing agents that are found in tobacco, it would seem

probable that the causal link between cannabis smoking and lung cancer is clear. However, the limited research literature available on this issue is mixed.

The paper states that similar efforts to those that exist for tobacco smoking are required to encourage prevention, reduction and cessation of cannabis smoking, particularly since the respiratory effects are similar to those of tobacco smoking even with shorter smoking histories. The report concludes by calling for additional research to ascertain the extent and prevalence of harm derived from smoking cannabis. To read the report in full please visit www.ccsa.ca and click on Our Publications under the Knowledge Centre tab. >

Research Assists Drug Recognition Experts

Correctly identifying drug-impaired drivers is no simple task. During a drug evaluation assessment, well over 100 pieces of information are collected by police officers trained as Drug Recognition Experts (DREs).

CCSA has recently conducted research to explore whether DREs could adopt a simpler approach to determine the correct category of drug used by a suspected drug-impaired driver. Findings from the study indicate they can. By examining only nine of the clinical indicators (signs and symptoms) from the Drug Evaluation and Classification (DEC) evaluations—which include pulse rate, systolic blood pressure, the presence of injection sites, the condition of the eyes (i.e., reddened, watery) and eyelids (i.e., droopy), lack of convergence, the rhythmic pulsating of the pupils as they dilate and constrict (hippus), and rebound dilation (the dilation of the pupils after constriction in the presence of direct light)—DREs were able to correctly identify the drug category 81% of the time. Such findings suggest that DREs can focus on a limited set of drug-related

indicators when determining the category of drug ingested by the suspect without significantly compromising the accuracy of their evaluations. This work provides the foundation for an innovative, statistically based approach to drug classification decisions by DREs.

By simplifying the process of drug identification, this may contribute to improving the overall accuracy of drug evaluations. Greater accuracy of the DEC program will not only help to increase its value as a law enforcement tool but will also enhance the acceptance of the program by the courts, the police and the public.

This research was funded by the Policy Development Contribution Program of Public Safety Canada and is published in the December 2009 issue of the journal *Traffic Injury Prevention*. To read this report in full, please see *Towards a more parsimonious approach to Drug Recognition Expert Evaluations* by A. J. Porath-Waller, D. J. Beirness, and E. E. Beasley in the journal *Traffic Injury Prevention* (2009) volume 10. >

Behavioural Competencies Postponed

The release of the *Behavioural Competencies for Canada's Substance Abuse Workforce*, version 1.0 has been postponed to the end of January due to the findings of a recently completed literature review and comparative analysis of competency models that CCSA had commissioned for the Competencies Project.

Revisions are being made to the document to incorporate conclusions drawn from this analysis to ensure that this supportive resource—which identifies the abilities, knowledge and values required to perform effectively in the specialized substance abuse field—is in keeping with current evidence.

The Competencies Project—comprised of both the *Technical Competencies for Canada's Substance*

Abuse Workforce and the *Behavioural Competencies for Canada's Substance Abuse Workforce* and supporting tools—aims to enhance professionalism and excellence within the field. They accomplish this by providing tools and resources to: identify knowledge and skill sets for allied professionals; support employers in hiring and staff development; and assist educators and trainers in developing strategies for learning that provide Canadians with a more consistent quality of service delivery from the substance abuse workforce.

To learn more about this project or to read the document when it's released, please visit www.ccsa.ca and click on Workforce under the Priorities tab. To see more resources specifically for workforce development, visit www.cnsaap.ca. >

EVENTS

January 25–28, 2010

Behavioral Health and Addictive Disorders Conference
Clearwater Beach, Florida
W: <http://www.usjt.com/bhad10>

February 8–9, 2010

Promising Practices, Promising Futures Alberta FASD Conference
Calgary, Alberta
W: <http://fasd.typepad.com/misc/FASD2010-AdvanceNotice.pdf>

February 17–19, 2010

5th National Aboriginal Hepatitis C Conference with Added Focus on Addictions
Toronto, Ontario
W: <http://www.caan.ca/>

February 21–24, 2010

Southeast Conference on Addictive Disorders (SECAD)
Nashville, Tennessee
W: <http://209.196.57.200/ME2/Sites/Default.asp?SiteID=121FA692C6524EA6A7D1BB32DEE1BEFA>
E: wdean@vendomegrp.com

March 1–2, 2010

2010 Aboriginal Health Forum-Fetal Alcohol Spectrum Disorder (FASD); Aboriginal People & The Criminal Justice System
Toronto
E: wzarchikoff@yahoo.com
T: Toll Free 1-888-683-7711 or Tel. 604-530-3840

Tuesday, March 2, 2010

Alcohol: No Ordinary Commodity 7 Forum
North York, Toronto
W: <http://www.apolnet.ca/resources/education/ANOC-forums.html>

March 26–27, 2010

Intervention brève pour les problèmes de dépendance
Toronto, Ontario,
Wendake, Québec
W: <http://www.psychosolutions.qc.ca>
E: centre@psychosolutions.qc.ca

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