

June 2022 Newsletter

Mobile Apps for Addictions

As much of our daily lives involve our cell phones, below is a small selection of some mobile acts to support individuals with addictions.

Twenty-Four Hours a Day

(Android/iOS) (Free)

 Offers daily thoughts, meditations, and prayers for those in recovery from alcohol and other drugs

Sober Grid

(Android/iOS) (Free-includes in app purchases)

- Connects users instantly to sober people nearby and around the world, while remaining completely anonymous or choosing what to share
- Chat with others and send private messages
- Post messages, photos, and videos to share with the
- Sobriety calculator to keep track of how many days sober achieved
- Get support from the global sober community and help others achieve sobriety

ConnexGO

(Android/iOS)

- Provideson the go, guided navigation to Mental Health, Substance Use, and Problem Gambling services within Ontario
- Offers users with the option to search for a variety of services by answering a short questionnaire, or by contacting our System Navigation Specialist via phone, chat, or email
- Directs users to 27/7 crisis services based on their geographical location

 Users are able to access service details such as description, referral information, location, hours of operation, and more...

Headspace: Mindful Meditation

(Android/iOS) (Free, contains in-app purchases)

- Guided meditation to release stress
- Relax and sleep with stories and music
- Choose from hundreds of guided meditations on everything from managing stress and everyday anxiety to sleep, focus, and mind-body health

Smoke Free—Quit Smoking Now

(iOS) (Free, contains in-app purchases)

- See and celebrate how long you've quit, how your health is improving, how much money you have saved, and how many cigarettes not smoked
- Receive tips to deal with cravings
- Add notes to identify patters and use graph to see how they're decreasing

Reframe: Drink Less & Thrive

(iOS) (Free, contains in-app purchases)

- Track drinking and health updates
- 24/7 private, anonymous community
- More than 100 research-backed tools

Aloe Bud

(iOS) (Free, contains in-app purchases)

- Self-care pocket companion
- Gently brings awareness to self-care activities, using encouraging push notifications, rather than guilt or shame
- Self-reflection and journaling made simple
- Design reminder schedules to match your lifestyle



Young Adult Corner

Simultaneous Alcohol and Marijuana Use Among Young Adults

Alcohol and marijuana are both commonly used substances by young adults, with the use of both substances particularly at the same time being prevalent among this population. This scoping review identifies and describes peer-reviewed literature focusing on simultaneous alcohol and marijuana use (SAM) by young adults, providing a summary of prevalence, patterns of use, psychosocial correlates, and consequences. 74 papers were examined in this review.

Result highlights:

- Findings suggest SAM use is prevalent and associated with negative consequences and perceived positive consequences
- Papers using nationally representative samples suggest up to about 25% of young adults reported SAM use in the year prior
- Several papers found strong evidence suggesting that SAM

use is common among individuals who engage in heavier and more frequent alcohol and marijuana use

Additional research needed on types of people and situations associated with SAM use and consequences

Papers demonstrated association between SAM use with negative consequences

Only four papers examined perceived positive consequences associated with SAM use, generally reporting more positive consequences on SAM use than alcohol- or marijuana-only occasions

Enhancement-related motives were consistently associated with SAM-related behaviours

The authors identified several considerations in interpreting the findings from their review of literature, and measurement considerations. It is noted that the ways in which SAM use presents acute risk which is greater than the risks associated with separately consuming alcohol and marijuana need to be identified.

To read the full article, click here

INFO SHEET Prescription opioids, including fentanyl

- Opioid misuse can be very dangerous, and even deadly
- Misuse of opioids is common amongst young people
- The risk of overdose is high
- With fentanyl, even small amounts can kill, and because it is sometimes mixed into other street drugs, young people may not be aware they are putting themselves at risk

What are prescription opioids?

There are two types of opioid medications:

- Over-the-counter opioids
- Opioids that must be prescribed by a doctor or dentist

Fentanyl has been found in fake prescription pills, which are created to look like opioid prescription pain relievers

What is fentanyl?

Fentanyl is a powerful prescription medication, 100x stronger than morphine. It is usually prescribed for severe pain. It can also be produced illegally, where the strength is unknown.

How common is prescription opioid misuse?

What should I be concerned about for students misusing opioids?

Opioids can be addictive, withdrawal can create negative cycles, crushing slow-release products can increase risk of overdose, using opioids with other substances can increase the risk of overdose, risky behaviour.

How do young people get access to prescription opioids?

59% of teens reported they used opioids found at home. When youth get drugs from friends or street sources, they may not be aware they are using fentanyl.

Are there risks even if a young person is prescribed an opioid?

Yes, without careful monitoring prescription opioids can lead to addiction.

How do I recognize the signs of a problem?

Signs of a problem with opioids or other substances may include: mood or personality changes, dropping grades or failing classes, lack of interest in school or other activities, changes in energy, sleep or appetite, changes in friends or hangout location, secretiveness, borrowing money or having extra cash.

To read the full info sheet, click here



Cannabis Corner— An Investigation of cannabis use for insomnia in depression and anxiety in a naturalistic sample

Symptoms of insomnia have been reported by 80-90% and 70-90% of individuals with major depressive disorder (MDD) and anxiety disorders respectively. Although insomnia has been found to be reported as a post-treatment residual symptom in both mood and anxiety disorders, the authors a recent make note that there are limited evidence-based strategies for treating insomnia in mood and anxiety disorders. Several studies are cited reporting cannabis benefits as a sleep aid, and for use for depression and anxiety. Kuhathasan, N., Minuzzi, L., MacKillop, J. et al aimed to investigate the use of cannabinoids for insomnia in individuals with depression, anxiety, and comorbid depression/anxiety.

In examining data collected using medical cannabis tracking app sessions over a 3-year period with users managing insomnia symptoms in depression, anxiety, and comorbid depression and anxiety.

The results demonstrated that individuals with depression, anxiety, and comorbid anxiety and depression who use cannabis for insomnia reported significant improvements in insomnia symptom severity following cannabis use. Cannabis appeared to be effective for insomnia across all groups, regardless of age and gender, with dried flower and oral oil being the most used and effective product forms.

An investigation of cannabis use for insomnia in depression and anxiety in a naturalistic sample - PubMed (nih.gov)

Clinical Corner: How Can We Actually Change Help-Seeking Behaviour for Mental Health Problems among the General Public? Development of the 'PLACES' Model

The development of a new model combining facilitators towards mental health treatment engagement is intended to successfully change help-seeking behaviour for mental health problems among the general public. The PLACES (Publicity, Lay, Acceptable, Convenient, Effective, Self-referral) model was developed in light of the fact that help-seeking behaviour is largely researched in relation to barriers rather than facilitators.

PUBLICITY (P) — increasing knowledge of mental health problems and treatments through utilizing attractive and engaging methods to inform the public, such as through colourful posters, social media platforms, etc.

LAY NON-DIAGNOSTIC LABEL (L) — removing diagnostic labels and language to reduce attached stigma, utilizing more colloquial language

ACCEPTABLE INTERVENTION (A) — treatment/intervention is appropriate and applicable to the

program

CONVIENIECE C) — convenient and accessible location, convenient times offered

PERCEIVED EFFECTIVENESS (E) —the potential effectiveness of the treatment/intervention is shared and publicized

SELF-REFERRALS (S) — availability of self-referral route

The model was utilized among four different clinical groups (adults experiencing stress, adults experiencing depression, adolescents experiencing stress, and mothers with postnatal depression), where high rates of uptake were recorded by people who had previously not sought help and by racial and ethnic minorities.

The PLACES model is unique as it fills a gap in the literature by focusing on changing help-seeking behaviour rather than attitudes alone, and combines facilitators with an engaging intervention for the general public.

To read the full summary paper, <u>click here</u>

11

Courage is resistance to fear, mastery of fear – not absence of fear. –

Mark Twain



The Young Adult Substance Use Program (YA-SUP)

LOVED ONES EDUCATION GROUP

Community Reinforcement Approach Family Training

The YA-SUP Loved Ones Education Group is a group for the parents and other supporters of young adults (17-25) with substance use problems. This may include immediate, extended, or chosen parents and family members or close friends and partners.

This group is based on Community Reinforcement Approach to Family Training – Support and Prevention (CRAFT). CRAFT is an evidence-based approach to change the way you interact with your child or loved one to promote positive relationships and recovery. Substance use can be difficult to understand and challenging to cope with. CRAFT talks about how behaviour makes sense and how the environment, community, and social support can play a powerful role in recovery.



This group includes 8 sessions:

Group Overview, Safety, and Self Care

Understanding Substance Use

Understanding Co-occurring Mental Health Concerns

Positive Communication

Past Patterns & New Strategies

Rewards & Coping with Intoxication

Allowing Negative Consequences

Special Cases, Review, & Next Steps



Sign up today to participate in one of our future groups. The next cycle will begin on September 13th, 2022. Groups run for 8-weeks, on Tuesday's 6:00-7:30pm.

If you are interested in participating in a Loved Ones Education Group, please register here: https://www.cdcapacitybuilding.com/youth-program



Loved Ones Group

Young Adult Substance Use Program (YA-SUP)

A program designed to meet the unique needs of young adults (17-25 years of age)

Who is this program for?

- ☐ Young adults age 17-25
- ☐ Young Adults looking to make changes to their substance use
- ☐ Young Adults committed to attending group-based treatment
- Those not in immediate crisis

How to Refer?

CONNECT (self or professional)

(905) 522-1155, Ext.36499

Internal referrals

can be made via Dovetale

Loved Ones Education Group

An 8-week group for the parents and other supporters of young adults with substance use problems focusing on changing the way you interact with your child or loved one to promote positive relationships and recovery.

Please register on the website: https://www.cdcapacitybuilding.c om/youth-program The Young Adult Stream has a core ~12-week group structure and includes:

Five individual sessions including:



- ✓ Intake assessment (2 hours)
- √ 1 week feedback session (1 hour)
- ✓ Check-ins (1 hour) at weeks 4, 8, and 12

Group Programming including:

- ✓ Mind-Drug Connection based in Cognitive Behavioural Therapy and Relapse Prevention.
- ✓ Balancing Emotion and Mind based on Dialetical Behavioural Therapy.
- ✓ Mindfulness based on Mindfulness-Based Stress Reduction.

Other Groups Coming Soon

We recommend attending 2 or more groups per week.



Young adults can continue accessing groups even after individual sessions are completed.



<u>Consultations</u> (time-limited) with a Nurse Practitioner, Psychiatrist, or Psychologist *may* be offered to to help clarify diagnoses, recommend medications, and conduct additional testing. YA-SUP is **not intended for those only requiring access to consults.**

We want to work together. The YA-SUP is one part of a complex health and mental health system. We want to work together with current health and mental health providers to share care and collaborate to optimize treatment.

Reduce negative impacts of substance use

Improve mental health and wellbeing

Increase substance-free activities



More information here: https://www.cdcapacitybuilding.com/youth-program

One-Page Overview

Click here for a one-page overview of the YA-SUP program

Trauma-Informed Care

TUESDAY, JULY 28TH 12:00PM - 1:00PM

Presented by:

Sonya Sethi-Rankin, Clinical Supervisor, Men's **Addiction Service Hamilton**

Please join us on July 28th

for a discussion of trauma-informed care and approaches.

A trauma-informed approach takes into account an understanding of trauma in all aspects of service delivery and more directly addresses the need for healing from traumatic life experiences.

Register through Eventbrite HERE:

Contact: kayv@stjosham.on.ca





Upcoming Education Opportunity

The CDCBT will be holding its July education session on THURSDAY, JULY 28th, from 12:00pm-1:00pm virtually over Zoom. Next month we will be discussing <u>Trauma-Informed Practice</u>. Please see page 6 to view the poster and access the link to register. Please note that this education will not be held through OTN.

In The News

DRHC opens new clinic for additional addictions support

<u>Hotel-Dieu Grace Healthcare welcomes</u> <u>new addiction services funding</u>

<u>High school students across Canada to be trained on how to administer naloxone</u>

Your CD Capacity Building Contacts

SJHH - West 5th Site: R151	Fax: (905-381-5620)
Catherine McCarron (RSW, MSW, Manager)	Ext. 34388
Young Adult Substance Use Program (YA-SUP)	yasup@stjosham.on.c a
Amanda King (Community Support Counsellor), Charlton Site	Ext. 36227
Bill Baker (Addiction Specialist) Charlton Site	Ext. 32801; Pager 5799
Jonathan Paul (Community Support Counsellor), West 5 th & Charlton Site	Ext. 36287; Pager 5799
Melissa Bond (Administrative Assistant)	Ext. 39343
Michelle Sanderson (Community Support Counsellor), West 5 th & Charlton	Ext. 36868; Pager 5707
Nick DiCarlo (Addiction Attendant), West 5 th & Charlton Site	
Patrick Geuba (Registered Nurse)	
Stephanie D'Odorico (Mental Health Worker), West 5 th & Charlton Site	Ext. 35047
Tracie Groff (Addiction Attendant), West 5 th & Charlton Site	Ext. 34901
Victoria Kay (Concurrent Disorders Intern)	Ext. 39124
Opioid Replacement Therapy consultations available through Addiction Medicine Service Team	Contact Paging

^{*}Updated evening/night coverage for ED/PES: Monday to Thursday 8:00pm-6:00am, Saturday and Sunday 12:00pm-12:00am

SJHH Intranet: http://mystjoes/sites/Depts-A-L/concurrent
External Website: https://www.cdcapacitybuilding.com

