

CANADIAN CENTRE ON SUBSTANCE ABUSE POLICY PORTFOLIO ASSESSMENT

May 2004

Executive Summary

This report provides an assessment of the policy portfolio of the CCSA with the primary goal of developing options for future substance abuse policy research and development by the National Policy Working Group.

A review of the past policy-related activities of the CCSA reveals that they have taken four general forms: (1) policy discussion papers, (2) statements on national substance abuse policy, (3) comments on proposed legislation and (4) letters to trade groups and/or regulatory bodies. These activities have covered seven major topics: (1) national substance abuse policy, (2) harm reduction (including syringe exchange), (3) drug treatment (including drug treatment courts), (4) alcohol control policy (including FAS, alcohol warning labels, regulation of alcohol at sporting events, and alcohol advertising), (5) cannabis control policy, (6) problem gambling and (7) performance enhancing drugs.

The past policy work of the CCSA on each of these substantive issues is compared to recent events and options for future policy research and development by CCSA's National Policy Working Group are identified. In addition, several emerging substance abuse topics (Prescription Drugs, Internet Pharmacies, Drugged Driving, Employment Related Drug Testing and MDMA) are examined for future policy research and development options. All told, three issues are flagged for potential policy development and 31 topics are identified for possible future policy discussion documents. These options are presented in summary form below:

Options for Policy Development

Topic Area	Issue	Purpose	Rationale
Harm Reduction	Reduction of Fee Paid to Pharmacists for Dispensing Methadone	To summarize the evidence on the effectiveness of methadone for treating opiate dependence and the implications of Health Canada reducing the fee paid to pharmacists for dispensing methadone in Canada.	Methadone is currently the "gold standard" for the treatment of opiate dependence with 30 years of evidence behind it. The reduction of harms related to injection drug use is a central priority of the renewed National Drug Strategy. Reducing the fee paid to pharmacists for dispensing methadone has the potential to curtail delivery of this important harm reducing service in Canada.
Harm Reduction	Implementation of Pilot Needle Exchange Program at CSC	To summarize the international evidence of effectiveness and safety of prison needle exchange programs and consider options for Correctional Service Canada.	One of the most important tasks facing substance abuse policy today is taking the rhetorical commitment to harm reduction and translating it into actual policies and programs that reduce harm. An important part of this process is proceeding with carefully designed studies that will generate reliable information for informing harm reduction policy choices. Several countries have piloted and evaluated syringe exchange programs in their correctional systems and demonstrated that they are a safe and effective way to reduce risky injection behavior among incarcerated populations. Numerous official studies and organizations in Canada have recommended a pilot needle exchange program for CSC including The Expert Committee on AIDS in Prison (1996) and the Canadian Human Right Commission (2003).
Alcohol Policy: FAS	Alcohol Warning Labels	To summarize the rationale behind alcohol warning labels, their introduction in Ontario and options for Canada.	While alcohol warning labels have not been shown to be effective for changing the behavior of problem drinkers, they can serve as one strategy for shifting general public awareness and long term cultural norms around at-risk alcohol consumption. In addition, alcohol products are the only commodities sold for consumption in Canada with significant negative health effects that do not carry warning labels. In 2001, Parliament passed a motion in favor of alcohol warning labels but no action has been taken so far.

Options for Policy Discussion Documents

Topic Area	Issue	Purpose	Rationale
National Substance Abuse Policy	Renewed Drug Strategy	To identify and recommend specific, measurable criteria for evaluating the renewed National Drug Strategy and to develop a conceptual framework for understanding the relationship between the components of national substance abuse system in Canada (as suggested by the October 2003 Forum).	The first three National Drug Strategies (1987, 1992 and 1997) failed to include measurable criteria for their evaluation and were therefore open to criticism regarding their effectiveness. The need for a conceptual framework for understanding the relationship between the various national substance abuse/addiction systems was identified during the October 2003 Forum on Alcohol and Illicit Drugs Research in Canada. A clearer understanding of the relationship between the systems addressing substance abuse and addictions can be used in strategic planning for a more effective and efficient response to these problems.

	Operationalizing a Continuum of Drug Use in Public Policy	To more fully develop a graduated continuum of drug use and to use this continuum to develop more effective substance abuse policy.	Prevalence data on drug and alcohol use are most often presented in terms of lifetime or annual use. While these data are useful for informing policymaking on primary prevention, they are not very useful for policymaking regarding secondary or tertiary prevention. The Senate Special Committee on Illegal Drugs developed a continuum of cannabis use based on five categories: no use, experimental use, recreational use, at-risk use and excessive use. Prevalence data collected and interpreted according to this continuum would help in the development of more effective and efficient substance abuse policy in Canada.
	Evidence-Based Drug Schedule	To use accepted scientific criteria based on addictive potential, risk to public health, evidence of actual abuse and degree of actual harm relative to other benchmark substances to construct an evidence based drug schedule.	To a large degree the current drug schedule in Canada is not based on objective, scientific criteria. Given the substantial increase in knowledge about substance abuse in the last few decades, it would be sensible to assess the current schedule based on current information and make suggestions for changes that would improve our management of illicit drugs.
	Research on Innovative Substance Abuse Programs	To highlight the importance of conducting evaluative research into innovative substance abuse programs and policies and to identify political, economic and social factors that may be hindering the implementation of such studies.	One of the most important problems related to the development of effective substance abuse programming and policy is the lack of scientific evaluations. In order to address this issue and improve substance abuse policymaking it is important to support well-designed pilot projects that include rigorous evaluation components. There is a multitude of political, economic, and social factors that make it difficult to conduct much needed evaluative research on innovative substance abuse programs and policies and the identification of these factors is a necessary first step to dealing with them.
	Involvement of Non-Traditional Groups in Substance Abuse Policymaking	To develop suggestions for facilitating the meaningful participation of non-traditional groups in substance abuse policymaking.	Substance abuse policymaking in Canada has been criticized for being "top down" and not including all relevant stakeholders. Two groups in particular that have not been included in past policymaking efforts are drug users and the business sector. Efforts to include these groups in substance could serve to improve our efforts in this area.
	Evaluation of Enforcement Approaches to Controlling Illicit Drugs	To conduct a literature review of existing evaluations of policies and programs designed to reduce the supply of drugs and set out options for future work in this area.	While it is the case that the enforcement approach to controlling illicit drugs has received substantial funding around the world, very few evidenced-based evaluations of policies and programs related to this approach exist. This paper would draw together evaluations of the enforcement approach and develop options for future evaluation work in this area.
Harm Reduction	Needle Exchange	To assess the geographical coverage of needle exchange programs and identify options for extending the reach and improving their effectiveness.	While needle exchanges have become common throughout some areas of Canada, there are still populations and locations that have not been reached by this important harm reduction service. In addition, there is evidence that even where needle exchanges are available, risky injection practices are still a problem (Wild, et al. 2003). A discussion paper looking at best practices for improving the reach and effectiveness of needle exchanges would help maximize the effectiveness of this harm reduction service.

	Methadone Maintenance Therapy	To assess the availability of methadone maintenance therapy and identify policy options for improving access of difficult to reach populations.	While methadone maintenance therapy has been available in Canada for several decades, there are still populations and locations that are not adequately served by this important harm reduction program including younger injection drug users and inmates in some provincial correctional systems. A discussion paper looking at best practices for improving the reach and effectiveness of methadone maintenance therapy, including a discussion of options regarding low-threshold methadone programs in Canada, would help maximize the effectiveness of this harm reduction service.
	Enforcement-Related Harm Reduction Policies	To discuss a range of enforcement-related harm reduction policies and identify options for their use in Canada.	Harm reduction is often associated with programs like needle exchanges and safe injection sites but there are a number of policies that relate to drug enforcement including cautioning, referral to substance abuse programs, etc. This paper would discuss enforcement-related harm reduction policies and make recommendations for their use in Canada.
	Safe Injection Sites	To review the evidence of the effectiveness of safe injection sites, describe the Vancouver pilot site, and review the status of safe injection sites vis-à-vis the major international drug control conventions.	North America's first supervised injection facility opened in Vancouver in late 2003 but they have been in operation in Europe and Australia for some time. Several evaluation studies have now been published on safe injection sites and given the controversial nature of the concept, it would be prudent to legitimize the Vancouver pilot site by a thorough review of the evidence regarding their effectiveness.
	Heroin Assisted Therapy (HAT)	The review the evidence of the effectiveness of heroin assisted therapy and discuss the NAOMI trials currently being implemented in Canada.	The NAOMI trials are set to begin in mid to late 2004. Trials of HAT have been conducted in the UK, Switzerland and the Netherlands and evaluations have been published. Given the controversial nature of HAT, it would be prudent to add legitimacy to the NAOMI study by reviewing the evaluations of previous HAT trails and explain what NAOMI will add to these studies.
Drug Treatment	Continuum of Interventions	To provide an overview of the continuum of interventions available for substance abuse in Canada and to assess the coverage of these interventions geographically and by treatment type.	In basing it's treatment regime on the public health model of substance abuse, Canada has developed a wide range of interventions from broad public awareness campaigns directed at primary prevention to intensive to long-term inpatient treatment programs providing tertiary prevention. No national study of the coverage of these services has been conducted, however, and with new drug use prevalence data on the horizon for 2004, a paper investigating the provisioning of treatment will be both timely and useful for an overall assessment of Canadian substance abuse policy.
	Brief Interventions	To review the literature on the effectiveness of brief interventions in the continuum of interventions to substance abuse and to present public policy options that will promote the use of brief interventions in Canada.	Brief interventions are a flexible and cost effective treatment that plays a critical role in secondary prevention by promoting early detection and assisting in keeping recreational use of drugs and alcohol from progressing to at-risk or excessive use. In recent years this treatment has garnered a lot of research attention and has been shown to be very effective at reducing the harms associated with drug and alcohol use.

	Implementation of Harm Reduction Policies and Programs in Treatment Field	To discuss strategies for improving the acceptance and implementation of empirically validated harm reduction program and policies within the treatment field.	Harm reduction is a major “pillar” of the renewed National Drug Strategy. As an approach that does not focus on the cessation of drug use per se, harm reduction runs counter to many institutionalized beliefs and practices including the “abstinence” model of drug and alcohol treatment. Research has shown that many working in the treatment field trained before the emergence of harm reduction are unreceptive to many policies and program promoted by this newer approach. A discussion of strategies for promoting harm reduction within this group will facilitate the implementation of harm reduction in Canada.
	Drug Treatment Courts	To review recent evidence on the effectiveness of drug treatment courts (DTC’s), including the Vancouver and Toronto DTC’s, and to identify “best practice” options.	While drug treatment courts have proliferated widely in the US, they have not yet become common in Canada. While most experts agree that DTC’s are a positive development for the substance abuse field, they are not universally supported and some questions regarding their effectiveness and appropriateness still remain. The renewed National Drug Strategy includes significant resources to maintain the existing DTC’s in Canada and to fund the development of several more in the coming months. An evaluative review of the concept with the goal of identifying “best practices” for Canada would be timely given the impending expansion of DTC’s.
	Mandated/Coerced Treatment	To look at the evidence regarding the effectiveness of mandated treatment and to suggest policy options regarding this controversial approach for Canada.	While the concept of mandated/coerced treatment has not been widely supported in Canada, there has been non-trivial support for this approach among conservative elements in the US and in Ontario. A systematic review of the potential harms and scientific evaluations of coerced treatment would add an evidence-based tone to the politically charged discussion around this issue.
	Diversion of Non-Violent Drug Offenders from Criminal Justice System	To discuss options related to the diversion of non-violent drug offenders from the criminal justice system (other than drug treatment courts) in Canada and identify best practices in this area. This topic relates to enforcement related harm reduction listed above under harm reduction.	There is widespread support for programs that divert non-violent offenders from the criminal justice system that is part of the larger movement to treat drug abuse as a health issue rather than criminal issue. Drug treatment courts are one option for promoting the diversion of drug users but there are others such as police referrals to service, etc. A discussion of the options for diversion would help expand the available diversion program beyond its current focus on DTC’s.
Alcohol Policy	Assessment of Canada’s Alcohol Policies	To use the best practices identified in Babor et al. (2003) to assess the current status and trends of alcohol policy in Canada.	Alcohol remains one of the leading causes of substance abuse related harm in Canada and around the world. Babor et al. (2003) identifies ten best practice policies for the management of harms related to alcohol use and although a number of these policies have been strengthened in recent years, some have actually been weakened. A general assessment of alcohol policy based on Babor’s evidence-based framework could serve to further reduce the harms associated with alcohol misuse in Canada.

	Broadcast Alcohol Advertising	To compare broadcast alcohol advertising in Canada before and after the 1997 decision to turn the screening of alcohol ads over to Advertising Standards Council.	Several changes were made to the regulation of broadcast alcohol advertising in 1996-97 with the most significant being the hand over of screening of ads to the Advertising Standards Council, an advertising industry sponsored non-profit organization. While the number of alcohol advertisements receiving negative rulings in arbitration remains relatively low (avg. = 23/yr.), there are questions as to the appropriateness of making an industry sponsored group so central to the regulation of alcohol advertising in Canada.
	College Binge Drinking	To present evidence on the prevalence of college binge drinking in Canada, discuss the potential harms associated with binge drinking, and develop best practice policies for controlling binge drinking among college students.	A report completed in 2000 by CAMH identified college binge drinking as a serious problem in Canada. Several significant studies of options for dealing with this issue have been undertaken in the US and these could be used to develop best practice policy suggestions for Canada.
	Treatment Resistant Drunk Drivers	To present evidence on the prevalence of 'treatment resistant' drunk drivers in Canada and develop best practice policies for controlling repeat offenders.	Impaired driving is still a leading cause of preventable death and the number one criminal offense in Canada. Studies have shown that a large proportion of impaired driving-related harm is perpetrated by so-called "hard-core" drunk drivers. The identification of best practices for dealing with repeat drunk driving offenders could help reduce alcohol related harms in Canada.
	Lowering the Legal Blood Alcohol Content (BAC) Limit from 0.08 to 0.05	To present background information on the arguments for and against lowering the BAC from 0.08 to 0.05.	Canada, like much of the rest of the developed world, has seen dramatic reductions in drinking and driving charges in the last two decades. A large part of this reduction can be attributed to the lowering of the legal limit for blood alcohol content and other policy changes. Currently, there are organizations in Canada calling for the BAC to be lowered from 0.08 to 0.05. This paper would review the evidence for and against lowering the BAC in Canada.
Cannabis Control Policy	Assessing Effects of Decriminalization	To identify a set of criteria useful for assessing the impact of cannabis decriminalization should it occur in Canada.	The decriminalization of cannabis should be accompanied by a detailed analysis of drug use and enforcement related costs. The identification of specific criteria for analyzing the effects of decriminalization would be useful in advance of decriminalization to demonstrate the commitment of CCSA to provide leadership in this area.
	Potential Net Widening Associated with Cannabis Ticketing Scheme	To discuss and analyze the potential effects of net widening as a result of implementing a ticketing scheme for cannabis possession.	Bill C-10 currently proposes to implement a ticketing scheme for the simple possession of cannabis. At the current time, about half of all cases of cannabis possession are not pursued by police. It is conceivable that a large number of these cases will be pursued under the proposed ticketing scheme thus increasing the overall number of cannabis possession cases in Canada. In addition, a potentially significant number of those receiving fines for cannabis possession may not pay thus leading to further involvement in the criminal justice system. A recent Supreme Court decision regarding the unconstitutionality of imprisoning citizens for not paying fines is relevant to consider as well.

Gambling Policy	Best Practices for Policies Related to Problem Gambling	To discuss the issue of problem gambling, review current evidence as to options for managing this addiction-related problem, and identify best practice policies for Canada.	The growth of legalized gambling in Canada has been staggering and problem gambling is estimated to affect approximately 5% of the adult population. Since the late 1990's, a substantial amount of research has been done on the causes and consequences of problem gambling. A paper summarizing these research findings and identifying best practice policies would be helpful given the likelihood of further expansion of legalized gambling in Canada.
	Internet Gambling	To discuss the issue of internet gambling, the potential harms associated with online gaming, and options for regulating this activity in Canada.	Internet gambling is illegal in Canada but there literally hundreds of internet "casinos" and gambling sites that provide opportunities for online wagering. Recently, a website in Canada offered betting on horse races and is now being investigated by the authorities. Given the massive increase in gambling in general and the potential revenue that could be generated from this form of gambling, a review of policy options would be prudent since proposals to legalize internet gambling will likely be brought forward in the future.
Prescription Drugs	Misuse/Diversion of Prescription Drugs	To discuss the issue of prescription drug abuse and develop recommendations for managing this issue in Canada.	The issue of prescription drug abuse is now on the official agenda of the US government and several Canadian provinces. A systematic review of policy options for managing this issue would be useful for both the provinces and the national government as they attempt to deal with this emerging substance abuse problem in Canada.
Internet Pharmacies	Regulation of Internet Pharmacies in Canada	To review the issue of internet pharmacies and develop best practice policies for regulating online sales of prescription drugs in Canada.	The growth of internet sites providing access to prescription drugs is staggering. One recent study in the US found a large proportion of internet pharmacies engaging in highly questionable practices including dispensing drugs without proper documentation and selling drugs to minors. Given the growth in prescription drug abuse in Canada, the issue of regulating internet pharmacies is likely to be a significant issue in the future.
Drugged Driving	Assessment of Policy Options for Drugged Driving	To discuss the issue of drugged driving and analyze a range of policy responses available for managing this issue.	The potential decriminalization of cannabis in Canada has led some substance abuse stakeholders to call for efforts to improve our ability to detect people driving under the influence of drugs and to stiffen penalties for this offense. The issue of drugged driving is incredibly complex, however, as there is no convenient, legally accepted way to determine drug intoxication as there is for alcohol. A paper reviewing the complexities of this issue and making policy recommendations based on the evidence would be timely and useful.
Employment-Related Drug Testing	Assessment of Current Drug Testing Policies	To review the rationales for and effectiveness of mandatory employment-related drug testing and identify make policy options for Canada.	Although not as common in Canada, mandatory drug testing has become wide spread in the US particularly in so-called sensitive industries such as transportation and policing. A recent report on the drug squad scandal in Toronto suggested that police in sensitive positions should be required to provide urinalysis samples. Police in Canada have come out against this policy.

MDMA	Harms and Medical Uses of MDMA	To review the evidence on the harms associated with MDMA use and its use as a therapeutic agent.	Recently it was discovered that a clinical trial that served to reinforce the need for highly restrictive laws against MDMA in the US was flawed due to a laboratory mix up where methamphetamine was mistakenly used instead of MDMA. In addition, the first clinical trial to investigate therapeutic uses of MDMA are set to begin in the US in the coming weeks. A paper reviewing the confirmed harms associated with MDMA and its potential for therapeutic use would be useful for creating evidence-based policies on MDMA in Canada.
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References

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