



The Evidence (transcript)

Season 1, Episode 3

Topic: Interview with Rita Notarandrea

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[ANNOUNCER] You're listening to *The Evidence*—knowledge that inspires.

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[ANNOUNCER] *The Evidence*: produced by the Canadian Centre on Substance Use and Addiction.

[Lee Arbon] Welcome back to another episode of *The Evidence*, your podcast on substance use in Canada.

[AD] We're your hosts, Lee Arbon and Amanda Deseure. We have a fantastic episode for you today. We're joined by Rita Notarandrea, Chief Executive Officer of CCSA.

[LA] Yeah, Rita's gonna talk to us a bit about her background, some of the exciting projects that CCSA did last year, as well as what they're looking to do this year with the calendars turning to 2019.

[Amanda Deseure] Before we get to that though, Lee I'm very curious to see what you did over the holiday season.

[LA] Oh, you know... I... I... You know, the girls had a great time with Christmas and New Year's, and played with their gifts and had a, you know, great time being off school for two weeks. What about you? What did you guys... what did you do?

[AD] Um... I ate a lot, pretty much, throughout the entire holiday season, I...

[LA] Who doesn't!?

[AD] ... I know, I know. I have quite the flair for devilled eggs, and, and turkey so...

[LA] So we didn't do turkey, my wife does beef tenderloin for Christmas, it's kinda become the tradition in our household. It's different, we do turkey at Thanksgiving, but Christmas she likes to mix it up.

[AD] Oh, that's different, that's nice, that's nice to have a family tradition that's a little bit different than everyone else's.

[LA] Oh, you know, what about New Year's? Like, you know, it's 2019, did you... did you bite the bullet? Did you make any of those pesky New Year's resolutions?



[AD] So I... I didn't... I actually don't make New Year's resolutions... because I'm a little scared of just letting myself down in three days. I've never been able to keep a resolution...

[LA] If you can last three days, that will beat probably half the people out there who make resolutions.

[2:04]

[AD] [laughter] Yeah, I... I just can't seem to keep them and I think it's, for me at least it's better for me to take like a really small behavioural change that isn't necessarily a resolution, it feels littler, and that I can handle and go from there.

[LA] [hesitation] You know, I have to tend to agree with you, I think it's more on the lines of, you know, putting all that pressure on yourself for something that's supposed to be for a whole year, you know. So I don't necessarily make resolutions, but I, you know, want to do things more, like last year it was stuff like you know do more crosswords puzzles, or some thing, you know, that will enhance my life a little bit, not get stressed out as much. Kind of make that kind of a resolution.

[AD] Yeah, that's, that's totally fair. I, I, I think last year I made a small one and it was more like to be home more, see my family a bit more, and I actually think I stayed true to that, I got home to see my family a bit more, and I made more of an effort to be home after work, which was pretty impressive for me, I tend to just wanna be out all the time... [laughter]

[LA] You know what, with three girls I wish I was out more.

[AD] [laughter] Uh... For our listeners, if you made a New Year's resolution, or you decided not to, let us know! You can email us at podcast@ccsa.ca.

[music starts]

[LA] And, you know what? We'll be right back with our guest today, Rita Notarandrea. Stay tuned!

[ANNOUNCER] Like our show? Have a comment or question? Want to suggest a guest for *The Evidence*? Email us at podcast@ccsa.ca, and let us know. We want to hear your take on *The Evidence*.

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[3:50]

[LA] And welcome back to *The Evidence*! We're here with our guest today, Ri- CCSA CEO Rita Notarandrea. Thank you for joining us today!

[Rita Notarandrea] It's a pleasure to be here.

[LA] Okay, so... first off, you know, how was your holiday?

[RN] I had a great holiday, it was relaxing... It was wonderful spending so much time... with my daughters, and with my family, and Christmas was at my home, so it was wonderful.

[LA] So Rita let me ask you something, I mean... people get up in the morning, they go to work, you know, to do their job, to pay their bills, but... I mean, you have a real passion about what you do, so what drives you? What makes you get up in the morning with eagerness?

[RN] Thanks very much for picking up on that, Lee. I am very passionate about what I do. And I love what I do, I definitely don't see this as a job when I wake up in the morning. And what drives me is... I always have an individual in my mind, and everything we do, we need to be helping someone out there. So if I have a person in my mind, then everything I do is, how could this help that person's



family? How can this help that person? And so I do have a person in my life that I have been working with for a couple of years and... So when I think of CCSA's work, I think of this person and, would this make a difference in that person's life? And that is why I'm passionate, because this person is really reflective of the population that are dealing and living with substance use disorders. So for me, if I could make a difference in this person's life, if I could make a difference in this person's family, then my hope is that CCSA as a whole can make a difference in someone's life. So that's what drives me is this person and, when I say that I'm touched by it, and I have someone in mind, I'm sure other people at CCSA also have people in their minds that have been touched by this. So, that's what perhaps makes me passionate, but I also believe that that's what makes a lot of the staff at CCSA passionate about their work and, by the way, probably other staff that work in this area in other parts of the system.

[LA] You know, I think, you know, just listening to you speak on that makes it quite evident, you know, why it is easy for you to get up in the morning.

[RN] It's exactly that, thank you for the question and... I think all of us have an important role to play, and I really do believe in the end that we are going to make a difference, and I have seen a bit of the change, and I see a lot of openness out there. So I'm very hopeful.

[LA] And with you working now, you know, in substance issues, what are some of the biggest challenges you have seen with regards to that?

[RN] Um... Before I came into the world of substance use disorder, of substance use and addiction, I come from the world of mental health, and that has given me a lot of learnings. I've learned so much from the mental health world, and I have brought that to the world of substance use and addiction. And the challenges, there are a lot of similar challenges, and what I mean by that is the issue of stigma, the issue of focus, the issue of investment. It's something that has been there for a very long time, and when it comes to substance use disorder, it certainly is an area that hasn't received the same level of attention, focus, and investment that we see perhaps in other areas of health, and with other chronic diseases.

[silence]

[7:53]

[LA] Yeah, and I think, I think that's a great point you bring up there, because, you know, I attended an event not too long ago, regarding stigma, and I know we talked about it with Gord, but the presenter there had a really key concept about, you know, when someone abuses food, we don't call them a food abuser, we call them someone with an eating disorder. And I think there's a lot of those misconceptions with substance issues as well.

[RN] There's a lot of misconceptions, myths, beliefs out there, and I'm not thinking that they're necessarily intentional. I think that we've all grown up with certain understandings of things, and when it comes to substance use disorder, I'm not sure we have a good understanding of, of what it's about, how it occurs, what are the factors that contribute to it... So I would like to believe that we don't have a good understanding of substance use disorder and the factors contributing to it, and that leads to certain language, certain attitudes, certain behaviours, and we're not always conscious of our attitudes, of our beliefs, or of our behaviours. And some of those behaviours can be very discriminatory. But it's important to be aware, and I think that's one of the things I'd like to see in our society is greater awareness about substance use disorders is all about. So that with greater awareness, with greater understanding comes greater compassion.

[9:37]



[AD] With Canada's legalization in 2018, do you think that the stigma around cannabis use is going to change, or have you seen any changes since legalization?

[RN] Not with respect to cannabis legalization, I think the change and the openness to substance use disorder has come about more because of the opioid crisis... I think because the opioid crisis has affected everyone... You know substance use disorder and overdoses is not discriminating. Everyone is touched by this, everyone is touched by someone in their workplaces, in the community, on a sports league, so everyone has seen this, so all of a sudden, it has really opened our eyes that this affects us all, and I think that has had a greater impact on us looking at substance use disorders with the intent of trying to understand it a bit more, whether it be in a health professional's office or in emergency departments or right, right at home. Trying to really understand what is this all about? I think cannabis legalization has contributed to a greater dialogue in Canada... But when it comes to stigma, I think stigma, it cuts across substances. Stigma is really how do you look at that individual with a substance use disorder. And whether it be an alcohol use disorder or cannabis, or opioids, I think the momentum is there now to have a good conversation about this, and for people, there's a greater interest in trying to understand what is really happening.

[11:27]

[AD] You spoke about the opioid crisis. Would you be able to tell us a little bit more about the work CCSA is doing on the opioid crisis, or on opioids more generally?

[RN] Again, more generally, CCSA does have work in different areas pertaining to substance use. So, some of our work is substance-based, i.e. opioids, cannabis, alcohol. Some of our other work is foundational to all of those... such as the, our work on stigma. So some of it, when it comes to opioids... CCSA's mission is really to bring the evidence to people, so that they could make more informed decisions. And whether it be the general public or whether it be again a health professional, or a decision maker, how do we bring forward the evidence? On opioids, that's what we've done, we were asked by government to look at what are the best practices when it comes to opioid use disorders? What are the best things we ought to do in treatment? What are the best things we ought to do in terms of prevention and harm reduction? In community recovery supports? And that's what we have produced, we have produced something for all governments, and for health professionals, as these are what the latest evidence, what the latest evidence is telling us as to what we ought to be doing when we're treating opioids, and opioid use disorders. We've done other things in terms of mobilizing the evidence, we had a wonderful opioid summit with Health Canada, and with our federal minister of health, Ginette Petitpas Taylor. It was a wonderful event, we had I would say a third of the people in the room were people with lived and living experience, and hearing their perspective on it really does create for a better dialogue. It's a much more informed dialogue, because you get to hear their experiences, with the system, with families, with the community, with society. And I think that there was a greater richness in that kind of a summit. It was quite successful, from all of our points of view, people walked away having learned something. And really looking at how can we each change something in our workplaces or in our families, or in our communities...

[13:49]

[LA] And I think on that note we'll take a short break, but we'll be right back shortly with more conversation with CCSA CEO Rita Notarandrea. Stay tuned.

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[ANNOUNCER] This is *The Evidence*. If you find today's topic interesting, be sure to visit ccsa.ca for more information.



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[AD] And we're back from our break, still speaking with CCSA's CEO Rita Notarandrea. Um..... actually we're going to talk to you a little bit about the cost study that CCSA released this year. In the cost study, it came out that Canada spends 38.4 billion dollars a year on substance use. Is this an alarming number for you?

[RN] It's definitely an alarming number. However, what is more alarming is that 70% of those costs are associated with legal substances such as alcohol and tobacco...

[AD] Wow.

[RN] ... I think... Exactly, when you see that 70% are associated with two substances, that is definitely alarming. So, it's been an important study, but I also wanna say that, it's alarming, undoubtably, but I don't think that's the complete picture either. There are so many things that are also... there's a limitation to it to some extent, we don't have all health services incorporated there. So when we look at this as being an alarming number, I think we need to also appreciate that it's not the full number. There are other costs that may not have been reflected in there, for example, community residential treatment facilities that are not associated with hospitals. So a lot of the data when it comes to health care are... is really that data that is associated... generally the hospitals.

[15:53]

[AD] Wow. For this number, 38.4 billion, when we break it down, the numbers say it's about 1,100 dollars per person in Canada. That feels really high. Were you surprised by how high that number is, or do you think it would have been lower?

[RN] Um... The number didn't surprise me as much, it is high per person. That is high. I looked at it always from the perspective of... however it didn't even include everything, so imagine if you look at it from that perspective, and the other side of it as I mentioned earlier is when you consider that 70% of those costs are associated with tobacco and alcohol, that to me is the more alarming aspect of it. Now, in the midst of an opioid crisis, people would be thinking, what about opioids?" We're seeing so many deaths, we've seen 8,000 deaths since 2016. I just wanna emphasize that that study had data up to 2014. So, when we replicate it again and we include numbers that are 2016, 2017, I think that will be most likely alarming, because what did we experience as a society, once you add to those numbers the opioid-related deaths?

[AD] Absolutely. And it is shocking to think that it's the legal substances. I think you would kind of assume it wouldn't be since it's legal, and since we've legalized cannabis, do you expect the costs around cannabis to go up?

[silence]

[RN] I am expecting overall costs to go up. On the other hand, when we come to enforcement, what we have also heard is that a lot of the costs when it comes to cannabis has been related to enforcement. And certainly, there are a lot of groups out there that have indicated that once we legalize cannabis, the costs associated with enforcement will go down, so I am expecting that. Then there are other groups that say yes, but now we're going to have perhaps more cannabis use disorders, so perhaps if we're going to see a change, it might increase in the area of health services, cause certainly from a hospital utilization, we are seeing a greater number of hospital utilization pertaining to cannabis use disorders. But again, with enforcement costs going down, and perhaps health care costs going up, it's really difficult to predict on the cannabis front.

[AD] And what do you think we can do as a country or as a society to help bring these costs down?



[RN] I think where we really need to focus is on... upstream work. Um... I think if we're going to bring down the costs associated with substance use disorders, we need to understand the contributing factors. And some of those contributing factors have to do with adverse childhood events. Therefore, what can we do as a society to increase the protective factors that reduce the risks? And how do we reduce the risk factors? So, I think there are opportunities when it comes to prevention, and upstream work that we can do to reduce the overall numbers of people with substance use disorders.

[19:25]

[LA] That's, that's a great point, and... I just, I wanna change directions just a little bit here, cause we kinda talked about some of the different stuff that CCSA has done more recently, but with it being the new year, you know, what's on the horizon, you know, and what are we... what's our main mandate and prerogative moving into 2019?

[RN] There's a lot of priorities, we still have an opioid crisis, we still have to address... address the issue of opioids, as to what more evidence do we need? And one of them is always what has worked elsewhere? What more do we need to do when it comes to opioids to reduce the number of deaths? So that's definitely a priority. When it comes to cannabis, I think we have edibles and concentrates, that's another issue we need to address. I think it comes down to public education, I think there is still a lot of room to really inform people about edibles, and to talk about concentrates. So we have a huge area there where we could really contribute, and that is answering a lot of questions. I... Like everyone else, there are... naïve users of cannabis, and I think we really have to share information of, about edibles. We also need to share more information when it comes to cannabis and driving. Again, this is all with the view to reducing the risks. That's what we're trying to do at CCSA is, through the evidence, reduce the risks, and at the same time, ensure that people are making informed decisions. We also, when I talk about advancing the evidence... advancing, mobilizing the knowledge, we have a huge Issues of Substance conference that we organize every two years, and we have an opportunity at that conference, which is at the end of th- of next November. We have an opportunity to again share the evidence, but more importantly give partners out there to come forward to our conference and share the evidence that they have, and some of their own experience, so that we can each learn from one another.

[21:35]

[LA] That's a great answer, and I wanna thank you for joining us today, but I'm gonna also close it with a... I wanna ask a personal, more thoughtful question, and I think with all your experience... What do you feel is maybe the biggest accomplishment or the biggest movement in substance use disorders that you have seen over the last few years?

[RN] I think... the biggest change that I have seen in our society is the openness to wanna talk about substance use disorders more. There's a greater thirst to learn more about what this is all about. And I think it's because we're seeing it everyday in the paper, we're trying to get a greater understanding as to what is happening here, and why are... you know, why are there so many deaths? And each of us is affected by this, each of us is touched by this. And I think there's a greater thirst for information, and there's a greater thirst to try to understand this a little bit more and try to get a better handle. So when I say that, I mean from, you know... from decision makers and politicians wanting to learn more so that they could come up with the, with the right answers, more than one response to this. But there's also just the general public wanting to know more, and so that I... I can be a better parent, so that if I learn more, I can certainly impart some of the information to my children. So I think all parts of society is, we're faced with this, and whether it be the national talk about cannabis legalization, or whether it's been about the opioid crisis, there's a greater thirst for



information, and there's a greater thirst to try to really truly understand what this is all about. That's a great opportunity and challenge for the Canadian Centre on Substance Use and Addiction.

[23:38]

[LA] I don't think we can end it on a better note, so we'll stop it right there, and I wanna thank you for coming in and taking time to speak with us today.

[RN] Thank you very much for the invitation.

[AD] Absolutely, you've really weaved together a lot of the ends for us, and it's nice to have a big picture.

[RN] Thank you. Thank you very much.

[music starts]

[LA] Stay tuned, we'll be right back with more on *The Evidence*.

[AD] *Addiction News Daily* delivers a news scan of relevant articles, events and resources related to substance issues directly to your inbox Monday to Friday. Join our almost 3,000 subscribers in receiving news that's relevant and interesting. Sign up today by visiting www.ccsa.ca.

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[AD] We're back. That was a very enlightening and moving interview with Rita. I couldn't help but keep my family and friends and the community around me in mind as Rita spoke about what motivates her and what makes her get up in the morning, and I think the same is for a lot of us, and I think when we talk about substance use, it's more true than ever.

[LA] No, I think, I think you hit it dead on, I think it's more on the lines of, you know, if you have that cause, if you have that purpose, it just fuels you to do more, to take that extra step with that extra little bit of effort in on whatever you're doing to reach an end goal.

[AD] Absolutely.

[LA] Well that's the end of our show, we hope you've enjoyed it. We'll be back again next month and... for our next episode... we're gonna be talking pot! So come back for another episode of *The Evidence*.

[music starts]

[ANNOUNCER] This is *The Evidence*. If you find today's topic interesting, be sure to visit ccsa.ca for more information. Technical and editing support for the podcast is handled by Christopher Austin. *The Evidence* is owned and produced by the Canadian Centre on Substance Use and Addiction. Copyright 2019.

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