

Serving clients who use substances

A guide for community workers

Mentoring, Education, and Clinical Tools for Addiction: Primary Care–Hospital Integration (META:PHI)

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Introduction

Working in a community setting can bring many rewards and many challenges. It can be very fulfilling to provide support to clients who really need it, which is why many of us have gotten into this field. The clients we serve are often facing difficulties of all kinds, and sometimes we need more information and knowledge in order to help them. A major difficulty that some of our clients are struggling with is substance use. This is a complicated issue that can affect all areas of a person's life, and community workers may not know what to do to help. The purpose of this booklet is to share what we have learned and provide some knowledge and tips to help community workers in all settings better serve clients who use substances.

The knowledge in this booklet comes primarily from Camille Keith, an addiction worker and educator at Women's College Hospital in Toronto. Throughout this document, Camille shares some of her experience and wisdom in text boxes like this one:

Who am I?

My name is Camille and I am an addiction worker/educator at Women's College Hospital. What a title! I am just another person like you working in the field and wanting to help those I meet. I started working in this field by accident 21 years ago, when I was bumped from neuro and geriatrics to withdrawal management services at St. Joseph's Health Centre in Toronto. I didn't know anything about addiction or what people went through in withdrawal, and I had my own ideas about what "addicts" were like. Over time, though, getting to know the clients helped me recognize that what I thought I knew was so wrong. I quickly came to learn that people with addictions are real people: they can be just as complicated, smart, educated, and loving as anybody else. These clients, like many others, have a medical issue, like diabetes – the only difference is the stigma they face when trying to get help.

After learning more about addiction, I decided to go back to school. I took a number of courses, and when the opportunity presented itself, I started doing front-line work in withdrawal management services. I then reached out in order to get more experience working with clients struggling with mental health issues. As a front-line worker, I came to see that addiction and mental health work hand in hand, making me want to do more. From there, I just took every opportunity I could to take educational workshops and certificate programs – anything that would help me help those in our care.

Why will this booklet help?

I don't think much about my "experience" – most of it has just been caring about people. I know that one of my greatest skills is being observant of my surroundings and recognizing when someone is in distress and crying out for help. Like so many of us working in this field, I approach my work with great passion and sincerity, and I will always do everything in my power to help someone who is suffering.

This booklet has everything I wanted someone to talk with me about when I first started. It's an overview of the information that I've learned along the way. I hope this booklet will be useful for service providers just entering the helping field and also as a quick reference for service providers with many years of experience.

Identifying signs of substance use

It is important to be able to recognize the signs of different types of intoxication and withdrawal so that you will know when your client needs medical attention. Use this information to assess your client if they appear unwell but you're not sure what they have taken or if they require hospitalization. This information is also available as a one-page quick-reference at the back of this booklet in Appendix B and online at <http://www.metaphi.ca>.

Alcohol

- Slows down central nervous system function and causes euphoria and decreased inhibition
- Effects: Euphoria, sedation, decreased inhibition, unpredictable mood, slurred speech, nausea, difficulty walking
 - Refer to medical care if client can't stay awake
- Withdrawal symptoms: Tremors, sweating, nausea, disorientation, hallucinations, seizures
 - Refer clients in alcohol withdrawal to medical care

Cannabis

- Psychoactive plant that can be smoked, vaporized, eaten, or used as an oil
- Effects: Euphoria, increased appetite, drowsiness, anxiety, increased heart rate, panic, paranoia
 - Refer to medical care if client is delusional (may need antipsychotics) or if they are experiencing a panic attack
- Withdrawal symptoms: Anxiety, strong cravings, depression, irritability, chills, sweating, nausea

Opiates

- Powerful painkillers that cause relaxation and euphoria
- Examples:
 - Codeine
 - Morphine (M, Miss Emma, morpho, dreamer)
 - Hydromorphone (Dilaudid, dust dillies, D, juice)
 - Hydrocodone (Vicodin, vikes, hydros, vicos)
 - Oxycodone (oxy, OX, OC, hillbilly heroin)
 - Heroin (smack, H, brown sugar, junk, skag, horse, black tar)
 - Fentanyl (apache, China white, China girl, poison, TNT, dance fever, greenies)
 - Carfentanil
 - Desomorphine (krokodil, crocodile, Russian magic)
 - Kratom* (ketum, thang, thom, biak, kakuam)
- Effects: Warm flushing, euphoria, sedation, slow breathing, dry mouth, heavy extremities
 - Call 911 immediately (and give naloxone if available) if client shows signs of overdose: Limp, having trouble staying awake, having trouble breathing, snoring or gurgling, choking noises, has blue lips or fingernails, has tiny pupils
 - **Do not touch client** if you suspect a fentanyl or carfentanil overdose
- Withdrawal symptoms: Strong cravings, insomnia, irritability, anxiety, agitation, diarrhea, sweating, nausea, muscle/joint pain, runny nose, racing heart
 - Some clients may be interested in trying buprenorphine, which relieves opiate withdrawal symptoms and can be used as a long-term treatment
 - Hot baths can ease some of the discomfort of opiate withdrawal
 - Clients are at high risk for overdose after going through withdrawal because they have lost tolerance

*Kratom has properties of both opiates and stimulants: Lower doses cause stimulant effects, and higher doses cause opiate effects.

Stimulants

- Increase central nervous system activity
- Examples:
 - Cocaine (coke, blow, powder, dust, bump, snow)
 - Crack (rock, candy, base, ball)
 - Methamphetamine (crystal, crystal meth, meth, ice, crank, glass, chalk)
 - Psychoactive bath salts (brand names often used: Ivory Wave, Cloud Nine, Vanilla Wave, Flakka, White Dove, Blue Silk, Lunar Wave, etc.)
- Effects: Wakefulness, euphoria, decreased appetite, aggression, rapid heart rate, elevated body temperature, agitation, paranoia, delusions, hallucinations
 - Refer to medical care if client is very agitated (may need benzodiazepines), delusional (may need antipsychotics), or hyperventilating and experiencing severe sweating and convulsions (may indicate an overdose)
- Withdrawal symptoms: Severe depression, strong cravings, paranoia, anxiety, fatigue, sleep disturbances, suicidality, itching
 - Refer to medical care if client is very anxious, fearful, or worried that people are trying to kill them

Sedative-hypnotics

- Slow the function of the central nervous system
- Examples:
 - GHB (G, liquid X, liquid ecstasy, Georgia home boy, scoops, gamma-OH)
 - Benzodiazepines (benzos, candy, downers, tranks)
 - Diazepam (Valium, V, jellies, vallies)
 - Lorazepam (Ativan, control, silence)
 - Alprazolam (Xanax, xanies, zanies, handlebars, bars)
 - Flunitrazepam (Rohypnol, roofies, date rape drug, roach, rope, forget-me pill)
 - Clonazepam (Klonopin, K pen, K pin)
 - Methaqualone (Quaaludes, ludes, quads, quay, sopors)

- Effects: Euphoria, sedation, slow breathing, sweating, slow heart rate
 - Refer to medical care if client is delirious, twitching, confused, having trouble breathing, or can't be woken up
- Withdrawal symptoms: Anxiety, sweating, headaches, dizziness, panic, nausea, insomnia, hallucinations, seizures
 - Refer to medical care if client is very confused or delirious, or if they experience seizures
 - If client has been using benzodiazepines daily for a while and suddenly stops, refer to medical care even if they are not yet showing any signs of withdrawal

Hallucinogens

- Alter sensory perceptions and cause changes in thoughts and feelings
- Examples:
 - LSD (acid, lucy, paper, tab, ticket)
 - Dextromethorphan (DMT, Dimitri, businessman's trip)
 - MDMA (ecstasy, E, X, molly, love drug)
 - Psilocybin (mushrooms, shrooms, magic mushrooms)
 - Ketamine (K, special K, super C, green, cat valium)
 - Mescaline (peyote, mesc, cactus, moon, buttons)
 - Phencyclidine (PCP, angel dust, dust, peace pills, ozone, embalming fluid)
- Effects: Euphoria, hallucinations, dizziness, anxiety, sweating, nausea
 - Refer to medical care if client is very agitated or aggressive, or if they experience seizures
- Withdrawal symptoms: Cravings, anxiety, depression, sweating

Providing wellness and comfort

It could be me

From the time I started working in this field, I have always said “It could be me.” I like to treat those in our care how I would like to be treated. I remind myself that the tables could always be turned – I could be the one asking for help. If it were me, how would I want to be treated?

While serving those in our care, we need to remember that individuals may have a number of issues that they are dealing with: Just being there speaking to you may be hard for them, let alone talking about their substance use. So when you support someone in your care, remember that the tables could always be turned. Instead of just asking the question you need answered, take a moment to give them comfort, offer them a drink of water, give them a chance to ask you questions, and see what they may need to help them in this journey they have embarked on.

What you can do

Here are some tips on how to connect with and offer support to clients:

- Keep people hydrated – offer them water or juice.
- Offer thiamine on intake – it helps with memory and other cognitive functions.
- Have blankets on hand for clients who are cold.
- Try to keep a small “quiet space” for people who are struggling with overstimulation.
- Provide basic toiletries.
- Check in regularly.
- Ask clients about their mood.
- Give clients your undivided attention.
- Look for non-verbal signs of how clients are feeling.
- Be truthful – it’s okay to say you don’t know the answer to a question.
- Use your team for support – you don’t need to handle everything on your own.
- Smile! Many people who have sought help for their substance use have experienced stigma. Receiving warmth and understanding from you can go a long way in helping them feel supported.

Talking about trauma

Trauma occurs when someone is in a frightening situation that is out of their control and overwhelms their ability to cope. These experiences can affect people so profoundly that they are left with feelings of fear and helplessness that may impact the rest of their life. Many clients who use substances have a personal history of trauma; substance use is a very common way of coping with the intense and overwhelming emotions that trauma can cause. Healing from trauma takes a long time, and is most successful with the help of an experienced trauma therapist. Community services are generally not the right setting for doing in-depth trauma work with clients; however, we should practice **trauma-informed care** with everyone who comes through our doors.

Here are the principles of trauma-informed care:

Acknowledgment	Listen to their story. Don't get too in-depth, but make sure the client feels seen and heard. Acknowledge the impact that their experience has had on them (e.g., "That sounds really difficult").
Trust	Be honest about what you can and can't do for the client. Be consistent about boundaries so that the client knows what to expect.
Collaboration	Emphasize the client's choice and control . Work with the client to come up with plans for dealing with triggers.
Compassion	Don't ask "What's wrong with you?" but "What happened to you?"
Strength-based	Draw them back to their tools : <ul style="list-style-type: none">• What have you learned?• What has worked in the past?• What have you done for yourself?
Safety	Make sure your space promotes physical safety (good lighting, comfortable environment). Focus on how the client feels in the moment . Refer clients to trauma therapy (e.g., trauma-focused cognitive behavioural therapy, Seeking Safety) when you can.

Harm reduction

The purpose of harm reduction methods is to reduce the negative effects of substance use without necessarily reducing the substance use itself. It can be difficult to watch clients continue to take substances that are harmful to them, but for clients who are not able to stop their substance use, encouraging harm reduction is a good way to keep people engaged with you while helping them to minimize the negative impacts of substance use.

My journey

I must be honest and say that, years ago, if you asked me about harm reduction, I would have said that I don't agree with it, that it's all or nothing. However, during my years in the field, I have learned that clients can reduce the impact of their substance use on their lives in many different ways. We must recognize that not everyone can (or wishes to) just stop using, but with support and understanding, we can help each individual meet their own goals for their substance use. This can lead to a client cutting the substance out of their life altogether, if we are open to meeting them on their own terms.

I used to think that harm reduction meant that I would have to give someone a drink and watch them become intoxicated and then help them go through withdrawal. But now I know that harm reduction can look very different from one individual to another. Anti-craving medications such as buprenorphine, methadone, nabilone, or naltrexone can change lives. It is very important that we not put barriers in place for those in our care. We say we like to meet the client where they're at – this has to mean putting a plan in place that helps the client feel like they have been heard. Even when we suspect that a client's plan may not work, we have to allow the individual to realize that on their own. It is very good to educate ourselves and our clients about what resources and supports are available to help someone have a better life, whatever that means for them.

Methods of harm reduction

Harm reduction can look different for different people. Here are some ways of reducing substance-related harms that you can discuss with your clients:

- **Not using drugs alone (especially opiates):** Using with a buddy means one of you can call for help if the other overdoses.
- **Carrying naloxone:** Naloxone temporarily reverses an opiate overdose, giving you some time to get help.
- **Getting immunized:** This reduces the chance of infection.
- **Using clean/sterile works:** This also reduces the chance of infection.
- **Not buying from unknown sources:** This reduces the chance of getting a contaminated supply.
- **Not using more than one substance at a time:** If you use two similar substances (e.g., two depressants, like opiates and alcohol) together, harmful effects are increased.
- **Using safer delivery routes:** Injecting carries the greatest risk – using other methods reduces that risk.
- **Using test doses:** This helps you determine how potent your supply is and keeps you from taking more than you intended to.
- **Not driving while intoxicated:** Driving while intoxicated greatly increases the chances of a car accident.
- **Visiting a supervised injection site:** Supervised injection sites provide clean works and nurse supervision.
- **Avoiding non-palatable alcohol (like rubbing alcohol, hand sanitizer, mouthwash, etc.):** These alcohols are toxic and can make you very sick.
- **Reducing consumption by any degree:** Using less can reduce the chance of short-term harms.
- **Using a medication for addiction, like buprenorphine, methadone, naltrexone, or acamprosate:** These medications can help many people reduce or stop their consumption by eliminating cravings.

Talking to clients about harm reduction

- Avoid judgment! Don't put your expectations of what recovery looks like on the client.
- Answer client questions as fully and honestly as you can.
- Ask clients what their harm reduction goals are (as opposed to their goals for substance use, like abstinence, reduced use, or continued use) and help them come up with a plan that meets those goals.
 - Talk about ways to make sure they can meet their goals.
 - Discuss backup plans, alternatives, etc.
 - Work with them on their harm reduction goals even if you don't agree with their substance use goals.
- If clients don't know what their goals are, mention the strategies above and help them prioritize.
- Acknowledge/celebrate successful efforts to reduce substance-related harms.
- If clients aren't able to meet their goals for harm reduction, problem-solve with them and help them come up with a new plan.
- Be welcoming and provide encouragement.

Addiction medications

Many people with alcohol or opioid use disorders find that taking medications to help overcome their cravings makes it easier for them to not use their substance of choice. These medications are not **cures** for substance use disorders, but **tools** that clients can use, alongside other tools like counselling or 12-step groups, to help them in their recovery. Each of the following medications must be prescribed by a physician or nurse practitioner.

Naltrexone

- Reduces cravings and pleasurable effects of drinking
- Client does not have to be abstinent before starting
- Possible side effects: Nausea, headache, dizziness, insomnia, anxiety, drowsiness
- Should not be taken if client is pregnant or takes opioids (will cause severe opioid withdrawal)

Acamprosate

- Relieves subacute withdrawal symptoms (like insomnia, depression, and cravings)
- Best if client has been abstinent for several days before starting
- Possible side effects: Diarrhea
- Should not be taken if client is pregnant or has kidney problems

Gabapentin

- Relieves withdrawal symptoms and subacute withdrawal symptoms
- Possible side effects: Dizziness, sedation, loss of coordination, nervousness
- Risk of intoxication (clients may feel high)
- In rare cases, can cause suicidal thoughts

Topiramate

- Reduces pleasurable effects of drinking
- Client does not have to be abstinent before starting
- Possible side effects: Sedation, neurological effects (such as speech problems)
- May cause glaucoma or kidney stones
- Should not be taken if client is underweight (may cause additional weight loss)

Buprenorphine

- Partial opiate that relieves opiate withdrawal symptoms for full 24 hours
- Often combined with naloxone (to discourage people from injecting)
- Does not cause high
- Safer than methadone (very low risk of overdose)
- Possible side effects: Nausea, constipation, sedation
- Client should avoid taking other sedatives (like alcohol or benzodiazepines)

Methadone

- Relieves opiate withdrawal symptoms for full 24 hours
- Appropriate dose does not cause high
- Possible side effects: Nausea, constipation, sedation
- Risk of intoxication and/or overdose
 - When first starting on methadone, people have to take **observed doses**
 - As they become more stable, they begin to receive doses to take at home
- Client should avoid taking other sedatives (like alcohol or benzodiazepines) while on methadone

Self-care

People who are intoxicated are not in full control of what they say and do, and people who are in withdrawal are likely to be feeling angry or irritable due to their physical and/or psychological discomfort. For these reasons, clients who use substances may express hostility towards you. Even though workers are trained not to take it personally when a client says or does something abusive, sometimes you can't help being hurt by a client's words or actions. It is also a sad fact that sometimes people you have worked with relapse, get very sick, or even die. It is extra important for caregivers to be able to give themselves care. After dealing with a difficult situation, take a moment to ground yourself.

Encouragement

Getting into this field may not be what you expected. When you see the same client over and over again, not getting better, you may feel that you are not helping anyone, or you may even ask yourself what the point is. Don't be discouraged. What I have done is treat each intake as a new one. Listen, I know that it's not always easy, especially when you have been abused, put down, or even hurt. I know that when we have seen a client 287 times, treating their intake as the first admission can be very difficult. But try it – pretend you don't know them, ask them questions, have a conversation. **This could be the time that they're ready to make a change** – whether it's the first time you've seen them or the 288th time. Change is possible – you won't know if you don't give them a chance. A few days ago, I got an e-mail from an addiction worker asking for a meeting. I knew I recognized their name, but I didn't know from where. When I met with them, I was very excited to see that it was someone that I had worked with as a client; they are now working in the field as part of our team. It was so encouraging to hear how supported they had felt and that they now wanted to give back what was given to them. When someone who has been in your care returns to show you how well they are doing and how far they have come, you realize that you really can make a difference in someone's life.

Affirmations

Affirmations can be a good way to bring yourself into the present and consciously express some positivity to yourself. Here are some affirmations you might find helpful:

"I will not take this home with me."

"I allow myself to feel the hurt, but I don't need to hold onto it."

"I strive to be compassionate and understanding."

"I am whole."

"I release any negative thoughts I'm holding onto."

Add any other affirmations that make you feel safe, calm, and positive.

Resources

Community workers are in a great position to talk to clients who are interested in reducing or stopping their substance use. Here are a few resources that might be helpful in these discussions.

Treatment programs

There are many options in Ontario for people interested in participating in substance use disorder treatment. Programs may be residential or outpatient; medical, psychosocial, or both; religious or secular; focused on abstinence or on harm reduction; gender-specific or not; and so on. The choice of program depends on the client's needs, goals, and preferences. There is a list of treatment programs in the appendix of this document; you may wish to go through these programs with your client to find appropriate options.

RAAM clinics

Rapid access addiction medicine (RAAM) clinics are drop-in medical services for people seeking help for addictions. They provide the following services:

- Brief, time-limited counselling
- Anti-craving medications for alcohol use disorder
- Opioid substitution therapy with buprenorphine or methadone
- Take-home naloxone kits for people who use opioids, or knowledge on where to get them locally, anonymously, and at no cost
- Harm reduction advice
- Strategies for reducing substance use
- Relief of mild to moderate withdrawal from some substances
- Community and residential program referrals
- Referral to recovery programs and groups
- Management of anxiety and mood disorders that may be contributing to substance use
- Connections to primary care

Please feel free to refer any clients who are interested in talking with a doctor or nurse about their problematic substance use. Clients who would **most benefit** from the RAAM clinic include:

- Clients who use opioids, even if they aren't interested in buprenorphine or methadone
- Clients in **mild** or **moderate** alcohol withdrawal (clients in **severe** withdrawal should be sent to the emergency department)
- Clients who are open to discussing anti-alcohol medications
- Clients who struggle with their benzodiazepine use
- Clients who use other substances and would like to get connected with community programs
- Clients whose substance use has caused medical or psychiatric problems, such as liver disease or paranoia

META:PHI

The Mentoring, Education, and Clinical Tools for Addiction: Primary Care–Hospital Integration (META:PHI) project is a province-wide initiative to support care providers who work with people who use substances. The META:PHI website, <http://www.metaphi.ca>, has a collection of tools and resources that may be useful for you or your clients.

Ontario Residential Treatment Centres







This is a compilation of Ontario residential treatment centres. Treatment centre entries are organized based on shortest to longest length of stay (LOS) and alphabetically.

Descriptions were written by the programs; some minor edits have been made to ensure brevity. The information in this list is up to date as of the time of writing, and every effort has been made to ensure that programs are accurately described. If any of the information presented here is not correct, please contact sarah.clarke@wchospital.ca.

As referral and admission criteria, waitlists, fees, and accommodation arrangements may be subject to change, META:PHI recommends that centres be contacted directly to ensure that they meet your client's needs.

Please note: META:PHI neither recommends or endorses any of the treatment facilities on this list and is providing this information strictly as a resource.

Legend

	Smoking is allowed
	No smoking
	Youth-specific program and/or beds available
	Ministry of Health–subsidized beds available
	Fee-for-service beds available; private insurance benefits may be accepted
	Accessible to non-cisgendered clients

Treatment centres for men and women

New Port Centre



260 Sugarloaf Street, Port Colborne ON, L3K 2N7

t: 905-378-4647 ext. 32500, f: 905-834-3002, e: NewPortAdmin@niagarahealth.on.ca

LOS: 18 days
Accepted medications: methadone, buprenorphine
Assessment: ADAT/GAIN required; application form

Treatment program focusing on addiction recovery through stabilization, education, skill development, health promotion and aftercare planning.

Additional information: On admission day, please have your daily suboxone dose/methadone drink before you arrive. Your prescription should be dated to begin the day after admission and to end on the last day of treatment. Methadone script must be faxed to Boggio Pharmacy prior to admission date (t: 905-834-3514, f: 905-834-6252).

Westover Treatment Centre



2 Victoria Road South, Thamesville ON, NOP 2K0

t: 519-692-5110 ext. 2, f: 519-692-3138, e: homeoffice@westover-fdn.org

LOS: 19 days
Accepted medications: buprenorphine (case by case, at this time)
Assessment: ADAT/GAIN required

The program blends cognitive behavioural models, group therapy, and the 12-step curriculum. We examine personal values and teach disciplined lifestyle habits that will be essential to your recovery success. We will help you prepare a plan for a substance-free lifestyle. The program model includes: relapse prevention, education sessions, peer counselling, 12 Steps, individual counselling, mindfulness therapy, meditation, and smoking cessation.

Additional information: An aftercare program is offered in Oakville. Participation in these sessions is highly recommended for continued support, self-care, and maintaining sobriety. Meetings are held Wednesdays @ 6:30pm for 26 weeks- 1476 Speers Road. Oakville ON, L6L 2X6.

Bellwood \$

175 Brentcliffe Road, Toronto ON, M4G 0C5; t: 416-495-0926, f: 416-495-7943

LOS:	21 to 84 days
Accepted medications:	all medications accepted
Assessment:	application form required

This oasis of calm in the heart of Toronto gives clients a chance to heal – to take a break from their lives, gain some perspective, and begin to put in place plans and practise the skills that will be essential to their recoveries. Our primary goal is to restore hope in our clients' lives. Our committed and compassionate staff take incredible pride in their work, in the process of helping our clients set the foundations for healthier, happier, and more meaningful lives.

Additional information: 6-month to 1-year waitlist for OHIP-subsidized beds.

Brentwood Recovery Home

2335 Dougall Avenue, Windsor ON, N8X 1S9; t: 519-253-2441 ext. 106, f: 519-258-2095

LOS:	21 days to 3 months
Accepted medications:	contact facility to confirm
Assessment:	no assessment required

Highly structured program consisting of daily meetings, one-on-ones, intensive group therapy, and individual counseling. After completion of 21 days, the clients are re-assessed to determine whether they should stay for our long-term program or continue with our follow-up program. If a client chooses to leave after 21 days, they are not granted the status of Alumnus or Graduate. After completion of the 90 day long-term program, the client is considered an Alumnus of Brentwood and encouraged to continue to attend meetings and groups regularly. The person who graduates has the full use of meetings, social activities, and counseling, as well as youth and spouse support.

Holmes House Treatment Centre

394 West Street, Simcoe ON, N3Y 1T9

t: 519-428-1911, f: 519-428-7756, e: cbancarz@ngh.on.ca

LOS:	21 days
Accepted medications:	methadone, buprenorphine
Assessment:	ADAT/GAIN required

Structured program designed to involve clients in their recovery. Treatment includes the bio/psycho/social effects of chemical dependency, self-esteem, competencies, anger/resentment & coping skills, dealing with shame and guilt, the impact of biases and prejudices, dealing with family violence, healthy relationships, communication skills, boundaries, finding motivation, concurrent disorders, dealing with PAWS, 12 Step support, grief/loss, stress, relapse prevention, spirituality, and mindfulness. Clients are required to attend three 12 Step meetings per week.

North Bay Regional Health

50 College Drive, P.O. Box 2500, North Bay ON, P1B 5A4; t: 705-474-8600, f: 705-476-6240

LOS:	21 days
Accepted medications:	methadone, buprenorphine
Assessment:	ADAT/GAIN required; application form

The program provides individual and group assessments and treatment for persons with substance abuse issues. Program participants attend sessions during the day and remain in the building. It is open to anyone, aged 16 and over with addiction issues.

Additional information: Genders are separated into two houses.

Renascent House \$

Sullivan Centre, 90 Colston Avenue, Brooklin ON, L1M 1C1; t: 416-927-7649 (men)
Punanai Centre, 54 Madison Avenue, Toronto ON, M5R 2S4; t: 416-927-7649 (men)
Munro Centre, 356 Dundas Street West, Toronto ON, M5T 1G5; t: 416-927-7649 (women)

LOS:	21 days
Accepted Medications:	contact facility to confirm
Assessment:	assessment conducted face to face with physician

Intensive addiction treatment programming; group and individual counselling, relapse prevention and psycho-education using a 12-step program foundation and utilizing supplementary educational materials with a 12-step program framework. Orientation and introduction to programs such as Alcoholics Anonymous (AA) and Narcotics Anonymous (NA).

Sister Margaret Smith

301 Lillie Street North, Thunder Bay ON, P7C 0A6
t: 807-684-5100/1-866-346-0463, f: 807-622-1779

LOS:	24 days
Accepted medications:	methadone, buprenorphine
Assessment:	ADAT/GAIN required

Residential and non-residential services for the treatment of addictions, including drug and alcohol, gambling and eating disorders, among others. The residential program is divided into 15 beds for females, 15 beds for males and 10 beds for youth, including children as young as 13 years. The residential programs and non-residential programs have separate entrances to protect the privacy of each. Non-residential programs include private and group therapy rooms, gymnasium, spiritual room, crafts room and administration.

Camillus Centre

9 Oakland Boulevard, Elliot Lake ON, P5A 2T1; t: 705-848-2129 ext. 312, f: 705-461-8599

LOS: 26 days
Accepted medications: buprenorphine
Assessment: ADAT/GAIN required

Chemical Dependency Program Overview: daily journal entries, step-work assignments (Steps 1-5), morning meditation, art therapy, group therapy, daily exercise and free time, life story, videos and group discussion, outside AA meetings, in house after care (Thursdays).

Lecture topics: medical consultant topic series (smoking cessation, anxiety, depression, etc.), boundaries and sexuality, how AA works, feelings/attitudes/behaviors, steps and traditions, shame and guilt, relapse prevention, acceptance/forgiveness, and the deadly deceptive D's (disease, denial, detour, delay).

Additional information: Individuals on buprenorphine must be on a stable dose for 3 months or longer.

Benbowopka Treatment Centre

144 Causley St, Blind River ON, P0R 1B0; t: 705-356-1681/1-877-356-1681, f: 705-356-1684

LOS: 28 days
Accepted medications: buprenorphine
Assessment: application form required

Structured treatment program using a harm-reduction model and emphasizing cultural teachings as a means to addressing addiction issues. 24-hour support is provided. A 7-day clean time required.

Enaahtig Healing Lodge



4184 Vasey Road, Victoria Harbour ON, L0K 2A0; t: 705-534-3724, f: 705-534-4991

LOS: 28 days
Accepted medications: buprenorphine
Assessment: application form required

Persons affected by Concurrent Disorders (addiction and a number of different mental health challenges at the same time. Program includes: family consultation, counseling and psychotherapy, community clinical consultation, frontline worker peer support, intensive and non-intensive case management, community capacity building, training, service system liaison and networking, screening and assessment, comprehensive assessments, care planning and referral.

Additional information: Individuals on buprenorphine must obtain their own prescription for the length of treatment - 28 days - as there is no physician on-site.

Jubilee Centre



140 Jubilee Avenue West, Timmins ON, P4N 4M9; t: 705-268-2666, f: 705-267-6882

www.jubileecentre.ca

LOS: 28 days
Accepted medications: contact facility to confirm
Assessment: ADAT/GAIN required

This is an intensive program which addresses Addiction & Concurrent Disorders. Housing and support in a therapeutic community environment, designed for (but not exclusively) hard-to-treat populations with a history of severe and persistent co-occurring addiction and mental health problems. Through a holistic approach, client progress is intensely monitored and services include individual & group counseling, educational sessions, interactive workshops, peer support, life skills training and discharge planning/preparation for reintegration to home and family, school/work/life, and/or referral to longer-term treatment and rehabilitation.

Migisi Alcohol & Drug Treatment Centre

38 Rat Portage Reserve, Kenora ON, P9N 3X7; t: 807-548-5959/1-888-223-2284, f: 807-548-2084
e: migisitreatmentcentre@bellnet.ca

LOS: 28 days
Accepted medications: methadone, buprenorphine
Assessment: no assessment required; application and medical package

14-day residential program facility with offered to men & women seeking assistance in dealing with their alcohol and/or drug dependence. We offer the following: alcohol and drug education, case management, crisis intervention, individual and group counseling, follow-up after care, life skills and personal development teachings, individual treatment planning, recreational therapy, traditional spiritual and cultural healing practices.

Additional information: Kenora District, Treaty #3 Area; Clients must have 1-2 weeks of medication with them and a physician needs to order methadone or buprenorphine for treatment days.

Mino Ayaa Ta Win Healing Centre

Fire #1107 Highway 11 – Watten Township, Fort Frances ON; t: 807-274-7373, f: 807-274-9941
Intake Coordinator: Nakita Morrisseau (nmorriseau@fftahs.com); 807-271-0194

LOS: 28 days
Accepted medications: buprenorphine
Assessment: ADAT/GAIN required; application and medical package

Guided by the Anishinaabe Seven Grandfather Teachings, the main focus is to provide holistic support for individuals struggling with substance use. Treatment cycles run quarterly throughout the year. The admissions process includes completing a detailed admissions package. Potential clients can fill this out on their own or with community member/family assistance. Once completed and suitability is ensured, a client will be given their next upcoming treatment date. Admissions package, FAQ, Pre-admissions Checklist, Consent to Release/Obtain and Medical form can be found at www.fftahs.com or on Facebook and can be emailed/faxed as needed.

Additional information: Gender-specific treatment cycles are also available.

Rainbow Lodge – Ngwaagan Gamig Recovery Centre



56 Pitawanakwat Street, Wikwemikong ON, P0P 2J0; t: 705-859-2324, f: 705-859-2325

LOS: 30 days
Accepted medications: methadone, buprenorphine
Assessment: no assessment required; application and medical package

Addictions Treatment utilizing a Cognitive Behavioral Therapy (CBT) approach integrated within the foundation of the Seven Grandfather teachings. Co-ed and cultural ceremonies daily. Anyone who identifies as Aboriginal is welcomed.

Sagashtawao Healing Lodge



100 Quarry Road, P.O. Box 99, Moosonee, ON; t: 705-336-3450; f: 705-336-3452

LOS: 30 days
Accepted medications: buprenorphine
Assessment: ADAT/GAIN required; application and medical package

Sagashtawao Healing Lodge is a residential treatment program for First Nation adults and families who are challenged with drug and/or alcohol addiction. Sagashtawao Healing Lodge maintains a philosophy that every person has within themselves inner strength, and positive qualities, which will enhance their well-being.

The treatment program offers the following: assessment and treatment planning, individual and group counselling, a nutrition program, recreational programming, health services, community education and resources, aftercare planning and follow up.

Trafalgar \$

Trafalgar – West, 5483 Trafalgar Road North, Erin ON; t: 1-855-972-9760

Trafalgar – East, 5316 Rice Lake Scenic Drive, Rice Lake ON; t: 1-855-972-9760

LOS:	30 to 45 days
Accepted medications:	contact facility to confirm
Assessment:	no assessment required

We operate 3 addiction treatment centres. Each of our centres offer their own distinct treatment programs and pricing in order to facilitate different levels of treatment intensity. Core to all treatment programs at Trafalgar Addiction Treatment Centres is treating the underlying mental health issues fuelling the addiction. All our centres adhere to our guiding principle of providing an effective, holistic and client-centred treatment protocol. Upon determining your needs we will help you choose the most suitable Trafalgar facility and treatment program.

Additional information: Gender-specific treatment can be provided.

Dilico Residential Treatment

200 Anemki Place, Fort William First Nation ON, P7J 1L6

t: 807-623-7963/1-855-623-8511, f: 807-623-2810/1-855-626-7999

LOS:	35 days
Accepted medications:	buprenorphine
Assessment:	ADAT/GAIN required; application and medical package

Healing is assisted through multidisciplinary treatment within a safe, semi-rural environment on Fort William First Nation. Therapeutic community principles of peer support, cooperation, open communication and shared rehabilitative goals are taught. The ARTC features a spiritual room modeled after a sweat lodge. Participation in regular traditional healing practices is encouraged. Programs and services offered and delivered through ARTC include: intake, assessment, group and individual counselling, cultural teachings, aftercare planning, and post-treatment care.

Edgewood \$

39 Pleasant Boulevard, 3rd floor, Toronto ON, M4T 1K2

t: 647-798-5501/1-800-387-6198 (Toronto)/613-748-7000 (Ottawa), f: 647-748-1932

LOS:	35 days
Accepted medications:	methadone (30 ml max.), buprenorphine
Assessment:	no assessment required

Addiction can be treated effectively, and your personalized journey to recovery begins minutes from the heart of downtown Toronto. As our patient's first point of contact in dealing with addiction, Edgewood Health Network Toronto provides a comprehensive outpatient program, one-on-one counselling, as well as group and family therapy. Our program is tailored to the individual because no two patients are entirely alike. Whatever your needs are, we can – and will – meet them, and help you on your journey to recovery. Edgewood can also link patients to any of their other inpatient and outpatient programs – call for more details.

Homewood \$

148 Delhi Street, Guelph ON, N1E 6K9; t: 1-877-290-3317

LOS:	35 days
Accepted medications:	methadone (30 ml max.), buprenorphine
Assessment:	no assessment required

The program treats psychiatric and addiction conditions including: trauma/PTSD, severe depression, anxiety disorders including OCD, substance and behavioural addictions (gambling, sexual, gaming, internet), ADHD and personality disorders. Homewood's team includes 24/7 nursing staff, psychologists, social workers, occupational therapists, addiction counsellors and recreation therapists.

Additional information: *Waitlist is approximately 1 year for OHIP-subsidized beds.*

Native Horizons Treatment Centre



130 New Credit Road, Hagersville ON, N0A 1H0

t: 905-768-5144/1-877-330-8467, f: 905-768-5564

LOS:	42 days
Accepted medications:	buprenorphine
Assessment:	ADAT/GAIN required; application form

For many First Nation communities and individuals, trauma is a common factor of substance use/abuse. Native Horizons strives to provide holistic programming to assist clients in their endeavors towards wellness and health. Program components include orientation, self-assessment, self-awareness, psycho-education; identification of life traumas and patterns; expressing emotions; understanding relapse; after-care and planning for recovery. Interventions used include individual care planning, individual and group education sessions, individual and group counselling, experiential learning exercises, psycho-dramatic bodywork, Reality Therapy/Control Theory, Cultural Teachings and ceremonies, recreation, arts, crafts, physical exercise, and outside resource presentations.

Canadian Centre for Addictions



175 Dorset Street West, Port Hope ON, L1A 1G4; t: 905-800-1171/1-855-499-9446

LOS:	45 days
Accepted medications:	contact facility to confirm
Assessment:	no assessment required

Inpatient rehab is for people who are *ready and serious* to recover from addiction to drugs or addiction to alcohol or any other substances. Assessment and stabilization, recovery and aftercare provided. Initial detox can be managed under medical supervision onsite. Rehab consists of round-the-clock care, 24/7.

Crisis Response Services Kenora

Rainy River District

P.O. Box 3003, Dryden ON, P8N 2Z6; t: 807-223-1418, f: 807-223-4594

LOS: 56 days
Accepted medications: methadone, buprenorphine
Assessment: ADAT/GAIN required

Responds to individuals in the community and provides short-term crisis accommodation in the District as needed. Utilizes the least intrusive, most effective intervention to provide immediate support, information and referrals. Facilitates problem-solving to assist in the alleviation of a mental health crisis and develop an intervention plan with individuals in crisis that meets their needs and mobilizes their strengths, averting hospitalization and contact with police.

Alwood Treatment Centre



1986 Scotch Corners Road, Carleton Place ON, K7C 3P1
t: 613-257-2813, e: admin@12steptreatmentcentres.com

LOS: 4 months
Accepted medications: methadone, buprenorphine
Assessment: GAIN required

The program utilizes a strengths-based, non-judgmental approach respecting diversity. Our mission is to assist youth with issues in achieving their goal of abstinence and developing a healthy lifestyle. Our program is designed to: prepare youth to return to the community as healthy substance free individuals by assisting them in developing a recovery plan that includes appropriate coping skills, self-esteem building, life management training and reduction of high risk behaviors, and promoting healthy family lifestyles and relationships by assisting families in dealing with the impact of the substance abuse.

North Bay Recovery Home



393 Oak Street West, North Bay ON, P1B 2T2

t: 705-472-2873, f: 705-472-6442, e: nbrh@nbrh.org

LOS:	4 months
Accepted medications:	methadone, buprenorphine
Assessment:	ADAT/GAIN required; application form

A structured, therapeutic, live-in program that addresses the core issues that cause substance use and addiction and identifies ways to overcome them. The program is a well-rounded, immersive experience that is based on individual needs and circumstances. It will help clients understand themselves, identify and overcome emotional and psychological challenges, and provide a structured, proven, caring and supportive environment to reinforce a healthier life while maintaining a holistic balance.

Additional information: Genders are separated into two houses – one house per gender.

Stonehenge Therapeutic Community



60 Westwood Road, Guelph ON, N1H 7X3; t: 519-837-1470, f: 519-837-3232

LOS:	4.5 to 6 months
Accepted medications:	methadone, buprenorphine
Assessment:	ADAT/GAIN required

Phase 1 (Orientation - 2 weeks): Allows both staff and the new resident the opportunity to determine “program fit”. New residents are paired with a supportive peer to guide and support them through the program. No outside communication with family or friends is allowed so that the resident can focus on integration into the program. *Phase 2 (Active treatment - 3-4 months):* This phase includes individual and group therapy, workforce therapy, leisure & learning activities, art therapy, life skills, emotions management as well as outings in the community. Program duration depends on addressing the specific needs of each resident. *Phase 3 (Re-entry 4-6 weeks):* Residents focus on rebuilding connections and prepare for transition back to their home community. This can involve searches for employment, housing, and/or education. Building recovery supports, developing community connections, and relapse prevention are integral components of this phase.

Caritas \$

241 Hanlan Road, Woodbridge ON, L4L 3R7; t: 416-748-9988/1-800-201-8138; f: 416-748-7341
e: help@caritas.ca

LOS: 1 year
Accepted medications: contact facility to confirm
Assessment: medical required

Our Residential Therapeutic Community provides a structured, family environment in which honesty, trust and respect are key. Caritas believes that addiction and other major life problems must be interpreted within a multidimensional (Bio-Psycho-Socio- Spiritual) framework. The Caritas Therapeutic Community addresses your life in its entirety: your living body (biomedical), the thinking and feeling part (psychological), social skills (or lack thereof), and your spiritual needs.

Additional information: Fee is \$1000.00 per month.

Pine River Institute \$

180 Dundas Street West, Suite 1410, Toronto ON, M5G 1Z8; www.pineriverinstitute.com

LOS: 12 to 14 months
Accepted medications: contact facility to confirm
Assessment: online screener; application required

The only treatment center of its kind in Canada. Our program encompasses four seamless phases that support a youth's and family's gradual development, allowing time to *learn, practice and mature*. Our students progress through the phases as they are ready. There is no set length of stay (the average is 12-14 months), and each family's needs are unique. We offer continuous intake and operate 365 days a year, 24 hours per day.

Additional information: \$15,440.00 for private bed and \$2650.00 for Ministry of Health subsidized bed. Bursary Assistance Program offered for eligible participants. Waitlist is 15 months for male youth and 12 months for female youth.

Teen Challenge \$

Lambeth Box 777, London ON, N6P 1R6 (Ontario Men's Centre)

t: 519-652-0777/1-877-343-1022 x.1, f: 1-844-652-0384

P.O. Box 20012, Sault Ste Marie ON, P6A 6W3 (Ontario North Men's Centre)

t: 705-942-7771/1-877-343-1022 x.1, f: 1-844-652-0384

P.O. Box 100, Stn Main, Aurora ON, L4G 3H1 (Ontario Women's Centre)

t: 905-727-3913/1-877-343-1022 x. 2, f: 1-844-652-0384

LOS:	12 months
Accepted medications:	contact facility to confirm
Assessment:	application form required

The 12-month Teen Challenge Program is divided into 3 Phases, each 4 months long: *Induction Phase* is the initial 4 months of the Program, wherein you will stabilize physically, physiologically, and mentally to a new structure, discipline, routine, and environment. Included will be the creation of an Addictions Treatment Plan in the Addictions Counselling weekly sessions, introduction to basic Christian concepts, and working through basic personal disciplines. *Training Phase* is the next 4 months of the Program, with continuing emphasis on the execution of the Treatment Plan, a deepening understanding of the Bible and of the spiritual personal journey. You will start to engage in Teen Challenge community leadership opportunities, outreach, personal testimony, and further growth and maturity. *Transition Phase* is the final 4 months of the Program. Your focus will be leadership skills development, exit strategy, relapse prevention, strengthening family relationships, and a mature Christian spiritual life.

Additional information: \$100.00 application fee and \$1000.00 non-refundable entry fee.

Treatment centres for men

Belleville Treatment Centre

142 Foster Avenue, Belleville ON, K8N 3P9; t: 613-962-7838, f: 613-962-8388

LOS:	21 days
Accepted medications:	buprenorphine
Assessment:	ADAT/GAIN required

A 21-day, abstinence-based program for adult men based on a cognitive behavioural model and harm reduction. Daily group sessions on topics such as goal setting, communication, assertiveness, and harm reduction, as well as, weekly individual counselling. Residents are expected to participate in daily chores, exercises and evening activities. The facility has 16 beds. Not particularly suitable for youth (e.g., under 21 years of age).

Sobriety House

90 First Avenue, Ottawa ON, K1S 2G4; t: 613-233-0828, f: 613-233-1472
e: sobrietyhouseottawa@gmail.com

LOS:	28 days
Accepted medications:	contact facility to confirm
Assessment:	ADAT/GAIN required

Many of the problems arising from substance abuse are interpersonal in nature. Group therapy provides a realistic yet “safe” setting for the acquisition or refinement of interpersonal skills. There are a number of features associated with group therapy that promote healing cognitive and behavioural changes. Counsellors point out that they, the client, are not alone suffering with this disease, they are encouraged to develop an empathetic understanding of others, to use this understanding to develop healthy social behaviours, and practise these behaviours in a safe and supportive environment.

St. Michael's Homes

277 Rusholme Road, Toronto ON, M6H 2Y9; t: 1-855-505-5045; f: 647-493-2432

LOS:	30 days to 3 months
Accepted medications:	methadone, buprenorphine
Assessment:	none required

Highly-structured, residential treatment designed to equip clients with the tools they need to make sense of the effects of problematic substance use or dependence and its resulting behaviors, emotional impacts, and ambivalences.

Therapeutic modalities: cognitive behavioral therapy, psycho-educational programing, experiential learning, meditation, group therapy, grounding techniques, and spiritual development.

The Extended Residential Treatment program is designed to acknowledge that individuals also experience various forms of mental illness and unresolved trauma. The Program focuses on client complexity and developing techniques and strategies for seeking safety and self-soothing around life-trauma.

Additional information: Individuals must attend pre-engagement meetings to maintain name on waitlist on Thursday mornings (a weekly call in can be arranged for out of town clients).

Hope Place Centre \$

8173 Trafalgar Road, Hornby ON, L0P 1E0

t: 905-878-1120/1-877-761-6357, f: 905-878-1269, e: admissions@hopeplacecentres.org

LOS: 42 to 84 days
Accepted medications: methadone, buprenorphine
Assessment: ADAT/GAIN required

Using an evidence-based and gender-responsive curriculum that is trauma-informed, this holistic 42 to 84-day program provides an 'abstinence-based' approach to recovery. A rural home-like setting offers the safety, serenity and support individuals need to begin their healing journey. Our uniquely qualified and dedicated professional staff team – many of whom are also in recovery - deliver comprehensive services, which recognize individuals' needs, situations and experiences. A physician, specializing in addiction and mental health visits every week to tend to the complex health needs of our 'live in' program participants.

Additional information: Valid OHIP card required. Five beds are reserved for those with extended healthcare benefits or private-pay for a no-wait admission. A program fee is payable upon admission by all participants to offset costs for specialized program materials and activities.

Harbour Light – Kingston

562 Princess Street, Kingston ON, K7L 1C7; t: 613-546-2333, f: 613-546-4699

e: info@kingstonharbourlight.org

LOS: 2 to 3 months
Accepted medications: contact facility to confirm
Assessment: ADAT/GAIN required

The Chemical Dependency Treatment is an 18 bed, 90 day residential program for adult males. The Program is abstinence based; Christian influenced, twelve-step holistic treatment philosophy. The Program consists of the following activities: individual counselling, group, counselling, negotiated treatment plan development, spiritual growth, medical referrals, medication monitoring, case management, and discharge planning.

Wayside House of Hamilton

15 Charlton Ave. W, Hamilton ON, L8P 2B8

t: 905-528-8969, f: 905-528-7057, e: waysidehouse.info@gmail.com; www.waysidehouse.ca

LOS:	2 to 3 months
Accepted medications:	methadone, buprenorphine
Assessment:	ADAT/GAIN required; application form required

Wayside House of Hamilton is a residential addiction treatment program for adult males. Our programs are specifically designed to address the needs of men who have identified an issue with alcohol and drug use. Program components meet best practice and are as follows: orientation, formulation of treatment plan, introduction to self-help supports including AA, NA & CA, educational sessions, process groups, life skills, social development and one-to-one counselling. Clients will complete a comprehensive relapse prevention program, put into action a discharge plan and be given supports to reintegrate into the community. Clients can also access two years of supportive aftercare, weekly support groups and maintain a relationship with the program for ongoing support.

Monarch Recovery Services

402 & 396 Brady Street, Sudbury ON, P3B 2P6;

t: 705-674-4193 x.3224/1-877-431-6713 x.3224, f: 705-671-8069

LOS:	60 to 180 days
Accepted medications:	methadone, buprenorphine
Assessment:	ADAT/GAIN and medical form required

Monarch Men's Treatment Centre offers a 60 day Residential treatment program for men aged 16 years and older. The men must have a desire to attend a treatment centre, which requires them to be abstinent while they are with us. We provide a structured, psycho-educational, holistic approach.

Brock Cottage

58 Wall Street, Brockville ON, K6V 4S1; t: 613-342-6415, f: 613-498-1376

LOS:	3 months to 1 year
Accepted medications:	contact facility to confirm
Assessment:	ADAT/GAIN required

Structured group sessions on bio-psycho-social/spiritual recovery and relapse prevention skills development. Standardized residential treatment materials delivered in group format. Build peer supports, access mutual aid supports. Daily routine includes house duties. Link with other needed supports and individual counselling. Focus on therapeutic environment, communications skills and life skills development.

Downsview Dells

1651 Sheppard Avenue, Toronto ON, M3M 2X4; t: 416-392-5452, f: 416-392-5455

LOS:	3 to 5 months
Accepted medications:	contact facility to confirm
Assessment:	no assessment required; in-person interview

A safe, abstinence-focused, short term living environment. Must attend a suitable Outpatient Addiction Day Treatment Program (example: Toronto East Health Network - Day Program or Humber River Hospital Day Program). Daily onsite workshops/groups to support ongoing recovery. First 7 days you must remain in the house - no access to outings or walks. Case Management for clients: developing individualized service plans through a housing first approach, and referrals to relevant external agencies and additional supportive services.

G&B House



509 9th Avenue East, Owen Sound ON, N4K 3E2; t: 519-376-9495 x.1, f: 519-376-3972

LOS:	3 to 6 months
Accepted medications:	contact facility to confirm
Assessment:	ADAT/GAIN required

G & B House is a 15 bed Residential Supportive Treatment Service for men, 16 years of age and over with severe and often chronic addiction issues that have not been met by less intrusive community treatment approaches. For clients with a trauma history, G & B House can refer clients to the local hospital for trauma informed counselling which can extend a client's stay for up to 6 months. Program incorporates the 12-Step Program.

Additional information: Over-the-phone intake interview for clients on buprenorphine.

Halton Recovery House



8173 Trafalgar Road, Hornby ON, L0P 1E0; t: 905-878-1120, f: 905-878-1269

LOS:	3 months
Accepted medications:	contact facility to confirm
Assessment:	ADAT/GAIN required

Using an evidence-based and gender-responsive curriculum that is trauma-informed, this holistic program provides an 'abstinence-based' approach to recovery; in a rural home-like setting, which offers the safety, serenity and support men need to begin their healing journey. Our uniquely qualified and dedicated professional staff team – many of whom are also in recovery, deliver comprehensive services, which recognize men's individual needs, situations and experiences. A physician, specializing in addiction and mental health visits on-site every week to tend to the often complex health needs of our 'live in' program participants.

Harbour Light –Toronto



160 Jarvis Street, Toronto ON, M5B 2E1; t: 416-572-2691 x. 2503

LOS: 3 months
Accepted medications: methadone, buprenorphine
Assessment: no assessment required

Concurrent Disorder Treatment (e.g. depression, anxiety, bipolar disorder, personality disorders, schizophrenia). Strengths-based, trauma-informed approach to recovery. Located in the downtown core of Toronto.

Treatment Modalities: Cognitive Behavioral Therapy, Community Reinforcement Approach, Motivational Interviewing.

Program Components: Psycho-educational groups, therapeutic groups, individual groups, life skills classes, structured relapse prevention, first stage trauma treatment, discharge planning, nicotine replacement therapy, spiritual care and chaplaincy, medical care (nurse and visiting doctor), in house AA, CA, NA and Double Recovery Meetings.

Serenity House Treatment Centre



103 Leopolds Drive, Ottawa ON, K1V 7E2; t: 613-733-3574, f: 613-733-1639

LOS: 3 months
Accepted medications: methadone, buprenorphine
Assessment: GAIN assessment required

All aspects of the person's needs are considered, including psychological, physical, social and spiritual. This holds true, no matter what the complex needs of those who come to Serenity House: psychiatric disorders, homelessness, cultural- specific issues, educational restrictions, financial and health challenges, pharmacological complications and trauma.

Program includes: anger management, emotion regulation, men in recovery, changing self-defeating thoughts and behaviors, self-sabotage, assertive refusal skills, managing persistent psychological problems, working with family belief systems, and more. *Call to be placed on waitlist, intake done every month and a half.

Additional information: Only one client on methadone or buprenorphine at a time. Call to be placed on waitlist – intake done every month and a half. Fees \$50 per day.

Seven South Street Treatment Centre

7 South Street, Orillia ON, L3V 3T1; t: 705-325-3566, f: 705-325-9355

LOS:	3 months
Accepted medications:	contact facility to confirm
Assessment:	ADAT/GAIN required; in-person interview

Phase 1 is the educational component and includes groups on such topics as: cross addiction, how to get the most out of group therapy, men's issues in recovery, communication, developing 12-step support, and an introduction to the first four steps of the 12-step program. The client completes a life history and maintains a daily journal. By the end of this phase each client is expected to have achieved specific goals. The objective of *Phase 2* is to dismantle denial, gain personal insights into character defects, to challenge irrational thinking and begin the healing process necessary for recovery. Goals consist of achieving honesty, adherence to the recovery plan, and to learn to self-monitor thoughts through rational emotive therapy techniques. Managing feelings of guilt and shame, depression, anxiety and worry, developing problem solving skills, and engaging in group therapy is a part of this phase. A six-part anger/emotion management program is included during this phase. *Phase 3* prepares for a successful reintegration into the community including employment, school, stable social relationships, relapse prevention and post release adjustment. We assist the client by preparing a reasonable long-term recovery and discharge plan. One-on-one counseling is offered during the entire program. ** 4 NA/AA meetings a week is mandatory.

Vita Nova

6299 Rutherford Road, Woodbridge ON, L4L 1A7; t: 905-850-3690, f: 905-850-3835

LOS: 3 months
Accepted medications: contact facility to confirm
Assessment: GAIN completed on-site

Provides assessment, counselling, group therapy, family counselling, anger management, and crisis intervention. Provides a day program for both men and women, and residential treatment for men. Program offers: art therapy, yoga, acupuncture, after care, family support, and outpatient support. Languages: English, Italian, Polish, Portuguese, Spanish.

Additional information: Methadone and buprenorphine accepted for outpatient program only.

Ottawa Booth Centre – Anchorage

175 George Street, Ottawa ON, K1N 5W5; t: 613-241-1573 x.302, f: 613-241-6863

LOS: 4 months
Accepted medications: buprenorphine
Assessment: ADAT/GAIN required; application form required

The Anchorage Addiction Recovery Program is a 24-bed facility that offers rehabilitation to men recovering from drug and alcohol addiction. The Anchorage program is abstinence-based and involves daily attendance to chapel services and group therapy programs designed to help residents identify and work through core issues related to drug or alcohol use.

Programming consists of: SMART recovery and weekly goal setting, relapse prevention, treatment modalities, emotional health, trauma and resilience, anger management, recreation activities, process groups, weekend planning. With your counsellor, you may work together to identify core issues related to your substance use, including: self-esteem, relationship issues, trauma, family history, and mental health.

Ka-Na-Chi-Hih



1700 Dease Street, Thunder Bay ON, P7C 5H4

t: 1-888-863-1560/807-623-5577, f: 807-623-5588, e: dmay@kanachihih.ca

LOS:	4 months to 2 years
Accepted medications:	contact facility to confirm
Assessment:	ADAT/GAIN required; application form required

A 12 bed long-term treatment program for chronic solvent abusers; in which a client may stay in our program for a minimum of 6 months and up to two years. Chronic solvent abusers are defined as those who have been abusing solvents daily, at least for a period of one year and which this use is affecting their life socially, physically, emotionally and spiritually. The program serves First Nation Male Youth between the ages of 16 to 25, from across Canada. Our programming is holistic in nature and we use traditional as well as contemporary models of treatment to help our clients deal with their habitual use of solvents.

Quintin Warner House



477 Queens Avenue, London ON, N6B 1Y3; t: 519-434-8041, f: 519-434-1669

LOS:	4 months
Accepted medications:	methadone, buprenorphine
Assessment:	ADAT/GAIN required; application form required

The program includes intensive group therapy. Other aspects of healthy living are promoted in sessions which deal with assertiveness, life skills, goal setting, spiritual awareness, and recreational activity. Program also focuses on sexual trauma/inner child. To help make a successful transition back into the community following the four-month residential program, clients may stay for up to one year, if necessary, in one of the Quintin Warner annexes. During that time, clients may be referred to resources for further education, career identification and integration.

Ray of Hope



230-659 King Street East, Kitchener ON, N2G 2M4; t: 519-578-2018, f: 519-743-6206

LOS: 4 to 6 months
Accepted medications: methadone, buprenorphine
Assessment: ADAT/GAIN required; phone or in-person intake

Residential Treatment is offered at Ray of Hope's residence in downtown Kitchener. Once they've completed this program, youth are welcome to join the Community-Based Treatment Program or Day Treatment Program for continued support. Participants: Receive individual attention from staff, learn healthy self-care in all aspects of life, develop a personalized plan of recovery which involves peer support, individual counselling, life-skills and development, recreation and spiritual care. You are provided with independent study time for five days each week which is supported by a teacher. Learn the importance of community support through participation in volunteer work and attendance at AA or NA meetings.

House of Friendship



174 King Street North, Waterloo ON, N2J 2Y5; t: 1-844-437-3247/519-742-8327 x524

LOS: 5 to 6 months
Accepted medications: contact facility to confirm
Assessment: ADAT/GAIN required

Addiction treatment program for men, 21 years and older, whose use of alcohol and/or other drugs has seriously affected their lives. It is a supportive alcohol and drug-free environment (complete abstinence is required) where participants can identify and address lifestyles issues, and build on personal strengths. The program includes: a weekly individual counseling session, small group counseling, groups for relapse prevention, communication skills, spiritual discovery, healthy relationships, family and childhood issues, masculinity and sexuality, positive life skills, goal-setting, 12-step meetings, leisure and recreation activities, and household tasks.

Hope Acres



998614 Mulmur Tosorontio T.L., Glencairn ON, L0M 1K0; t: 705-466-3534 x251, f: 705-466-2102

LOS:	6 months
Accepted medications:	contact facility to confirm
Assessment:	ADAT/GAIN required; application form required

Hope Acres offers adult men whose lives have been impacted by substance abuse the opportunity to develop the skills needed to lead a substance free life. Clients learn these valuable tools through individual and group counselling and classroom session as well as evening electives. *Group Counselling:* These groups are facilitated by one of our professional staff members but it is expected that you will be an active participant in group discussions. Your group counsellor will also be your individual counsellor. *Individual Counselling:* Your counsellor is also your “go-to” person for everything that happens during your stay. *Classes:* Uses evidence based material throughout the program - to help with social skills and relationships, health, general addiction and recovery information, managing high risk situations and relapse prevention. *Discharge Planning:* Work with a counsellor 2 months prior to completing program. *Work Therapy:* Assigned either a maintenance, janitorial, or food services area of work. This contributes to your growth socially, physically, emotionally, and spiritually. Provides structure and self-discipline.

Treatment centres for women

Jean Tweed

215 Evans Avenue, Etobicoke ON, M8Z 1J5; t: 416-255-7359, f: 416-255-9021
e: info@jeantweed.com

LOS:	21 days
Accepted medications:	methadone, buprenorphine
Assessment:	ADAT/GAIN, application required

You will learn about the impact of your substance use or gambling on your life, your relationships and your health. Every woman will have an individual counselor and take part in a variety of groups that cover themes such as: self-esteem, healthy relationships, managing emotions, effective communication, wellness, and safe coping skills. While many of the groups are integrated to include both substance use and problem gambling issues, others are separate and relate to the unique needs of each. Our residence (Cumberland House) offers a therapeutic environment 24 hours a day, 7 days a week. During the evening, you will participate in a variety of activities including acupuncture, journaling, expressive art, recreation & leisure, and guided discussions.

Lakeridge Health Pinewood Centre

118 Cochrane Street, Whitby ON, L1N 5H8; t: 905-668-1858/1-800-825-6325, f: 905-668-7591

LOS:	21 days
Accepted medications:	methadone, buprenorphine
Assessment:	ADAT/GAIN required

A 21-day, live-in program offers women a safe residence while working toward their treatment goals. The Women's Residential Treatment Program provides a highly structured, holistic, women-centred and trauma-informed program that addresses the biopsychosocial needs of women. Client goals range from abstinence to controlled use. The program offers women individual and intensive group counselling through a variety of treatment approaches: process-oriented groups, psycho-education, cognitive-behavioural therapy, creative expression, and psychodrama.

Alcontrol

71 Ann Street, Kitchener ON, N2B 3T3; t: 519-957-5001, f: 519-745-3957
e: alcontrol@houseoffriendship.org

LOS: 28 to 70 days
Accepted medications: buprenorphine
Assessment: ADAT/GAIN required

Alcontrol is a community-based, residential addiction treatment program for adult women, whose use of alcohol and/or other drugs has seriously affected their lives. It provides a supportive drug-free environment. Abstinence is required. Participants identify and address lifestyle issues, and build on personal strengths.

Hope Place Centre \$

9605 Regional Road 25 North, RR3, Milton ON, L9T 2X7 (women)
t: 905-875-3214/1-877-399-7299, f: 905-875-3635, e: intake@hopeplacecentres.org

LOS: 33 days
Accepted medications: methadone, buprenorphine
Assessment: ADAT/GAIN required

Priority admission for women who are pregnant or parenting children 0-6 years of age. Participants' physical and mental health must be stable enough to fully participate in a structured, intensive treatment program; as evidenced by their physician's report form and any other health reports that may be required. Recovery goals must be compatible with '12-Step', 'abstinence-based' treatment philosophy. Our clinical model requires that women using drug replacement and must satisfy pre-treatment requirements.

Additional information: Valid OHIP card required. Two beds are reserved for those with extended healthcare benefits or private-pay for a no-wait admission. A program fee is payable upon admission by all participants to offset costs for specialized program materials and activities.

House of Sophrosyne \$

1771 Chappell Avenue, Windsor ON, N9C 3E8; t: 519-252-2711, e: information@sophrosyne.ca

LOS: 35 days
Accepted medications: methadone, buprenorphine
Assessment: ADAT/GAIN required

We offer a holistic approach to the program, including strengths-based counselling and empowerment, exercise and recreation, art therapy, meditation, nutrition, reiki and acupuncture treatments, psycho-educational groups, process groups and individual counseling. Participation in healthy leisure activities: yoga, walk, art therapy and dance. Working through addiction-related issues: trauma, guilt, grief, denial, unresolved anger, assertiveness, self-esteem, and relapse prevention.

Additional information: OHIP covered beds and two fee-for-service beds available; fee-for-service rate is \$7000.00; private insurance accepted

Monarch Recovery Services

405 Ramsay Road, Sudbury ON, P3E 2Z5
t: 705-674-5090/1-877-431-6713 x.2225, f: 705-674-8002

LOS: 35 days
Accepted medications: methadone, buprenorphine
Assessment: ADAT/GAIN required

Monarch Women's Treatment Centre offers a 35-day residential treatment program to women aged 16 years and older. The woman must have a desire to attend a treatment centre, which requires her to be abstinent while she is with us. We provide a structured, psycho-educational, holistic approach. We accept women on the Methadone or Suboxone maintenance program.

Vesta Recovery (Ottawa)



101 James Street, Ottawa ON, K1R 5M2; t: 613-233-0353, f: 613-234-3019

e: jrai@vestarecoveryprogram.ca

LOS:	35 to 60 days
Accepted medications:	methadone, buprenorphine
Assessment:	ADAT/GAIN required

Residential Supportive Treatment Level I provider of services for women who are struggling to recover from the impacts of substance use or abuse. Women completing all phases of our residential programming have an opportunity to receive a 12 week comprehensive treatment plan. Others may choose or require a shorter length of stay which would be determined by their individual treatment goals.

Womankind Addiction Services



431 Whitney Avenue, Hamilton ON, L8S 2H6; t: 905-521-9591 ext.237; f: 905-528-7255

LOS:	35 days
Accepted medications:	methadone, buprenorphine
Assessment:	ADAT/GAIN required

Trauma-informed, therapeutic, holistic and education programming in a five week treatment model. The program includes individual and group based counselling, as well as, leisure and peer-led programs. Treatment is based on evidence-informed practices for women using substances and focuses on empowerment and relapse prevention.

The Homestead



Downtown location: 2085 Ellesmere Road, Scarborough ON, M1H 2W6
t: 416-921-0953, f: 416-921-4430, e: information@salvationarmyhomestead.org

LOS: 42 to 60 days
Accepted medications: methadone, buprenorphine
Assessment: ADAT/GAIN required

The Salvation Army Homestead exists to serve women who want to experience recovery from substance use. Our mission is to provide effective treatment and support so that women can heal in body, mind and spirit. Groups and individual counselling, anger management, relapse prevention, aftercare, information and referrals are included. Our programs are holistic and abstinence-based.

Empathy House



360 Sunnyside Avenue, Ottawa ON, K1S 0S4; t: 613-730-7319, f: 613-730-1350
e: info@empathyhouseofrecovery.org

LOS: 3 to 12 months
Accepted medications: buprenorphine, benzodiazepine (case by case basis)
Assessment: ADAT/GAIN required

Our residence has an atmosphere conducive to recovery and reintegration, in a home-like, community-based milieu that encourages improved personal growth and social development. The groups are held in the dining room, living room and various locations for leisure activities. We treat women, 18 years and older, who are addicted to drugs and/or alcohol, have a history of sexual, physical and emotional abuse, have a concurrent disorder, may be homeless, have behavioural and cognitive disorders, are unemployable, possess inadequate social support, limited life skills, are relapse-prone, and may have conflict with the law.

Tennant House



581 King Street West, Brockville ON, K6V 3T5; t: 613-342-2262/1-866-499-8445, f: 613-342-4969

LOS: 3 to 6 months
Accepted medications: contact facility to confirm
Assessment: ADAT/GAIN required

Structured group sessions available Monday to Friday on biopsychosocial, spiritual recovery and relapse prevention skills development. Standardized residential treatment materials delivered in group format. Build peer supports, access mutual aid supports. Daily routine includes house duties. Link with other needed supports and individual counselling. Focus on therapeutic environment, communications skills and life skills development. Support is offered 24 hours/day.

Grant House



7 Pembroke Street, Toronto ON, M5A 2N9; t: 416-960-9430 x. 322, f: 416-920-3380

LOS: 6 months
Accepted medications: contact facility to confirm
Assessment: ADAT/GAIN required; application form required

Grant House offers a six-month residential stay for 10 women recovering from substance abuse. We have two groups daily to address the physical, emotional, mental, spiritual and social aspects of recovery, and provide individual counselling as well. We attend 12-step meetings, go to the YMCA, and pursue leisure activities as part of our abstinence-based program.

Symptoms of substance use: When to seek medical attention

Alcohol

Can't stay awake
Tremors
Sweating

Disorientation
Hallucinations
Seizures

Snoring/gurgling/choking
Blue lips/fingernails
Tiny pupils

Limp
Can't stay awake
Trouble breathing

Opiates

Cannabis

Delusions
Panic attack
Aggression

Severe sweating
Convulsions

Agitation
Delusional
Hyperventilating

Stimulants

Hallucinogens

Agitation
Aggressive
Seizures

Delirious
Twitching

Confused
Can't stay awake
Trouble breathing

Sedative- hypnotics

