



January 2008

PIVOT

A FORUM FOR MENTAL HEALTH AND SOCIAL SERVICES

INSIDE

- 3 Prescription pain relievers emerge as a concern
- 4 CIHI study finds fewer seniors taking higher-risk medications
- 6-7 Across Grey Bruce

Complimentary Advance Care Planning DVD January is Alzheimer Awareness Month

The University of Toronto's *Ian Anderson Continuing Education Program in End of Life Care* has developed an excellent new Advance Care Planning DVD. It provides an introductory look at some of the basic concepts involved in Advance Care Planning. The DVD features three brief dramatizations of cases involving Advance Care Planning and narratives explaining life support, palliative care and other related concepts.

The first scenario involves a 37-year-old man admitted to intensive care with a life threatening head injury. It illustrates the role of the Substitute Decision Maker and how difficult it can be for that person to make decisions when Advance Care Planning has not been done. This scenario points to the fact that you don't have to be old to have these issues arise. One can benefit from engaging in Advance Care Planning regardless of age or health status.

Scenario #2 portrays a woman with early Alzheimer disease who is still capable to appoint a Substitute Decision Maker and determine her wishes related to various health care decisions that might have to be made in the future. She seeks legal counsel and consults her doctor about future possible treatments in order to help her give direction to her daughter who will act as her Substitute Decision

Maker when she is no longer capable. It illustrates that completing a Power of Attorney is not enough. The person has to make sure her Substitute Decision Maker understands her wishes and the reasoning behind those wishes.

The third and final scenario involves a man with incurable cancer and explains the common concepts of palliative care. Life support is discussed earlier in the DVD. Here the alternative option of palliative care is explained to address some of the myths around end of life care.

There are a limited number of copies of this excellent Advance Care Planning resource that are currently available to service providers who are working with Substitute Decision Makers or assisting those who need to engage in Advance Care Planning. For a complimentary copy of the DVD please contact Barbara Fox at the Alzheimer Society of Grey Bruce 519-376-7230, 1-800-265-9013 or bfox@alzheimergreybruce.com.

I am also available to facilitate discussions and provide presentations to groups on this topic.

*Barbara Fox
Public Education Coordinator
Alzheimer Society of Grey Bruce
1-519-376-7230 Ext 28
bfox@alzheimergreybruce.com*

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One can benefit from engaging in Advance Care Planning regardless of age or health status

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Help for today. **Hope** for tomorrow.
Heads up for healthier brains.

http://www.alzheimer.ca/english/brain/brain_boost.htm



Cannabis and Psychosis: The Controversy Continues

Over this past summer, the British medical journal *The Lancet* published a series of articles that have stirred up the long simmering debate about the effects of cannabis use on mental health. The publication of a meta analysis of 35 longitudinal, population-driven studies by researchers in the United Kingdom concluded that the relationship between cannabis use and psychosis is not as benign as has been previously believed. In [Cannabis Use and Risk of Psychotic or Affective Mental Health Outcomes: a Systemic Review](#), the authors concluded that whether cannabis can cause psychotic or affective symptoms that persist beyond transient intoxication is unclear. The authors did however report that they observed an increased risk of psychotic outcomes in individuals who had used cannabis. These observations were also consistent with a dose response effect, with greater risk in people who used cannabis most frequently. Depression, suicidal thoughts and anxiety outcomes were examined separately. However, the authors found that these outcomes were less consistent.

Zammit and his colleagues combined data from 35 longitudinal trials in which populations were observed over time. They found that after allowing for factors such as other substance use and intelligence, people who had used cannabis were more likely to develop schizophrenia or other psychotic problems than those who had never used it. Those who used cannabis most frequently were more likely to suffer problems.

There has been continuing debate in medical circles over whether cannabis actually causes psychotic illness or whether people with psychiatric problems self medicate with the drug. The uncertainty about whether cannabis use causes psychosis is unlikely to be resolved by further longitudinal studies such as those

examined in the Moore and Zammit study. However the authors concluded that there was sufficient evidence to warn young people that using cannabis could increase the risk of developing a psychotic illness later in life. "The message that has to be made clear is there are potentially quite serious risks from using cannabis" says Zammit of Cardiff University, UK. "For psychotic outcomes there certainly is enough evidence to warn people of the risk".

The increased risk of psychosis, particularly in long term cannabis users, is particularly worrying because cannabis is the most widely used illegal drug and any increased risk causes concern. In an editorial accompanying

"With pot addiction beginning at increasingly young ages ..., [Messing with Heads: Marijuana and Mental Illness](#) is important viewing for professionals working in the field of Addictions."

the study, Merete Nordentoft and Carsten Hjorthoj of Copenhagen University Hospital, Denmark say "In the public debate, cannabis has been considered a more or less harmless drug compared with alcohol, central stimulants (such as amphetamines) and opioids. However, the potential long term hazardous effects of cannabis with regard to psychosis seem to have been overlooked".

Article References

[Does Cannabis use cause schizophrenia?](#); John Macleod, George Davey Smith, Mathew Hickman

The Lancet vol. 367 Issue 9516, April 1, 2006 page 1055
[Cannabis use and risk of psychotic or affective mental health outcomes: a systematic review](#); Theresa Moore, Stanley Zammit, Anne Lingford-Hughes, Thomas Barnes, Peter Jones, Margaret Burke, Glyn Lewis
The Lancet vol. 370 Issue 9584, July 28, 2007 pages 319-328

[Cannabis use and risk of psychosis in later life.](#); Merete Nordentoft, Carsten Hjorthoj
The Lancet vol. 307 Issue 9584, July 28, 2007 pages 293-294
[Rehashing the evidence on psychosis and cannabis.](#)
The Lancet vol. 370 Issue 9584, July 28, 2007 page 292

Video Resource

(available from *New Directions*)

[Messing with Heads: Marijuana and Mental Illness](#)

For decades, heavy marijuana use has been linked to impaired judgment and mental ability. This thought provoking and sometimes frightening DVD explores another link – this time between marijuana and mental illnesses, specifically schizophrenia and paranoid psychosis. Citing clinical evidence and observations by neurologists, psychiatrists and psychologists, the DVD delves into the frightening effects of THC on young brains: psychotic delusions and behaviour that may not appear until years after drug abuse has ended. With pot addiction beginning at increasingly young ages around the world, this program is important viewing for professionals working in the field of addictions. Films for the Humanities & Sciences (46 minutes). Call *New Directions: for Alcohol, Drug and Gambling Problems* 519-371-1232 if you would like to screen this film.

Nancy Hall, Community Development Worker

Drug and alcohol use stabilizes, but prescription pain relievers emerge as a concern

For Immediate Release – November 20, 2007

(TORONTO) – While alcohol, cannabis and other drug use among Ontario teens has remained stable or decreased, the misuse of prescription opioid drugs may be a cause for concern according to the 2007 Ontario Student Drug Use and Health Survey (OSDUHS). These surprising data are the first comprehensive Canadian survey results on non-medical use of prescription opioid pain relievers.

Released by the Centre for Addiction and Mental Health (CAMH) today, OSDUHS found that 21% of Ontario students in grades 7 to 12 report using prescription opioid pain relievers such as **TYLENOL®** No. 3 and **Percocet®** for non-medical purposes; and almost 72% report obtaining the drugs from home. In addition, among all drugs asked about, **OxyContin®** was the only drug to show a significant, but small, increase in non-medical use since the last survey (2% of students reported using it in 2007, representing about 18,100 students, versus 1% in 2005).

Generally, the lack of increase in the use of other drugs is encouraging and may reflect the health promotion initiatives that have been taken over the years. “The reasons for the increase in **OxyContin®** use are currently unknown, and we need to monitor this finding to determine whether it is a real trend or a one-time finding. However, the finding that 72% of the student users report obtaining the drugs from home suggests that some intervention with families might be appropriate,” said Louis Gliksman, Acting Chief of Research at CAMH and spokesperson for the study.

Alcohol remains students’ drug of choice. Almost two-thirds (61%) of all students drink alcohol. Binge drinking (consuming at least 5 drinks on the same occasion) still remains high, as approximately 26% of students are likely to engage in

this behaviour. The proportion of all students who may be drinking hazardingly (defined as a risky pattern of alcohol use that increases the likelihood of physical, psychological, or social problems) is at 19% and has not changed since 2005.

While the study shows a general decline in illicit drug use over the past decade, 26% of students reported using cannabis at least once in the past year. Among all students, 14% reported using cannabis six times or more during the past year. Also, more students with a driver’s licence report driving after using cannabis than after using alcohol

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(16% versus 12% respectively). The proportion of students reporting riding in a vehicle with a driver who had been using drugs declined since the last survey, but still remains elevated at 18%.

More encouraging news was revealed in the data on smoking. Only a small minority (5%) of all students report smoking on a daily basis, and 72% report never having tried a cigarette in their lifetime. The prevalence of daily smoking has been declining since the late 1990s, and the 2007 rate is the lowest on record since monitoring began in 1977. However, there is still a significant percentage of students (12% or about 119,900 students) that do smoke either occasionally or daily.

“This survey indicates that it is the legal drugs--alcohol and prescription opioids--that are being used by Ontario’s youth today, and our governments’ efforts to address substance use among youth need to be in synch with that reality if we want to improve the health of our

young people,” said Gail Czukar, CAMH’s VP of Policy, Education and Health Promotion.

Other survey highlights include:

- In addition to use of prescription opioid pain relievers, 2007 is also the first year that students were asked about their use of over-the-counter sleeping medication (4%), **Jimson Weed** (3%), and the non-medical use of attention deficient/ hyperactivity disorder (ADHD) drugs (1%).
- Despite recent attention on methamphetamine (‘speed’) and crystal methamphetamine (‘crystal meth’), there is no evidence that either drug has diffused into the student population in Ontario. In fact, past year use of methamphetamine significantly decreased between 2005 (2%) and 2007 (1%).
- About 3% of all students used cannabis daily during the 4 weeks before the survey (representing about 27,300 Ontario students in grades 7 to 12). About 3% of all students may have a cannabis dependence problem representing about 28,700 students).
- About 15% of students report getting drunk or high at school at least once during the past year, and one-in-five (21%) were sold, given or offered a drug at school.

Celebrating its 30th anniversary, CAMH’s Ontario Student Drug Use and Health Survey (OSDUHS) is Canada’s longest running school survey of adolescents, describing drug use and changes since 1977. During the 2006-2007 school year, 6,323 students in grades 7 to 12 participated in the survey administered by the Institute for Social Research, York University. The sample represents about 1,011,200 Ontario students in grades 7 - 12.

For more information or to arrange interviews please contact Michael Torres, Media Relations, CAMH at (416)595-6015.

Ten Tips for Good Mental Health

1. **Build confidence.** Identify your abilities and weaknesses together, accept them, build on them and do the best with what you have.
2. **Eat right, keep fit.** A balanced diet, exercise and rest can help you to reduce stress and enjoy life.
3. **Make time for family and friends.** These relationships need to be nurtured; if taken for granted they will not be there to share life's joys and sorrows.
4. **Give and accept support.** Friends and family relationships thrive when they are "put to the test".
5. **Create a meaningful budget.** Financial problems cause stress. Overspending on our "wants" instead of our "needs" is often the culprit.
6. **Volunteer.** Being involved in community gives a sense of purpose and satisfaction that paid work cannot.
7. **Manage stress.** We all have stressors in our lives, but learning how to deal with them when they threaten to overwhelm us will help maintain our mental health.
8. **Find strength in numbers.** Sharing a problem with others who have had similar experiences may help you find a solution and will make you feel less isolated.
9. **Identify and deal with moods.** We all need to find safe and constructive ways to express our feelings of anger, sadness, joy and fear.
10. **Learn to be at peace with yourself.** Get to know who you are, what makes you really happy, and learn to balance what you can and cannot change about yourself.



Canadian Mental Health Association

Seniors taking higher-risk medications: CIHI study

"Barbara Farrell, a pharmacist with *Ottawa's Geriatric Day Hospital*, often gets seniors referred to her who are on multiple medications or who have had issues with certain drugs.

Although the **Beers list** is a good way of identifying potentially problematic drugs, she said, certain medications can sometimes be useful in treating conditions other than the ones they are normally prescribed for, a practice known as off-label prescribing.

"Sometimes there may be a drug that's on the list of inappropriate drugs that may in fact be an appropriate drug for a person." But Farrell said she also sees many patients who are over prescribed, taking numerous drugs on the **Beers list** that they shouldn't be on.

"It's not unusual for me to see a patient on 20 to 30 medications."

Educating seniors about the medications they take is critical in getting them to change medications, she added. "In the way the system is set up right now, physicians don't necessarily have the time." She suggested a collaboration between physicians and pharmacists — in which pharmacists offer solutions, such as tapering a dose rather than outright declaring a medication inappropriate — would be best for curbing inappropriate prescribing."

For more information go to:
<http://www.cbc.ca/health/story/2007/09/13/beers-list.html>

www.cihi.ca

The Canadian Institute for Health Information (CIHI) provides timely, accurate and comparable information. Our data and reports inform health policies, support the effective delivery of health services and raise awareness among Canadians of the factors that

(CIHI—Canadian Institute for Health Information)
 (**Beers list**—an internationally recognized list of medications identified as "potentially inappropriate")

Mental Health Library CNST Staff Picks

Book Reviews

The Drama of the Gifted Child:
The Search for the True Self
By Alice Miller

Nancy Hall reports....Don't let the fact that this great little book was originally published in German put you off. From its first appearance in 1979, this widely read and important book has undergone a number of revisions and the 1997 version, offers a wonderful translation completely revised and updated with an afterword by the author.

Swiss psychotherapist Alice Miller, who has achieved worldwide recognition for her work on trauma, investigates why so many of our most successful people are plagued by feelings of emptiness and alienation. Interweaving the life stories of sculptor Henry Moore, author Herman Hesse and filmmaker Ingmar Bergman with contemporary case studies of ordinary wives and mothers, business people and others from all walks of life who are seeking treatment for depression, Miller creates a compelling and important case for the role of childhood trauma in the development of mental illness. Reviewers have

described *The Drama of the Gifted Child* as "an unpretentious little book with an amazing impact ..." and "...full of wisdom and perception.". In the words of Alice Miller, "A book is no substitute for a good therapist. But it can perhaps make us aware of our need for therapy by putting us in touch with our suppressed or possibly even repressed feelings and thus triggering a process that may have some very salutary effects indeed." Also available in the Mental Health Resource Library is another book by Miller, *For Your Own Good: Hidden Cruelty in Child-Rearing and the Roots of Violence*. Both books offer thought provoking insight into the roots of mental illness and are great reads that can trigger not only debate and discussion but hopefully understanding and compassion.
Nancy Hall

Beyond Crazy: Journeys Through
Mental Illness
By Julia Nunes and Scott Simmie

Jim Lonie reports....This book tells it like it is. It goes beyond the realm of diagnosis and treatment. You are

able to gain an insight, even if only for a moment, into the day to day world of ordinary and famous Canadians who struggle with mental illness. People like musician Ronnie Hawkins, Actress Margot Kidder, and Olympic figure skater Elizabeth Manley. This book is a great source of encouragement and optimism. It is an excellent read.

Jim Lonie

Unclutter Your Mind, 500 Ways to
Focus on What's Important
By Donna Smallin

Cheryl McMillan reports Donna Smallin's book "*Unclutter Your Mind*" has easy solutions and quick tips for controlling stress and anxiety. You can learn how to focus your mind and discover your physical emotional and spiritual needs. This book is divided up into two sections, Clear Out and Keep Clear. Chapters include strategies for moving from a place of overload to a place of focused connectedness. I believe the overall goal of this easy read is to teach us how to create a simpler and happier life.
Cheryl McMillan

You can choose from a large selection of books and videos to meet your needs

The Mental Health Resource Library is a service of the *Community Network Support Team, Consumer/Survivor Development Project and the Family Support Initiative*. These program offices and the Adult Mental Health Resource Library are located at 1139 2nd Ave. East in Owen Sound. The library is a free service, open to the public. It houses an extensive collection of books and videos covering different aspects of mental illness.

Specific topics include:

- Schizophrenia
- Depression
- Anxiety
- Bipolar Disorder

- Borderline Personality Disorder
- Medications
- Self-Help
- Family Support
- Consumer/Survivor Issues

If you take the time to visit our offices or the library, feel free to pick up copies of the *Pivot Newsletter*, *Where to Find Help in Grey Bruce*, a quick-find reference outlining local services in our community, or our Program Brochure that describes our services.

If you would like more information about our library resources, mental health system services or other programs in our community, call us at 519-371-4551.



Mental Health Resources
this way

Community Network Support Team
1139 2nd Ave. East
Owen Sound

Career opportunity

**THE FAMILY SUPPORT INITIATIVE
requires a****Family Support Worker****FULL-TIME POSITION One Year Contract: 37.5 hours per Week**

The Family Support Initiative is funded by the Ontario Ministry of Health & Long Term Care to provide information, education and support for family members and friends of those with serious mental illness. The program also promotes self-help and networking among family members and assists them to access needed mental health services and supports. The project is sponsored by the *Community Network Support Team* and is based in Owen Sound.

We require a full-time (37.5 hours per week) Family Support Worker on a one-year contract basis to provide a range of program services for family members, including information and education about mental health topics and services; consultation and assistance in navigating the mental health system and individual and group support to cope with the mental illness of a loved one. The Worker is responsible for preparing reports and for developing promotional and educational materials. The position is available immediately and it entails extensive travel across Grey and Bruce Counties.

Qualifications:

- 3-year degree or diploma in applied health or social sciences, with content relating directly to mental health services (If there are no suitable candidates with the required academic qualifications, consideration will be given to those with lesser qualifications who have significant directly-related experience.)
- Strong interpersonal skills and ability to work effectively with family members and with professionals
- Strong group work skills
- Personal experience as a family member of a person with serious mental illness
- Knowledge of major mental illnesses and their impact on individuals and families
Experience in working with the formal and informal mental health system
- Organizational ability, maturity and a good sense of humour
- Understanding of /sensitivity to the needs of families of those with mental illness
- Advanced communication skills, including public speaking and writing skills
- Proficiency in the use of personal computers for word processing, data entry and email (Proficiency in the use of Power Point would be a definite asset.)
- Ability to accommodate a flexible work schedule (Some evening work and occasional weekend work is required.)
- This position requires a valid driver's licence and a personal vehicle for work-related travel.

Interested applicants are invited to submit detailed resumes, (Please include salary expectations.) to:

Mr. Shane Barker, Director
Community Network Support Team
1139 2nd Avenue East
Owen Sound, Ontario N4K 2J1

Application Deadline: Feb. 25, 2008

Welcome Susan!
 Intake Mental Health
 Counsellor for Wiarton

I would like to introduce Susan Goldman who has just recently joined the *North Bruce Community Mental Health Team* as an Intake Mental Health Counsellor.

Susan's office is located in Wiarton at the Professional Allied Health Building, Suite 111, next door to the GBHS-Wiarton Hospital.

Susan joins the *North Bruce Community Mental Health Team* with a wealth of knowledge, experience and credentials in many areas of mental health i.e. cognitive behaviour therapy, brief solution focused therapy methods, just to mention a few.

Susan will be providing the community with intake assessments and counseling for our clients in Wiarton and the Bruce Peninsula.

We are very happy to have Susan on our team and would like all of you to join us in welcoming her to Mental Health Grey Bruce.

*Louise Cameron, M.Ps., C.Psych. Assoc.,
 Team Leader,
 North Bruce Community
 Mental Health Team*



Ontario Student Drug Use and Health Survey (OSDUHS)

South West LHIN* Teleconference

Tuesday, January 29, 2008
2:30 pm – 4:00 pm




You will learn about:

- Results of the 2007 Ontario Student Drug Use & Health Survey
- South West Local Health Integration Network (LHIN) highlights

Facilitators

- Beth Powell, Maria Banning, Janet McAllister and Donna Beatty Program Consultants, Centre for Addiction & Mental Health (CAMH)
- Angela Book, Research Coordinator & Analyst, CAMH, will be available to answer your questions

Who should attend?

If you live in the South West LHIN area (*Middlesex, Oxford, Elgin, Perth, Huron, Grey and Bruce) and:

- ✓ work/volunteer with youth or
- ✓ are a young person interested in the survey results

Agenda:

- Overview of OSDUHS Results
- South West LHIN data
- Implications for the future

For further information about the Ontario Student Drug Use and Health survey, go to www.camh.net/Research/osdus.html

This is a free event, but requires you to register to receive the materials and teleconference information. Registrants can call in from their location of choice or if participating from the Grey Bruce area may choose to participate via group teleconference at Classroom 1, Grey Bruce Health Services, Owen Sound. Please register early, as there are limited connections available.

Please email or fax your completed registration form by January 23rd, 2008 to:
 Shelly Bassett
 519-858-5133 (fax) or shelly_bassett@camh.net

NAME: _____

AGENCY: _____

EMAIL: _____

Don't miss the 11th annual Health Fair!

Getting and staying healthy has never been so much fun!

Check out over 80 diverse and informative health exhibits, plus a chance to win door prizes!

Wait - there is more...Join in the free family skate from 10 a.m.-noon.

Admission is free!

Saturday, March 15th

10 a.m. to 3 p.m.

Bayshore Community Centre, Owen Sound

For inquiries contact Eileen Comars at: 519-372-1158.

PIVOT

The *Pivot* is published by the Community Network Support Team, **371-4551**, which operates under the umbrella of the Grey Bruce Community Health Corporation.

It is published about the 15th of the month in January, April, July and October.

Click-View and Print

You can now access the *Pivot* Newsletter and Where to Find Help in the Grey Bruce Area on-line at www.mhagb.ca under "resources".

Staff

Director - Shane Barker
Community Development Worker - Nancy Hall
Program Secretary - Joanna Depencier

Submission Deadlines

January 1
April 1
July 1
October 1

Submissions are subject to editing. Send potential submissions to cnst@gbhc.org. Opinions expressed are not necessarily those of the Grey Bruce Community Health Corporation.

Consumer/Survivor Development Project Program Update

Happy New Year and all the best for 2008! Wow, where does the time go? There are some new and exciting events scheduled for the Project in the coming months but, some things will remain the same. One of the new additions to the Project this year comes by way of staffing. As you may know, Cheryl Jackson is off on maternity leave and will be returning to us next year. In the interim, Victoria MacAleese will be filling the role of Community Development Assistant. Victoria comes to us with a background in Social Service Work, Drug and Alcohol Counseling as well as relevant personal, workshop and self-help experience. She will be an excellent addition to the Project. Please call or visit the office and help make her feel welcome!

On Thursday February 21st in collaboration with Community Connections: Housing and Support, we will again be offering the ever popular Hope and Mental Illness series. This will be a chance to share and explore with others the significance that hope plays in our

lives. We will be continuing to offer the Mental Health Resource Sessions in collaboration with Grey Bruce Health Services on the Inpatient Unit at the Owen Sound site. This occurs every Tuesday evening from 6:00 – 8:00 pm. Mood Disorders Information and Support Groups will continue to be held monthly in Owen Sound and Hanover. Coping with Mental Illness Information and Support Groups will also continue to be held in the Kincardine and Wiarton areas on a monthly basis. New workshops and a "Recovery" focused speaker are also in the works for the near future so stay tuned.

If you would like more information pertaining to any or all of these events, why not call us or drop by the Office for a visit... 1139, 2nd Avenue East, Owen Sound, 371-4582... We would be glad to meet and talk with you!

All the Best!

*Jim Lonie, Project Coordinator,
Consumer/Survivor Development Project*

Eating Disorder Awareness Week: February 3—9, 2008

We all know someone whose preoccupation with her or his physical size, shape or weight negatively impacts on his or her ability to live a rich and connected life. Vanities don't drive these preoccupations. Attempts at self-management and emotion-regulation do.

National Eating Disorder Information Centre www.nedic.ca

IF UNDELIVERABLE RETURN TO:
Community Network Support Team
1139 2nd Avenue East
Owen Sound, Ontario N4K 2J1

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