

De Novo Treatment Centre 87 Forbes Hill Dr. Huntsville ON. P1H 1R1 T: 1-800-9De-Novo www.denovo.ca

"A New Beginning"

We do recover! Addiction and Suicide Prevention in the Trades.

Presenters:

Rob Trymbulak Foreman/Supervisor Ironworkers Local 700

Aaron Sinclair RP, ICADC, CCS-AC Registered Psychotherapist Executive Director





De Novo is an <u>accredited</u> drug and alcohol treatment service operated as a partnership between management and unionized members of the Ontario Construction and Building Trades.

We serve unionized workers, employers, and their families.

'De Novo' means, a new beginning.

Governance & Accreditation



De Novo Treatment Centre is governed by a Board of Directors consisting of both Employer/ Contractor and Union Representatives. Currently, there are eighteen directors.

De Novo is fully accredited by the Canadian Centre for Accreditation (CCA). Accreditation offers an extensive third-party review process of our programs, practices, and procedures to ensure that they meet the highest standard and quality of care.



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De Novo Treatment Centre was founded by Sean O'Ryan & Mitch Griffiths - members of the United Association Local 46, Jerry Knight - member of Electrical Power Systems Construction Association (EPSCA), Hugh Laird - member of the Boilermakers Local 128 and Rudy Schrempf - member of the Mechanical Contractors Association of Toronto.

De Novo was first established in Sundridge, ON in 2002 with 21 beds. We have since outgrown this location and needed to expand. In 2018, the new Huntsville site was purchased. Now, we have 40 beds to serve both men and women – with the potential to grow.

Because of the shared vision of these individuals, along with the contributors that followed, we have been able to serve over 6000 men, women and youth affected by addiction.

We celebrate our 20th Anniversary this year.

Sundridge site



Huntsville site



Our Funding Model



De Novo is a not-for-profit, funded through its membership.

- 0.02 0.04 cents per hour worked by the member matched by the employer.
- Paid in all disciplines of the construction sector, i.e., ICI, NMA, GPA and EPSCA
- This allows the members, employers and their families to access drug and alcohol treatment services without large initial fees or wait-times.

Programs



Residential Addiction Treatment Program

- 35-day residential program.
- Utilizing the Minnesota model, Stages of Change model, Cognitive Behavioural Therapy, Harm Reduction and other proven treatment modalities.
- Our education and program content is presented in group sessions (28-33 hours per week) to enhance life-skills as well as mental, emotional, spiritual and physical health. This does not include our four-five NA/AA meetings each week.
- Individual counselling sessions with qualified clinicians.
- Though 'non-medical', access to psychiatry and medical supports.

Programs



Aftercare Program

- Weekly meetings offer ongoing support for recovery maintenance, life-skills enhancement and relapse prevention.
- Supportive phone consultations with counsellors for up to one year.
- Prior to completing the residential program,
 clients have many options available to develop a personal aftercare component.

Family Program

- Running approximately once every 5 weeks.
- Focus is on the family member, the disease of addiction, and its impact on the family unit.
- Topics include Al-Anon, self-care, healthy communication, setting boundaries, detachment, grief, and healthy support systems.

Access



Admission Process

- 1. Person seeking help is referred to De Novo, calling the Centre to complete a 20–30-minute screening with our admissions team.
- 2. Information package is provided, including the Medical Clearance certificate to be filled out and returned to De Novo outlining any medications required during treatment along with health approval for the residential program.
- 3. At some point during this process, the Union or Employer representative calls to inform De Novo that the person seeking assistance is cleared to attend De Novo. This usually means that on the union side, the member is in "good standing".

The Need for Research



- In the U.S., statistics indicate that the rate of suicide is <u>3 times the national average</u> in the construction industry (*Purdin*, 2019).
- Nearly <u>one-third of all opioid-related deaths</u> in Ontario among those employed were from the construction industry (*Public Health Ontario*, 2018).
 - This study was completed with a sample group of 2000 people from the general population.
 - Of 2000 people, 200 were employed.
 - Of 200 people employed, 75 were from the construction sector (1 in 3).

Drivers of Addiction and Suicide in the Trades

METHODOLOGY

- Pollara Strategic Insights, an independent market research company, assisted with this project. Collectively, we developed three online surveys and an interview protocol to collect qualitative and quantitative data.
- Individuals for all three target groups were recruited through convenience sampling. Our partner employers/union locals distributed the survey link.
- In-depth interviews (IDI's) were also conducted among a sample of leaders.



Members: N=1011

Leaders: N=167

Clients: N=78

IDI's: N=11



Surveys: June 11 to July 25, 2021

IDI's: July 14 to 27,

2021



This research is funded by the Ministry of Labour, Training and Skills Development Fund

Driver Number One of Five



Work Habits and Schedule 44%-49% of respondents

- Physical pain due to the kind of work involved.
- Long working hours.
- Not eating and/or living healthy.
- Working in shifts, don't have a fixed sleeping pattern, trouble falling asleep, feeling tired, low on energy.

Driver Number Two of Five



Personal Relations
45%-47% of respondents

- Staying away from home and/or family for extended periods of time.
- Living on the go, travelling a lot, staying in hotels, and not being able to spend enough time at home.
- Unable to maintain relationships.
- Feeling isolated and cut off from family and friends.
- Not having anyone to talk to, feelings of being alone or lonely.

Driver Number Three of Five



Stress, Anxiety and Depression 40%-41% of respondents

- Work related stress.
- Feeling sad, depressed, or hopeless.
- Feeling anxious, restless, or uneasy.
- Anxiety, depression and stress caused by other drivers ex. Financial, personal relations, bullying etc.

Driver Number Four of Five

- Finances
 35%-44% of respondents
 - Financial insecurity.
 - Not being able to pay bills.
 - Uncertainty about the next job, getting the next job.
 - Accepting jobs for the sake of having a job.

Driver Number Five of Five



Discrimination and Abuse

24%-26% of respondents

- Bullying by other members and/or the leaders.
- Getting abused physically, verbally, or mentally at the jobsites.
- Being of a different racial or ethnic background (being non-white), including speaking a different language and struggling to mix with colleagues.
- LGBTQ+.
- Being a woman in a male dominated industry sexual harassment.

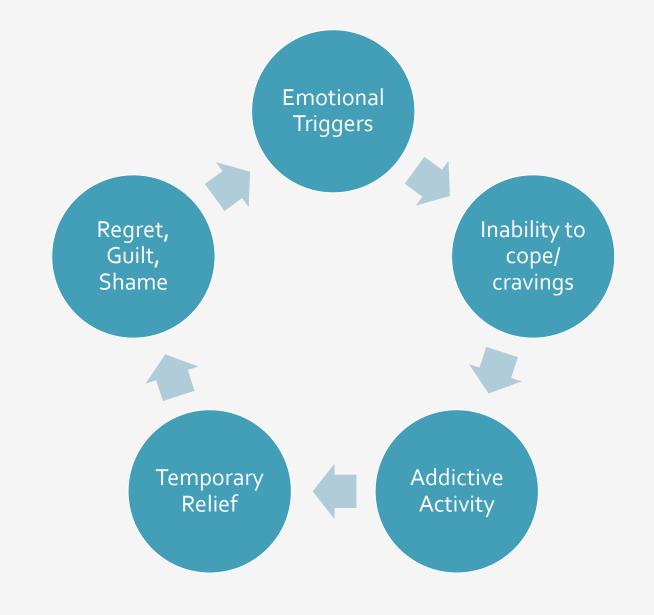
The more we know...



- **50%** of people experiencing an addiction say that being worried about what other people will think of them prevents them from seeking help. (McQuaid et al 2017).
- Stigma is a <u>major barrier</u> to wellness for those seeking and delivering treatment.
 - Self stigma
 - Social stigma
 - Structural stigma
- Reflecting on the nature of the health condition and putting the person first, will inevitably grant permission for those struggling with addiction and mental health to seek the appropriate care to return to wellness.

The Addiction & Shame Cycle





The more we know...



- Mental Health refers to a state of well-being. It includes our emotions, feelings of connection to others, our thoughts and feelings, and being able to manage life's highs and lows.
- Mental Illness refers to a wide range of mental health conditions – disorders that affect your mood, thinking, and behaviour.
- By the time Canadians reach the age of 40, 1 in 2 have – or will have had – a mental illness (Smetanin et al., 2011).
- People with a mental illness are twice as likely to have a substance use problem compared to the general population (Rush et al., 2008).

$Importance \\ of Education$



- Workplace education can help to reduce employee substance use (Meister, 2018).
 - Inform of rights, support/treatment options, build an understanding and supportive community to come back to.
- Often there are misconceptions about getting help for substance use disorder or mental health issues.
 - Fear of losing job, fear of stigma, being treated differently or ridiculed.

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"You Are No Longer Alone"

As the sole substance use treatment service to the construction and building trades of Ontario, De Novo Treatment Centre has firsthand seen the effects of the addiction and suicide crisis.

In March of 2021, De Novo set out to understand the causes and drivers of these issues within our industry. As a result, the *You Are No Longer Alone* resource hub was founded.

www.youarenolongeralone.com



You Are No Longer Alone was first inspired by members of Barrie UA Local 46, where individuals posted these words on their jobsite in support of those struggling. It represents standing up to combat addiction and mental health issues within the construction industry, where individuals struggling may often feel alone.

De Novo was inspired by their actions and wanted to help recreate this act of solidary industry wide.

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What are we doing to help?

De Novo Treatment Centre has produced a short educational film designed to inspire positive culture change.

The video includes featured individuals from the industry who are in leadership and or have their own recovery journey to share along with professionals in the field speaking to education to increase knowledge and reduce stigma.

This <u>free</u> video resource from De Novo is available to all contributing trade locals and employers, training colleges & apprenticeship programs via:

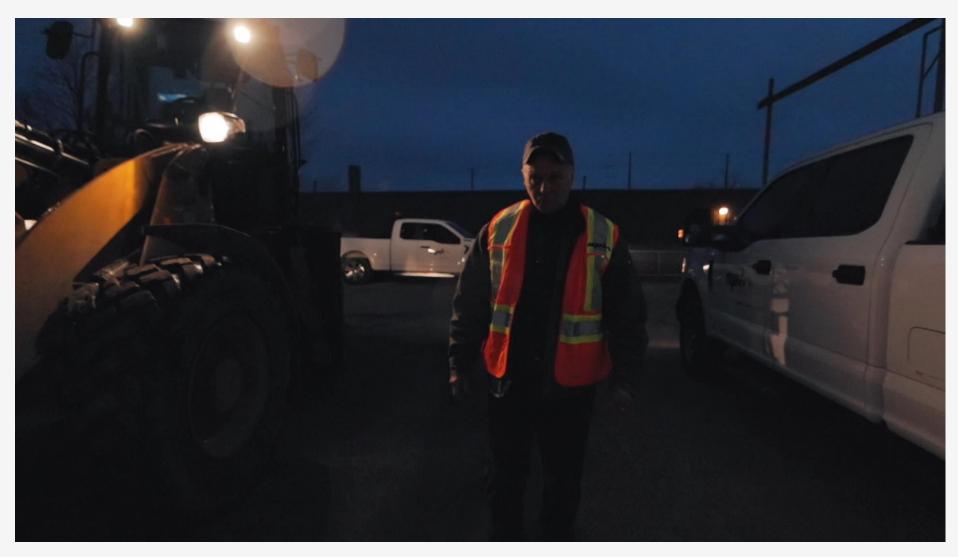
www.youarenolongeralone.com

Supporting our Trades









Supporting our Trades



Continued Research

Firstly, De Novo will research and provide comparative data between the general population and those employed in the construction industries as it relates to struggles with opiates and other substances.

Secondly, we are completing a longitudinal study to identify the unique factors that influence recovery for trades people and their families. From this data, we hope to provide additional resources to improve outcomes for our clients, employers and unions.











Thank you.

Access free resources at:

www.youarenolongeralone.com