

**ORAL QUESTION—JULIE GREEN, MLA YELLOWKNIFE CENTRE**

**QUESTION 692-18(3): ALCOHOL HARM REDUCTION POLICY CHANGES**

**March 13, 2019**

**MS. GREEN:** Mahsi, Mr. Speaker. My questions are for the Minister of Health and Social Services. In my statement today I spoke about screening brief intervention and referral as a cost-effective way for healthcare providers to talk to their patients about the harmful effects of alcohol. This was also a recommendation of the report I spoke about in the House last year. My question is: has the Minister looked at developing guidelines, or adopting them from another jurisdiction, to provide for screening brief intervention and referral around alcohol consumption? Mahsi.

**MR. SPEAKER:** Masi. Minister of Health and Social Services.

**HON. GLEN ABERNETHY:** Thank you, Mr. Speaker. The department is actually very familiar with the screening brief intervention and referral process. They are familiar with both the practice, and they have done some research. In fact, they did utilize that tool here in the Northwest Territories dating back to 2014. It was actually used as part of an approach to work with youth, and it was done in conjunction with some screening tools, including motivational interviewing. Unfortunately, Mr. Speaker, I have confirmed with the department that there was not a lot of uptake by practitioners. Practitioners like physicians, counsellors, nurses, who we were encouraging to use that tool, there was not a significant amount of uptake. However, we still think there is some value in it. After the Member shared me the article in the report, I did share it with the department. I asked them to look at it. The new interdepartmental problematic substance-use task force that we will be establishing under the draft action plan that we were discussing earlier today, I have directed them to share that information with them so that they can dig into that a bit more and find out how we could better utilize that tool here in the Northwest Territories for the benefit of residents.

**MS. GREEN:** The report writers were apparently unaware that this tool is used because the scoring for the NWT as a whole was an F, and for the tool use it was zero. Moving onwards, 71 percent of Canadians on average have had conversations with health practitioners about smoking in which they received information about the health risks of smoking and they are encouraged to quit and given ways to quit. Is there a parallel that the department can use to create guidelines that would be as effective for alcohol as they are for tobacco?

**HON. GLEN ABERNETHY:** Just to be clear, we have utilized this tool in the Northwest Territories, and we did make it available, and we did provide resources so that people could use it. Unfortunately, there was not a lot of uptake, and I think that's important to remember. Although it has been available, there was not a lot of uptake. With respect to the tools that have been developed around alcohol, in the new wellness plan, the draft wellness plan, which I just want to be clear is still only draft format, we are waiting for feedback from committee on how we can make it stronger, we are creating an interdepartmental problematic substance-use task force. We are also creating an

advisory committee of individuals with lived experience to help inform how we move forward to get positive messaging out, encourage people to drink responsibly, and understand the impacts of over-drinking and those types of things. I feel, and I will certainly reinforce that message to the department, that what the Member is talking about is something that we are actually trying to do within the action plan, but I will reinforce that message to them and let them know that this is something that this Assembly would like to see.

**MS. GREEN:** Thank you to the Minister for that response. I am concerned that this issue is fairly straightforward and that there are a number of sets of guidelines available to review from across the country, including from the College of Family Physicians, and I feel that it would be possible to move directly to implementation without streaming everything through additional studies. I guess my question for the Minister is how to improve uptake by medical practitioners to use some kind of screening brief intervention and referral tool.

**HON. GLEN ABERNETHY:** This is what this advisory group is going to help us with. We are not looking to do more planning. We are not looking to do more studies. We have the resource in front of us. We know there was not a lot of uptake. The Member even, in her Member's statement, mentioned that there has not been a lot of uptake with this program and this tool across Canada, so there are clearly some challenges with acceptance of this tool by practitioners. We see that there is some value, and we are going to get this group to work with us to help us figure out how to get more buy-in and utilize this tool as necessary, recognizing that some practitioners do have a scope of practise and they do work within that scope of practise. Some may not want to use this tool. They might have other tools they want to use. We are going to promote this tool within the government.

**MR. SPEAKER:** Masi. Oral questions. Member for Yellowknife Centre.

**MS. GREEN:** Mahsi, Mr. Speaker. I feel that the launch of the Cultural Safety Action Plan sets the scene for more effective conversations about alcohol abuse because there will be strengthened relationships between healthcare practitioners and their clients. Having said that, there are also different approaches to doing screening intervention and referral. It can be done online, which is the case in a number of different provinces. Has the Minister considered a different approach to delivering this, that is online?

**HON. GLEN ABERNETHY:** We did obtain some dollars from the federal government, focused on helping us get a message out about the use of cannabis and encouraging people to use responsibly and to understand the health ramifications of using it. This money we are also going to be using to do more of a polysubstance approach, trying to get messages out there both online and at a community level, using different sources and technology to get this information out. So, yes, Mr. Speaker, this is something we are aware of. This is something we are trying to do. We are trying to be creative. We are trying to tailor the message to the audience in different communities throughout the Northwest Territories, and we are getting communities involved to help us. Thank you, Mr. Speaker.