



Department of
Health

P.E.I. Youth Substance Use and Addictions Strategy

***Presentation to the Issues of Substance
National Conference***

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Coordinator***

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Building the Strategy

- Public consultations and service provider/ community-based focus groups held Spring '07
- Strategy Framework document developed – Summer/ Fall '07 – Public Validation – December '07
- Strategy Planning and Implementation Phase – commenced January '08
- Advisory Committee and Working Groups meet every 4 to 6 weeks in the developmental stages
- Ongoing “Best Practice” consultations with the Canadian Centre for Substance Abuse, the Centre for Addictions and Mental Health, and Health Canada.



Advisory Committee and Working Group Membership

- Advisory Committee includes representation from Ministries of Health, Education, Social Services, and Justice
- Includes community parent group reps, John Howard Society, municipal police and RCMP, National Addictions Research Centre, Aboriginal community reps, service providers (including a physician) and policy makers
- Three Working Groups included mix of community reps, management and frontline services



Building the strategy

- Studied service models in neighboring Atlantic provinces and across Canada
- Considered services which already existed in the province, where enhancements and new services were needed
- Looked at the short term and long term priorities and considered a phased in approach
- Ongoing government and community stakeholder presentations and media communication to ensure understanding of the strategy activities.



A snapshot of PEI youth substance use

- Alcohol is the drug of choice, with half of adolescent students (grade 7 to 12) reporting its use in the past year.
- Drinking rates in PEI climb from 8% of Grade 7 students to 77% of Grade 12 students
- Cannabis use was reported by about one in four students in PEI. Rates climb from 3% of Grade 7 students to 37% of Grade 12 students
- About 15% of students smoke cigarettes and the rates are continuing to decrease

Source: 2007 PEI Student Drug Survey



PEI Snapshot

- About 5% of PEI students reported using stimulants, magic mushrooms, or inhalants. The remaining drugs are reported by less than 3% of students
- Patterns of **multiple drug use** demonstrate that alcohol use overlaps almost all other drug use
- Among students frequently using alcohol or other drugs, the most common consequence is unplanned sex. Rates of sexual activity climbed from 13% of Grade 9 students to 53% of grade 12 students
- Population: 140,000 – great “microcosm” environment for pilot projects

Source: 2007 PEI Student Drug Survey



Prevention, Education and Early Intervention – the plan

- Build active, collaborative partnerships with communities and organizations
- Public awareness/ education campaigns with media and within communities.
- Primary focus on the effects of alcohol, illegal drugs, prescription drugs, and other abused substances
- Communicating the risks and consequences – e.g. unplanned pregnancy, car crashes, overdose, violence, theft, etc.
- Guiding parents, youth and other families members who are dealing with the issue.



Prevention, Education and Early Intervention - activities

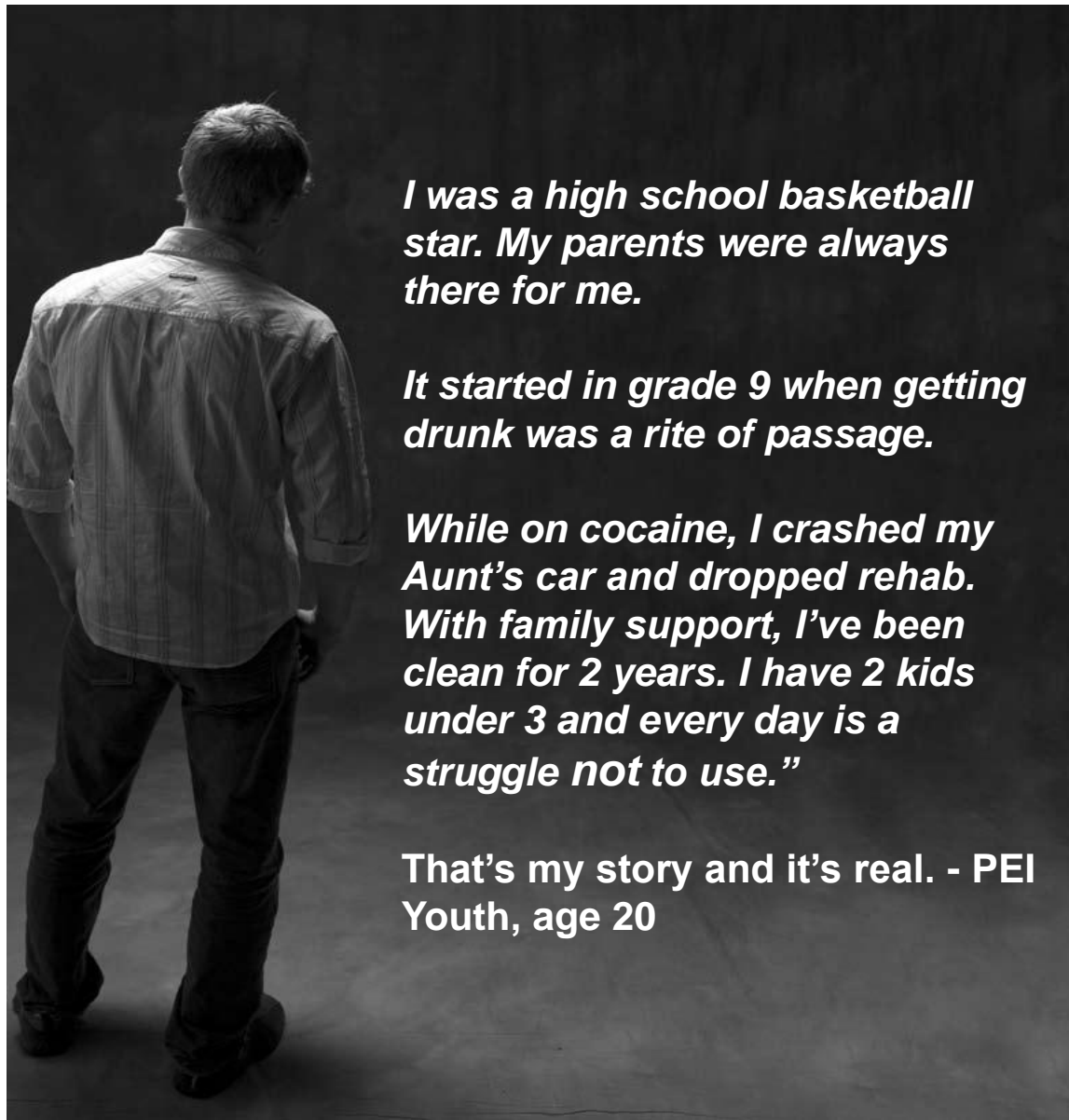
- Helping Island communities develop local action plans – shared ownership of the issue among government and community
- Strength-based, empowering messages targeted to youth and adults/ parents – communicating the role they can play in overcoming the challenge of substance abuse.
- Consulting with a variety of healthcare service providers and best practice experts along the way
- Communicating treatment options
- Develop evaluation efforts to ensure we are on track



Public Awareness/ Social Marketing Campaign

- Parent targeted newspapers ads Spring and Fall 2009
- Tips for teens brochure series – alcohol, cannabis, crack/ cocaine, hallucinogens, tobacco
- Youth telling their stories of substance abuse and recovery (testimonials)
- Youth driven Facebook page
- Posters series (9 versions)
- Radio and TV ads





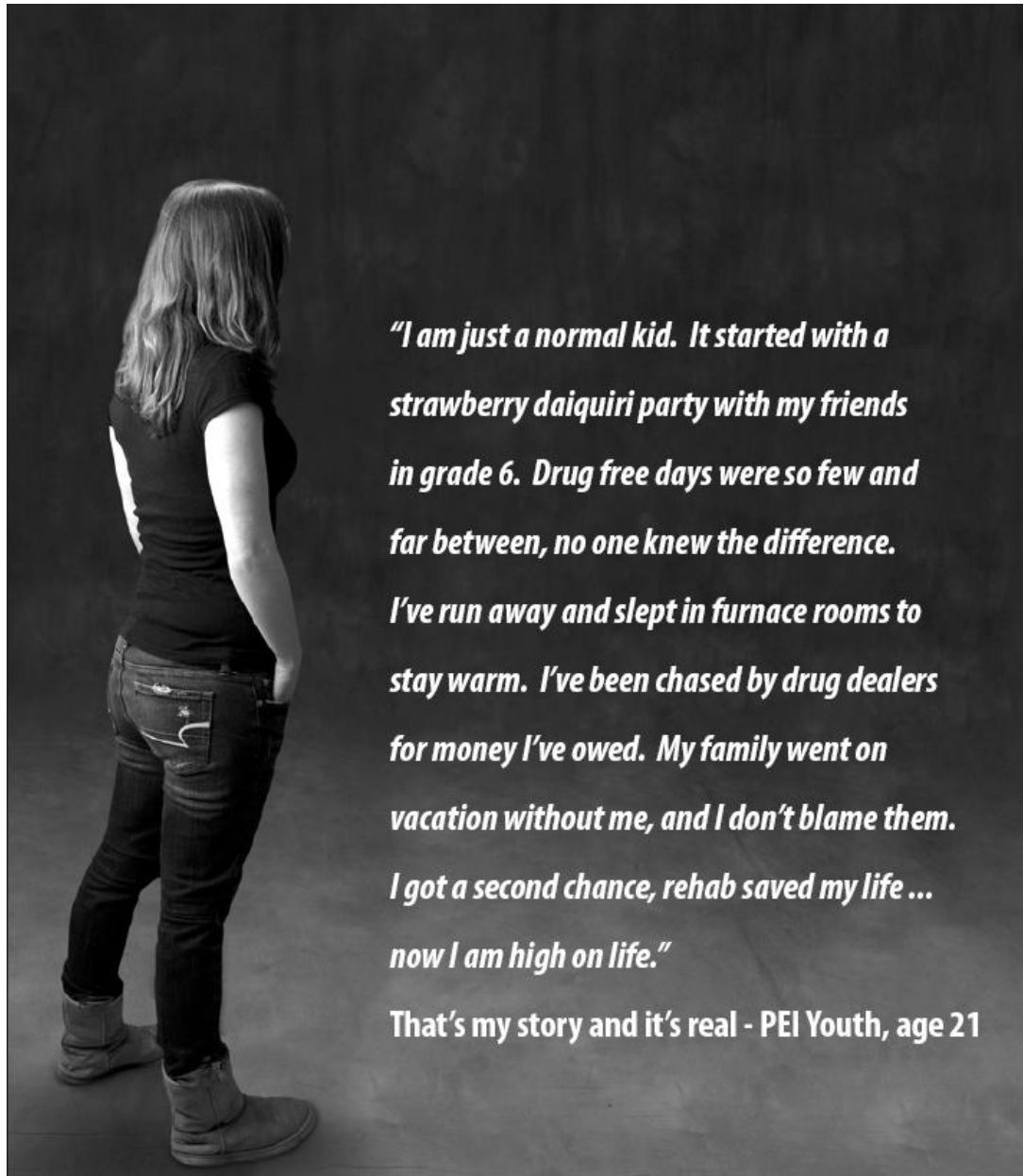
I was a high school basketball star. My parents were always there for me.

It started in grade 9 when getting drunk was a rite of passage.

While on cocaine, I crashed my Aunt's car and dropped rehab. With family support, I've been clean for 2 years. I have 2 kids under 3 and every day is a struggle not to use."

That's my story and it's real. - PEI Youth, age 20





"I am just a normal kid. It started with a strawberry daiquiri party with my friends in grade 6. Drug free days were so few and far between, no one knew the difference. I've run away and slept in furnace rooms to stay warm. I've been chased by drug dealers for money I've owed. My family went on vacation without me, and I don't blame them. I got a second chance, rehab saved my life ... now I am high on life."

That's my story and it's real - PEI Youth, age 21



Social Marketing – theme



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Community Outreach Resources

- Full time provincial coordinator to guide communities in developing action plans for prevention, education and early intervention
- 2 full time youth addiction counselors and one early intervention specialist to work afternoons, evenings, and some weekend time – rotating schedule 7 days per week.
- 7 full time youth addiction counselors and 5 youth and family counselors (daytime)
- Working in community settings, schools, and with community residents and organizations



Community Outreach

- Working to prevent late stage abuse and the need for addiction treatment
- Guiding people toward the supports they need (social support, mental health services, etc)
- Building on community and individual strengths
- Messages of empowerment:
 - No one solution to the issue ...everyone is affected ...it's everyone's challenge.
 - Government is not able to tackle this issue alone and requires grassroots, community involvement to achieve momentum



Partnerships are key to success

Strategy staff continue to work closely with community and government-based partners:

- Family Physicians,, Specialists, Mental Health Services – social workers, nurses, psychiatrists
- Justice services and police agencies
- Education
- Social Services
- Communities – town councils, local interest groups,
- Aboriginal organizations
- Community self help groups
- Youth centres, recreational facilities – areas where youth and families frequent
- Business organizations



Annual Stakeholder Forum

- Bringing a variety of community leaders, residents, youth, media, and community service providers together in a public forum
- Presenting an annual report card on strategy activities
- Communicating best practices - guest presenters/ out of province experts
- Community engagement in the annual process of planning activities to increase prevention, education and early intervention of youth substance abuse
- Usually held during Addiction Awareness Week.



New Day Treatment Program Model



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When the treatment program is necessary

- Addiction services accepts referrals from a wide variety of sources (e.g. physicians, police, parents, friends, etc.)
- Some youth reach a stage of substance abuse where an extended treatment plan is necessary – while others may require education and guidance
- There is a wide range of treatment interventions available that are either community-based or facility-based.



What treatment is available

- Youth and Family Counsellors in 5 service sites across the province – one-on-one or group counseling.
- Youth-focused detox services at the Provincial Addictions Treatment Facility
- Emergency Departments for medical stabilization
- Inpatient and outpatient mental health – co-occurring issues
- New youth day treatment program being launched this fall
- Various off-Island residential treatment programs



Day Treatment Program

- Provincial program located at in Charlottetown – approximately 70 percent of Island youth live within a 20 km radius of the city
- 5000 square foot program space
- First intake – December, 2009
- Program is currently in final stages of development
- Program space is currently being renovated



Day Treatment Program Model

- Programming for medium to high risk youth who are dealing with substance use and addiction issues.
- Appropriate to those who require more focused intensive therapies than can be provided through youth addiction counsellor sessions
- The program will include group and individual substance use and addiction counseling, educational/curriculum opportunities, life skills development, gambling support, recreational activities and family support



Day Treatment Program Model

- Treatment will be tailored to individual client's needs and would also consider specific cultural (e.g. aboriginal) or gender needs – case management approach
- Parent involvement and parent education on substance use, as appropriate, will be part of the treatment process
- New client intake (10 participants for each intake) will be ongoing throughout the year
- Average age 13-18



Day Treatment Program Model

- Eight week program
- Counseling in home community happens prior to program entry
- Not all youth who use substances are appropriate to the program - clients may be assessed to be better served in long term residential care, 1 on 1 or group counseling.
- The program will also address social and mental health challenges (e.g. ADHD, depression, anxiety, low self esteem) in context to substance use/ addiction issues



Treatment Program Staff

- Program Leader
- 1 Youth Addiction Counselor
- 1 Youth and Family Counselor
- 2 Youth Workers
- 1 Mental Health Therapist
- 1 Teacher/Educator
- 1 Admin Support



Treatment Centre Client Referral

- Clients will be individually assessed by Youth Addiction Counselors across the province in consultation with other service providers as appropriate
- Community-based counselors will also provide follow up aftercare upon completion of treatment programming.
- No direct program referrals prior to assessment or pre-program counseling through community youth counselors.



Day Treatment Program Model

- Transportation and housing needs will be considered part of the individual case management process.
- Supervised housing is in development as part of the program. Up to 5 youth per time – 5 days per week while in program. Overnight supervision provided by Youth Workers.
- Programming will be monitored and evaluated on an ongoing basis to measure success
- An Aftercare program will be run by Youth Addiction Counselors for clients who completed day treatment or long term residential care programming.



Questions/Discussion



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