

The Updater

Crisis Line Numbers

Wellington,
Dufferin
519-821-0140
or toll free
1-877-822-0140

+++++

Waterloo Region
519-744-1813
or toll free
1-866-366-4566

Inside this issue:

| | |
|---|-------|
| House of Friendship Addiction Services | 1 |
| CAMH | 2 |
| St. Mary's Counselling Service | 3-4 |
| Homewood Community Addiction Services (CADS) | 5 |
| The Stigma of Parenting a Child with Substance Dependency | 6-7 |
| Cognitive Distortions | 7 |
| Dear Bandit | 7-8 |
| Intensive Outpatient Program (I.O.P.) | 9 |
| Stonehenge | 10 |
| Stonehenge Therapeutic | 11 |
| Resources | 12-13 |
| Waterloo-Wellington- Dufferin Regional Crisis Update | 14 |

Welcome

This issue is an expanded version of the previous edition on *Addiction Service: What we Have and Where*. People who receive the Updater are encouraged to forward it to relevant

House of Friendship Addiction Services

Submitted by: Pam Gardiner
House of Friendship

House of Friendship is a Christian non-profit human service agency that serves 32,500 low income women, men, youth and, children in Waterloo Region annually through 17 programs.

Alcontrol

- 9 bed, residential treatment program for adult women with serious substance abuse problems.
- 24 hour staffing model.
- Structured program includes; individual counselling, group counselling, personal goal setting, relapse prevention, women's wellness, women's health issues, relationship skills group, communication skills group, family issues group, mom's in recovery group – skill building (parents only), recreation and leisure activities, exercise, community AA, NA meetings.
- Flexible length of stay, 3 –

- 12 weeks depending on individual need.
- Day program provided to local women completing program if needed.
- Aftercare group for set period of time.
- Serves women from the province of Ontario.

Moving Forward Program

- Individual counselling, support and information to pregnant women and/or women who have children under six years who are involved with alcohol or other drugs (within 48 hours of request).
- Link to medical evaluation, care and follow-up.
 - 6 week Parenting Group-Skill Building.
 - Mom's in Recovery Weekly Support Group.
 - Assistance with child care and transportation if needed to access non-residential service.
 - Substance use assessments for pregnant women in Wa-

terloo Region (Wellington Dufferin if requested).

- One residential treatment bed designated for pregnant women (Ontario).
- ### 174 King Street North Waterloo
- 10 bed residential treatment program for adult men with serious and long-standing substance abuse and other related living issues.
 - 5 bed residential supportive treatment service for adult men.
 - Self care model – staffed 7.5 hours per day, 24 hour emergency pager.
 - Flexible length of stay 5-8 months, depending on individual need.
 - Structured program includes; individual counselling, group counselling, masculinity and sexuality group, family issues group, relapse prevention group, communication skills, leisure and recreation activities, family issues, personal goal setting.



CAMH (Centre for Addiction & Mental Health)

CAMH: Our Commitments, we believe in:

- Using evidence-based knowledge and reflecting best practices in our work
- Demonstrating the outcomes and impact of our work
- Applying the principles of knowledge exchange in our community consultations, program/resource development and in our dissemination and evaluation strategies
- Working collaboratively with internal and external partners
- Serving Francophone communities
- Engaging and working with diverse and marginalized communities
- Engaging and working with consumers and their families
- Influencing the social determinants of health

Website:
www.camh.net

About the Centre for Addiction and Mental Health

The Centre for Addiction and Mental Health (CAMH) was created in 1998 through the merger of the Addiction Research Foundation, the Clarke Institute for Psychiatry, the Donwood Institute and the Queen Street Mental Health Centre.

CAMH is a teaching hospital fully affiliated with the University of Toronto and is the largest addiction and mental health facility in Canada. It operates clinical, health promotion, education, and research facilities in Toronto, including internationally recognized biological, clinical and social research.

CAMH staff throughout the province work with professionals in the field of addictions and mental health to incorporate new knowledge, training and resources into practice. CAMH realizes that knowledge exchange is a two-way process. It values the expertise and experience of provincial service providers and seeks to incorporate their expertise into the knowledge development and exchange process.

About the Policy, Education & Health Promotion Division (PEHP)- Provincial Services Department

Staff from Provincial Services work with community partners across Ontario to enhance the capacity and quality of systems and services addressing the prevention and reduction of harm associated with addiction and mental health problems.

Staff utilize knowledge generated by CAMH's partners, including its internal academic and research divisions, to increase the capacity of organizations such as LHIN's, school systems, municipalities, community action groups, media, public health units and addiction and mental health agencies on programming, planning and policy development initiatives.

Staff influence the thinking and practice behaviour of a wide array of community leaders through the provision of its expertise, resources, knowledge and skills in the areas of addictions, mental health, policy development, systems planning, evaluation consultation, community training, research, program development, health promotion, prevention, and advocacy

Provincial Services is comprised of staff working in office locations throughout the Province and are distributed across 6 LHIN-based areas: West, West Central, Central, GTA, East and the North.

Local Contact for Waterloo-Wellington:
Pat Allan, Centre For Addiction and Mental Health
pat_allan@camh.net; telephone:519-884- 8757.

The local role in Waterloo – Wellington includes:

- ◆ Network development for improved coordination of services
- ◆ Program development and dissemination, including training
- ◆ Policy Development and advocacy
- ◆ LHIN liaison
- ◆ Public Education (including anti-stigma programs)

St. Mary's Counselling Service

Description of Services

Submitted By: Coba Moolenburgh, Director
St. Mary's Counselling Service

St. Mary's Counselling Service is a community program of St. Mary's General Hospital. It provides a range of community based counselling services for individuals over 12 years of age who are concerned about their use of alcohol, other drugs or their gambling behaviour. A consultation service is available for family members to acquire information, support and referral. All services are confidential and free of charge. The Mental Health and Addictions Branch of the Ministry of Health and Long Term Care funds the service. Participant evaluation and feedback is used with all group programs to determine program effectiveness and quality improvement.

Counselling Approach

Cognitive-behavioural counselling helps clients identify conditions that "trigger" problem behaviour, and develop specific strategies to avoid these situations and change the behaviour. Gaining control over one's behaviour by initially reducing the use of a substance, or employing a harm reduction strategy, rather than im-

posing immediate abstinence, can be an appropriate strategy for some clients. The client-centered approach eliminates barriers and encourages clients to be directly involved in treatment choice and planning. Clients are encouraged to take responsibility for the change process as well as evaluating their satisfaction with the progress. Solution Focused interventions and Motivational Counselling techniques (William Miller) are employed to help clients recognize and/or move through the Stages of Change (Prochaska and DiClemente). The Problem Gambling Program additionally incorporates cognition understanding (Alex Blaszczynski) and harm reduction or cessation of problem gambling behaviour. St. Mary's Counselling Service follows evidenced based best practices and Ministry of Health and Long Term Care addiction treatment directives.

Entry Services

Inquiry Contact/ Consultation

Requests for information about programs at SMCS, or in the community, are directed to the Intake Worker. Brief telephone

consultations may be offered to professionals, family members or friends who require immediate information or assistance.

Intake and Screening

Individuals requiring service are asked to phone the Intake Worker. Speaking directly with the individual requesting service and using an ministry directed *admission criteria flow chart*, the intake worker collects information to assess the individual's immediate needs, stage of change, treatment readiness and suitability for SMCS programs and/or other community services. If suitable for SMCS services, an appointment is scheduled; otherwise, the individual is redirected to other appropriate community services. Client registration in group format is scheduled to reduce the wait for first assessment.

Information Drop In Session

(in group format) A one-hour informational session is for anyone currently waiting to access substance abuse treatment in Cambridge. It provides an overview of the services provided at St. Mary's Counselling Service. Educational material

is presented to understand facts about substance use and abuse, what to expect in counselling, and how to get started in the change process. (Offered daytime in Cambridge office only)

Client Registration

(in group format)

In this group, participants complete the ministry directed *provincial addictions assessment tools*. Attending the group is an opportunity to expedite the assessment process. An appointment to meet individually with a counsellor to conduct a comprehensive assessment, including goal setting and treatment planning, is scheduled within 10 days of the Client Registration. (Offered daytime in both Kitchener and Cambridge offices; separate group for youth, separate group for adults).

Continued on next page

St. Mary's Counselling Service

Description of Services, cont'd

Submitted By: Coba Moolenburgh, Director
St. Mary's Counselling Service

Alcohol and Drug Awareness Seminar (in group format)

This is a three hour psycho-educational group session designed for individuals who are identified to be in the precontemplative stage of change. Information on physical effects of alcohol and drugs is presented. Participants complete the Inventory of Drug-Taking Situations (IDTS), and several brief screening instruments. Scoring and interpretation guidelines are provided so the participants can identify their level of problem severity. Handouts include problem solving strategies, refusal skills, risk factors and indicators to consider change and alcohol and/or drug use. The participants are encouraged to contact the agency if they would like an individual appointment to discuss their situation in more detail. (offered in daytime in both Kitchener and Cambridge offices; separate group for youth, separate group for adults.

Initial Assessment Treatment Planning Services

The initial assessment and treatment planning services include either a brief

triage, or a comprehensive assessment depending on the severity of presenting concerns and client choice, resulting in the formation of a mutually agreed upon plan of action, including internal or external referral.

Initial Assessment (Triage) and Treatment Planning

Individuals attend a structured interview with a counsellor to complete a thorough assessment to determine problem severity, and identify personal strengths, coping skills and support systems. Standardized assessment questionnaires are used, and individual goals regarding substance use are identified. An appropriate treatment plan is developed in collaboration with the individual based on assessment results, identified goals, strengths and supports, treatment preferences and treatment availability.

Counselling Services

A number of counselling options are discussed with the client during initial assessment and treatment planning. Individual and group counselling programs are designed to assist the individual to de-

velop skills to manage substance abuse and related problems and/or maintain and enhance treatment goals. All services are offered in the Kitchener office, limited services are offered in the Cambridge satellite office.

- Individual Counselling
- Group Counselling
- Relapse Prevention Group
- Youth Treatment Group
- Aftercare Group
- Parent Group Workshop (alcohol & drug)
- Gambling Prevention Group
- Partner & Significant Other Workshop (Gambling)

St. Mary's Counselling Service values client feedback and routinely conducts customer satisfaction evaluations for group programs. Collaborative partnerships with community and provincial facilities ensure a smooth transition for referrals, with consistent treatment planning, in addition to addiction specific education and support.

Outreach - Community Awareness and Development

St. Mary's Counselling Service provides consultative services not only to individuals who call for information or advice, but also to interested professionals, groups or agencies in the community. The format may include telephone and in person consultations or presentations. Presentations may include a description of the services offered at St. Mary's Counselling Service to generate appropriate referrals and enhance working relationships with community agencies.

Educational presentations on gambling behaviours, alcohol and drug use, and interventions are conducted for professionals to increase their understanding and knowledge of addiction treatment modalities, and to assist in providing early intervention for their clients. For further information or for requests for presentations, please contact the Agency Director., 519-745-2585, ext 225.

Homewood Community Addiction Services (CADS)

Submitted By: Jenny Marino, M.A., Psych.,
Program Coordinator
Homewood Community
Addiction Services

Who We Are

As part of the Homewood Addiction Division, Homewood Community Addiction Services (CADS) provides community outpatient addiction counselling for individuals and family members struggling with addiction issues. One goal of CADS is to promote early identification of alcohol, drugs and gambling problems. CADS is client-focused and works closely with the community to provide quality programming and services.

CADS is funded through the Ontario Ministry of Health. There is no charge for services.

Overview of Services Offered—Service Area

CADS has offices in Guelph, Mount Forest, Ferris and Orangeville and services are open to all residents of Guelph/Wellington and Dufferin Counties.

Assessment & Referral

Alcohol, drug use or gambling behaviours are assessed and evaluated. Other problem areas are also identified. Following the assessment, any need for further action is discussed with

the client. Referral to appropriate treatment resources is coordinated when needed.

Counselling & Treatment

Counselling services are available on a short-term basis for individuals, family and groups focusing on the effects and responses to alcohol, drug and/or gambling problems. In addition, staff will facilitate and co-ordinate contact with community resources; maintain a supportive relationship with the individual and the family; and provide follow-up services after discharge from treatment.

Family Services

An alcohol, drug or gambling problem in a family affects every member. The Family Program offers assistance to family members and significant others who have been affected by someone's alcohol, drug or gambling problem now or in the past. Family Services include the 2 Day Family Program, Family Support Group, Young People's Family Program, Parent Support and individual counselling and support. CADS staff often

partner with other agencies (e.g. Family and Children's Services) to offer addiction-related education and support through presentations and/or group co-facilitation.

Youth Services

Counselling services are available for young people. CADS counsellors are present in all high schools for ½ day per week. Youth are offered confidential counselling and support, referral and education on addictions. Counsellors present in classrooms, at assemblies and during in-school events. Youth who have a family member dealing with issues relating to substance or gambling problems can also participate in the 2 Day Young People's Family Program. CADS staff also participate in VIP and Power of Positive Choices workshops in local elementary schools.

Community Consultation

Staff are available to consult with agency staff and teams on issues relating to substance and/or gambling problems. Presentations are designed to fit the specific and unique needs of each group. CADS staff provide case consultation where possible as well as workshops for a

with community partners to effectively streamline services and processes for clients and community members across sectors. CADS engages in structured continuous quality improvement activities including: client satisfaction questionnaires, wait list monitoring, logic model development, outcome evaluation framework development and implementation and professional development.

Group Activities

A wide variety of groups ranging from educational/informational through to insight-oriented groups are offered. Groups include:

- Gambling Education
- Pre-Contemplator Group
- Gambling Relapse Prevention
- Gambling Family Group
- Gambling Support
- Family Support
- Young People's Family Program
- Women's Support
- 2 Day Family Program
- Adult Children of Alcoholics
 - ◆ Drinkwise
 - ◆ Adult Recovery

The Stigma of Parenting a Child with Substance Dependency

Source: Patricia McIntyre, MSW, RSW
St. Mary's Counselling Service



Gandhi, who is respected for changing the perceptions of many others, once said, “You must be the change you wish to see in others” (S. Chandler, *100 Ways to Motivate Yourself: Change Your Life Forever*).

“I am hopeful that eventually more professionals will have an awakening, as experienced by G. Ramey, and challenge parental self-blame to see the strengths in family functioning.”

Patricia McIntyre

The willingness to seek support is a difficult task for parents when the concern is a son or daughter's substance dependency. In fact some parents may wait several years before accessing support. This is extremely unfortunate considering the chaos, anger, disappointment, fear, and powerlessness that family members experience when a loved one's substance dependency is exposed. Yet many parents choose not to discuss the situation with anyone including extended family members and friends. Consequently, parents do not get the benefit of emotional support and the user is spared the discomfort of exposure that may have been helpful in promoting change. Why are parents reluctant to seek support? In my opinion, parents are challenged by the stigma that is associated with a child's substance abuse. This stigma can be the result of perceptions generated by others, including family, friends, and professionals, in addition to a parent's own perception of self.

It is common knowledge that substance use is a personal choice, however when the user is an

adolescent, there is a general perception that somehow the parents are responsible. Although this perception is false, it fuels the stigma for parents associated with addiction. In 2003, *The Record*, our local newspaper, discussed the issue of perceptions by featuring an article by G. Ramey, titled “Don't blame good parents for raising bad kids”. In this article Ramey, who is an American child psychologist, stated that he was wrong to assume that troubled children come from dysfunctional families. Ramey shared his observation that some children will continue to be troubled despite living in a healthy family environment and receiving ongoing support. He also observed that the false perception of parental responsibility has led some professionals, including himself, to inadvertently encourage parents' feelings of guilt. It was refreshing to read the conclusion of Ramey's article since he apologized for his false perception and advised professionals to “lighten-up” on parents. I can only imagine how extremely difficult it must be for parents who have felt stigmatized by these perceptions, by some

professionals, and yet need to seek further “professional support” to promote their healing. When reflecting on my work experience with parents of addicted children, it is evident that they are stigmatized on more than one level. As stated earlier, parents are negatively impacted by the perception of others, but are also negatively impacted by their own self perception. Parents have often made comments that reflect a distorted perception of themselves, such as, “I tried my best to do everything right, but I guess I'm a failure as a parent”, or “I can't seem to talk to my son anymore, if I don't say anything, that's wrong; if I try to talk to him, that's wrong too; it must be my fault”. A typical comment is, “I am the only one in my family who has a child who uses drugs so I must be the problem”. I frequently hear these types of comments from parents, and try to assure them that they are not responsible for their child's decision to abuse substances.

Many of my counselling sessions begin by challenging parents' perceptions.

Continued on page 7

Cognitive Distortions

Submitted By: Jenny Marino, M.A., Psych.,
Program Coordinator
Homewood Community
Addiction Services

Cont'd from page 6

Unfortunately the phenomenon of self-blame is a powerful force and as a result, some parents feel too embarrassed to discuss their child's behaviour.

When this occurs, parents don't talk to anyone about their concerns and the addiction becomes a family secret. On a positive note, when parents gather the courage to attend a support group for addictions in the family, they express tremendous appreciation for having the opportunity to openly share their stories without the fear of being judged.

The stigma for parents, attached to substance use, abuse or addiction, will continue unless we start to make it our business to openly challenge people's perceptions about substance use.

Cognitive distortions are a common trait among problem gamblers. This notion of cognitive distortions makes treatment fascinating and distinctly different from treating substance abusers.

There are important differences between games of skill and games of chance. Problem gamblers often forget or deny that the outcome of gambling is determined largely by chance. Gamblers develop an **illusion of control**, where they overestimate their probabilities of success and/or they believe in false cause-effect links between their actions and the outcome of the game.

These false beliefs fuel their gambling behaviour; therefore, an integral part of treatment for problem gamblers involves using cognitive behavioural therapy to help identify these false beliefs and countering them with a factual statement.

*The problem gambler's **illusion of control** may be influenced by superstitious beliefs. Superstitious beliefs may be classified as talismanic, behavioral and/or cognitive.*

Talismanic—possessing certain objects will lead to a favorable outcome.

Behavioural—certain actions or behaviours can increase the probability of winning.

Cognitive—a certain state of mind can influence a winning outcome.

*The following **Dear Bandit** highlights all three of the aforementioned superstitious beliefs and behaviours.*

Dear Bandit,

I've run into some problems with playing slot machines. I don't know how this has happened. I thought I had a sure system and have won many times. Lately, I've started to lose and I don't understand what's changed. I'm doing all the same things I was doing when I was winning, but now I seem to be losing more than I'm winning. I always play the same machine, The Frog Prince, because this particular machine has been good to me. I also think this is my lucky machine because ever since I was a little girl I've loved fairytales. And get this, my son who is almost three, sleeps in this cute little frog position so I know that this is a sign that this is my lucky machine. It's hot and I'm hot when I play it (well, I was hot). I also try to arrive soon after the slots open because this is when most of my winnings have happened. I seem to win when I'm wearing my JD Fortune concert shirt and if I wipe off the machine before I play. On the drive to the casino I crank the tunes and get myself into a mellow and relaxed state. I got to be in just the right frame of mind. What has happened? Has my luck run out?

Lucky Shirt

continued on next page

Dear Lucky Shirt

“Touching the machine in a certain way or wearing your lucky shirt has NO impact on your wins or losses”

I think your luck has run out. A lot of your beliefs are based on superstition. There is also a saying that says “the more you play the more you pay.” Often gamblers follow a predictable cycle through a winning, losing, and desperation phase. You may be in the losing phase.

It’s also important to know that it makes no difference to a machine’s operation if it’s played at any particular time of the morning or night. Touching the machine in a certain way or wearing your lucky shirt has NO impact on your wins or losses. There is no “secret skill factor” or “system” that confuses or

tricks the machine into producing winning combinations. To play a slot machine is to play a game of CHANCE. Slot machines have a computer program called a Random Number Generator (RNG) that determines which symbols line up on the reels. Its sole purpose is to generate a sequence of numbers in milliseconds. Whatever number was generated the split second you pulled the handle or pushed the button (this also has no impact on the outcome) will result in the corresponding reel combinations that appear on your screen. The RNG doesn’t care what time of day you play, how

much you adore the machine, how clean you keep it, your frame of mind or whether you have your “lucky JD Fortune shirt” on.

I hope this information will help you make some healthy and informed choices about your gambling, so you don’t head towards the desperation phase. Be aware and play smart. Take heed of the wisdom from Thomas Jefferson who said, “I am a great believer in luck, and I find the harder I work, the more I have it.”

Bandit



Lucky Penny

The humble penny has always been considered lucky. Everyone has heard that finding a penny and carrying it around with you will bring good luck. Even those of you that don’t believe in luck or superstition are hard pressed to walk past a penny without thinking about the potential bad or good luck that may be bestowed on a person for picking it up or not picking it up. Luck is one of the most universal beliefs. How much does luck and/or superstition affect your life?

Intensive Outpatient Program (I.O.P.)



For more information call: 519-836-5733 x 2396 and choose option "1" for details on the I.O.P. program.

Homewood Health Centre has treated patients for addiction since the doors first opened in 1883.

The programs offered today are part of a continuum of care for addicted individuals and family members, which encompasses prevention and health promotion, harm reduction, treatment, and follow-up.

Homewood offers in-patient services for adults, 19 years and older, who suffer from chemical or behavioural addictions including specialized tracks for health care professionals, those suffering from concurrent psychiatric disorders (if psychiatrically stable), and pathological gamblers.

The Homewood Addiction Program also offers an Intensive Out-patient Program (two weeks followed by a 36 week

program of follow-up and aftercare). For community members in Guelph/Wellington/Dufferin, out-patient support and services is offered through Community Addiction Services.

Intensive Out-Patient Program - I.O.P.

This program gives people the option of getting help for an addiction problem without being hospitalized. The program includes group counselling, self-help groups, addiction education, spirituality groups, self-esteem groups, recreation activities and lectures, family education and specific therapeutic homework. The program includes attendance at Alcoholics Anonymous, Women for Sobriety, Narcotics Anonymous and/or Gamblers Anonymous (as well as other 12 step programs).

The program runs Monday through Friday for 2 weeks. Clients return home on evenings and weekends. All participants who complete the program as well as their family members are eligible for a Phase III program consisting of 36 weeks of follow-up and aftercare.

Eligibility requirements include a two week period of abstinence, an addiction assessment and medical assessment by family physicians. A pre-admission interview will be held to explain the program and evaluate suitability for the program.

As with programs across the Addiction Division, family treatment is essential for a successful outcome. Family members are encouraged to attend Family Information Nights and two-day Family Program.

Stonehenge Therapeutic Community Program Information

For more information, on Stonehenge Therapeutic Community Program, contact the Administrative Office at 519-837-1470 60 Westwood Road Guelph, ON N1H 7X3 www.stonehengeetc.com

Stonehenge Therapeutic Community was founded in 1971 as a long-term residential treatment program for men and women with a history of acute and chronic substance abuse. The agency has expanded over the years to offer a broad scope of addiction programs for a diverse client group.

- Long-term Residential Treatment for Women
- Long-term Residential Treatment for Men
- Residential Methadone Program and Out Patient Methadone Case Management Program
- Early Childhood Development Addictions Program for Pregnant and Parenting Women – including “Let’s Grow Together” Day Treatment Program
- Family Support Group
- Correctional Programs:
 - ◆ Correctional Services of Canada – 13 residential beds for male and female federal

- offenders
- ◆ Ministry of Community Safety and Correctional Services – 10 residential beds for male and female provincial offenders
- ◆ National Substance Abuse Program – referral through Correctional Service Canada, Guelph Area Parole Office

Stonehenge, a modified therapeutic community, is based on the belief that chronic addiction comes with an acquired lifestyle and that recovery requires a holistic approach with a particular emphasis on healthy life style changes. Stonehenge offers an alternative lifestyle where issues, values/beliefs and behaviors are explored and challenged in an atmosphere of support.

Self help and a community focus set the tone for all interventions in a therapeutic community. Residents, or community members, are encouraged to assist each other in every aspect of their

treatment. Professional staff function as facilitators. In the residential program, clients are encouraged to take on increased responsibility for the well being of the community as a whole as they move through the stages of treatment.

Through a thorough assessment, and possibly pre-treatment, Stonehenge ensures a good treatment fit for applicants and better prepares clients for treatment. Residential treatment (consisting of orientation, active treatment – an intense therapeutic experience, and re-entry) spans over a four to six month period, followed by up to two years of continuing care. Support to families is also offered through the monthly Family Support Group while clients are in residential treatment.

Stonehenge Therapeutic Community

Let's Grow Together

A Program for Pregnant & Parenting Women Who are Substance Involved

Submitted By: Heather Kerr
Stonehenge Therapeutic Community

Alcohol and other drug use during pregnancy is a major public health concern. Substance dependent women tend to neglect general health and prenatal care. Prenatal management is often difficult due to medical, obstetrical and emotional complications. Evidence suggests that women who use substances during pregnancy experience poorer birth outcomes. The negative consequences for babies do not stop at birth; home environments may be chaotic and often children are removed from their mother's care if substance abuse continues after birth.

The purpose of Let's Grow Together is to develop a multilevel model of treatment for substance-involved women who are pregnant and/or parenting. The services are available to women throughout the Guelph-Wellington-Dufferin Regions. Partnerships and linkages have been developed with many community agencies (including Public Health, Family and Children's Services, the Ontario Early Years Centre, FASAT and

Ontario Works) to increase the services available to these women. These partnerships focus on the provision of integrated prenatal health services, parenting education, information, childcare, nutrition and mental health services.

The new program consists of residential services, day treatment and outreach based. Stonehenge has reserved 2 beds in its Women's Residential Program to accommodate pregnant women. Referrals are received from a number of sources including Alcohol and Drug Assessment Centres, Family and Children's Services, Correctional Services and neighborhood groups.

A Day Treatment Program is also offered by Stonehenge at our Administrative/Out-patient Services site, 60 Westwood Road. The Day Program provides a range of services in one location for pregnant/parenting women and their children (0 – 6 years) including: addictions assessment and counseling, parenting education, public health

services, childcare, and consultations regarding legal, financial and housing matters. Transportation and nutrition assistance are also offered as part of this program. An Advisory Committee has been established consisting of a number of community partners. A multi-agency team delivers the program to ensure seamless service and to increase the support base available to women and their children.

Enhancing community connections is a priority of this program. The outreach program is one aspect of our community education strategy, which also includes a two-hour training for service providers entitled asking the Tough Questions: Talking with Pregnant and Parenting Women about Their Substance Use. The goal of this workshop is to increase the comfort and sensitivity of service providers when discussing substance use with clients in order to increase the likelihood of early identification and appropriate referrals for women in need of support.

For more information, on Stonehenge Therapeutic Community Program, contact the Administrative Office at 519-837-1470 60 Westwood Road Guelph, ON N1H 7X3 www.stonehengeetc.com

Resources on Addiction



HOMEWOOD
Health Centre

Homewood Community Addiction Services (CADS)

Assessment, Counselling, Follow-up, Family Program and Health Promotion.

As part of the Homewood Addiction Division, Homewood Community Addiction Services (CADS) provides community out-patient addiction counselling for individuals and families struggling with addiction issues. One of our goals at CADS is to promote early identification of alcohol, drug and gambling problems. CADS is client-focused and works closely with the community to provide quality programming and services.

CADS Can Assist you with...

- Facilitating and co-ordinating contact with community resources
- Providing counselling, treatment and support
- Providing follow-up services after discharge from treatment
- Support as a family member
- Support for youth including in-school services
- Relapse prevention
- Harm reduction
- Various educational, supportive and process oriented groups

What does it cost?

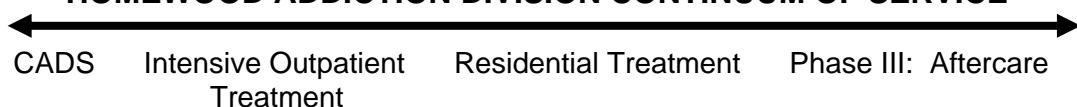
Homewood Community Addiction Services is funded by the Ontario Ministry of Health and Long-Term Care.

There is no charge for services.

Offices are in Guelph, Fergus, Orangeville and Mount Forest. For information on services in your area contact:

| | |
|--------------------------|--------------|
| CADS Guelph | 519-836-5733 |
| CADS Orangeville | 519-942-2361 |
| CADS Mount Forest | 519-323-4558 |
| CADS Fergus | 519-787-7015 |

HOMEWOOD ADDICTION DIVISION CONTINUUM OF SERVICE



Resources on Addiction



St. Mary's Counselling Service

A community program of St. Mary's General Hospital.
Funded by the Ministry of Health and Long Term Care

Kitchener Office

30 Duke Street West
Suite 600
Kitchener, Ontario
N2H 3W5
Tel: 519-745-2585
Fax: 519-745-5808
Email: smcs@smgh.ca
www.smgh.ca

Cambridge Office

51 Water Street North
Suite 201
Cambridge, Ontario
N1R 3B3
Tel: 519-621-8424
Fax: 519-621-6564
Not wheelchair accessible

Kitchener Hours of Operation:

Monday, Tuesday, Friday: 9:00am – 5:00pm
Wednesday, Thursday: 9:00am – 8:00pm
No weekend hours

Cambridge Hours of Operation:

Monday to Friday: 8:30am – 4:30pm
Limited evening hours
No weekend hours

All counselling services are:

1. No charge.
2. By appointment only.
3. Walk in requests cannot be accommodated.
4. Crisis services are not provided.

Central Referral: 519-745-2585, Ext 232



Alcontrol
215 King Street South
Waterloo, Ontario
519-745-4691

Moving Forward Program
215 King Street South
Waterloo, Ontario
519-745-4691

174 King Street North
Waterloo, Ontario
519-885-3330

Updater Newsletter Contact Info:

Editorial support for this issue was provided by Coba Moolenburgh, Director, St. Mary's Counseling Service
Phone: 519-745-2585
Fax: 519-745-5808

Karen Guse,
(Administrative Support, email distribution contact)
Regional Support Worker, Waterloo, Wellington, Dufferin Regional Crisis System
Email: kguse@cmhcgwd.on.ca
Phone: 519-821-8089, ext 236
Fax: 519-836-7459

Article submissions can be forwarded to Karen Guse at kbyars@cmhcgwd.on.ca. A call for article submission outlining the theme as determined by the PAC Facilitation group will be sent 2-3 weeks prior to the email distribution target date. Suitable material such as articles of interest, new issues, important notices, changes in service, current research initiatives, coming events/conferences, etc, will be identified and submitted to the editor(s) for inclusion. The editor(s) will edit for spelling, grammar and format but will not be ultimately responsible for content errors and will not significantly alter submissions unless otherwise notified.

**Check out:
www.crisislinks.ca**

Waterloo-Wellington-Dufferin Regional Crisis System Update

Submitted By: Joanne Martin,
Public Relations Working Group
Waterloo-Wellington-Dufferin

The Public Relations Working Group – a subgroup of the Regional Crisis Committee has continued to work on finding new and engaging ways to bring information on the mental health crisis services system to the community, police and other partners.

Currently, the committee has begun planning for the development of a training DVD that could be shown at presentations and other promotional events. It is expected that the production of the DVD would commence in the early fall.

As reported in the last issue of the Updater, the committee members are in the process of constructing a website – crisislinks.ca. The website is nearing completion and will soon include links to a variety of agencies, mental health resources and suicide prevention information along with schedules of Self-Help monthly group meetings.

The committee has developed a number of promotional and informational materials over the last few months. As noted in the last issue, the Regional Crisis Services brochure has now been distributed to a variety of locations across the region.

In April, the committee created a peer/self help resource information bookmark. These can be given to people who utilize the various mental health services in our region. The bookmark includes numbers for the Crisis Lines, family education, support, information and referral sources.