

AADAC's Role in Health System Renewal February 2005

The health care system in Alberta is facing increased pressure related to growing rates of chronic disease, an aging population and escalating costs for new drugs, labour and technologies. In the context of health system renewal and accessibility, specialized addiction services represent a valuable asset and an effective use of public funds.

Alcohol, other drug and gambling problems do not occur in isolation. They are tied to the determinants of population health (e.g., income and social status, physical and social environment, biology/genetics, education, employment and working conditions, social support networks, personal health practices and coping skills, gender, culture, healthy child development and health services). Substance abuse and problem gambling can cause poor health outcomes or be the consequence of health deficiencies, yet they are not only a health issue. They affect family relationships, work/academic performance, and public safety. Treating addiction involves more than dealing with presenting medical or behavioural symptoms—it also requires attention to issues like housing, employment, child rearing and the development of social supports.

Specialized addiction services can reduce the social and economic costs of alcohol, other drug use and gambling through improved workplace productivity, decreased health care utilization, reductions in crime, increased social stability and enhanced personal functioning. Unless there are medical complications, substance abuse and gambling problems can be effectively treated using behavioural management approaches provided in the community, rather than hospital-based care.

A strong argument can be made for the value of and return on investment in specialized addiction services. Treatment reduces the demand for acute and long-term care by those experiencing addiction problems, and it promotes more efficient use of the health care system by individuals and their families. Prevention is a sensible and cost-effective adjunct to treatment, reducing the incidence of substance abuse and the development of gambling problems.

There is consensus in the research literature that individuals and families who have been negatively impacted by substance abuse and/or gambling problems are best served by a range of program options that meet their multiple and varied needs. Provincial coordination of specialized addiction services reduces fragmentation, discontinuity and inaccessibility, resulting in fewer service gaps and fewer clients who 'fall through the cracks'.

Strategies used to address addiction problems must relate to local circumstances and priorities, yet it is well recognized that alcohol, other drug and gambling problems cannot be geographically contained. They require a widely coordinated and consistent response. Centralized organization of addiction services creates economies of scale that produce efficiencies in the delivery of community-based programs, and it allows for a strategic approach to program planning and resource allocation.

Alberta is in a unique and fortunate position among provinces and territories, having a government-funded agency specifically mandated to provide specialized addiction services. That agency is the Alberta Alcohol and Drug Abuse Commission (AADAC), and for more than 50 years AADAC has been assisting Albertans affected by alcohol, other drug or gambling problems.

AADAC provides a province-wide system of centrally administered and locally delivered services. Community presence and extensive inter-agency cooperation are strengths that AADAC continues to build upon. AADAC believes substantial benefits are derived from working with others to avoid duplicating effort and develop innovative approaches that address the individual and social harms associated with substance abuse and problem gambling.

AADAC maintains linkages with key stakeholders such as the health regions, establishing assessment, counselling and referral services in primary health care facilities, working in partnership to deliver prevention and education programs, and providing consultation and professional development opportunities to health care staff. AADAC also has close ties with Child and Family Service Authorities, with Alberta Health and Wellness and other government ministries, and with non-profit organizations, community agencies and private industry employers.

Demand for AADAC services has increased, and this situation is likely to continue with changing demographics, increased complexity of client issues, growing concern about the availability and use of new or unfamiliar substances, and public policy debate about problems associated with gambling.

The Commission will respond to this demand by focusing on individuals and families, and their needs. This means ensuring Albertans have access to the existing continuum of programs, strategically investing in the extension of services where the impact will be greatest (e.g., for youth, Aboriginal peoples, women), and maintaining valued partnerships with local, provincial, and national stakeholders to sustain provincial health system capacity.