

Summer Institute follow-up and workforce survey findings top CCSA's training agenda

CSA is moving forward steadily on its best practices and training agenda with the successful conclusion of the second National Summer Institute on Addictions in July, and the completion of a national survey of the professional development needs of Canada's specialized addictions treatment workforce.

The 2004 Summer Institute, co-sponsored by CCSA and the Addiction Research Centre (Correctional Service of Canada), dealt with the treatment of clients with both mental health and substance abuse problems (concurrent disorders), providing about 60 addictions and mental health professionals from across Canada with current information on the subject. Interest in the four-day event exceeded available space and work is underway to boost capacity for future Institutes.

The 2004 Summer Institute built on work initiated by Health Canada in its 2001 report, "Best Practices: Concurrent Mental Health and Substance Use Disorders". Faculty at the Institutemany of whom were involved in developing the reportshared their experience with organizational restructuring, comprehensive screening and assessment, and integrated treatment models. Overviews of each presentation will be available in six to eight weeks through Best Practices and Training at www.ccsa.ca.

Workforce survey

Results of CCSA's workforce development survey—based on a national random sample of treatment directors, program managers and front-line workers-are now being compiled. The survey assesses levels and types of education and professional

development experiences among treatment professionals, and identifies their training needs. It also explores factors that influence the ability of the workforce to provide high-quality services.

The survey findings will be reviewed and analyzed during a two-day meeting of the survey advisory committee in October. The committee will also recommend next steps.

CCSA is convening a key stakeholder meeting on addictions workforce development this fall as part of a broad consultation on a national framework for action on substance abuse. CCSA launched the roundtable series with Health Canada in May. The workforce roundtable agenda will help shape CCSA's workforce development strategy based on consultation and input from the advisory committee and careful analysis of the survey results.

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Registration and opening session at the 2004 National Summer Institute on Addictions in Montague, PEI. Photos courtesy of CSC.





Canadian Centre on Substance Abuse · Centre canadien de lutte contre l'alcoolisme et les toxicomanies



For a year, six communities taking part in the CCENDU/HEP Community Action Project have been developing portraits of local substance abuse issues and priorities. Four communities have reported on data collected so far: Whitehorse, YK, Pemberton/Mount Currie, BC, and Moose Factory and Brockville. ON. Reports are also expected from Windsor, ON and Montreal, QC.

Alcohol issues top the list of community action priorities

nitial results of an ongoing national exercise to identify priorities for community action on substance abuse indicate that alcohol remains the biggest source of concern. Six communities are taking part in the Community Action Project, funded through the National Crime Prevention Centre and coordinated by CCSA. Of four locations that have so far completed the data collection part of the project, all report that alcohol has the most impact on the community. It is the most commonly used substance and accounts

for the largest number of hospitalizations and people seeking treatment; in some cases, it also places the greatest demand on local police services.

Data were collected according to indicators used by the Canadian Community Epidemiology Network on Drug Use (CCENDU), which include prevalence, enforcement, treatment, morbidity, mortality, and HIV/AIDS/ Hep C. In each community, a local partnership has been set up to guide the data collection and planning process. Modelled on the Health, Education and Enforcement in Partnership (HEP) network, the local partnerships include representatives from health care, addiction treatment, police and municipal governments.

In smaller communities, where access to data was limited, CCENDU coordinators used focus groups, community forums, in-depth interviewing and surveys to develop a portrait of local issues.

In the next phase of the project, communities will develop plans to respond to the issues identified.

More details on the project, including reports and plans, are at www.ccsa.ca/ccendu

CHN's Substance Use/Addictions affiliate tackles tobacco

s part of its renewed funding from Health Canada. the Substance Use/Addictions affiliate of the Canadian Health Network (CHN) has added tobacco to its area of responsibility, increasing its activities by about 25%. CCSA operates the affiliate jointly with the Addictions Foundation of Manitoba (AFM), and the Association

des intervenants en toxicomanie du Québec (AITQ). The Centre for Addictions Research at the University of Victoria (CAR-BC) (see related story on page 4) recently joined the affiliate and will contribute articles to the CHN Web site at canadianhealth-network.ca.

In addition to managing a collection of more than 1.000 addictions-related resources

in both official languages, the affiliate actively promotes participation in CHN. Tobacco coordinator Kendra Smith is currently testing a Web-based research activity for students pursuing a career in social services. Fifty teachers have been invited to pilot-test the "Addictions Information Challenge" with their post-secondary students to promote CHN as a selfhelp and prevention resource for social service clients.

The affiliate is also developing plain language Web resources and will collaborate with the HIV/AIDS affiliate, CAR-BC and Health Canada to present a CHN workshop at the Second Canadian Conference on Literacy and Health, Oct. 17–19.

The affiliate has eight parttime staff in Montreal, Ottawa, Sudbury, Winnipeg, Vancouver and Victoria.

CHN's substance use/addictions affiliate met in Ottawa in June. Left to right. Nicholas Thivierge, Information Specialist (AITQ); Christine Ball, Information Specialist and Marketing (AFM); Kendra Smith, Tobacco Coordinator (CCSA); Karen Palmer, Information Specialist (CCSA); **Debbie Ayotte**, Information Specialist (CCSA); Tom Axtell, Manager (CCSA). Missing: William Land, Information Specialist (consultant). Bette Reimer replaced Debbie Ayotte in July.



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Newfoundland and Labrador is newest CECA member

he province of Newfoundland and Labrador has ioined the Canadian Executive Council on Addictions (CECA), a national, nongovernmental organization established in 2002 to influence public policy on substance use. At a summer meeting in St. John's, CECA welcomed Doreen Chaulk as the province's representative. Ms. Chaulk is Assistant Chief Executive Officer, Client Services: Mental Health, Addiction, Rehabilitative Services and Human Resources with Health and Community Services Western (HCSW).

Also at the meeting, Murray Finnerty, Chief Executive Officer, Alberta Alcohol and Drug Abuse Commission (AADAC), was elected to represent AADAC as the next CECA president starting in April, 2005. John Borody, Chief Executive Officer, Addictions Foundation of Manitoba (AFM), remains president until then. Dr. Franco J. Vaccarino, representing Ontario's Centre for Addiction and Mental Health (CAMH), becomes vicepresident in September. He replaces CAMH's Dr. Patrick Smith and Peter Coleridge who are stepping down from

CECA after helping to guide it through its first two years.

In November, CECAwhich includes CCSA-will release the results of the Canadian Addiction Survey (CAS), which the organization launched in December 2003 in collaboration with Health Canada. The CAS is the first major national survey of Canadians' use of alcohol and other drugs since 1994. The survey also polled more than 10,000 Canadians on their attitudes toward measures to control drug use, and on their beliefs about the availability of drugs and the risks associated with use.



▶ Doreen Chaulk has become CECA's Newfoundland-Labrador representative. Besides her position with Health and Community Services Western (HCSW), she has also served in a voluntary capacity, for the past 25 years, on various addiction boards and agencies in the province, including the Alcohol and Drug Dependency Commission.

CCSA expands agreement on treatment data collection

reation of a national framework for treatment. services data collection moved a step closer to reality in July when representatives from British Columbia, Ontario and the First Nations and Inuit Health Branch of Health Canada (FNIHB) agreed in principle to contribute data to CCSA's national treatment database. Quebec's Association des intervenants en toxicomanie du Québec (AITQ) had already agreed to share their treatment data last year (see Vol. XIII No. 4) and recently completed transfer of 128 records to CCSA.

Quebec, BC and Ontario are home to 75% of Canada's treatment programs and the sharing of their data will mean less duplication of effort, better data integrity and reduced "survey fatigue"



when CCSA updates its national treatment database every two years.

Participants at a CCSAhosted meeting also agreed on the type of information that should be included in the national database. As a result, CCSA has now designed a new survey instrument that will help to streamline data collection across Canada.

Organizations represented at the meeting included Ontario's Drug and Alcohol Registry of Treatment (DART), BC's Information Services Vancouver (ISV), the Alberta Alcohol and Drug Abuse Commission (AADAC), the Addictions Foundation of Manitoba (AFM), AITO and FNIHB.

You can find the national database of treatment services in Canada by clicking on CCSA Addictions Databases at www.ccsa.ca

Representatives of several organizations that collect data on treatment services in Canada met with CCSA personnel on July 8 to discuss the Centre's long-term plan to create a national framework for standardized treatment data collection. From left to right: Gilles Strasbourg, CCSA Associate; Susan Rosidi, Database Coordinator, CCSA; Art Dyer, Manager, Information Services, AADAC; Carmen Trottier, Director, AITQ; Susan Vincent, Executive Director, DART; Nina Frey, Director of Information and Reference Services, CCSA; Hugh Leschot, **Resources and Publications** Coordinator, ISV; George Poitras, Manager, Addictions, FNIHB; and Sheila Duprey, Information Specialist, AFM.



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Tim Stockwell heads new research centre

im Stockwell has been appointed Director of the new Centre for Addictions Research of BC (CAR-BC) at the University of Victoria, effective Aug. I. Dr. Stockwell joins CAR-BC after 15 years with the National Drug Research Institute (NDRI) in Perth, Australia—most recently as Director.

Writing in CAR-BC's May 2004 newsletter, he said his first objective will be to seek advice and support in developing "a research program that will advance the entire prevention, treatment and policy response to drug issues in BC".

Dr. Stockwell's links with CCSA go back many years. Eric Single, CCSA's Scientific Advisor Emeritus, worked with Dr. Stockwell and NDRI to develop legal options for cannabis possession in Australia that significantly influenced legislative changes in that country. In 1993, Dr. Stockwell contributed a very amusing and informative article to *Action News* (Vol. IV No. I) in which he told how he and Dr. Single accompanied an inspector with the Liquor Li-



• Tim Stockwell will direct CAR-BC's addictions research activities at UVic.

censing Board of Ontario (LLBO) on an undercover tour of Toronto nightclubs. Dr. Stockwell's research has covered many aspects of alcohol policy, liquor licensing issues, taxation, and drinking patterns and their consequences.

CAR-BC has its origins in a 2001 report, Weaving Threads Together, whose recommendations led to the creation of the BC Addiction Foundation, which in turn sponsored the establishment of the new research centre.

For more information, visit the CAR-BC Web site at www.carbc.uvic.ca

CCSA's Annual Report now available

Copies of CCSA's 2003-2004 Annual Report are available free as of mid-October; you can order one now by e-mailing the Editor at rgarlick@ccsa.ca. The distinctive 16-page report, *Positioned to Influence*, reviews activities by Canada's national addictions agency in transferring knowledge, developing policy, and building partnerships. Designed by Ottawa's Parable



Communications, it will also be available as a PDF at CCSA's Web site, www.ccsa.ca

Events

Oct. 17-19—2nd Canadian Conference on Literacy and Health. Ottawa. Web site: www.cpha.ca/literacyandhealth/index2.html. E-mail: literacyandhealth_conf@cpha.ca Oct. 21–23—ELISAD: European association of libraries and information services on alcohol and other drugs. Problematic drug use and lifestyles: trends and social representations. Florence, Italy. Web site: www.elisad.org. E-mail: mariella.orsi@asf.toscana.it

Oct. 28–29—On the FAS Track to Understanding. A national conference on Fetal Alcohol Spectrum and related neurobehavioural disorders. California Fetal Alcohol Spectrum Organization. Riverside, CA. Web site: www.calfas.org/conference.htm. E-mail: ecarner@calfas.org Oct. 31–Nov. 5—International Council on Alcohol and Addictions. 47th International Confer-

ence. Venice, Italy. Web site: www.icaa.de. E-mail: icaa.venice@gmx.at.

Nov. 1–3—VI Europad Conference, European Opiate Addiction Treatment Association, Paris. Web site: www.europad.org/conf2004.asp. E-mail: maremman@med.unipi.it

Nov. 2–4—National Aboriginal Gambling Awareness Conference. Winnipeg. Web site: www.afm.mb.ca/nagac.

Nov. 4– 6—American Society of Addiction Medicine Review Course in Addiction Medicine. Toronto. Web site: www.asam.org. E-mail: reviewcourse@aol.com

Nov. 18–20—Western Canadian Conference on Addictions and Mental Health. Richmond, BC. Tel.: I 888 877-4777. E-mail: occhealth@infoserve.net

Dec. 1–4—International Conference for Alcohol and Drug Addiction Professionals. National Association of Addiction Treatment Providers. Atlanta, GA. Web site: www.naatp.org/secad/ index.php. E-mail: EPuckett@naatp.org

Dec. 5–7—Gambling and Addiction: Common Causes, Managing Consequences. Institute for Research on Pathological Gambling and Related Disorders. Harvard Medical School, Division on Addictions. Las Vegas. Web site: www.hms.harvard.edu/doa/institute/

New faces around the CCSA office



► CCSA has welcomed five new staff members in recent weeks. *Seated from left to right:* **Deborah Robillard**, Administrative Assistant; **Lee-Anne Ufholz**, Information Specialist/Web Technician. *Standing:* **Anne-Elyse Deguire**, Senior Research Analyst; **Deborah Peterson**, Administrative Officer; **Shauna Kelly**, Finance/Administrative Assistant. For a complete list of CCSA staff please see "About CCSA" at www.ccsa.ca