

Assessing the high costs of substance abuse

Tobacco and alcohol abuse four times costlier than abuse of illegal drugs

A new study portrays 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) estimates 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.

Legal substances (tobacco and alcohol) account for about 80% of the total while illegal drug use makes up the remaining 20%. Tobacco leads the way with a cost of \$17 billion or 42% of the total estimate; alcohol accounts for \$14.6 billion (36.6%), and illegal drugs for \$8.2 billion (20.7%).

Comparing cost studies

This is the second cost study conducted in Canada using the *International Guidelines for Estimating the Costs of Substance Abuse*, which were developed in a series of meetings of world experts hosted by CCSA. CCSA published the first Canadian cost study in 1996 based on 1992 data. The total cost of substance abuse was then estimated to be \$18.5

billion. The authors of the new study caution against making direct cost comparisons with the 1996 study, beyond concluding that costs have risen.



Cost estimation methods have evolved and data contained in one study were not always available for the other. Inflation and demographic shifts also make comparisons difficult.

More death and illness

The two studies can be compared in terms of their underlying estimates of death and illness linked to substance abuse. In relative terms, alcohol was more of a problem in 2002 than it was in 1992, tobacco was stable or falling, and illegal drugs saw a substantial increase. Drug-related deaths, for example, more than doubled between 1992 and 2002, largely because of

an increase in drug overdoses and the spread of hepatitis C, which was not a significant factor in 1992. Fewer Canadians die from illegal drugs than from alcohol or tobacco, but they tend to be younger and so the impact is large in terms of years of life lost.

Increases in alcohol-attributed death and illness may be linked to changes in drinking patterns, including an increase in heavy drinking. The reduction in rates of smoking-attributed death and illness may result from improved tobacco control measures in the 1980s and '90s.

How the provinces rate

The impact of substance abuse is relatively uniform across Canada except in the territories where costs are higher than in the provinces. New Brunswick, British Columbia and Alberta are at the high end of the scale in terms of provincial per-capita costs, while costs in Ontario, Quebec and Prince Edward Island are the lowest.

Cost study highlights

CCSA has produced a 12-page highlights document as an aid to understanding and interpreting the detailed report. It can be viewed and downloaded as a PDF at www.ccsa.ca.

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► *CAS Research Brief I: Toward a Policy-Relevant Typology of Cannabis Use for Canada*, the first in a series of analyses based on the 2004 Canadian Addiction Survey (CAS), was written by CCSA Senior Policy Analyst **Gerald Thomas** with the assistance of **Jillian Flight**, **Krista Richard** and **Stéphane Racine** of Health Canada.

Typology of use could inform cannabis control policy: brief

A new research brief analyzes data from the 2004 Canadian Addiction Survey (CAS) to make the case for a more useful assessment of the harms associated with cannabis use. *Toward a Policy-Relevant Typology of Cannabis Use for Canada* argues that a more discerning interpretation of cannabis use in Canada could enhance the effectiveness of cannabis control policy in this country.

“(Cannabis use) is most often reported in terms of lifetime and past-year use and

this... does not provide useful information on at-risk or excessive use of the drug—exactly the categories of use that public policy should focus on,” say the authors. The brief contrasts this with a six-category alcohol typology developed by researchers in the Yukon in the early 1990s based on the quantity and frequency of alcohol use. The authors apply this typology to self-reported drinking behaviour in the CAS to identify the proportion of current drinkers who are the most likely targets of policy inter-

ventions (heavy-infrequent and heavy-frequent drinkers).

“Unfortunately no similar accepted typology of (cannabis) use is available (in Canada),” says the brief, which can be downloaded as a PDF at www.ccsa.ca or ordered from info@ccsa.ca.

In a second paper, CCSA will compare reported harms with various levels of cannabis use to identify low, moderate and high-risk users. It will also recommend ways to collect data that will allow for more accurate identification of problematic cannabis users. □



**nationalframework-
cadrenational.ca**

Progress on the National Framework includes new website

A new website provides information on the National Framework for Action to Reduce the Harms Associated with Alcohol and Other Drugs and Substances, including background documents, Framework priorities, thematic workshops, and contact information for a Framework Secretariat jointly managed by CCSA and

Health Canada. There is also a “What’s New?” section and an Event/Conference Calendar.

Government and non-government partner organizations have begun to endorse the Framework and many more are expected to do so. The Secretariat is helping partners develop thematic workshops based on Framework priorities. Workshops have

been held on alcohol policy, increasing awareness and understanding of problematic substance use, police and police partners, corrections, research, and workforce development. Others are planned on preventing the problematic use of psychotropic pharmaceuticals; and improving the quality, accessibility and range of options to treat harmful substance use. □



► **Stanhope Beach Resort** in PEI will be the site of the 2006 National Summer Institute on Addictions, July 10–13.

2006 Summer Institute will focus on continuity in care

CCSA is once again partnering with the Addiction Research Centre (ARC), Correctional Service Canada (CSC), to host the 2006 National Summer Institute on Addictions, July 10–13 at Stanhope Beach Resort, PEI. Stanhope is located 20 minutes from Charlottetown on PEI’s legendary north shore.

The theme of this year’s institute is “Working To-

gether: Partnerships Along the Continuum of Service”.

A 2006 Summer Institute steering committee has been recruited from among members of the new National Advisory Group on Workforce Development (NAGWD), including NAGWD co-chair Greg Purvis, Director of Addiction Services, Pictou County Health Authority, Nova Scotia; Brian Grant, CSC; Ron Hector, Addictions Foundation of

Manitoba; Narinder Dhillon, Department of National Defence; and Lianne Calvert, CCSA’s Director of Training and Workforce Development and NAGWD co-chair.

Please visit www.ccsa.ca for updates on faculty, presentations and registration, or contact Lianne Calvert to learn more about the Institute and/or the NAGWD at 613 235-4048, ext. 225 or e-mail lcalvert@ccsa.ca □

Graduation reinforces primary community care in NWT

In January, the Department of Health and Social Services in the Northwest Territories hosted a ceremony to recognize 15 graduates of the Community Wellness Worker

Program conference in Yellowknife, attended by Community Wellness Workers, Mental Health Counsellors, Addiction Counsellors and Clinical Supervisors who represent 77 new Community Counselling

integrated, coordinated care, which is the foundation of a Primary Health Care model, or Primary Community Care, as it is known in NWT. ISDM has identified six core services, including Mental Health



Certificate Program of Keyano College (Keyano is in Fort McMurray, Alta., but the 10 courses were given in Yellowknife). The ceremony kicked off the department's first annual Community Counselling

Program positions in NWT. The department has been busy since the development of the Integrated Service Delivery Model—the department's new framework for health and social services. ISDM supports

and Addiction Services, which has seen significant investment in recent years.

For more details on NWT, go to the HEP Web page by following the link to CCSA Partnerships at www.ccsa.ca □

► Community Wellness Worker graduates were photographed with **Michael Miltenberger**, Minister of Health and Social Services, NWT. The graduates are (first photo, left to right): **Cyndi Caisse**, **Lucy Dillon**, **Byrne Richards** (back row), the Minister, **Wilfred Simon** (back row), **Tina Gargan** and **Beatrice Blake**; (second photo, left to right): **Mary Rose Drybones**, **Teresa McDougall**, the Minister, **Sarah Polguin**, **Dowey Lafferty** (back row), **Theresa Simon** (back row), **Bernice Hardisty**, **Edna Alexie** and **Rick Alexander**.

Updates keep Researcher and FASD databases relevant

► **Addictions researchers**
In 2001, CCSA was commissioned by the Addictions Research Centre (ARC), Correctional Service Canada, to create a database of Canadian researchers. ARC continues to pay for its maintenance.

The resource now lists more than 200 researchers with detailed information about their academic background, affiliation, area of expertise, and a selected bibliography of recent publications, many of which are now in CCSA's searchable on-line library collection. As a who's who of researchers, the database is a useful networking tool. It is also used to circulate research

and faculty positions via the researchers listserv (an offshoot of the database), to identify experts for potential collaboration on national and international projects, and to facilitate calls for papers, studies, proposals and presenters on behalf of researchers and organizations across Canada.

To search the database or to submit your name to it, follow the link to *CCSA Addictions Databases* at www.ccsa.ca. Send requests to promote Canadian research/faculty positions to databasecoordinator@ccsa.ca.

► **FASD resources**

With funding from the Public Health Agency of Canada's

FAS/FAE Strategic Project Fund, the national database of FASD and substance use during pregnancy resources was launched in April, 2003, as a single source of Canadian FASD content. Designed with six other partner organizations, it has grown from 120 unique resources to more than 450, including websites, videos and DVDs, fact sheets, newsletters, research reports, posters and pamphlets.

To search the database, link to an electronic version of a resource (if available), order a resource, suggest a new resource or update an existing one, follow the link to *CCSA Addictions Databases* at www.ccsa.ca □



► CCSA maintains a total of six databases, including Library Collection, National Database of FASD and Substance Use During Pregnancy Resources, Addictions Organizations in Canada, Addictions Researchers, Education Programs, and Funding Sources. The databases are continually updated, and design and navigation changes in the past year have made searching easier.

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The second Canadian cost study was undertaken in 2003 by a multidisciplinary working group of scholars from various institutions led by Dr. Jürgen. Rehm from Ontario's Centre for Addiction and Mental Health (CAMH). The

working group included Dolly Baliunas, Serge Brochu, Benedikt Fischer, William Gnam, Jayadeep Patra, Svetlana Popova, Anna Sarnocinska-Hart and Ben Taylor. The project was carried out in collaboration with Edward Adlaf, Melanie Recel and Eric Single. □

Contributors to the second Canadian cost study

- Addictions Foundation of Manitoba
- Alberta Alcohol and Drug Abuse Commission
- British Columbia Ministry of Health
- Canadian Institutes of Health Research, Institute of Neurosciences, Mental Health and Addiction
- Centre for Addiction and Mental Health—Ontario
- Health Canada
- Ministère de la Santé et des Services sociaux—Québec
- New Brunswick Department of Health and Wellness
- Nova Scotia Health Promotion and Protection
- Public Safety and Emergency Preparedness Canada

CCSA Board elects two new members

Jean T. Fournier became Canada's first Senate Ethics Officer in April, 2005. He has had a distinguished career in the federal public service, including a broad range of experience in senior positions in the areas of public safety, aboriginal and northern issues, federal-provincial-territorial relations, pension reform, official languages, cultural diversity, and trade and international relations.



Michael DeGagné is Executive Director of the Aboriginal Healing Foundation. He has been actively engaged in the health field since 1986 and has 15 years' experience as an executive manager in public service at both the federal and provincial levels. Mr. DeGagné was a CCSA staff member from 1990 to 1992 and managed the relationship between the Centre and other federal and provincial agencies. □



Events

For details of these and other events or to submit an event, go to **Calendar of Events at www.ccsa.ca**

April 29—Hear & Now: Harm Reduction in Nursing Practice. Conference Centre, St. Paul's Hospital, Vancouver. www.nurses-harmreduction2006.com/index.html (info@nurses-harmreduction2006.com). Tel.: 604-677-2758; fax: 604-677-2755

April 30-May 4—17th International Conference on the Reduction of Drug Related Harm. Vancouver. www.harmreduction2006.ca/ (info@harmreduction2006.ca). Tel.: 1-604-688-9655, ext. 2; fax: 1-604-685-3521

May 5-6—1st National Harm Reduction Therapy Conference. Seattle. http://depts.washington.edu/adai/training/HR%20Therapy%20Conf%202006_draft.pdf (abrc@u.washington.edu). Tel.: (206) 685-7504

May 10-12—Prévention des assuétudes: concepts et stratégies. Liège, Belgium. <http://social.prov-liege.be/index.jsp?channel=une&page=current&lang=fr> (carine.noel@prov-liege.be). Tel.: +32 (0)4 232 31 44 et 53 ; fax: +32 (0)4 232 31 79

May 17-19—Canada Northwest FASD Partnership Conference. Regina. www.preventioninstitute.sk.ca and www.cnfasdpartnership.ca (tcm.lcoben@sasktel.net). Tel.: 306-683-3663; fax: (306) 683-3665

June 5-6—Bridging the Gaps: Inspiration to Execution. Stage West, Mississauga, ON. www.addictionsontario.ca/ (debbie@highonlife.org). Tel.: 519-772-0113, ext. 226

July 10-13—2006 National Summer Institute on Addictions. Stanhope Beach Resort, PEI. The theme of this year's institute is "Working Together: Partnerships Along the Continuum of Service". Contact Lianne Calvert, CCSA, 613 235-4048, ext. 225; lcalvert@ccsa.ca, or go the CCSA website at www.ccsa.ca

Oct. 15-18—Canadian Association of Drug Treatment Courts National Conference. Edmonton. neil.skinner@gov.ab.ca

Chris Davis joins Research and Policy

Chris Davis has joined CCSA's Research and Policy Division as an Associate. In collaboration with members of the Division, Chris is conducting data analyses on risk factors and consequences associated with alcohol and substance abuse, using data from the 2004 Canadian Addiction Survey.

Chris is an Associate Professor of Psychology at Carleton University, where he teaches Personality and Statistics. His research concerns the cognitive and emotional adaptations people make following life-changing experiences, including those associated

with loss of significant others (bereavement), injury (such as spinal cord injury), and chronic debilitating health conditions (such as tinnitus). His research examines how people find meaning from loss and trauma and how these factors promote personal growth and well-being. □

