

EVIDENCE IN ACTION

CCSA annual report
2018–2019



Canadian Centre
on Substance Use
and Addiction

Evidence. Engagement. Impact.



What is evidence?

It can be academic and scientific research. It can be the insight that comes from lived experience. It shows where action is needed and which solutions work best. It guides decisions that change and save lives.

In 2018–2019, we at CCSA worked with our partners in Canada and internationally to gather and share the newest, best practices and advice on substance use to drive action where it matters for Canadians — tackling stigma, informing cannabis policy, addressing the opioid crisis, calculating the costs of substance use and more.

\$38.4 billion

Was the total cost of substance use and its consequences in Canada in 2014.

Canadian Substance Use Costs and Harms (2007–2014)



-  @CCSA.CCDUS
-  @CCSACanada | @CCDUSCanada
-  Canadian Centre on Substance Use and Addiction
-  www.ccsa.ca | www.ccdus.ca
-  Tel./Tél. : 613-235-4048

CEO's message



CCSA provides national leadership on issues of substance use and addiction. Our goal is to harness the power of evidence to generate coordinated action across Canada. Our data and analysis inform policy making at all levels of government. However, our goal is also to have our work reach beyond government policies to the people who need it most. I'm proud to say we are succeeding.

Our main concern is the health and well-being of all Canadians. Last year, we reached more people than ever before. *Talking Pot With Youth: A Cannabis Communications Guide for Youth Allies* shattered records for uptake of a CCSA product. Teachers, counsellors, coaches and parents are using the guide to set up safe environments to talk to young people. Timely and relevant evidence put into action. The communications guide was just part of a suite of reports prepared in advance of the legalization of cannabis in 2018.

CCSA is also working to provide crucial information needed by governments and by people trying to cope with the opioid crisis. Last year, our reports ranged from opioid-impaired driving to the latest on counterfeit pharmaceuticals.

There is a human as well as a financial toll from substance use. We consider the 2018 *Canadian Substance Use and Harms* study to be foundational and it will be updated as new data become available. It determined that substance use cost the Canadian economy 38.4 billion dollars in 2014. The report also mapped out how each province is affected.

In November, we put evidence about stigma into action. CCSA joined forces with the Canadian Addictions Peer Support Association for our first stigma workshop in Ottawa at the Wabano Centre for Aboriginal Health. Stigma is a huge barrier for those seeking and receiving treatment for substance use disorders. Delegates with lived and living experience shared stories that brought that evidence to life. Evidence and experience are generating interest and action across Canada. We all want those we serve to have more timely access to quality services and supports in their communities.

Our partners affirmed our importance to their work last year when CCSA and all pan-Canadian health organizations came under review. We are grateful for their support. Many of them, including those in the provincial and territorial governments, expressed their view that CCSA has an important, unique role to play.

As I look back over 2018–2019, I marvel at what the people at CCSA achieved; the lives they changed by putting their evidence into action. People here care. Their hard work and dedication inform real, constructive action on substance use.



Chair's message



It was an honour to be appointed Chair of CCSA's Board of Directors in June 2018. Over the years, I've seen the impact this organization can have. I believe that CCSA has a unique position as a meeting place for the many communities dealing with substance use issues. I've been personally involved in many of those communities through my work in the volunteer sector and in government, and particularly with youth who have substance use disorders and mental health issues.

CCSA is a critical contributor to the substance use field because of its dedication to equipping decision makers with objective, reliable evidence — and also because it creates the spaces and opportunities for government policy makers, service providers, researchers, and people with lived and living experience to share knowledge, exchange experiences and arrive at a deeper understanding of substance use and how to reduce its harms. Our Board is committed to ensuring CCSA is strategically and organizationally equipped to continue delivering that value and turning the evidence into action with our partners.

In the year to come, our Board will support CCSA in continuing its work on topical issues such as cannabis and opioids, in studying the growth of methamphetamine use, and in preparing for CCSA's Issues of Substance conference. The conference is a significant event that involves every part of this organization and is a prime example of CCSA bringing communities together — of being that place where the national perspective and dialogue on substance use gets richer and deeper, and is informed by the evidence.

As a Board, we will pursue our mission with renewed capacity. Last year, eight of the total 13 Board positions were filled. Each of our members brings unique perspective and expertise of great value to this organization, and with a full complement of directors we can engage fully in leading CCSA forward as a trusted source of knowledge when it comes to substance use in Canada.

I welcome our new members and thank all those outgoing for their contributions — especially Paula Tyler, who served as interim Chair and whose leadership has been enormously important to CCSA's success.

CCSA's insistence on informing the substance use conversation with evidence, and its eagerness to work with and learn from people with all kinds of experience — lived and living, professional and personal, scholarly and practical — has served Canadians well for more than 30 years, and I have no doubt it will continue to do so in 2019–2020.





Driving home the message that #StigmaEndsWithMe

Stigma is any attitude, belief or behaviour that discriminates against people. It often takes the form of derogatory language that shames and belittles, ultimately marginalizing people and isolating them. World Health Organization research shows hazardous alcohol and drug use disorders are among the most stigmatized conditions. Last year, CCSA partnered with the Community Addictions Peer Support Association to continue challenging the negative beliefs, attitudes and judgments that perpetuate stigma.

Changing language to change lives

WORDS MATTER! Here are some word choices we're making to strip stigma from our language:

STIGMATIZING

Addict

Reformed
drug
addict

Drug
habit

NON-STIGMATIZING

Person in
recovery

Regular
substance
use

Person
with a
substance
use disorder

High turnout. High impact.

CCSA teamed up with the Community Addictions Peer Support Association to host a pair of *Stigma Ends with Me* workshops in 2018–2019.

Who attended?

People with lived and living experience
Healthcare providers
Law enforcement representatives
Academics and other stakeholders
Minister of Health
Chief Public Health Officer

2

CITIES



261

participants in the two workshops



71%

of participants said they were interested in a

national community of practice

More than

80,000

reached through CCSA's social media

Participants reported a



48–73%

INCREASE in skills to address stigmatizing language and practices

95%

of participants identified

at least one practical action

they could take to address stigma



Calculating the costs

CCSA partnered with the Canadian Institute for Substance Use Research at the University of Victoria to publish a ground-breaking cost study, *Canadian Substance Use Costs and Harms (2007–2014)*, that sheds fresh light on the impact of substance use across the country.

In popular demand

In the first eight months after its publication, the cost study was:



Downloaded
+13,000
times



Covered by
192 media
outlets reaching
~37M people



Promoted to nearly
270,000
individuals
on social media



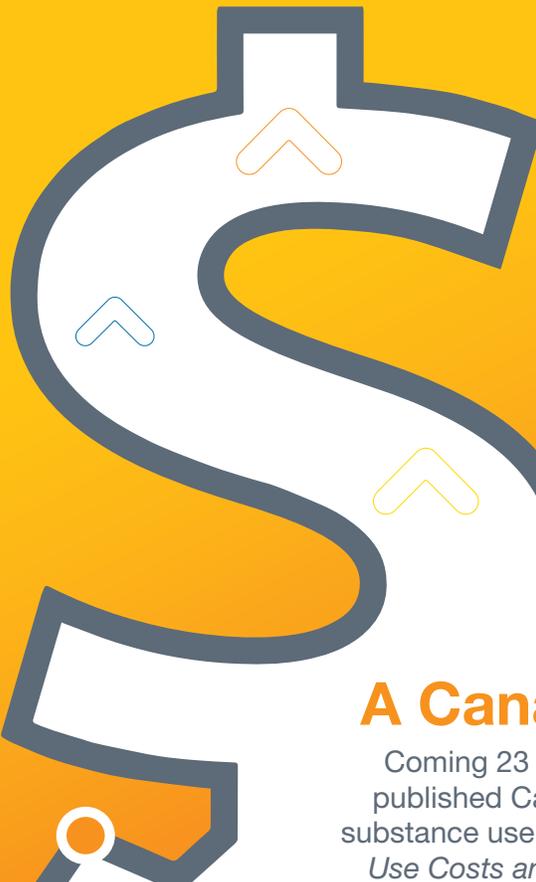
Featured in
webinars
viewed by
~350
people



Talked about in
+20 media
interviews



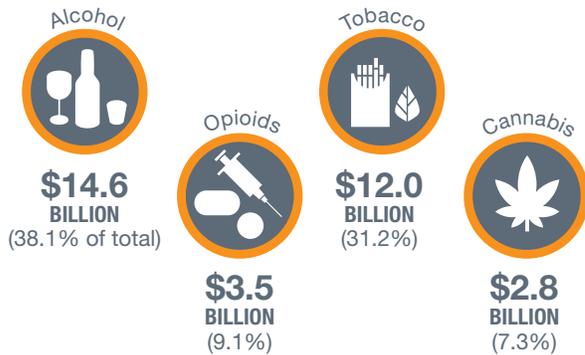
Cited in
7 peer
reviewed
publications



A Canadian first (again)

Coming 23 years after CCSA and its partners published Canada's first national cost study on substance use, the new study, *Canadian Substance Use Costs and Harms (2007–2014)*, looks at the societal costs from a wide range of perspectives.

Top substances by cost



Distribution of costs



22.2%
increase in
per-capita **opioid-related**
healthcare costs from
2007 to 2014

25.9%
increase in
per-capita **alcohol-related**
healthcare costs from
2007 to 2014

HIGHEST
per-person costs
Atlantic provinces
Saskatchewan
Alberta
The territories

LOWEST
per-person costs
Ontario
Manitoba
British Columbia



COMING SOON:
Updated study with
2017 data



An
ONLINE TOOL
based on the report lets users visualize
and customize study data to inform
future research and test policy decisions

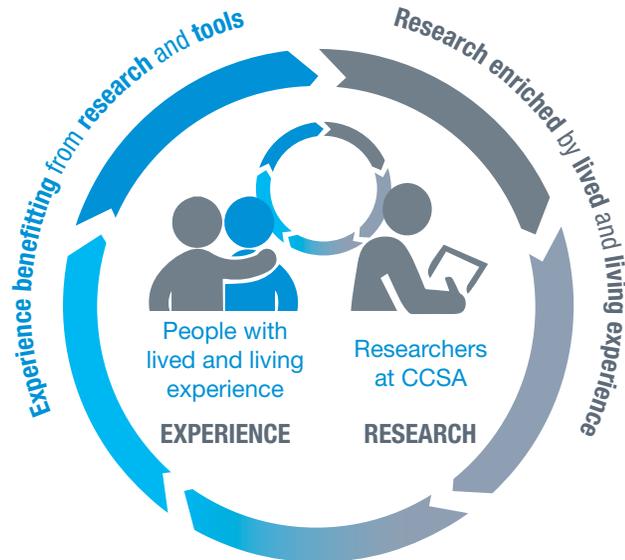


FOLLOW-UP REPORTS
were published for each
province and territory

Expanding the evidence base

Scientific research is a crucial and objective tool for understanding substance use and its impacts. But it is not the only one. CCSA continues to enrich its research with the full breadth of perspectives and experience — from the front line to the family room.

A two-way exchange



Shared experience, shared benefits

CCSA and the Community Addictions Peer Support Association formalized their ongoing collaboration last year with an agreement that, among other things, will enrich CCSA's work and see CAPSA benefit from CCSA's evaluation and measurement capacity.



University students

contributed to on-campus discussions about alcohol and binge drinking through CCSA's collaboration with the Postsecondary Education Partnership – Alcohol Harms



First responders

brought their frontline perspective to help address the opioid crisis



Youth and youth allies

shared their experiences as we developed and disseminated *Talking Pot with Youth: A Cannabis Communications Guide for Youth Allies*



Advisory groups

to be formed with people with lived and living experience of substance use



People with lived and living experience shared their knowledge by participating in **two anti-stigma workshops**

“Nothing about us without us.”



Grounding the cannabis conversation in facts

With recreational cannabis now legal in Canada, governments, frontline workers and the public need to stay informed of the latest research on cannabis consumption. CCSA continued to meet that need last year with a steady stream of evidence-based publications, presentations, guidance documents and more.

The costs of cannabis

Last year's joint CCSA–Canadian Institute for Substance Use Research substance use cost study found that in 2014 cannabis accounted for:

1.87% / \$209M

a year of substance-related
healthcare costs in Canada

\$368M

in lost productivity

Sought-after guidance

Within a week of its launch in September 2018, the *Cannabis Communication Guide for Youth Allies* became one of the most-downloaded resources ever published by CCSA — proof of demand for clear, objective information about cannabis across the country.



8,000
downloads
on Day One



28,062
downloads
from September 2018
to March 2019



20
approved
copyright requests
to tailor the guide to other purposes



CCSA presented
on cannabis at

36

events
in 2018–2019

CCSA hosted

4

cannabis-related
events
in 2018–2019

CCSA published

9

products
on cannabis and

32

cannabis-related
products
last year

CCSA co-hosted
a joint symposium
on cannabis research
with Public Safety
Canada



Reducing the harms of opioids

Canada and other countries continue to face a tragic and devastating opioid crisis. Effective interventions depend on accurate diagnosis — which hinges on high-quality evidence and clear best and emerging practices. Last year, CCSA continued to gather critically needed evidence and inform government action on effective responses.

The rising toll of opioids

The period covered by the *Canadian Substance Use Costs and Harms* study ended in 2014, before opioid overdose deaths reached crisis levels in Canada and other countries. Even so, the numbers tell a powerful story about the costs of opioid use:

2.8% / \$313.1M

of substance-related healthcare costs in Canada in 2014

\$1.83B

in lost productivity

12.4% / \$1.11B

of substance-related criminal justice costs

Part of Canada's Opioid Response Team

Last year, CCSA and Health Canada led an Opioid Response Team to advance knowledge and build on individual and collective efforts. The Team reduces harms for Canadians by coordinating the response to the opioid crisis, providing leadership for Canada's drug policy, and regulating drugs and substances.

Opioid Symposium

CCSA supported the national Opioid Symposium

in September 2018
in Toronto

Opioid Symposium

Partners

Health Canada

Globe and Mail

Centre for Addiction and
Mental Health



More than

200

policymakers, researchers,
health experts, first responders,
people with lived experience and
others attended the symposium

86%

of attendees said the symposium
helped them identify at least one
person to collaborate with

Opioid Speakers Series

U.S. embassy support

for U.S. experts to share
their experience on
opioids through CCSA
concluded last year

11

speakers

from Canada and
the U.S. shared

insights into opioid trends and best-practice strategies

for mitigating harms

Cross-Canada speaker series
shared opioid insights in

6 Canadian cities:



Edmonton



Halifax



Montreal



Toronto



Vancouver



Winnipeg



Building capacity to make evidence-based decisions

Best and emerging practices are an important kind of evidence CCSA gathers and shares to help improve the lives of people who use substances — equipping people with the knowledge to make better informed, more confident decisions.

Bringing evidence to the private sector

CCSA works with employers to inform their HR policies and responses to substance use issues in the workplace. Last year, for example, we developed and delivered a webinar to 300 national employees at Bell Canada. We also produced the first study of its kind to explore substance use policies in Canadian workplaces.

The brain science of substance use

CCSA launched an initiative last year to help service providers and policy makers understand the relationship between childhood trauma, brain development and substance use.



Based on
The Brain Story
certification program from the
Alberta Family Wellness Initiative

CCSA organized the Brain Builders Lab

A national event to develop
and strengthen:



Networks across sectors



Connections with experts



Project plans to embed Brain
Story science in the community



Informs professionals across
health care, education and
social services about how
**adverse childhood
experiences**
affect people's brains,
behaviour and health



As a result of CCSA's
promotions, more than

400

enrolled in the Brain Story
certification course and
more than
70 were certified

62

Brain Story certified
people attended the
Brain Builders Lab

As a result of the Lab,

98%

of participants increased their
knowledge and understanding
about how to apply the Brain
Story to practice



After

2 days

of project development,
participants received

2 years

of support for their projects

Year at a glance

Social Media Activity



Impressions

1,829,329



Engagements

33,981



Messages sent

3,403



Presentations

- 25** Presentations on cannabis
- 20** Presentations on substance use costs and harms
- 7** Presentations on youth and alcohol
- 4** Presentations on family physicians and billing for substance use treatment
- 4** Presentations on opioids
- 3** Presentations on decriminalization
- 8** Miscellaneous presentations

Activities in the Community

- 6** Speaker events across the country with U.S. embassy to address opioid crisis
- 6** Webinars to audiences across Canada
- 4** Briefs to Parliament
- 2** Stigma workshops with Community Addictions Peer Support Association
- 1** Two-day cannabis symposium with Public Safety Canada
- 1** Panel on edible cannabis and concentrates for members of Parliament
- 1** Two-day lab to mobilize and apply knowledge about adverse childhood experiences

Publications

- 11** Major reports with summary reports
- 6** Articles in peer-reviewed journals
- 6** New or updated policy briefs
- 5** New or updated drug or topic summaries
- 3** Articles in other periodicals
- 2** Communications toolkits
- 1** Updated report on cannabis
- 1** Joint publication on cannabis and driving
- 1** National survey on cannabis

Report of the Independent Auditor on Summary Financial Statements

To the Directors of the Canadian Centre on Substance Use and Addiction

Opinion

The summary financial statements, which comprise the summary statement of financial position as of March 31, 2019, the summary statements of operations, changes in net assets and cash flows for the year then ended, are derived from the audited financial statements of the Canadian Centre on Substance Use and Addiction for the year ended March 31, 2019.

In our opinion, the accompanying summary financial statements are a fair summary of the audited financial statements, in accordance with the Canadian accounting standards for not-for-profit organizations.

Summary Financial Statements

The summary financial statements do not contain all the disclosures required by the Canadian accounting standards for not-for-profit organizations. Reading the summary financial statements and the auditor's report thereon, therefore, is not a substitute for reading the audited financial statements and the auditor's report thereon. The summary financial statements and the audited financial statements do not reflect the effects of events that occurred subsequent to the date of our report on the audited financial statements.

The Audited Financial Statement and Our Report Thereon

We expressed an unmodified audit opinion on the audited financial statements in our report dated July 4, 2019.

Other Matter – Comparative Information Audited by a Predecessor

The summary financial statements for the year ended March 31, 2018, were prepared by another auditor who expressed an unmodified opinion on those statements on June 25, 2018.

Responsibilities of Management and Those Charged with Governance for the Summary Financial Statements

Management is responsible for the preparation of the summary financial statements in accordance with the Canadian accounting standards for not-for-profit organizations.

Auditor's Responsibility

Our responsibility is to express an opinion on whether the summary financial statements are a fair summary of the audited financial statements based on our procedures, which were conducted in accordance with Canadian Audited Standard (CAS) 810, *Engagements to Report on Summary Financial Statements*.

Raymond Chabot Brant Thornton LLP

Chartered Professional Accountants,
Licensed Public Accountants

July 4, 2019
Ottawa, Ontario

Salary Disclosure

As of March 31, 2019, CCSA had 66 full-time employees. See the auditor's report for their salary and benefits. The directors on CCSA's board are volunteers and do not receive any remuneration.

Salary Ranges	Minimum	Maximum
Level 1 (Governor in Council, Level 6)	Available on Privy Council website	
Level 2	\$91,680	\$165,308
Management	\$91,680	\$149,380
Professionals	\$67,071	\$126,060
Specialists and Technicians	\$49,450	\$78,824
Administrative Support	\$43,686	\$60,068



Summary Annual Financial Statements

Summary Statement of Financial Position As of March 31, 2019

	2019 \$	2018 \$
Assets		
Cash	1,409,997	1,051,773
Trade and other receivables	419,863	359,587
Contributions receivable	585,000	227,255
Prepaid expenses	177,458	135,326
Investments	2,292,127	2,196,403
Capital assets	255,830	375,213
	5,140,275	4,345,557
Liabilities		
Trade payables and other payables	829,466	979,564
Deferred revenues from contributions and external contracts	1,952,154	1,047,968
	2,781,620	2,027,532
Net Assets		
Invested in capital assets	255,830	375,213
Internally restricted for contingencies	901,165	901,165
Internally restricted for future projects	788,219	788,219
Unrestricted	413,441	253,428
	2,358,655	2,318,025
	5,140,275	4,345,557

Summary Statement of Operations and Changes in Net Assets Year ended March 31, 2019

	2019 \$	2018 \$
Revenues		
Health Canada primary funding contributions	8,965,997	8,279,564
External contracts	728,307	414,196
Other contributions	259,153	230,221
Conference		407,602
Other income	13,240	9,358
Net investment income	103,748	76,969
	10,070,445	9,417,910
Expenses		
Salaries and benefits	5,775,021	5,227,014
Contractor fees	1,452,000	1,768,105
Equipment maintenance and repairs	51,363	85,918
Honorariums	68,583	26,796
Rent	352,991	325,092
Equipment rental	21,102	78,559
Insurance	14,101	13,579
Travel	1,225,977	965,908
Research expenses	4,867	47,511
Printing	164,610	43,674
Advertising	58,849	30,909
Office supplies and expenses	377,406	327,405
Telecommunications	112,035	100,694
Membership fees	17,853	12,801
Professional fees	57,614	45,262
Recruitment	83,525	113,404
Amortization of tangible capital assets	142,890	142,620
Amortization of intangible capital assets	49,028	73,296
	10,029,815	9,428,547
Excess (deficiency) of revenues over expenses	40,630	(10,637)
Net assets, beginning balance	2,318,025	2,328,662
Net assets, end of year	2,358,655	2,318,025

Summary Statement of Cash Flows Year ended March 31, 2019

	2019 \$	2018 \$
Cash flows provided by (used in)		
Operating activities	469,828	453,490
Investing activities	(547,583)	316,620
Net increase in cash	(77,755)	770,110
Cash and cash equivalents, beginning of year	1,526,843	756,733
Cash and cash equivalents, end of year	1,449,088	1,526,843



Our Leadership

As of June 1, 2019

Senior Leadership Team

Rita Notarandrea

Chief Executive Officer

Rhowena Martin

Vice-President, Operations and Strategies

Glenn Brimacombe

Vice-President, Strategic Partnerships
and Priorities

Amy Porath

Director, Research

Rebecca Jesseman

Director, Policy

Bob Bissonette

Director, Finance (interim)

Darlene Pinto

Director, Human Resources

Scott Hannant

Director, Public Affairs
and Communications

Ahmer Gulzar

Director, Information Systems
and Web Services



Board of Directors

CCSA is governed by a Board of Directors consisting of a Chairperson and 12 directors whose backgrounds and experience assist CCSA in the fulfillment of its purpose. The Chairperson and up to four other directors are appointed by the Governor in Council on the recommendation of the Minister of Health. Other directors, known as Members-at-Large, are recruited from a number of sectors, including the business community, labour groups, and professional and voluntary organizations. These organizations also have a particular interest in alcohol and drug use that the Board considers appropriate. CCSA attempts to achieve national representation through its Board of Directors.



Board of Directors

Governor in Council Appointees

Curtis Clarke (Alberta)
Member of the Audit Committee
Deputy Minister of Education,
Government of Alberta

Christopher Cull (Ontario)
Member of the Nominations and
Governance Committee
Director, Producer,
Founder of Inspire by Example

Vaughan Dowie (Ontario)
Chair; Member of the Executive
Committee and the Performance
Management Committee
CEO, Pine River Institute

Renu Kapoor (Saskatchewan)
Member of the Nominations and
Governance Committee
Social Work Consultant and
Community Leader

Anne Elizabeth Lapointe (Quebec)
Member of the Audit Committee
Executive Director, Addiction Prevention
Centre and la Maison Jean Lapointe

Members-at-Large

Gary Bass (British Columbia)
Member of the Finance Committee
Retired RCMP Officer

Lesley Carberry (Yukon)
Member of the Executive Committee,
and Chair, Audit Committee
Secretary-Treasurer, Teegatha'Oh Zheh
Society Parent member,
FASD 10-Year Strategic Planning Group

Linda Dabros (Ontario)
Vice Chair; Member of the Executive
Committee and the Performance
Management Committee,
and Chair, Nominations and
Governance Committee
Former Director General,
Canadian Human Rights Commission

Deborah Dumoulin (Quebec)
Member of the Executive Committee
and Chair, Finance Committee
Financial management consultant

Daniel Hogan (Ontario)
Member of the Audit Committee
Substance Abuse Violence Prevention
Coordinator, Safe Schools Department
of Durham District School Board

Audrey McFarlane (Alberta)
Board Secretary; Member of
the Executive Committee,
the Performance Management Committee,
and the Nominations and
Governance Committee
Executive Director, Lakeland Centre for FASD

Julie Menten (British Columbia)
Member of the Finance Committee
Senior Associate, Roper Greyell LLP

Donald Nicholls (Quebec and Cree Nation)
Member of the Finance Committee
Director of Justice and Correctional Services,
Cree Nation government

Ex-Officio Members

Malcolm Brown
Deputy Minister, Public Safety Canada

Simon Kennedy
Deputy Minister, Health Canada

Rita Notarandrea
Chief Executive Officer,
Canadian Centre on Substance
Use and Addiction

Alumni Members

Dr. Louise Nadeau, Chair (Quebec)
Normand (Rusty) Beauchesne (Ontario)
Leonard Blumenthal (Alberta)
Dr. Jean-François Boivin (Quebec)
Beverley Clarke (Newfoundland)
William Deeks (Ontario)
Mike DeGagné (Ontario)
Dr. Nady el-Guebaly (Alberta)
Jean Fournier (Ontario)
Pamela Fralick (Ontario)
Heather Hodgson Schleich (Ontario)
Frances Jackson Dover (Alberta)
Dr. Harold Kalant (Ontario)
Barry V. King (Ontario)
Roger D. Landry (Quebec)
Dr. Anne M. Lavack (British Columbia)
Jacques LeCavalier (Quebec)
Leanne Lewis (Ontario)
Dr. A.J. (Bert) Liston (Ontario)
Dr. Christine Loock (British Columbia)
Barry MacKillop (Ontario)
Mark Maloney (Ontario)
Marnie Marley (British Columbia)
Michel Perron (Ontario)
Dr. Darryl Plecas (British Columbia)
Meredith Porter (Ontario)
Michael Prospero (Ontario)
Rémi Quirion (Quebec)
Pierre Sangollo (Quebec)
Jan Skirrow (British Columbia)
Dr. Sherry H. Stewart (Nova Scotia)
Margaret Thom (Northwest Territories)
Paula Tyler (Alberta)



Canadian Centre
on **Substance Use**
and **Addiction**

Evidence. Engagement. Impact.