The first 20 years

Canadian Centre on Substance Abuse
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CANADIAN CENTRE ON SUBSTANCE ABUSE
Bill C-143, the legislation that established the Canadian Centre on Substance Abuse (CCSA) as a national focus for Canadian efforts to address substance abuse and addictions, was passed with all-party support in Parliament on August 31, 1988. As CCSA approached the 20th anniversary of that historic event, we began to look for ways to mark the occasion. We started with a celebratory gathering of about 90 current and former CCSA staff and Board members, and many other “friends” of CCSA in Ottawa in February 2008. The occasion took on very special significance when Her Excellency, the Right Honourable Michaëlle Jean, Governor General of Canada, agreed to address the gathering. Her remarks were filled with compassion and insight.

We also felt it was important to honour the man whose vision and energy made the Centre a reality, David Archibald. He kindly agreed to be interviewed and to share his memories of a lifetime devoted to helping reduce the burden of substance abuse and addictions on thousands of Canadians. We published his recollections in a document entitled, *It was 20 years ago today...An interview with H. David Archibald*, which is available on CCSA’s website at
www.ccsa.ca. It traces Dr. Archibald’s tireless efforts and ultimate success in building political support not only for the establishment of CCSA, but years earlier for the founding of the Addiction Research Foundation (ARF) of Ontario, now part of the Centre for Addiction and Mental Health (CAMH).

This new document, *Canadian Centre on Substance Abuse: The first 20 years*, starts with CCSA’s legislated beginning in 1988 and some of the behind-the-scenes activities that brought that about, and then moves forward through time looking at the people and events that brought us to where we are now. The transition has not always been smooth, but the vision bequeathed to us by David Archibald has never failed to pull us through the tough times and to point us in the right direction. This history of CCSA’s first 20 years is dedicated to him.
The beginning and how we got there:
1988

Key events of 1988

Jan. 2: Canada and the U.S. sign the Free Trade Agreement after months of negotiating on Canada’s behalf by Simon Reisman (right) and Gordon Ritchie.

Jan. 28: The Supreme Court of Canada strikes down Canada’s abortion law, deeming it unconstitutional.


On Oct. 27, 1986, President Ronald Reagan signed a bill into law budgeting $1.7 billion for a U.S. “war on drugs” and setting a mandatory minimum penalty for drug offences. Two days later, Canadian Prime Minister Brian Mulroney deviated from a prepared speech to announce that “drug abuse has become an epidemic that undermines our economic as well as our social fabric”. Seven months later, on May 25, 1987, Canada announced its five-year, $210-million National Drug Strategy (“Action on Drug Abuse”), renamed Canada’s Drug Strategy (CDS) when the initiative was renewed for another five years in 1992.

Although creation of the CDS seems at first glance to have been inspired by the U.S. action—and the close relationship that had developed between Reagan and Mulroney following the famous Shamrock Summit in Quebec City in 1985—the need for a coordinated Canada-wide response to substance abuse was already well recognized by those working in the field. In fact, there was already Cabinet approval of a new drug strategy at the time Prime Minister Mulroney made his apparently off-the-cuff remarks.
The drug strategy that was introduced in May 1987 was a very different entity from the U.S. war on drugs with its “just say no” approach to illicit drug use. Reflecting extensive consultations with the provinces, territories, municipalities and non-governmental organizations, the CDS opted for a more balanced approach with a strong emphasis on demand reduction in the form of prevention, education and treatment. Importantly, the CDS also recognized alcohol as “by far the most frequently abused substance in Canada”.

In October 1987, the Minister of National Health and Welfare Jake Epp asked Dr. H. David Archibald, founder of the Addiction Research Foundation of Ontario (now the Centre for Addiction and Mental Health) to head up a task force on the “national focus” of the CDS. The assignment was to examine how Canadian experience and expertise in the area of alcohol and drugs could be used for the benefit of all Canadians. In February 1988, Dr. Archibald submitted his report to Minister Epp, with a recommendation to create a national centre devoted to alcohol and drug issues.

On March 28, 1988, the federal government introduced legislation (Bill C-143) to establish the Canadian Centre on Substance Abuse (CCSA). CCSA’s founding legislation was passed on August 31, 1988, with all-party support shortly before the calling of the November 1988 federal election.

“At the start of summer 1988, all signs pointed to quick and easy passage of Bill C-143, CCSA’s founding legislation, through the House of Commons, but as luck would have it, the Bill ran up against some enthusiastic MPs and the clock ran out before a vote could be taken. The Bill was introduced again a short time later and passed on August 31, 1988, with all-party support shortly before the calling of the November 1988 federal election.”
—David Archibald, CCSA’s founding Chair
Key events of 1989–1990

March 1989: The National Alcohol and Other Drugs Survey (NADS) is conducted by Statistics Canada on behalf of Health and Welfare Canada.


June 4, 1989: Many civilians are killed or injured in Tiananmen Square as Chinese leaders take a hard line on political demonstrations.

November 1989: The U.S. government mandates warning labels to be placed on alcoholic beverage containers.

Nov. 9, 1989: The East German government opens its borders to the West and allows thousands of citizens to pass freely through the Berlin Wall.

Dec. 6, 1989: A gunman roams the corridors of Montreal’s École Polytechnique and kills 14 women.

July–September, 1990: An armed land dispute between the Mohawk nation and the town of Oka, Quebec, makes headlines around the world.
The months following passage of Bill C-143 were spent recruiting CCSA’s 15-member Board of Directors to represent a wide range of relevant experience as well as much of Canada’s geographic, ethnic and cultural diversity. With the Board in place by late 1989, key staff positions started to be filled. On Dec. 11, 1989, CCSA appointed its first Chief Executive Officer, Jan Skirrow, a leading figure with the Alberta Alcohol and Drug Abuse Commission for many years and subsequently Deputy Minister of Alberta Community and Occupational Health, and a Vice-President of Vancouver’s University Hospital.

On March 15, 1990, CCSA published its premiere edition of *Action News*, a newsletter at first entirely written and produced by the CEO—an effort he described as “our major way of encouraging debate and communicating with those Canadians most interested in the Centre’s work”. On March 23, the Board met at Meech Lake to adopt a mandate statement and strategic direction for the Centre, as well as an organizational structure and staffing plan.
CCSA quickly made its presence felt in the substance abuse field, both domestically and internationally. The Centre worked with a Youth Advisory Committee to organize the Youth Section of the Berlin Institute of the International Council on Alcohol and Addictions (ICAA) in June 1990, and on June 7, the Centre convened the first meeting of its Business Leaders Committee in Toronto to provide advice on issues related to the private sector.

In July 1990, CCSA published its first report, *An Overview of Youth-Oriented Prevention Programmes in European Countries* by Karl Burden, executive director of Concerns Canada. Another milestone occurred in October with the launch of CCSA’s National Clearinghouse on Substance Abuse. In November, CCSA’s founding chair David Archibald accepted an invitation from the government of Bermuda to spend a year there developing recommendations for a National Drug Authority. Quebec Board member Gaston Harnois stepped in as acting chair in Dr. Archibald’s absence.

Eric Single, an internationally recognized research scientist and author, became CCSA’s Director of Policy and Research in July 1990. Dr. Single was the driving force behind many of CCSA’s milestone projects, including the development of international cost estimation guidelines and the publication of *The Costs of Substance Abuse in Canada* in 1996.
Building profile at home and abroad: 1991–1992

Key events of 1991–1992

June 1991: The Yukon government mandates warning labels for all alcohol beverage containers.

July 1, 1991: Refraining from alcohol—on and off the job—becomes a condition of employment for all drug and alcohol workers employed by the Northwest Territories.


March 30, 1992: With less than 48 hours remaining in its original five-year mandate, Canada’s Drug Strategy is renewed for another five years with increased funding.

June 1992: Bill C-85, the new Psychoactive Substances Control Act, receives first reading in the House of Commons. It dies with the Conservative defeat of 1993, but is reintroduced by the Liberals as the Controlled Drugs and Substances Act.
In April 1991, CCSA convened the first meeting of a National Working Group on Drug/Addictions Awareness Week in Ottawa. The awareness event had begun as a grassroots initiative in the early 1980s, and although officially recognized by the Minister of Health and Welfare in 1987, it was slow to achieve national prominence. CCSA assembled a group of drug awareness coordinators from across Canada to discuss ways of raising the profile of the event, and the dialogue continued in a series of teleconferences over the next couple of years.

Meanwhile, CCSA was stepping out more confidently onto the world stage. In April 1991, the Centre asked Mrs. Tamar Oppenheimer, a prominent figure in the area of drug control at the United Nations until her retirement in 1987, to become its representative in Vienna. In October, CCSA co-sponsored the first-ever North American meeting of the International Council on Alcohol and Addictions (ICAA).

In August 1991, CCSA hired Pamela Fralick, Acting Chief of the Alcohol and Drugs Unit at Health Canada, as its first permanent deputy director. In October, CCSA published Panic and Indifference: The Politics of Canada’s Drug Laws, a book that has become a definitive study in the sociology of law. It had languished for a number of years as an unpublished manuscript before CCSA rescued it from obscurity.

From its earliest days, CCSA looked for opportunities to involve the Aboriginal community in its work. In February 1992, the Centre hosted a historic meeting of Aboriginal and non-Aboriginal researchers.
To discuss ways of improving Aboriginal research in Canada. In July, CCSA provided partial funding for the international Healing Our Spirit Worldwide conference on Aboriginal addiction in Edmonton. Dr. Archibald was a keynote speaker at the five-day event.

Meanwhile, CCSA experienced its first major change in personnel with the departure of Jan Skirrow as CEO in early 1992. He was succeeded first by Pam Fralick on an interim basis and later, on July 16, by Jacques LeCavalier. A pharmacist by training, Mr. LeCavalier joined CCSA after a lengthy and distinguished career at Health and Welfare Canada.

The year ended on a definite high note with the first presentation of CCSA’s new Award of Distinction. On Dec. 3, 1992, Her Excellency Mrs. Gerda Hnatyshyn, wife of then Governor General Ray Hnatyshyn, presented the special award to Dr. H. David Archibald.
Key events of 1993–1995

Oct. 25, 1993: In Canada’s 35th general election, the Progressive Conservatives under Prime Minister Kim Campbell go from 160 seats to only two.

Nov. 1, 1993: Europe’s Maastricht Treaty takes effect, creating the European Union.


April 6–mid-July, 1994: At least 800,000 Tutsis and thousands of Hutus were killed during the Rwandan genocide.


April 19, 1995: Scores are killed as a terrorist’s car bomb blows up the block-long Oklahoma City federal building.

Oct. 30, 1995: Quebec Liberal leader Daniel Johnson celebrates after the province narrowly rejects independence from Canada.
In April 1993, CCSA’s CEO Jacques LeCavalier was a key member of Canada’s delegation to the 36th session of the United Nations Commission on Narcotic Drugs in Vienna, which called for a comprehensive evaluation of the impact of the 1961, 1972 and 1988 UN conventions on the abuse and trafficking of narcotics. Closer to home, also in April, CCSA hosted a national workshop on substance abuse research and funding priorities with the goal of establishing a Canadian research agenda.

One of CCSA’s most ambitious and ground-breaking projects began in May 1993 with a trip to Washington, D.C. to initiate discussions around the development of international guidelines for estimating the health, social and economic costs of substance abuse. Subsequent meetings in 1994 and 1995 brought together representatives of eight countries and three international organizations who achieved a remarkable degree of harmony on methods of cost estimation. Canada was the first of several countries to apply the new guidelines to its own domestic costs, publishing the *Costs of Substance Abuse in Canada* in 1996.

“When I joined CCSA in July 1992, I quickly realized that I had inherited an organization with a core of highly talented and motivated professionals. The challenge lay in the enormous gap between the resource envelope and the scope of the mandate conferred by Parliament. The way forward required focus on key priorities, harnessing external resources through strategic partnerships, and timely delivery of highly visible and useful outputs. My most vivid recollection of that era is the emergence of a spirit of entrepreneurship within the organization. In retrospect, this culture of entrepreneurship, coupled with the credibility gained worldwide, served CCSA very well during the difficult years that followed.”

—Jacques LeCavalier, CCSA’s Chief Executive Officer from 1992 to 1999
CCSA names in the news in 1993 included William (Bill) Deeks, who succeeded Dr. H. David Archibald as CCSA’s chair in June, and Leonard Blumenthal, CEO of the Alberta Alcohol and Drug Abuse Commission (now retired), who received CCSA’s Award of Distinction in a ceremony at Rideau Hall on Nov. 12.

Partnerships were always key to CCSA’s early successes, and one of its most important partners was the Addiction Research Foundation (ARF), now part of the Centre for Addiction and Mental Health (CAMH). In November 1993, CCSA and ARF issued a policy statement on coronary heart disease and moderate drinking following an International Symposium on Moderate Drinking and Health in Toronto. In January 1994, CCSA once again joined forces with ARF to publish a comprehensive statistical manual in English and French, *Canadian Profile 1994: Alcohol, Tobacco and Other Drugs*. On March 6–10, CCSA and ARF co-sponsored the Fifth International Conference on the Reduction of Drug-Related Harm in Toronto.

Other CCSA innovations from this period include the March 1994 launch of Canada’s first national information service on fetal alcohol syndrome/fetal alcohol effects in response to a 1992 parliamentary subcommittee report on the impact of FAS/FAE. Nineteen ninety-four also saw the creation of the Health, Education and Enforcement in Partnership network as a tool for promoting multi-disciplinary dialogue on drugs and alcohol issues. The initial report of the HEP steering

“The years 1994–2002 were a crisis time for CCSA with serious threats to funding and a weakening of government interest in issues of addiction. So, the reality today of a strong and focused CCSA is the result of dedication and hard work by an entrepreneurial staff and associated government officials, and a new political will. Perhaps the most telling experience for me was at the international youth conference at Banff in 1998. Young people from around the world told us, “You don’t have to tell us drugs are bad! We know that. What you need to do is to encourage us in positive activities, such as sports and music, as an alternative to the boredom that leads us to use drugs.”

—William (Bill) Deeks, CCSA Board Chair, 1993–2001
committee, coordinated by CCSA, examined a variety of treatment and prevention programs across Canada linking police, the justice system and community groups with health and social agencies.

In January 1995, CCSA became one of the first Canadian organizations in the health field to recognize the value of the Internet as a tool for knowledge translation when it launched its website (www.ccsa.ca). CCSA also began a pilot project to create a worldwide “virtual clearinghouse” on alcohol, tobacco and other drugs. The dream of a fully operational Virtual Clearinghouse on Alcohol, Tobacco and Other Drugs eventually became a reality in June 2000, thanks to a $250,000 contribution from Canada’s Department of Foreign Affairs and International Trade (DFAIT).

Maggie Hodgson, a founding CCSA board member and former director of the Nechi Training Institute in St. Albert, Alberta, played host to CCSA’s board and senior staff during a tour of the Institute in 1995.

Key events of 1996–1997

The addictions field braces for the planned March 1997 sunsetting of Canada’s Drug Strategy. In a January 1996 newspaper interview, Chief Barry King, then head of the Drug Abuse Committee of the Canadian Association of Chiefs of Police, warns against the closure of agencies such as CCSA.

March 31, 1997: Canada’s Drug Strategy sunsets and the sharp focus it gave to substance abuse issues gives way to a more holistic “population health” approach.

May 14, 1997: The new Controlled Drugs and Substances Act finally takes effect.

June 1997: Prince Edward Island’s Confederation Bridge opens, connecting PEI to the mainland.

Aug. 31, 1997: Diana, Princess of Wales, is taken to hospital after a car crash in Paris and dies four hours later.

Dec. 3, 1997: In Ottawa, representatives from 121 countries sign a treaty prohibiting the manufacture and deployment of anti-personnel land mines.
With Canada’s Drug Strategy approaching the end of its second five-year mandate—and “program review” the new buzzword in government circles in Ottawa—severe cuts were made to CCSA’s operating grant, reducing the Centre’s original 1988 budget allocation of $2 million annually to $500,000. This led to sudden and radical downsizing of the organization, the loss of key personnel, and a much-reduced capacity to carry out CCSA’s legislated mandate.

Before the full impact of these budget cuts hit home, CCSA managed, in June 1996, to release its milestone study of the health, social and economic costs associated with the use of alcohol, tobacco and illicit drugs. The 532-page report, based on 1992 data, made front-page headlines across Canada. In October, CCSA appeared before the Standing Committee on Health examining substance abuse policy in Canada and outlined the issues and opportunities facing Canadian substance abuse policy makers. CCSA called for strong reaffirmation of the federal government’s leadership and commitment in the area of substance abuse.

Partnerships took on ever-greater importance as the financial picture worsened. Working with the Canadian Public Health Association, CCSA began to develop and disseminate a set of recommendations that had originated as workshop discussions at the Second National Workshop on HIV, Alcohol and Other Drug Use in Edmonton in 1994. Under contract to Health Canada, CCSA also began work with the Alberta
Alcohol and Drug Abuse Commission, the Addiction Research Foundation, and the Addictions Foundation of Manitoba to profile more than 700 alcohol and other drug treatment programs in Canada.

Early in 1997, the Health, Education and Enforcement in Partnership (HEP) network staged a National Roundtable to discuss school and community-based youth substance abuse education, and in May, CCSA published the first national report of the Canadian Community Epidemiology Network on Drug Use (CCENDU) following a one-year pilot project. Six cities took part in the project whose long-term goal was to develop a Canadian surveillance system to collect locally relevant information on drug use, its health and legal consequences, and its impact on treatment and law enforcement services.
Key events of 1998–1999

January 1998: An ice storm wreaks havoc over large areas of Quebec and Ontario.


Sept. 2, 1998: Swissair flight 111 crashes into the ocean near Peggy’s cove killing all 229 people on board.

Dec. 1, 1998: The Toronto drug treatment court begins operating with $1.6 million from Ottawa over four years. The object is to divert individuals who are addicted to drugs into rehabilitation programs rather than send them to jail.

April 1, 1999: The new territory of Nunavut is added to the map of Canada.

April 24, 1999: Ontario announces plans to sue the U.S. tobacco industry for as much as US$40 billion for smoking-related health damages.

Sept. 9, 1999: The first International FASD Awareness Day is held around the world.
Determined to rise above financial constraints, CCSA entered into a partnership with the United Nations International Drug Control Programme and the Alberta Alcohol and Drug Abuse Commission to stage the Youth Vision Jeunesse forum in Banff, Alberta, in April 1998. Nearly 200 children and young adults from 24 countries took part in this historic four-day exchange of ideas for preventing drug abuse. A document drafted by the young forum participants, *The Vision from Banff*, was presented to UN Secretary General Kofi Annan during a special session of the United Nations General Assembly (UNGASS) in June 1998.

In May 1998, CCSA published *Cannabis Control in Canada: Options Regarding Possession*, a policy discussion document prepared by CCSA’s National Working Group on Addictions Policy. Of the report’s four evidence-based recommendations, one in particular was singled out for widespread attention in the media, namely that the severity of punishment for a cannabis possession charge should be reduced and that cannabis possession should be converted to a civil violation under the Contraventions Act.
Following publication of *The Costs of Substance Abuse in Canada* in 1996, CCSA had become the go-to authority on domestic cost estimation and so when the Inter-American Drug Abuse Control Commission (CICAD) decided to help its member states to launch cost estimation studies, it came to CCSA. As a result, in November 1998, CCSA’s Senior Policy Associate Eric Single travelled to Santiago, Chile to present a week-long “knowledge transfer” seminar on cost estimation with a Chilean team assembled to launch the initiative. Dr. Single continued to act as advisor to the Chilean investigators throughout the study. A year later, he accepted another invitation from the Chilean government to present three papers on cost estimation at the International Seminar on Drug Information Systems in Viña del Mar.

In 1999, CCSA was chosen to lead a consortium of organizations that could provide the federal government’s new Internet-based Canadian Health Network (CHN) with content expertise in the area of substance abuse and addictions. The consortium also included the Addictions Foundation of Manitoba and Ontario’s Centre for Addiction and Mental Health. For a number of years, it functioned as a CHN Affiliate, identifying credible sources of information and responding to health information requests from the Canadian public. Also in 1999, CCSA published the second national CCENDU report and developed a guide for setting up epidemiology networks in local communities.

CCSA continued to collaborate with a variety of organizations to increase understanding of substance abuse in Canada.

Under a 1999 contract with Health

“As CCSA celebrates its 20th anniversary, I am struck by how quickly my nine years have gone by. I take tremendous pride in CCSA’s maturation as Canada’s national addictions agency. Successive governments, parliamentary committees, and private, public and international organizations have recognized the value of investing in and working with CCSA. But CCSA would not have reached these accomplishments without the many dedicated people that have and continue to work with us. Our Board of Directors readily volunteers their time because they see and believe in what we do for individuals, families and communities across this great country. To our many colleagues, friends and supporters, thank you for your confidence. We look forward to another 20 years of success with you.”

—Michel Perron, CCSA’s Chief Executive Officer, 1999–
Canada, CCSA developed profiles of drug users at risk for HIV/AIDS for use as background by staff in the HIV/AIDS Prevention and Community Action Programs Unit in developing policy and programming. In June 1999, CCSA collaborated with the Addictions Foundation of Manitoba, the Alberta Alcohol and Drug Abuse Commission, the Centre for Health Promotion Studies (University of Alberta), and Health Canada to present a two-day workshop in Edmonton on the relationship between population health and addictions.

On Nov. 1, 1999, a new era began at CCSA with the appointment of Michel Perron as CEO, succeeding Jacques LeCavalier. Mr. Perron had been the senior advisor to Canada’s Drug Strategy Secretariat at Health Canada before joining the Office of the Solicitor-General Canada as a senior policy advisor with responsibility for providing advice on domestic and international drug policy and legislative issues. He was also the lead drug policy advisor to the Deputy Solicitor-General in his capacity as Canada’s principal delegate to the Inter-American Drug Abuse Control Commission (CICAD).
Key events of 2000-2001

January 2000: Canada announces plans to introduce the world’s strictest anti-smoking health warnings with graphic images of disease on cigarette packs.

July 2000: The Ontario Court of Appeal rules that Canada’s marijuana laws are unconstitutional.

Nov. 30, 2000: The federal government announces plans to set up drug courts in all major Canadian cities by 2004, expanding a two-year-old pilot project in Toronto.

July 30, 2001: The federal government announces it will allow people suffering from terminal illness or long-term debilitating disease to grow and smoke their own marijuana.

Sept. 11, 2001: A series of coordinated suicide attacks on the World Trade Center in New York City and the Pentagon in Washington claims nearly 3,000 civilian lives.

December 2001: The Auditor General’s report on illicit drugs highlights serious deficiencies in the federal government’s handling of the illicit drug problem in Canada.
In February 2000, Foreign Affairs Minister Lloyd Axworthy invited Michel Perron to join a Canadian delegation visiting Colombia. The trip set the scene for a bilateral program, financed by Foreign Affairs, that included a two-week study tour of Canada by six Colombian officials working in various aspects of substance abuse control and prevention. Following the visit of the Colombians, Dr. Eric Single travelled to Bogota to deliver a cost estimation workshop. This, in turn, led to the participation of Colombian economist Ernesto Wilson in the third international symposium on cost estimation in Banff, Alberta, in September 2000. The revised cost estimation guidelines emerging from that meeting were eventually published by the World Health Organization.

The success of cost estimation guidelines for substance use led to a demand for a similar analysis of gambling. In September 2000, CCSA co-hosted the first Symposium on the Social and Economic Impact of Gambling with the B.C. Ministry for Children and Families, in Whistler, B.C. About 60 participants shared their experience and ideas for how to preserve the benefits of gambling (for example, from enhanced government revenues), while minimizing the associated harms.

CCSA intensified its involvement with gambling issues in 2001 with the launch of the Canadian Problem Gambling Index (CPGI) on behalf of a consortium of provinces. This was followed by development of the Canadian Adolescent Gambling Index (CAGI), scheduled for release in 2009, and
the Socio-Economic Impact of Gambling (SEIG) Framework, a set of guidelines for measuring the costs and benefits of gambling, released in February 2008.

In December 2000, CCSA co-hosted a symposium in Winnipeg, called Investing in Canada’s Future: New Partnerships in Addiction, that constituted the first multi-sectoral consultation on the development of a new national drug strategy. The meeting brought together representatives of all three orders of government, law enforcement, addictions (treatment, prevention and research) and the private sector (including the beverage alcohol industry).

Following the release of a concept paper in 2000 proposing a stand-alone institute on addictions—developed by CCSA in collaboration with other addictions agencies under a peer-reviewed grant—the Canadian Institutes of Health Research (CIHR) established the Institute for Neuroscience, Mental Health and Addictions (INMHA). Dr. Eric Single was selected as a member of the Institute Advisory Board, where he chaired a committee developing a communications plan for the new institute, and provided advice on strategic planning. He also contributed to the development of professional training programs and suggested specific topics in the addictions area where improved research was needed.

CCSA was quick to take advantage of the new opportunities that the advent of INMHA presented. In December 2001, the two organizations teamed up with Carleton University to present the Canadian

“I have many happy memories of CCSA, including the time when CCSA’s Board of Directors were guests of Her Excellency, the Right Honourable Adrienne Clarkson, Governor General of Canada, at Rideau Hall for a stimulating discussion of substance abuse issues. Another was when Her Excellency, the Right Honourable Michælle Jean, Canada’s current Governor General, spoke at CCSA’s 20th anniversary celebration. Other cherished memories include CCSA’s Board of Directors trip to Iqaluit in 2005 for their first meeting North of 60, and a Board meeting in Yellowknife in 2007 where we interacted with the community. I am pleased to have been able to contribute to fulfilling CCSA’s commitment to Canadians living in all parts of our country.”

—Chief (Ret’d) Barry V. King, OOM, CCSA Board Chair, 2001–2008
Addictions Researcher Workshop: Moving Toward a Plan of Action to Develop a National Research Agenda. At that same meeting, CCSA formalized a memorandum of agreement with Carleton aimed at forging closer links between researchers and policy makers working in the field of addictions and individuals working and studying in an academic setting. Under the agreement, Dr. Colleen Dell took up a part-time post at CCSA while functioning as associate professor of sociology at Carleton.

In other collaborative ventures, CCSA worked with Correctional Service Canada (CSC), Addictions Research Division, to create and maintain a database of Canadian addictions researchers. This unique resource provided researchers with the opportunity to locate colleagues with similar interests, develop partnerships, and explore new opportunities for multi-disciplinary cooperation. Under contract with Health Canada, CCSA worked with the Canadian Association for School Health and the Centre for Addiction and Mental Health to prepare a key resource entitled *Preventing Substance Use Problems Among Young People—A Compendium of Best Practices*. The compendium was published in 2001.

On Dec. 4, 2001, Health Minister Allan Rock announced the appointment of Barry King, Chief of the Brockville (Ontario) Police Service, as chair of CCSA’s Board, succeeding Bill Deeks. Chief King had joined the Board in October 1998, and became the Centre’s third chair.
**Key events of 2002-2003**

*March 1, 2002:* The U.S. invades eastern Afghanistan, the start of Operation Anaconda.

*Feb. 1, 2003:* Space Shuttle Columbia disintegrates over Texas on re-entry, killing all seven astronauts on board.

*March 19, 2003:* The first American bombs drop on Baghdad after Iraqi President Saddam Hussein and his sons do not comply with U.S. President George W. Bush’s 48-hour mandate demanding their exit from Iraq.

*May 27, 2003:* Canada’s Drug Strategy is renewed.

*Aug. 14, 2003:* A widespread power outage affects the north-eastern United States and South-Central Canada.

*Sept. 21, 2003:* Insite, North America’s first legal supervised injection facility, opens at 139 East Hastings in Vancouver.

*Oct. 15, 2003:* The Centre for Addictions Research of BC (CAR-BC) opens at the University of Victoria.
In April 2002, CCSA helped launch the Canadian Executive Council on Addictions (CECA) as a forum for heads of addictions agencies operating under a legislated federal, provincial/territorial or municipal mandate. With CCSA’s CEO Michel Perron as its first president, CECA added an important voice to the debate around alcohol and drug issues and helped to draw the attention of government to the need for a new drug strategy. In September 2002, the Senate Special Committee on Illegal Drugs issued a thoroughly researched, if somewhat controversial, report calling for the reshaping of Canada’s marijuana laws, and strongly endorsed CCSA’s leadership in the substance abuse and addictions field.

Three months later, the House of Commons Special Committee on Non-Medical Use of Drugs released its own report spelling out the need for a revived drug strategy and calling for a greater role and increased resources for CCSA.

The process of reinvesting in CCSA had, in fact, already begun the previous May when federal Health Minister Anne McLellan announced interim funding of $1.5 million a year for CCSA pending a new drug strategy. The strategy came a year later, on May 27, 2003, when the federal government announced that it would invest $245 million over five years in the renewal of Canada’s
Drug Strategy. The rejuvenated CDS promised a greater focus on community-based initiatives; education campaigns aimed at youth; new funding for research activities; and a biennial, national conference to set research, promotion and prevention agendas. The announcement meant the restoration of CCSA’s funding base, but it also placed huge new demands on the Centre, including the hosting of a biennial conference that came to be known as Issues of Substance.

The period leading up to CCSA’s refunding was unusually busy and productive considering the climate of financial uncertainty that prevailed after 1996–97. In April 2002, CCSA joined with the Correctional Service of Canada (CSC) to publish a landmark study called *Proportions of Crimes Associated with Alcohol and Other Drugs in Canada*—the first report of its type and scope in this country. The origins of this important study date back to 1996 when CCSA published *The Costs of Substance Abuse in Canada*. The Centre acknowledged at the time that very little data existed describing the economic impact of substance abuse on crime. CCSA took steps to address this gap, working with CSC to survey prison populations.

In September 2002, CCSA helped organize the first World Forum on Drugs and Dependencies in Montreal. In December, CCSA coordinated a meeting of interested parties from across Canada to look at Health Canada’s requirements for a special exemption under section 56 of the Controlled Drugs and Substances Act (CDSA). Health Canada invoked the exemption to allow for a pilot project that would see the establishment of a supervised injection site in Vancouver.
In 2003, CCSA undertook several new educational initiatives as part of a strategy to support Canada’s addictions workforce. Together with the Correctional Service of Canada (CSC), CCSA inaugurated the National Summer Institute on Addictions at CSC’s Addictions Research Centre in Montague, P.E.I. The event attracted a capacity audience of seasoned treatment professionals looking for an advanced learning experience.

In October 2003, CCSA co-led the Forum on Alcohol and Illicit Drug Research in Canada, a milestone event that saw more than 70 leading Canadian researchers agree on a set of strategic directions for future research into the causes and consequences of substance abuse, and into improved methods of knowledge exchange and dissemination. The Forum was co-sponsored by the Canadian Institutes of Health Research, Health Canada, the Solicitor General of Canada, and the Canadian Executive Council on Addictions. Also as part of its long-term commitment to knowledge exchange, CCSA signed a Memorandum of Agreement with the British Columbia Centre of Excellence for Women’s Health to help focus more attention on issues of gender and substance abuse.

On the international front, CCSA’s Chief Executive Officer was again invited to join the Canadian delegation at a meeting of the Commission on Narcotic Drugs (CND) in Vienna, and also co-chaired a forum aimed at enhancing the role of non-governmental organizations within the United Nations Office of Drugs and Crime (UNODC). This effort eventually grew into the Beyond 2008 International NGO Forum in Vienna in July 2008.
Key events of 2004-2005

March 29, 2004: The Republic of Ireland bans smoking in all enclosed work places, including restaurants, pubs and bars.


July 7, 2005: Four explosions rock the transportation network in London, killing 56 and injuring over 700.

Aug. 29, 2005: At least 1,836 are killed as Hurricane Katrina strikes coastal areas from Louisiana to Alabama, and travels up the entire state of Mississippi.

Sept. 27, 2005: The Right Honourable Michaëlle Jean is sworn in as the 27th Governor General of Canada.

Nov. 28, 2005: The Liberal Party minority government is toppled by a non-confidence vote tabled by the Conservatives and backed by the Bloc Québécois and the New Democratic Party.
The Centre began to extend its reach within the substance abuse and addictions community by creating new opportunities for dialogue and concerted action, and by travelling to new locations and jurisdictions to exchange knowledge with people in the field.

The seeds of a major initiative, the National Framework for Action to Reduce the Harms Associated with Alcohol and Other Drugs and Substances in Canada, were planted in May 2004 with the first of a series of national, cross-jurisdictional consultations co-hosted by CCSA and Health Canada. These “thematic workshops” were aimed at finding practical ways and means of working together to meet the broad objectives established by the renewal of Canada’s Drug Strategy in May 2003. In June 2005, a widely representative group of about 100 stakeholders met in Montreal to agree on a set of principles, goals and priorities that formed the underpinnings of the National Framework.

One of the first spin-offs of the National Framework process was the formation of the first-ever National Alcohol Strategy Working Group. In November 2004, CCSA had hosted a National Thematic Workshop on Alcohol Policy during which a diverse group of stakeholders, including alcohol industry representatives, reached consensus on a set of recommendations aimed at reducing alcohol-related harms. This was subsequently reflected in one of
13 National Framework priorities and eventually led to the 2007 release of *Reducing Alcohol-Related Harm in Canada: Toward a Culture of Moderation (Recommendations for a National Alcohol Strategy)*.

CCSA continues to help coordinate the National Framework and major outcomes so far, in addition to the National Alcohol Strategy, include a National Treatment Strategy, released in fall 2008, and a new focus on workforce development and youth initiatives.

CCSA’s partnership with the CIHR Institute of Neurosciences, Mental Health and Addiction (INMHA), which had begun in December 2001, took on new dimensions in December 2004 with the joint issuing of a Request for Application to provide much-needed funding for substance abuse and addictions research in Canada. CCSA pledged a total of $100,000 to support the five-year “strategic initiative”. All but one of the 10 eligible research themes had emerged as recommendations from the Forum on Alcohol and Illicit Drugs Research in Canada, co-sponsored by INMHA and CCSA in October 2003.

Another initiative aimed at building and strengthening networks within the substance abuse field was CCSA’s national *Issues of Substance* conference, held for the first time in Toronto in November 2005. The biennial event was CCSA’s response to persistent calls for a more coordinated approach to substance abuse problems in Canada. *Issues of Substance* was staged again two years later with twice as many people in attendance.

CCSA’s growing efforts to reach out extended beyond Canadian borders. In March 2004, following a CCSA presentat-
tion to community groups in Martinique on the Health, Education and Enforcement in Partnership (HEP) model, 11 Caribbean countries formed a HEP-like network for their region. HEP made another successful foray into the Caribbean two years later with a one-day “train-the-trainer” session and three-day workshop on the island of St. Lucia.

Meanwhile, CCSA’s Board of Directors also helped to expand the Centre’s horizons. In February 2004, Board members visited Insite, North America’s first legal supervised injection facility, which had opened six months earlier in Vancouver’s Downtown East Side. In June 2005, the Board travelled to Iqaluit for its first-ever meeting North of 60. During the four-day visit, Board members and senior staff met with local government officials, health authorities and substance abuse workers to explore areas of potential collaboration. High points of the visit included a keynote address by Nunavut Premier Paul Okalik at a Board dinner. CCSA further reinforced its commitment to the National Framework priorities of “Reaching out to Canada’s North” and “Supporting First Nations, Inuit and Métis Communities” by appointing a Senior Advisor on Northern Canada.

During this period, CCSA undertook a number of projects aimed at supporting the field. In 2005, the Centre published the results of a survey of executive directors, agency heads, and staff of specialized substance abuse treatment agencies and services, entitled Optimizing Canada’s Addiction Treatment Workforce: Results of a National Survey of Service Providers. Largely through CCSA’s efforts, “Sustaining
Workforce Development” became one of 13 National Framework priorities. Also in 2005, CCSA published the Canadian Addiction Survey, filling a 10-year gap in national drug and alcohol prevalence data in Canada.


Part of CCSA’s outreach effort included establishing Memorandums of Agreement with Aboriginal organizations aimed at bringing First Nations and Inuit treatment providers and addictions researchers closer together to share data, information, networks and resources. CCSA signed MOAs with the Youth Solvent Addiction Committee (YSAC)—a network of eight solvent addiction treatment centres located throughout Canada—in December 2004, and the National Native Addictions Partnership Foundation (NNAPF) in March 2005.
New horizons: 2006–present

Key events of 2006–present

Jan. 23, 2006: Canadians elect a minority government led by the Conservative Party with Stephen Harper becoming the 22nd Prime Minister of Canada.

March 26, 2006: A ban on smoking in public places such as bars and restaurants comes into effect in Scotland. A similar ban comes into effect in England on July 1, 2007. Smoking is also banned in pubs and clubs in New South Wales and Victoria, Australia.

Sept. 13, 2006: A shooting at Dawson College in Montreal leaves one student dead and 19 others injured.

Oct. 14, 2007: Robert Dziekanski, a Polish immigrant to Canada, dies after being tasered twice by Vancouver RCMP.

Dec. 27, 2007: Former Pakistani prime minister Benazir Bhutto is assassinated, and at least 20 others are killed by a bomb blast at an election rally in Rawalpindi.

June 11, 2008: Prime Minister Stephen Harper apologizes to Canada’s First Nations for the residential school system.

Aug. 8–24, 2008: The 2008 Summer Olympics take place in Beijing, China. Pool events are dominated by American swimmer Michael Phelps.
The political map of Canada changed dramatically on Jan. 23, 2006, when Canadians elected a minority government led by the Conservatives. Since coming to power, the new government has begun to redefine the federal role in a number of areas of Canadian life, including addictions and substance abuse. As an independent, nonpartisan organization, CCSA was once again able to prove its value to Canadians by providing objective, evidence-based advice to the new government, and by supporting National Framework priorities that extend and complement federal initiatives. A specific case in point is the development of the National Alcohol Strategy—released in 2007 as a response to a National Framework priority—which complements the government’s principal focus on illicit drugs. The federal government has demonstrated its trust in CCSA by asking the Centre to develop and implement A Drug Prevention Strategy for Canada’s Youth under its National Anti-Drug Strategy. The goal of the five-year prevention strategy is to reduce the number of young people aged 10 to 24 who use illicit drugs, and to delay the onset of use within this population. The strategy uses three complementary approaches: a media/youth consortium of

In November 2006, CCSA renewed a 2004 memorandum of agreement with the Youth Solvent Addiction Committee (YSAC) to strengthen the links between academic research and issues of substance abuse and addictions among First Nations peoples. The three-year agreement was signed by Michel Perron and YSAC Chair Carol Hopkins.
national media corporations and youth service organizations; a first-ever set of Canadian national standards for the design and delivery of prevention programs; and creation and maintenance of sustainable partnerships.

In January 2006, Her Excellency the Right Honourable Michaëlle Jean, Governor General of Canada, accepted CCSA’s invitation to become an Honorary Patron of the Centre. Madame Jean’s gracious gesture added another chapter to the history of CCSA’s relationship with Government House, which began in 1992 when Her Excellency Gerda Hnatyshyn, wife of then Governor General, the late Ray Hnatyshyn, kindly agreed to present CCSA’s annual Award of Distinction in the stately Ballroom at Rideau Hall.

In March 2006, CCSA released an important new study portraying substance abuse in Canada as a significant burden on the economy in terms of both its direct impact on health care and criminal justice costs, and its indirect effect on productivity resulting from premature death, illness and injury. The Costs of Substance Abuse in Canada 2002 (Rehm et al., 2006) estimated the total cost of substance abuse to be $39.8 billion (based on 2002 data). This represents a cost to each individual Canadian of $1,267. This report was a follow-up to CCSA’s ground-breaking cost study of 1996. The new report pointed to an increase in drug and alcohol use since the last study was done and found a particularly disturbing spike in drug-related deaths over 10 years.

A 2005 CCSA report had recommended a number of actions aimed at optimizing Canada’s substance abuse treatment workforce, including the formation of a
Canadian treatment network and the creation of an interactive Web-based resource. Throughout 2006, CCSA staff worked toward implementing this recommendation, through consultation with the field, and early in 2007, the Centre launched the Canadian Network of Substance Abuse and Allied Professionals—the first national website designed specifically for Canada’s substance abuse workforce. The site is intended not only for substance abuse specialists, but also for primary care physicians, public health nurses, correctional officers and other professionals who work with those whose lives are affected by substance abuse. CCSA followed up on another recommendation from its 2005 report when it unveiled version 1.0 of its draft Core Competencies for Canada’s Substance Abuse Field at its 2007 Issues of Substance conference in Edmonton. CCSA continues consultations to determine how best to implement and use the core competencies in a variety of settings.

In 2006, CCSA successfully bid on an RCMP contract to evaluate implementation of the Drug Evaluation and Classification (DEC) assessment program, a 12-step process targeting drug-impaired drivers conducted by Drug Recognition Experts (DRE), who are DEC-trained community police officers. The DEC program operated in Canada for more than 13 years, but until recently drivers had to agree to participate. A new law that came into effect on July 2, 2008, makes it mandatory to submit to a roadside drug test and refusing to do so is now equivalent to declining a breath test for alcohol, which is a Criminal Code offence. CCSA staff used RCMP data to compare DRE evaluations with toxicological tests of bodily fluid samples obtained
from subjects at the conclusion of DRE evaluations. CCSA’s analysis provided strong evidence that DRE officers can accurately detect impairment by a wide range of legal and illegal drugs.

A June 2006 report commissioned by CCSA contained recommendations aimed at helping the Centre to better reflect a biomedical and neuroscience perspective in all its activities. The author of the report, Dr. Franco Vaccarino of the University of Toronto, said a more effective approach to intervention for drug abuse in the future would depend on a better understanding of the potential relationship between pharmacological treatments that work on the brain and nervous system, and psychological treatments such as cognitive behavioural therapy that address situational and cognitive factors. Dr. Vaccarino also recommended that CCSA create a scientific advisory council to help the Centre to develop a strategy for raising awareness of current biomedical and neuroscience issues and their impact on addictions. The seven-member group is coordinated by CCSA’s Deputy Chief Executive Officer Rita Notarandrea.
Throughout this period, CCSA continued to reach out to other organizations and jurisdictions in an effort to promote knowledge exchange around substance abuse issues. In June 2007, the Centre signed a three-year memorandum of agreement with the Department of Health and Social Services (DHSS), Government of the Northwest Territories, pledging both parties to work together to enhance the health and well-being of the people of the NWT in the area of addictions and substance abuse. Signing of the agreement coincided with a three-day visit to Yellowknife by CCSA’s Board of Directors, executive staff, and Senior Advisor on Northern Canada. One of the highlights of the Board’s visit was an event called the NWT Addictions Community World Café, an informal discussion co-hosted by nearly 20 non-governmental organizations and key NWT government departments.

In September 2007, CCSA signed a memorandum of agreement with the University of Saskatchewan that is providing a bridge between academic excellence and the field of substance abuse and addictions research. In November, CCSA signed a memorandum of agreement with Tungasuvvingat Inuit (TI), an Ottawa-based organization providing a wide range of counselling and support services to Inuit living in Ontario. This was the first time CCSA had entered into such an agreement with an Inuit-specific organization.

Over the years, CCSA’s long-standing membership in the Canadian delegation to the Commission on Narcotic Drugs (CND) began to evolve into a special leadership role for the Centre within the Vienna
Non-Governmental Organizations Committee on Narcotic Drugs. CCSA took the lead in organizing the Beyond 2008 NGO forum in Vienna in July 2008. This involved organizing 13 consultations in 150 countries and nine regions around the world to provide input to a review of global progress on drug issues that was promised in 1998 at the United Nations General Assembly Special Session (UNGASS) on the world drug problem. Participants at Beyond 2008 came together to achieve something historic by providing a clear and single voice from NGOs around the globe to the CND on what civil society sees as critical to the future of global drug policy. This came in the form of a Declaration and three Resolutions highlighting key themes of shared responsibility and accountability, giving the most affected a voice, and creating a call for action. These documents have been welcomed by the preparatory sessions of the CND and are expected to substantively shape the recommendations and outcome of the 1998–2008 UNGASS review to be completed in spring, 2009.

Michel Perron addresses the closing session of Issues of Substance (IOS) 2007 in Edmonton in November 2007. Organizers initially thought the biennial event would attract 800 delegates—substantially more than the 450 who attended IOS 2005. As it turned out, registrations for IOS 2007 reached the upper limit of more than 950 well before the three-day meeting began.
Beyond 2008 is the most ambitious project CCSA has ever undertaken and its success speaks not only to the respect and trust that the Centre has earned over the years, but also to the quality and scope of the work it is capable of in the future both domestically and internationally. Through its founding legislation, CCSA was given a unique mandate to build cooperation and consensus around efforts to address alcohol and drug problems. It has consistently used its non-partisan position to bring partners together across jurisdictional, cultural and ideological lines to solve problems that cannot be solved in isolation. CCSA will continue to promote the benefits of multi-sectoral collaboration through alliances such as the National Framework for Action and through the many issue-focused working groups that have grown out of the Framework. CCSA’s first 20 years are something to be proud of, but they are only the beginning.