

Long form content

Existing evidence for drug abuse and addiction:

Alcohol and drug addictions are serious and ongoing problems in our communities penetrating the lives of many families.

In 2015-2016 (the most recent available data), Canadian Institute for Health Information (CIHI) reported that on average 345 individuals per 100,000 people were hospitalized due entirely to alcohol consumption in Saskatchewan. This is 44% higher than the national average. Hospitalization rates were also quite pronounced in rural parts of Saskatchewan as shown in Table 1. The Government of Saskatchewan offers ongoing programs and supports to individuals suffering from addiction to alcohol, which can be found on the provincial government's website under "Alcohol and Drug Support".

Table 1: Number of hospitalizations due entirely to alcohol in south Saskatchewan

Regional Health Authority (RHA), 2015-2016	Major towns in RHA	Number of hospitalizations entirely due to alcohol (as per 100,000 people)
Regina Qu'Appelle	Regina	339
Cypress	Swift Current, Shaunavon, Maple Creek	434
Five Hills	Gravelbourg, Moose Jaw, Assiniboia	222
Sun Country	Weyburn, Estevan, Oxbow	290
Sunrise	Melville, Yorkton, Esterhazy	292

Source: Canadian Institute for Health Information, 2015-2016 report.

With regards to drug abuse, a fairly new and devastating phenomenon is the increased use of opioids. Opioid overdoses claimed 95 lives in Saskatchewan in 2018, which is a rate of 8.2 individuals per 100,000 people.⁷ While the majority of cases occurred in Regina and Saskatoon, other locations such as Weyburn, Shaunavon, Estevan and Yorkton also suffered the effects of the opioid crisis.⁸

For the period from January to March 2019, there were 68 opioid overdoses in Saskatchewan, which is a 19% increase from 57 cases in the previous quarter (October to December 2018).⁹

The Government of Saskatchewan is committed to addressing the opioid and crystal meth dependency through various initiatives. It has invested \$7.4 million to expand access to opioid substitution therapy. The Government of Canada is also granting \$5 million to Saskatchewan to train health care providers in creating treatment options for patients who use crystal meth, amongst many other initiatives (Government of Saskatchewan, Alcohol and Drug Support).

On February 12, 2019, the Government of Saskatchewan launched a campaign to help bring awareness to the problem, educate the public on how to identify the signs of the opioid overdose and how to respond.

The province's health authority also administers harm reduction programs. One such program is Take Home Naloxone Kits available in case someone is experiencing an opioid overdose. To promote community safety, Saskatchewan's Health Authority also issues needles and collects them at no cost.¹⁰

⁷ National Report: Apparent Opioid-related Deaths in Canada (June 2019); <https://health-infodivisions.canada.ca/en>

Infographic/ Key Takeaway

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345 individuals per **100,000** people, on average, were hospitalized due entirely to alcohol consumption in Saskatchewan.

This is **44%** higher than the national average.

Click!

Rural Canada contributes about **30%** of the country's gross domestic product.

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Opens impact story popup

Emerging Issue #2:
Drug abuse and addiction
(20% of conversations)

"The abuse of methamphetamines, or speed, is not new. However, crystal meth, as it's more commonly known, is a relatively new, fast-acting, long lasting and cheaper drug than others and can be addictive after only one use. The fact that it is cheaper and longer lasting means that is more economically accessible to people in comparison to other drugs. As such, its use has spread rapidly in the past few years." From the Carmichael Outreach Inc. conversation

View SSCF Data/Long form

View UN data on alcohol

Opens new page of long-form content)

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"Drug addiction brings with it many problems such as prostitution, as a way to pay for the habit, and the contaminated litter, mainly needles, that could hurt children. A current challenge that the community faces is how unsafe they feel because of drugs. Parents do not want their kids to play outside because they may end up getting hurt by an infected needle and Elders are afraid they may be robbed for money as they are fragile and unlikely to fight back." From the Civic Museum of Regina conversation

Specific challenges reported by communities (Q5):

- Addiction to fentanyl, crystal meth
 - Alcohol dependence
 - Impacts of gang activity, which includes gang-related graffiti, drug use, sales and crime
 - Low school attendance
- Mental health supports, medications shouldn't be the first response
 - No treatment centers for youth
 - Increase in the incidence of drug abuse among young people

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Emerging Issue #2: Impact Story

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(20% of conversations)

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COMMUNITY FOCUS

Integrated support for recovery and homelessness promotes success

The first Oxford House Saskatchewan (OHS) residence was established in 2010. They now operate four Houses for men (20 beds) and one House serving women (5 beds) providing safe, affordable housing and support for people to continue their recovery from addictions.

Blair Pope, Executive Director of OHS says potential residents are referred by community organizations such as addiction treatment centres, counselling agencies, medical professionals, church and AA/NA leaders.

"Many recovering addicts try to quit by themselves," says Pope. "The vast majority fail. The key to recovery is living life with others. They find support and empathy with people who understand the struggles of maintaining sobriety."

The Oxford House process is unique and based on a model successfully implemented throughout the United States and other parts of Canada. An Outreach Worker interviews the candidate and if there is a good 'fit' within one of the Houses, the applicant meets the current House Membership and moves in as a temporary Member. After a one-month trial period, the House Membership democratically votes to grant permanent status. In doing so, they accept the responsibility of mentorship for that individual through recovery time at Oxford House.

"We do not enable our residents by 'fixing' their problems for them," Pope describes. "The Houses operate democratically and independently."

Any issues arising from within the Houses are dealt with by the Members.

Rather than the high risk of individuals repeating the cycle of addiction by going back to their 'old haunts' only to slip back, OHS provides a new lease on life. With a fresh start, Members can fully recover and re-establish themselves in their old community at a later date if they have the desire and when they have the emotional, psychological and financial strength to do so safely.

"This is a process, a journey, and few can magically recover from years of self-abuse with a single stay in an addictions treatment centre," says Pope. "This process takes time and energy to heal. OHS fills the gap that exists in the transition back to living independently."

Pope says as a country, the economic cost of homelessness is enormous. The majority of our residents at Oxford House are either homeless or at-risk of homelessness.

"When one calculates the cost reduction associated with fewer detox stays, emergency responses, policing, hospital, social welfare, and/or corrections and justice, the savings are immense. Every person we assist reduces the number of individuals who require social income support and those tax dollars can be directed to other initiatives.

As working, tax-paying citizens, these individuals can be productive members who contribute rather than being a burden on our tax dollars," he says.

Story courtesy of Oxford House Saskatchewan