

NEWS & VIEWS

Responding to Addiction Issues

In this issue

**Tri-District Launches
New PSA**

Why Youth Drink
Going Behind the Numbers

**Opiate Treatment
Program to Open in Truro**

**New Findings in
Adolescent Gambling**

The forecast is calling for flurries—and we don't just mean snow. There's been a real flurry of activities going on this season for everyone involved in Addiction Services.

Another **National Addictions Awareness Week** (Nov. 16 – 22) has come and gone. This is always an important time for communities to provide information and raise awareness on addiction issues that affect individuals, families, and communities.

Next up was **Issues of Substance '09: Pathways and Bridges to Change**, the Canadian Centre on Substance Abuse's (CCSA) National Conference, which took place at the World Trade and Convention Centre in Halifax (Nov. 15 – 18). Drawing inspiration from the National Treatment Strategy released in 2008, the conference

explored personal pathways to change individuals can pursue and the range of services available that ensure coordinated care experiences for those at risk or in need. A number of presentation and poster displays showcased the great work being undertaken by local and provincial Addiction Services offices throughout Nova Scotia. Department of Health Promotion and Protection was pleased to be a sponsor of this biannual conference. For details go to: www.issuesofsubstance.ca.

Finally, preparations are underway for **Health Promotion and Protection's Second Annual Alcohol Research and Policy Forum**, which will be held in Halifax on May 7, 2010. The forum will be an opportunity for government policy makers and key stakeholders to learn more about the cost that over-consumption of alcohol plays in Nova Scotia and how a best-practices approach to policy can directly impact the health of Nova Scotians.

As always, we appreciate your feedback on this newsletter. If you have an idea you'd like to share, or a comment on this issue's content, please let us know. You can contact us at addictionservicesnews@gov.ns.ca. You can also find this newsletter online at www.gov.ns.ca/hpp/addictionprevention.

Tri-District Launches New PSA

When a drink is a drink, and company is the pleasure. That's a poignant line from "When," the new public service announcement of the South Shore, South West, and Annapolis Valley Addiction Services departments.

"When" is the launching point of the tri-district's three-phased approach to changing the culture of alcohol use in Nova Scotia. Local celebrities including Neville MacKay of Your Mother's Bloomers; Lesley Choyce, celebrated Nova Scotia author; and Andre Levingston, owner of the Halifax Rainmen, volunteered their time to be part of this exciting project.



Check out changingtheculture.ns.ca to see the video, learn more about the project, and find out how you can get involved. Special thanks to the Department of Health Promotion and Protection for their generous support!

Why Youth Drink Going Behind the Numbers

We know that youth drink, how they drink, and when they start. And now, thanks to a new qualitative study done by Focal Research for Nova Scotia Health Promotion and Protection (NSHPP), we are beginning to understand why.

Child & Youth Drinking: The Context of Alcohol Use Among Children & Youth in Nova Scotia is the result of a series of focus groups held across the province with younger (13-15) and older youth (16-18), as well as their parents/legal guardians, who participated in separate groups.

As we had learned in previous studies, the majority of youth admitted to using alcohol in the past year. But an interesting disclosure is the commonality of why they consume: youth across all groups said they used alcohol to help them deal with pressure. Those pressures include academic performance, finding and holding down a job, meeting parents' expectations, changing relationships with their parents, personal image issues, peer pressure, violence and bullying, and more.

These "adult-style" reasons took many parents by surprise, as they may have previously believed youth drank for entertainment and to party.

The study also confirmed the influence that advertising and other media have on a youth's decision to use alcohol, with many participants saying alcohol looked

glamorous, exciting and cool. Young girls, who had higher rates of past-year consumption, said they wanted to "look like and be like" the people portrayed in the ads, and that they drank more when they were around males because it made them feel "sexier."

Both youth and their parents saw alcohol as a "fact of life" and part of growing up. Participants said accessibility to alcohol is very easy for youth, and there are few consequences for drinking by minors, with some parents expressing the view that alcohol was less worrisome to them than drugs, as long as the youth were in a safe situation. This normalization seemed to be especially true in rural areas, where there was increased access to alcohol through local corner stores and gas bars, and where more barriers existed for youth to get involved in healthy, alcohol-free activities.

James Shedden, a prevention coordinator at NSHPP, sees this passive social acceptance of youth drinking as cause for concern. "If young people see using alcohol as a coping mechanism, as something that is a normal part of their development—something they are almost expected to do—then we need to start looking at how we can put messages in place that support them to make other decisions. We also need to look at policies, such as taxation and availability, as a way of controlling accessibility."

At the same time, he was pleased to see that the study confirmed the positive influence parents could have in supporting their children to make healthy decisions about all aspects of life—especially alcohol.

Tim Dummer, Research and Statistical Office at NSHPP, emphasizes that this focus group study had a small sample size. "Generalizations and interpretations must be done so with caution," he says. "However, these initial results give us something to build on."

You can read the entire report online at: www.gov.ns.ca/hpp/publications/child_and_youth_drinking.pdf

Do you have any topic suggestions for future News & Views?

We would love to hear from you.

Contact us at addictionservicesnews@gov.ns.ca.



Opiate Treatment Program to Open in Truro

The harms that can result from the misuse of opiates, such as dilaudid and oxy contin, have been much in the news lately.

Soon, people and their families in Colchester East Hants, Cumberland, and Pictou counties who are experiencing those harms will have access to their own regional Opiate Treatment Program, located in Truro.

"There is an identified need for this program in our area," says Irene Gunn, the manager of the program, who goes on to say that community support and interest has been absolutely outstanding.

"Our first step in designing the program was a community consultation process. We sent out invitations to everyone we could think of and 70 people showed up. That included representatives from Addiction Services, Public Health, Community Services, the police, pharmacy, Primary Health, the First Nations communities, probation and parole officers, employment readiness programs, physicians, nurses, Mainline Needle Exchange, Direction 180, other methadone maintenance programs in Capital Health, and more. It was just an amazing level of interest."

Stakeholders called for a program that would do more than use methadone as a replacement medication for opiate addiction; they felt it needed to support clients and their families in getting their lives back on track and should focus on

the medical, emotional, and social issues involved in addictions. This input "reinforces the compassion in the community and the understanding of the need to extend our healthcare to meet even more needs," says Irene.

The result is a comprehensive program that will help clients establish and maintain a therapeutic dose of medication for the addiction along with groups on a variety of life-skill topics including nutrition and dental care, problem-solving skills, relationship skills, recreation and leisure time. It will also connect clients to individual counseling or mental health, support around infectious disease, and to other agencies involved with income support, housing, employment, and more.

Irene describes it as a four-step program that starts with screening and a comprehensive medical/social/psychological assessment. Through this, individual treatment plans will be developed so clients can establish goals for improving their health and general well being. Early in the program, treatment may include the initiation of methadone on one of the program's inpatient units, daily visits to the new Opiate Treatment Program during the week to receive their methadone, attendance in a variety of group sessions, and weekend visits to pharmacies to receive methadone. Individual appointments with nurses, physicians, and the program's community

outreach worker will help with case management and referrals to ensure each client's goals are being supported.

Families are also involved at this stage so they can understand the impact the program will have on their lives. "If a person wants to make a life change, the more the others around them are involved, the better," says Irene. "And if the family members need counseling themselves, we can help make that referral."

As clients progress through the program, they will move into a transition phase where they may receive some privileges to pick up "carries" from a pharmacy for a couple doses of their methadone each week. They will also come to the Opiate Treatment Program to receive some of their daily doses, to continue receiving support from clinic staff, and to attend group sessions.

The final "community" phase opens opportunities for clients to focus on long-range goals that may include

employment readiness programs, longer-term counseling, etc. Irene says the Opiate Treatment Team is hopeful family physicians in the rural areas of Cumberland, Pictou, Colchester and East Hants may be in positions to take on the methadone maintenance care of clients, once they are stabilized.

As they draw closer to the day when they'll be opening their doors, Irene and her team are preparing to roll out a communications campaign to encourage potential clients to self-refer to the program. Their plan includes posters in physicians' offices, pharmacies, and food banks, "places where the people who will need the program will see them." They also have people with direct methadone maintenance experience who are willing to be spokespersons and share their stories of how programs such as these helped them turn their lives around.

For more information about the Opiate Treatment Program, call 902-893-4776.

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New Findings in Adolescent Gambling

Why are young adults, aged 19-24, most at-risk of developing gambling problems? What predisposes them to this behaviour? When and how does it start?

New exploratory research from the Department of Health Promotion and Protection, Addiction Services, begins to shed some light on those questions.

The 2008 Nova Scotia Adolescent Gambling Exploratory Research Study: Identification of Risk and Gambling Harms Among Youth (13 – 18 years), conducted by Focal Research, is the first in Nova Scotia to use the Focal Youth Gambling Risk Screen® (FYGRS®), which was specifically designed to independently identify gambling harms and risk among adolescents. Previous screens were modifications of tools designed for use with adults and did not identify factors that were exclusive to youth.

While the sample size was small and this research was exploratory in nature, it did reveal some valuable insights worthy of further investigation.

For example, more than half the youth surveyed had gambled in the past year. The most frequent form (48 per cent) was charity raffles and 50/50 draws. "Although the research doesn't specify, these could be activities in which the youth were in the position of selling the products to raise funds for sports and extra-curricular activities," speculates Natalie Cochrane, Manager, Addiction Services.

The research further revealed that youth gambling is very different from adult gambling. Youth gambling tends to be more informal, sporadic, and social. It isn't done as the main activity, but is seen as an add-on to another activity, done to make the results "more interesting." Those informal forms of gambling included betting on card games among family, friends, and schoolmates; one-on-one skill games such as "Quarters," dice games and sports bets.

"The issue with youth learning about gambling through informal activities such as these is that they are developing faulty ideas or beliefs about what gambling is," continues Natalie. "There is no house edge with informal activities. Youth can begin to think that they are becoming skilled at gambling as they continue to play or practice; a belief that will not hold up when they are exposed to commercial, formal gambling, such as lottery draw tickets, VLTs, and casino gambling, which are designed for the 'house' to win."

Another risk factor uncovered in the research is the impact of adult/parental gambling behaviour and attitudes on adolescents. This could include adults having a Friday night poker game that the youth saw in action; an adult sharing gambling "know how" with a youth; an adult openly gambling on an Internet site, or an adult encouraging a youth to become involved with gambling, perhaps by purchasing a lottery ticket for the youth.



Youth gambling tends to be more informal, sporadic, and social.

Hand-in-hand with that risk factor was youth's exposure to gaming activities that mimic adult gambling. These included some arcade games; "free" online gambling sites that allow youth to play for points; and even toys that have gambling themes, such as poker sets or play-VLT machines. Add to that TV shows that make stars out of gamblers and advertising for gambling products that never shows the downside of the activity.

"An indicator of problem gambling is the experience of faulty cognitions," says Natalie. "In light of this research, we now have to ask the question: 'Are we instilling this cognition by how we raise our children? Are we, not just as individual parents, but as a society, placing them at risk by normalizing gambling concepts in the home and as part of child's play, glamorizing gambling through advertising and other entertainment media, and not educating them to the risks?'"

The screen identified that 12 per cent of the youth surveyed were at-risk for experiencing problems, while 7 per cent had experienced harm.

Fortunately, adults can have an influence. "Parents can play a significant role by talking to their children and helping them understand the risks of gambling, and by modeling responsible behaviour themselves. That's been shown to have benefits," says Natalie.

Next steps will include validating this study's results with more in-depth research and also exploring the connection between advertising and a youth's intent to gamble. "We know that advertising is a factor for intent to smoke and drink," says Natalie. "It will be interesting to see if it's the same with gambling."

You can read the full Adolescent Gambling Exploratory Research study yourself at: www.gov.ns.ca/hpp/publications/2008_Adolescent_Gambling_Report.pdf