





INTEGRATED & COMPREHENSIVE APPROACH

The Cape Breton Community Partnership on Drug Abuse

- 
 □ Chief Myles Burke
 Cape Breton Regional Police Services
 - 
 □ John Malcom
 CEO, Cape Breton District Health Authority
 - 
 □ Dr. Jane Lewis
 Dean, School of Education, Health and Wellness
 Cape Breton University
- 

OVERVIEW

Chief Myles Burke
 Cape Breton Regional Police Service



Top Island to Visit...






"Home of our Hearts"...




Oxycontin Capital



History

- Formed in March 2004
- Response to drug related deaths connected with Oxycodone abuse
- Community Partnership on Prescription Drug Abuse
 - Short term intent → long term commitment



Vision / Purpose

- *To work collaboratively to address the harmful impact of the abuse of drugs in the community, using interventions based on evidence and research.*



Members

- Cape Breton Regional Police Service
- Cape Breton District Health Authority
- Cape Breton University
- Royal Canadian Mounted Police
- Cape Breton-Victoria Regional School Board
- Nova Scotia Department of Justice
- Nova Scotia Department of Community Services
- Nova Scotia College of Pharmacists
- Nova Scotia Community College, Marconi Campus



Model Approach

- Collaboration – agencies and communities
- Knowledge sharing → improved service delivery
- Stronger, more effective effort to address complex problem of drug abuse



Leadership

- Chair vs. Chief
 - Community Policing / Enforcement
 - Quality of Life
- Government
 - Ownership / Endorsement
 - Mandated to look after people



Strategy – Phase 1

- Two-fold focus:
 - ▣ Harm reduction, through intervention
 - ▣ Reduce supply of drugs for illicit use
- Primary areas of work:
 - ▣ Research
 - ▣ Legalized entities – government and enforcement



Successes

- ↓ Supply of Oxycodone for illicit use
- Prescription Monitoring program
- Methadone treatment clinics
- Youth dialogue
- Agency collaboration – social, health and crime
- ↑ Research
- Empowered communities
- Nova Scotia Justice Minister's Award for Leadership in Crime Prevention – 2009



Strategy – Phase 2

- Re-focus → Demand
 - ▣ Root causes
 - ▣ Prevention
- Areas of work:
 - ▣ Normalization of Drug Use
 - ▣ Communication & Public Accountability
 - ▣ Community-based Research
 - ▣ Financial Sustainability



STATISTICAL STORY

John Malcom
CEO Cape Breton District Health Authority



Working Groups

- Treatment
- Education & Prevention
- Community Safety
- Research

** Over 5,000 volunteer hours to date



Findings & Results

- NS Prescription Monitoring Program
 - ▣ No formal status →
 - ▣ **Provincial Legislation** (2004)
 - ▣ Data analysis small and slow →
 - ▣ **Automated linking** 100% of pharmacies with real time reporting (December 2007)
 - ▣ Limited feedback to prescribers →
 - ▣ **Bimonthly notification**
 - ▣ 792 patient profiles / 26 prescriber profiles (2007-08)



Findings & Results

- Health Canada
 - National review of monitoring effectiveness →
 - **Atlantic Review** complete (not released)
 - Random narcotic inspections →
 - **Not implemented**



Findings & Results

- Treatment
 - Methadone Maintenance Programs →
 - **Established** (2004)
 - Provincial Continuing Medical Education Program



2007 Opioid & Benzodiazepines Variation per Capita Usage Compared to National Average

Province	Opioid %	Benzodiazepines %
British Columbia	- 25	0
Alberta	+3	+12
Saskatchewan	-18	-29
Manitoba	-26	+6
Ontario	+27	-20
Quebec	-25	+21
New Brunswick	+3	+70
Nova Scotia	+1	+17
PEI	-36	+29
NFLD	-6	+15

Source: Medical Post



Oxycodone Prescription in Cape Breton

	2005	2006	2007	2008	Change
# Patients	451	455	387	389	(62)
Total mgs	10,560,400	8,808,930	6,974,085	7,668,960	(2,891,840)

- Three districts saw decline in total mgs during this period:
 - Cape Breton (27.4 %)
 - South Shore (27.7 %); Southwest (49%)
 - Six districts increased, ranging from:
 - 8.5% (Pictou) to 43.4% (Halifax)



Oxycodone Product Utilization Based on Prescriber's District

District	# Prescriptions			Total Mg's (000)		
	2005	2008	% Change	2005	2008	% Change
South Shore	746	694	(7.0)	2,603.1	1,883.1	(27.7)
Southwest	248	115	(53.6)	880	449.1	(49.0)
Valley	619	850	37.3	2,142.9	3,135.2	46.3
Colchester	724	837	15.6	2,696.7	3,032.5	12.5
Cumberland	270	341	26.3	695.8	833.9	19.9
Pictou	452	500	10.6	1,221.3	1,325.6	8.5
GASHA	387	367	(5.2)	1,300.1	1,472.0	13.2
Cape Breton	2,728	2,227	(18.4)	10,560.4	7,668.9	(27.4)
Capital	3,705	4,667	25.7	10,524.6	15,146.2	43.9
Total	9,879	10,588	7.2	36,625.6	34,946.5	7.1



COLLABORATION

Dr. Jane Lewis
 Dean, School of Education, Health and Wellness
 Cape Breton University



Cape Breton University



Perseverance will triumph

Established 1974

35 years young!

Primarily undergraduate

3200 students

75% from Cape Breton

Youngest of 12



Cape Breton University

- Partnerships and Community Outreach
- Community-based research
- Success dependent on community



What is Population Health?

- Deals with the health of whole groups of people
- Helps us formulate policy and practice



What is Health Promotion?



"What fits your busy schedule better, exercising one hour a day or being dead 24 hours a day?"

- Shift:
 - From medical mode of curing illness...
 - To promoting health and preventing disease



Determinants of Health

- Employment and Working Conditions
- Gender
- Healthy Child Development
- Income and Social Status
- Social Support Networks
- Education
- Health Services
- Physical Environments
- Social Environments
- Personal Health Practices and Coping Skills
- Biology and Genetic Endowment
- Culture

The Crime / Health Connection

- Similar roots – poverty, deprivation, isolation
- Linkages to alcoholism, drug addiction, mental illness
- Criminal activity impacts community health



Illness; Crime; Unhealthy Communities

- Straightforward linkages:
 - similar determinants
 - reflect a failure
 - subject to different interpretations and approaches
 - subject to public policy decisions that determine quality of health and well-being



Partners in Health or Crime?

- Community Partnership → Community Health



- Complacency → partners in crime



What's in it for me?



What's in it for us?

- Community wellness
- Identify and fill gaps
- Strengthen networks
- Share resources and expertise
- Community and political support



Lessons Learned

- True confessions of the Community Partnership...



Sustainability

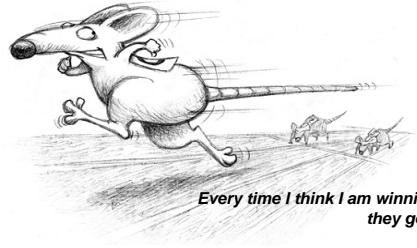
- Nobody's baby!



Complexity of the Problem



Winning Battles



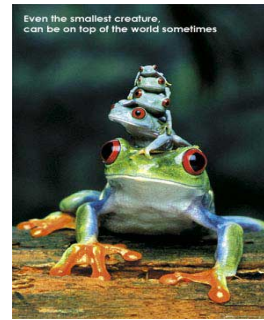
Every time I think I am winning the rat race they get bigger rats!!



Outside your Silo/Comfort Zone



Friends at the Top



Where to from here?



- Implement phase II
- New governance structure
- Somebody's baby???
- Forge ahead

Giving up is not an option!



Never doubt that a small group of thoughtful, committed citizens can change the world; indeed, it's the only thing that ever has

- Margaret Mead

