



CONCURRENT DISORDERS

CAPACITY BUILDING TEAM

July Newsletter

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St. Joseph's Healthcare Hamilton Young Adult Substance Use Program (YA-SUP)

Earlier this year, St. Joseph's Healthcare Hamilton launched a new program aimed specifically at providing help to young adults 17-25 years of age who are struggling with substance use and are looking to make changes to their substance use. The Young Adult Substance Use Program (YA-SUP) offers services for both young adults and the loved ones of young adults with problematic substance use to reduce the negative consequences of substance use and to promote healthy living.

The YA-SUP is made up of a collaborative team, which includes a mental health worker, a community support counsellor, nurse practitioners, an addiction psychiatrist, and substance use and mental health researchers.

The Young Adult Stream of the program is made up of several components and revolves around a 12-week structure. This includes five individual sessions comprised of an intake assessment that includes a survey, a 1-week feedback session where the results from the initial survey are reviewed, and three check-in sessions where additional surveys are completed. The purpose of these surveys is to help develop personalized care plans and track individual progress over time. Additional services in the Young Adult Stream include the availability of consults with a Nurse Practitioner or Addiction Psychiatrist to clarify diagnoses and/or explore or start medications.

A variety of daily group programs are offered in the Young Adult Stream covering topics that support self-discovery and self-management of young adults. There are currently six different groups offered daily within the Young Adult Stream:

- Mind-Drug Connection – based in Cognitive Behavioural Therapy and Relapse Prevention
- Navigating the Week – based on Relapse Prevention
- Levelling up Your Health – focused on the connection between physical and mental health
- Balancing Emotion and Mind – based on Dialectical Behavioural Therapy
- Mindfulness – based on Mindfulness-Based Stress Reduction
- Peer Space – focused on mutual support groups

Each group is broken down into specific sessions and most groups are drop-in. Currently, all groups are offered virtually.

In addition to offering services for young adults, the YA-SUP also places a strong emphasis on supporting the loved ones of those young adults. The YA-SUP Loved Ones Support Group is a group created for the loved ones of young adults with problematic substance use. This can include immediate family, extended, or chosen family members, or close friends and partners. Individuals are welcome to attend this group even if their loved one is not involved with the Young Adult Stream. However, if their loved one is involved in that stream, no information is shared between the Young Adult and the Loved Ones Stream, therefore participants can be confident that information will not be shared. This group includes seven sessions, each based on Community Reinforcement Approach to Family Training – Support Prevention (CRAFT).

[Click Here](#) for the YA-SUP Site Page

Email: yasup@stjosham.on.ca

Who is this program for and how to refer?

- 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

CONNECT MHAP
(self or professional)
(905) 522-1155, Ext.36499
Internal referrals
can be made via Dovetale

To note: The YA-SUP is not intended for those **only** requiring access to consults. The Concurrent Disorders program may be more appropriate for those not willing or able to attend groups or primarily requiring diagnostic clarification or medication.

*“Though no one can go back and make a brand-new start, anyone can start from now and make a brand-new ending.”
— Carl Bard*



More information about the YA-SUP:

[One Page Overview](#)

[YA-SUP Pamphlet](#)

[Detailed Program Overview](#)

Cannabis Column – Association of Cannabis Use with Self-harm and Mortality Risk Among Youths with Mood Disorders

Both cannabis use and cannabis use disorder (CUD) are common among youth and young adults with mood disorders. The association between CUD and self-harm, suicide, and overall mortality risk is not well understood, and this study aimed to examine those associations.

This study included youths aged 10 to 24 years with mood disorders, in which 10.3% had a diagnosis of CUD, a rate higher than in the general population.

The main question asked in this study: Is cannabis use disorder associated with a heightened risk of self-harm, suicide, and mortality among youths with mood disorders? The findings demonstrated that the presence of cannabis use disorder was significantly associated with an increased risk of nonfatal self-harm, all-cause mortality, and death by unintentional overdose and homicide.

Findings in this study were generally consistent with similar studies of adult populations. Although attention is brought to the association between mood disorders in youth and young adults and increased risks or harm, the causality or mechanisms of these associations were not found.

[Click Here](#) for the full article

Hospital policy as a harm reduction intervention for people who use drugs

Both formal and informal hospital policies can often have a negative impact on people who use drugs (PWUD) in acute care settings. Hospitals have the opportunity to use institutional policy change as a harm reduction intervention for PWUD. The authors of this paper suggest that the introduction of new policies or revisions of existing ones that unintentionally harm or stigmatize PWUD while hospitalized could be an effective harm reduction tool for PWUD.

The authors present seven distinct areas in which institutional policy change could improve the experiences of PWUD within hospitals:

- 1) The use of nonprescribed substances in hospital**
 - Abstinence-based approaches to drug use have not been found to be effective at reducing or eliminating nonprescribed drug use while in hospital
 - The authors recommend targeted education and training for healthcare providers on adequate pain and withdrawal management for PWUD in attempt to reduce the need for nonprescribed drug use
- 2) Supporting inpatient addiction consultation services**
 - Found to be effective in both increasing rates of treatment engagement among PWUD and in increasing trust between PWUD and healthcare providers
- 3) In-hospital supervised consumption spaces**
 - Designated spaces for drug use to take place can allow PWUD to complete hospital treatment in the context of ongoing drug use
- 4) Distribution of sterile drug use equipment and naloxone**
 - Harm reduction programs have been found to be a cost-effective and feasible intervention to reduce drug-related harms
 - Hospitals need to address barriers to implementing take-home naloxone programs
- 5) Use of security services and search of personal belongings**
 - Presence of security services in hospitals can serve as an additional barrier for PWUD when accessing health services
 - The authors urge hospitals to reconsider institutional policies that are likely to increase the frequency of interactions between security services and PWUD
 - Encourage hospitals to adapt policies which emphasize the autonomy of PWUD and to only involve security services where there is a serious risk
- 6) Use of hospital restrictions**
 - No evidence has been found that hospital restrictions are effective in limiting opportunities for nonprescribed drug use
 - The authors suggest for hospital policymakers to consider other approaches to managing the risks of nonprescribed substance use that are less likely to increase the risk of treatment interruption and patient-initiated discharge
- 7) Engaging PWUD in policy development and implementation**
 - PWUD are often better able to identify which interventions may be most effective and how to best engage target populations

[Click here](#) for the full article

Clinical Corner – Telehealth for the Treatment of Serious Mental Illness and Substance Use Disorders

Telehealth is the use of two-way, interactive technology to provide health care and facilitate client-provider interactions. The Substance Abuse and Mental Health Services Administration (SAMHSA), specifically, its National Mental Health and Substance Use Policy Laboratory, recently published an extensive evidence-based resource guide series overview reviewing the ways in which telehealth modalities can be used to provide treatment for serious mental illness (SMI) and substance use disorders (SUD) among adults. The guide has also condensed research in this subject area into recommendations for practice, and provides examples of how these recommendations can be implemented in practice. The guide focuses on the use of telehealth as a potential way to address treatment gaps for those with SMI and/or SUD, making treatment for accessible and convenient, to potentially improve health outcomes and reduce health disparities.

[Click here](#) for the full guide

Harm Reduction Workshop – July 6, 2021 6-7pm (Online)

The Institute for Advancements in Mental Health (IAM) will be hosting an online Harm Reduction Workshop on July 6, 2021 from 6:00-7:00pm. This workshop is designed to provide information on harm reduction to family members and others who may be supporting someone who uses substances, as well as experiencing mental health concerns. Participants will learn what harm reduction is and how harm reduction principles can be applied when supporting someone who may be dealing with both substance use and mental health concerns. The workshop will equip participants with skills and strategies to implement in their daily lives. Speakers at the event include professional counsellors/registered social workers.

[Click here](#) for full event details

Your CD Capacity Building Contacts

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Catherine McCarron (RSW, MSW, Manager)	Ext. 34388
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Melissa Bond (Administrative Assistant)	Ext. 39343
Jonathan Paul (Community Support Counsellor), West 5 th & Charlton Site	Ext. 36287; Pager 5799
Michelle Sanderson (Addiction Specialist), West 5 th & Charlton	Ext. 36868; Pager 5707
Bill Baker (Mental Health Worker) Charlton Site	Ext. 32801; Pager 5799
BreAnne Dorion (Community Support Counsellor) Charlton Site	Ext. 35324; Pager 5799
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>

Virtual Drop-In Group Information

We are happy to have all of our drop-in groups now running virtually through ZOOM!

Below are the times and a brief description of the group offered by the Community Psychiatry team at W5th

All ZOOM links found at cdcapacitybuilding.com

Mondays 1:30-2:30pm Moving Forward Skillfully * No Referral Required *

- A weekly drop-in class with 6 different modules
- Start any week
- Learn skills from DBT including emotion regulation, distress tolerance, and mindfulness

Tuesdays 1:30-2:30pm SMART Recovery * No Referral Required *

- A drop-in self-help group for recovery from any type of addictive behaviour
- Groups are led by a clinician and volunteer with lived experience
- Limit of 8 participants per group

Wednesdays 1:30-2:30pm Steps to Recovery * No Referral Required *

- A drop-in self-help group with 6 modules to increase motivation to decrease substance use.

Last Wednesday of Every Month 6:30 – 8:30pm Friends and Family Night

- A group for loved ones of those with substance use, mental health or concurrent disorders
- Contains 4 modules on supporting loved ones, creating boundaries, and self-care

Thursday 1:30-3pm -ACT

- A weekly drop-in class with 4 different modules.
- Start any week
- Available to all clients in the Community Psychiatry Clinic with any mental health diagnoses
- Topics from ACT therapy include: mindfulness, clarifying values, committed action, fusion vs. diffusion, control vs. willingness, acceptance as an alternative, and action planning

Monday 10-11:30 am PAWS

- Pick up a package and join any week!
- 6 different topics to help support and strengthen recovery: 1) education around post-acute withdrawal syndrome 2) Physical health exercise and nutrition 3) Mindfulness 4) Sleep hygiene 5) Budgeting and financial security 6) Self-care, balance and resiliency
- These 6 sessions provide us an opportunity to pause, reflect and build on our own foundations of recovery
- Please watch the video(s) listed on cdcapacitybuilding.com ahead of time



CONCURRENT DISORDERS FAMILY NIGHT

LAST WEDNESDAY OF EVERY MONTH: 6:30- 8:30PM

The Concurrent Disorders Family Night series is a 4-session group (Does Not have to be attended in order) that focuses on supporting families and loved ones of individuals with co-occurring substance use and mental health disorders. Family Night is largely based upon the therapeutic interventions of CRAFT (Community Reinforcement and Family Training) and ACT (Acceptance and Commitment Therapy).

**No Referral Required* Do not need to attend in order!*

St. Joseph's
Healthcare  Hamilton

**All loved ones, friends
and family members
welcome!**

**Week 1: Values, Recovery
and Acceptance**

**Week 2: Supporting
Yourself while Supporting
Someone with a
Concurrent Disorder**

**Week 3: Effective
Communication and
Support**

**Week 4: Motivating to
Make a Change**

**MORE INFORMATION AND
ZOOM LINK AT**

<https://www.cdcapacitybuilding.com/online-group-link>



Acceptance and Commitment Therapy (ACT) for

Trauma

Presented by:

Kim Jones, RN

Kim Jones is a Registered Nurse with the Community Psychiatry Clinic at St. Joseph's West 5th Campus and we are excited to have her speak this month!

Please join us on July 21st for a discussion on the use Acceptance Commitment Therapy (ACT) for trauma.

[Attend the session virtually through ZOOM:](#)

Wednesday July 21st 2021 from 12:00pm – 1:00pm

<https://stjosham.zoom.us/j/66336609819?pwd=anpvMEdKa1R4c210L0I5NzkwaEtmZz09>

Please [CLICK HERE](#) to register online

If you have any questions, please contact

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