



**University
of Victoria**

Centre for Addictions
Research of BC

ANNUAL REPORT

04/01/12 - 03/31/2013



OUR MISSION

To be an internationally recognized centre dedicated to the study of psychoactive substance use and addiction, in order to support community-wide efforts to promote health and reduce harm.

OUR VALUES

Collaborative relationships

Dynamic, collaborative relationships are essential for maintaining relevance to the multi-faceted concerns related to substance use and addictions. Key relationships include those with policymakers, researchers from many disciplines, practitioners and people with personal experience of substance use, addictions and related problems.

Independent research

Protection from vested interests is essential to ensure that rigorous research is conducted and communicated clearly, with a view only to furthering the public interest. This will be ensured through excluding representatives of alcohol, tobacco and gaming industries from membership of the Advisory Board and not accepting direct research funding from such sources.

Ethics, social equity and justice

Commitment to solid ethical principles governing internal and external relationships, financial management, the conduct of research and the communication of research findings is essential. Also required is a commitment to the promotion of equity and fairness and the pursuit of social justice through attention to the impact of the social determinants that shape substance use and the development of health inequities.

Reducing risk and increasing protection

Attention is required to both immediate factors (e.g., behavioural patterns and contexts) and distal factors (e.g., social, economic and developmental influences) to effectively address the harms from substance use and addictions across the life course.

Harm reduction

Recognition that some people will continue to use psychoactive substances and experience addictions is critical. Strategies are needed to reduce harmful consequences in addition to those that aim to directly reduce or prevent high-risk behaviours.

Informed public debate

Commitment to informing public debate to achieve effective public policy on substance use and addictions through the communication of research findings is required.



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Message from the Chair

CARBC – the Centre for Addictions Research of British Columbia – continues to conduct ground-breaking research and knowledge exchange. In the last year, research programs on several key issues have had tangible, practical impacts. These issues and impacts include helping to remove barriers for people dealing from substance use related problems, increasing understanding of the causes of harmful substance use, and providing evidence to policy makers about effective strategies and creating new services.

CARBC scientists are changing how people think about and respond to substance use in BC, Canada and internationally. Examples from the past year include:



- A demonstration that BC's new drinking and driving laws are saving lives (see: <http://communications.uvic.ca/releases/release.php?display=release&id=1376>) from Dr. Macdonald's collaboration with the Office of the Superintendent of Motor Vehicles and the University of British Columbia;
- Evaluations of the unique Canadian alcohol harm reduction strategy of Managed Alcohol Programs (Drs. Pauly and Stockwell);
- An evaluation of a new service to pregnant women with substance use problems (Dr. Benoit); and,
- A widely cited study showing significant reductions in alcohol-related deaths in BC each time minimum alcohol prices are increased (Dr. Zhao).

CARBC has exceeded many of the benchmark goals included in our Strategic Plan and I am pleased to make note of the following highlights. The number of PhD qualified researchers and affiliates at the centre has increased to 29 (benchmark 11) and our students now number 38 (benchmark 14). In 2012/13 the CARBC network of faculty spanned the disciplines of sociology, psychology, nursing, epidemiology, anthropology, economics and community medicine. It is also experiencing a steady growth in capacity thanks to significant success by centre scientists, other faculty members and graduate students in obtaining tri-council peer reviewed grants as well as substantial commissions and other grants. CARBC researchers have received more invitations this year 51 (25 benchmark) to present at conferences and symposia.

CARBC researchers and students have been cited 1,560 times (benchmark 1,045) in peer-reviewed journals and published 81 articles (benchmark 70). The number of collaborative projects that CARBC has worked on with other research centres at the University of Victoria, BC's post-secondary institutions and research settings has increased to 41 (benchmark 25) and to 13 (benchmark 10) for our projects with North American researchers.

On behalf of the Advisory Board, I congratulate all our researchers and students for their continued outstanding work on substance use, policy reform, and harm reduction. You can learn more about CARBC's award-winning research in this annual report and by visiting <http://www.carbc.ca>.

Michael J. Prince

Lansdowne Professor of Social Policy

Message from the Director

Welcome to our 2012/2013 Annual Report. Once more we attempt the difficult task of summarizing wide-ranging interdisciplinary research, knowledge exchange and teaching activities across multiple areas of focus. Our report is laid out against the template of our 2011-2015 Strategic Plan (see www.carbc.ca) which incorporates four key priority areas (building capacity, engaging academic expertise, conducting high quality research, dissemination and knowledge mobilization) along with reports against performance indicators.



Reflecting on the development of CARBC in recent years, one of the most striking changes has been a gradual integration with the rest of the University of Victoria (UVic). This is now indicated not only through the diverse disciplines represented in our wonderful faculty, but also by the many bright students—both graduate and undergraduate—who come to be involved in our work. In many instances they have initiated new projects and published their work in international peer-reviewed journals.

I would also like to commend our small army of volunteers many of whom are students at UVic, but not all. They've helped us conduct thousands of interviews over the years with different types of groups who are at risk of problems because of their substance use. It's a pleasure to observe and hear the feedback from this activity that is almost universally positive—both from those who kindly give their time to be interviewed and from those doing the interviewing. There is even a small amount of literature that suggests research interviews, if conducted in a respectful and non-judgemental manner, can be regarded as an effective form of treatment.

Many students also take advantage of the employment opportunities to contribute to the many research projects described in this annual report. There may have been a time when our centre was regarded as separate from the teaching enterprise at UVic. I think we can now claim to be a centre where training and learning take place while new knowledge is being created.

To all our supporters, collaborators, staff and associates, thank you for all that you do and for your contributions to making CARBC such a harmonious, positive and productive place to work.

Tim Stockwell, PhD
Director, CARBC



OUR PEOPLE AND PARTNERS

Directors and Faculty

Dr Tim Stockwell

Director (Psychology)



Tim Stockwell

Dr Scott Macdonald

Assistant Director for Research
(Health Information Science)



Scott Macdonald

Mr Dan Reist

Assistant Director
for Knowledge Exchange



Dan Reist

Dr John Anderson

Scientist
(Community Medicine/Education)



Bernie Pauly



Eric Roth

Dr Chris Auld

Scientist (Economics)



John Anderson

Dr Cecilia Benoit

Scientist (Sociology)

Dr Cheryl Cherpitel

Scientist (Nursing)



Chris Auld

Dr Mikael Jansson

Scientist (Sociology)



Cecilia Benoit

Dr Bernie Pauly

Scientist (Nursing)

Dr Eric Roth

Scientist (Anthropology)

Dr Jinhui Zhao

Scientist and Post-Doctoral Fellow



Cheryl Cherpitel



Mikael Jansson

Staff (Victoria)

Ms Emma Carter
Administrator



Emma Carter

Ms Sinéad Charbonneau
Research Assistant



Alissa Greer

Ms Thea Cunningham
Research Assistant



Caitlin Janzen



Thea Cunningham

Mr John Dorocicz
IT Support



Wanda Martin



Marie Marlo-Barski

Ms Alissa Greer
Research Assistant



Gina Martin



Sinéad Charbonneau

Ms Caitlin Janzen
Research Coordinator

Ms Chelsie Kadgien
Transcriptionist



Kathleen Perkin



Jeremy Riishede

Ms Bonnie Kryswaty
Research Assistant

Ms Corrine Lowen
Research Associate



Jen Theil



Kate Vallance

Ms Hilary Marks
Research Assistant

Ms Marie Marlo-Barski
Administrative Assistant



Pilar Zazueta



Corrine Lowen

Ms Gina Martin
Research Associate

Ms Wanda Martin
Research Associate



Natasha Potvin



Ashley Mollison

Ms Catherine McLaren
Research Assistant

Mr Whitey Mitchell
Transcriptionist

Ms Natasha Potvin
Research Assistant

Ms Kate Vallance
Research Associate

Ms Ashley Mollison
Research Assistant

Ms Joanne Parker
Research Associate

Mr Jeremy Riishede
Administrative Assistant/
Research Assistant

Ms Pilar Zazueta
Administrative Assistant

Ms Kathleen Perkin
Research Associate

Ms Jen Theil
Assistant to the Director



Staff (Vancouver)

Ms Nicole Bodner
Publications Officer

Dr Tim Dyck
Research Associate

Ms Bette Reimer
Research Associate

Ms Catriona Remocker
Research Associate

Ms Evelyn Souza
Information Officer

Ms Cathy Spence
Assistant to Mr Dan Reist



Tim Dyck



Nicole Bodner



Bette Reimer



Evelyn Souza



Catriona Remocker

Post-doctoral Fellows

Dr Rachel Phillips
Post-Doctoral Fellow
and Research Coordinator

Dr Leah Shumka
Post-Doctoral Fellow

Dr Cornelia Zeisser
Post-Doctoral Fellow and Data Analyst

Mr Bruce Wallace
Post-Doctoral Fellow



Rachel Phillips



Cornelia Zeisser



Leah Shumka



Bruce Wallace

Site Director

Dr Cindy Hardy
University of Northern British Columbia,
Psychology



Cindy Hardy

Advisory Board

Dr Laurence Bosley

Director, Addictions Services

Ms Lynne Belle-Isle

Graduate Student, Centre for Addictions Research of BC

Ms Liz Evans

Executive Director, PHS

Community Services Society

Chief Jamie Graham

Chief Constable, Victoria Police Department

Dr Perry Kendall

Provincial Health Officer, BC Ministry of Health Services

Ms Andrea Langlois

Manager of Community-Based Research, Pacific AIDS Network

Mr Philippe Lucas

Victoria City Councillor

CARBC Research Affiliate

Dr Michael Miller

Associate Vice President

Research, University of Victoria

Mr Warren O'Brien

Executive Director,

Communicable Disease

Prevention, Harm Reduction

and Mental Health, BC Ministry of Health

Dr Malcolm Ogborn

Associate Vice President

Research (Health), University of Northern British

Columbia

Dr Michael Prince, Chair

Lansdowne Professor of Social Policy, University of

Victoria

Ms Sandra Richardson

Chief Executive Officer, Victoria Foundation

Mr Blake Stitilis

Health Planner, Mental Wellness and Substance Use,

Health Actions, First Nations Health Authority

Dr Evan Wood

Urban Health Research Initiative. BC Centre for

Excellence in HIV/AIDS, St. Paul's Hospital



Perry Kendall



Jamie Graham



Andrea Langlois



Lynne Belle-Isle



Philippe Lucas



Michael Miller



Michael Prince



Sandra Richardson



Evan Wood



Blake Stitilis

Collaborating Scientists

Dr Gordon Barnes

Professor, School of Child and Youth Care, University of Victoria

Dr Jeffrey Brubacher

Emergency Physician and Researcher, Vancouver General Hospital

Dr Jane Buxton

Physician Epidemiologist, BC Centre for Disease Control Assistant Professor, Health Care and Epidemiology, University of British Columbia

Dr Clay Holroyd

Associate Professor, Department of Psychology, University of Victoria

Dr Bonnie Leadbeater

Professor, Department of Psychology, University of Victoria

Dr David Marsh

Clinical Associate Professor, Health Care and Epidemiology Psychiatry, Providence Health Centre

Dr Amy Salmon

Coordinator, Sheway, Vancouver Coastal Health

Dr Gerald Thomas

Canadian Centre on Substance Abuse, Ottawa, Canada



Gordon Barnes



Jeffrey Brubacher



Jane Buxton



Clay Holroyd



Bonnie Leadbeater



David Marsh



Gerald Thomas

Research Affiliates

Katherine Andersen-Schokalsky

Psychiatrist, Vancouver Island Health Authority, and Seven Oaks Tertiary Care Facility, Victoria, BC

Dr Robinder Bedi

Assistant Professor, Department of Educational Psychology, University of Victoria

Dr David Brown

Research Scientist and Senior Project Manager, Mental Health and Addictions Services, Provincial Health Services Authority

Clifton Chow

Research Coordinator, Youth Addictions, Vancouver Coastal Health Authority

Dr Anne George

Assistant Professor Pediatrics, Faculty of Medicine, University of British Columbia

Dr Marvin Krank

Dean Graduate Studies and Professor of Psychology, University of British Columbia, Okanagan

Mr Philippe Lucas

Victoria City Councillor CARBC Research Affiliate

Dr Ingrid Pacey

Psychiatrist, Private Practice, Vancouver, BC

Dr Diane Rothon

Physician, former Chief Coroner of BC

Dr Deborah Rutman

Adjunct Associate Professor, Faculty of Human and Social Development, University of Victoria

Dr Zach Walsh

Assistant Professor, Psychology, University of British Columbia

Dr. Erica Woodin

Assistant Professor, Department of Psychology, University of Victoria



Philippe Lucas



Clifton Chow



Anne George



Diane Rothon



Zach Walsh



Erica Woodin



Amy Salmon

Graduate Students

Travis Baker

Department of Psychology, University of Victoria

Lynne Belle-Isle

Social Dimensions of Health, University of Victoria

Rachelle Beveridge

Social Dimensions of Health, University of Victoria

Kristina Brache

Department of Psychology, University of Victoria

Connie Carter

Department of Sociology, University of Victoria

Lauren Casey

Social Dimensions of Health Research Program and
Department of Sociology, University of Victoria

Michelle Coghlan

Department of Sociology, University of Victoria

Geoff Cross

Public Administration-Dispute Resolution

Erin Cusack

Social Dimensions of Health, University of Victoria

Jane Drengson

Social Dimensions of Health Research Program and
Department of Anthropology, University of Victoria

Jessica Fitterer

Department of Geography, University of Victoria

Jackson Flagg

Social Dimensions of Health, University of Victoria

Alexandra Holtom

Social Dimensions of Health, University of Victoria

Andrew Ivsins

Department of Sociology, University of Victoria

Vandana Joshi

Social Dimensions of Health, University of Victoria

Mary Ellen Johnson

Interdisciplinary

Mary Clare Kennedy

Social Dimensions of Health Research Program and
Department of Sociology, University of Victoria



Lynne Belle-Isle



Travis Baker



Connie Carter



Kristina Brache



Lauren Casey



Jane Drengson



Jackson Flagg



Alexandra Holtom



Andrew Ivsins



Vandana Joshi



Mary Clare Kennedy



Jessica Fitterer

...Continued on next page

Graduate Students (Cont'd)

Nozomi Kido

Child and Youth Care, University of Victoria

Enock Makupa

Geography, University of Victoria

Anna Maruyama

School of Health Information Sciences,
University of Victoria

Warren Michelow

Department of Health Care and Epidemiology,
University of British Columbia

Trudy Norman

Department of Interdisciplinary in Nursing and
Anthropology, University of Victoria

Renee O'Leary

Social Dimensions of Health, University of
Victoria

Lisa Ordell

Department of Sociology, University of Victoria

Audra Roemer

Department of Psychology, University of Victoria

Florian Schmidt

Anthropology, University of Victoria

Kimberly Sharpe

Social Dimensions of Health Research Program,
University of Victoria

Amanda Slaunwhite

Department of Geography, University of Victoria

Alina Sotskova

Department of Psychology, University of Victoria

Camille Stengel

Department of Sociology, University of Victoria

Krystal Summers

Social Dimensions of Health Research Program,
School of Public Health and Social Policy,
University of Victoria

Kara Thompson

Department of Psychology, University of Victoria

Elizabeth, Walker

Child and Youth Care, University of Victoria



Warren Michelow



Trudy Norman



Renee O'Leary



Lisa Ordell



Audra Roemer



Alina Satskova



Kimberly Sharpe



Amanda Slaunwhite



Camille Stengel



Kara Thompson



Melanie Callas



Montana Osiowy

Undergraduate Students

Victoria Emberley

Mathematics and Statistics,
University of Victoria

Sonya Ishiguro

Biology, University of Victoria

Nichole Williams

Department of Psychology,
University of Victoria

Melanie Callas

Department of Anthropology, University of
Victoria

COLLABORATING CENTRES

British Columbia:

Centre for Social Responsibility, Simon Fraser University

National Institute for Research in Sustainable Community Development, Kwantlen University College

Public Health Association of British Columbia

Other Parts of Canada:

Canadian Centre on Substance Abuse, Ottawa, Ontario

Centre for Addiction and Mental Health, Public Health and Regulatory Policy Division, Toronto, Ontario

Marguerite's Place, St. John's, Newfoundland

Centre of Hope, Fort McMurray, Alberta

Sex Workers' Action Network of Waterloo Region, Waterloo, Ontario

Stepping Stone, Halifax, Nova Scotia

Shelter House (Kwae Kii Win Centre), Thunder Bay, Ontario

International:

Alcohol Research Group, National Alcohol Research Center, Berkeley, CA, USA

Prevention Research Center, Pacific Institute for Research and Evaluation, Berkeley, CA, USA

National Drug Research Institute, Curtin University, Perth, WA, Australia

Sheffield Alcohol Research Group, (SARG), School of Health and Related Research, University of Sheffield, UK

COMMUNITY COLLABORATIONS

We would like to gratefully acknowledge the support and collaboration of many colleagues and community agencies including the following:

Victoria:

Access Midwifery
AIDS Vancouver Island
Beacon Community Services
Blanshard Community Centre-Men's Trauma Centre
Burnside Gorge Community Centre
Greater Victoria Coalition To End Homelessness
PEERS Victoria
Our Place Society
Queen Alexandra Foundation for Children
(Children's Health Foundation of Vancouver Island)
SOLID (Society of Living Intravenous Drug Users)
Special Victims Unit, Victoria Police Department
Victoria Cool Aid Society
Victoria Youth Empowerment Society
Victoria Native Friendship Centre
Victoria Youth Clinic
Women's Sexual Assault Centre
YMCA-YWCA Greater Victoria
Vancouver Island Health Authority
BC Ministry of Health
Providence Health Care

Prince George:

BC Council on Substance Abuse
Carrier Sekani Family Services
Positive Living North
Prince George New Hope Society

Richmond:

Richmond Addictions Services

Nanaimo:

Edgewood Addiction Treatment-Drug Detox and Rehab

Vancouver:

7th Floor Media, Simon Fraser University
BC Centre for Excellence in HIV/AIDS
BC Centre for Disease Control
BC Centre for Social Responsibility
BC Non-Profit Housing Association
Canadian Mental Health Association (BC Division)
Collaborating Centre for Prison Health & Education
Directions Youth Services
Health Initiatives for Men (HIM) and Youth Co
McCreary Society
PACE Society
Pender Clinic
Pivot Legal Society
Portland Housing Society
Positive Living Society of British Columbia
SheWay
Vancouver Area Network of Drug Users (VANDU)
Vancouver Coastal Health
The FORCE Society for Kids' Mental Health
PHS Community Services Society
Dr. Peter AIDS Foundation

Rest of Canada:

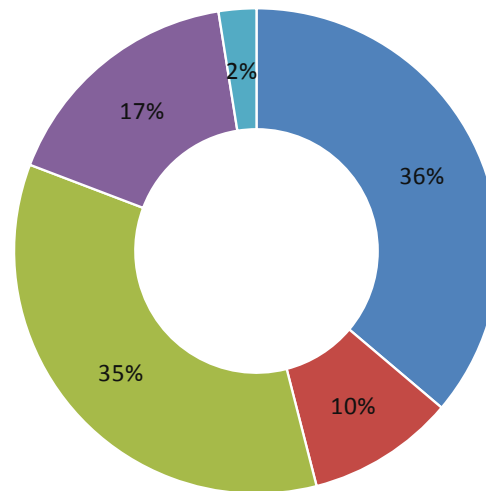
Kwae Kii Win Centre, Thunder Bay
Ottawa Inner City Health, Ottawa
Wesley Urban Ministries, Hamilton
City of Toronto/Seaton House Annex Harm Reduction Program, Toronto
Canadian Drug Policy Coalition
Canadian AIDS Society

Income for 2011-2012

The chart below identifies our major sources of income during the 2012/2013 fiscal year. Total revenue for the fiscal year was \$3,322,802, down slightly from 2011/2012, our highest year to date. There was a good balance of funding across research grant competitions and knowledge exchange contracts.

CARBC 12/13 Revenue and Carry Forward Summary

- Research Grant Competitions
\$1,139,435.00
- Other Research Grants and Contracts
\$309,438.00
- Knowledge Exchange Grants and Contracts
\$1,094,676
- Endowment
\$525,673.92
- Overhead
\$253,579.31





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KEY RESULTS AREA: *To Build Capacity*

“To build infrastructure and capacity across BC in order to conduct research and knowledge exchange that will increase the understanding of, and support more effective responses to, substance use.”

HIGHLIGHTS

It has been another successful year for CARBC faculty and collaborators in raising funds for research and knowledge exchange activities connected to substance use and related problems. There have been a total of nine successful applications to the Canadian Institutes of Health Research (CIHR) and the Social Science and Humanities Research Council (SSHRC). Projects funded range across many areas reflecting the broad range of interests and disciplinary backgrounds of our faculty. For example, how to combat stigma as it affects people who use drugs, how to support people living with HIV/AIDS, the effects of combining energy drinks and alcohol on risk-taking, how to best deter impaired driving, how to support people with substance use problems and unstable housing.

A major boost for our core operational capacity has come by way of a million-dollar grant from the Provincial Health Services Authority (PHSA) to enable us to continue activities such as the Alcohol and Other Drug Monitoring Project (AOD) which support implementation of the BC Government’s 10-year plan for mental health and substance use, *Healthy Minds, Healthy People*.

Faculty Profile - Dr. Bernie Pauly, RN, PhD

Associate Professor and Associate Director, Research and Scholarship



CARBC scientists are changing how people think about and treat addiction in BC, across Canada and internationally. Bernie has been very successful in obtaining research funding focused on building capacity within BC government and healthcare delivery, specifically working on its 10-year plan for mental health and substance use. Her current research focuses on enhancing health equity through the development and delivery of public health services, harm reduction strategies for vulnerable populations, and fostering transitions from homelessness to home.

This work looks at building capacity in relation to service providers and government, using research to strengthen and contribute to the development of policy and political decisions based on the best evidence available.

She is deeply interested in and concerned about the creation of programs and policies that promote fairness and justice and contribute to the improved health of people experiencing social disadvantages and impacted by substance use, for example, contributing to the development of housing interventions for people with substance use problems or creating good public policy that supports evidence-based harm reduction services as well as strong public health services that prevent the harms of substance use.

Successful applications to funding competitions

Alcohol, Energy Drinks and Other Stimulants: An Emergency Room Study Assessing the Effects of Gender, Context and Substance Use on Injury Risk.

CIHR, Operating Grant, \$522,556 from 2012 to 2016.

A Mixed Method Evaluation of the Impact of the Dr. Peter Centre on Healthcare Access and Outcomes for Persons Living with HIV/AIDS Who Use Illicit Drugs.

CIHR, Partnership for Health System Improvement Grant, \$343,911 from 2012 to 2015.

Building Capacity Among People Who Use Drugs: Reducing Stigma and Fostering Inclusion of Experiential Knowledge in Harm Reduction Research, Policy Development and Service Delivery.

CIHR, HIV/AIDS Priority Announcement Planning Grant, \$24,998 from 2013 to 2014.

Communities of Practice, Circles of Change: Building Dialogue on Social Justice, Advocacy and Activism.

Centre for the Study of Gender, Social Inequities and Mental Health, Seed Grant Award, \$14,996 from Feb 2013 to Sept 2013.

Development of a Report on Housing and Social Supports.

Greater Victoria Coalition to End Homelessness, \$10,000 from 2012 to 2013.

Disseminating Evidence-Based, Mental Health Promotion Programs for Children through Open Learning Resources and Collaborative Networks.

SSHRC, Connections Grant, \$50 000 from 2012 to 2013.

Evaluation of Traffic Safety Interventions in British Columbia.

CIHR, Operating Grant, \$149,868 from April 1, 2012 to March 31, 2014.

Investigating and Addressing Injection Drug Use and Other Harms among Street-Involved Youth: The ARYS Project.

CIHR, Operating Grant, \$203,682 from 2012 to 2013.

Population Health Interventions to End Homelessness.

CIHR, \$200,000 from 2012 to 2014.

The Cedar Project: Exploring Vulnerabilities to HIV, HCV, and STIs among Young Aboriginal People Who Use Drugs in Urban and Rural Settings.

CIHR, \$982,922 from 2012 to 2015.

The Impact of Police Discretion and Court Decisions on Youth Who Use Illicit Drugs.

SSHRC, Insight Grant, \$257,736 from 2013 to 2015.

The Role of Transitional Housing in Recovery from Homelessness and Substance Use.

Vancouver Foundation, Community-Based Health Research Grant, \$62,000 from 2012 to 2014.

Commissioned contracts won

An Evaluation of the Kwaie Kii Win Centre Alcohol Management Program, Thunder Bay, ON.

Shelter House, Thunder Bay, \$37,540 from February to December 2013.

BC Partners in Mental Health and Addictions.

Provincial Health Services Authority, \$239,875 from April 1, 2013 to March 31, 2014.

CCENDU Project- Webpage Development for Reporting Drug Overdose Data and Alerts.

Canadian Centre for Substance Abuse, \$2,500.

Evaluation of a Managed Alcohol Program -

Dissemination Phase. Vancouver Coastal Health, \$5,000 from April 1, 2014 to August 31, 2014.

Healthy Minds, Healthy People: A 10-Year Plan to Address Mental Health and Substance Use in BC.

Provincial Health Services Authority, \$1,000,000 from March 31, 2013 to March 31, 2018.

Psycho-Educational Groups for FASD: Development, Evaluation and Dissemination.

Northern Health, \$122,705 from 2013 to 2015.

Table 1: Performance Indicators for Key Result Area 1 (Building Capacity)

| OBJECTIVE | PERFORMANCE INDICATORS |
|---|---|
| 1.1 To maintain or increase funding for substance use and health research at CARBC | Maintain or increase funding for substance research won by CARBC scientists from (a) Canadian and international peer reviewed sources (b) Canadian and international contracts <i>Benchmarks:</i> (a) \$750,000 (b) \$150,000 per annum <i>2012/2013:</i> (a) \$2,753,669 (b) \$1,165,245 |
| 1.2 To maintain or increase funding for knowledge exchange concerning substance use and health promotion at CARBC | Maintain or increase funding for substance use knowledge exchange held by CARBC from (a) Canadian and international peer reviewed sources (b) Canadian and international contracts <i>Benchmarks:</i> (a) \$250,000 (b) \$750,000 per annum <i>2012/2013:</i> (a) \$290,676 (b) \$791,000 |
| 1.3 To maintain or increase the number of funding applications for long-term research programs addressing research areas of high priority in BC | Maintain or increase number of funding applications for new research programs identified in one or more identified priority areas (see Key Result Area 2) <i>Benchmark:</i> 15 applications <i>2012/2013:</i> 23 applications |
| 1.4 To achieve successful collaborations with researchers and community partners on projects that will lead to increased capacity and increased expertise in addictions research | Number of projects initiated that involve (a) community partners (b) researchers with relevant expertise who are new to substance use and addictions research <i>Benchmarks:</i> (a) 12 (b) 6 <i>2012/2013:</i> (a) 17 (b) 8 |
| 1.5 To improve access to datasets and platforms for addiction researchers | Number of datasets created, developed and/or maintained for use by BC researchers <i>Benchmark:</i> 7 <i>2012/2013:</i> 7 |

“To capitalize on the resources of BC universities – through the recruitment of high-calibre graduate and post-doctoral students from multiple relevant disciplines – to assist us in the study of substance use, addiction and harm reduction.”

HIGHLIGHTS

A major highlight this year has been the appointment of Dr. Russ Callaghan as a chair in Addiction Medicine at the University of Northern British Columbia. He will soon take over from Dr. Cindy Hardy as the CARBC Site Director at UNBC. Dr. Callaghan has had a long association with addictions research at Prince George while working from his base in Ontario at the Centre for Addiction and Mental Health. We have collaborated with him in the past on a number of studies, more recently examining the impact of changes to Canada to drinking age laws on admissions of young people to hospitals for alcohol-related reasons.

The growing cadre of CARBC-affiliated graduate and undergraduate students contribute greatly to the life, creativity and energy of the Centre. We have continued to offer scholarships for students working on substance use related dissertations, and recently we have also been able to identify funds to support research internships to be based with BC health authorities. These funds have been provided partly by CIHR-funded research led by Dr. Pauly and partly from capacity building funds received from the PHSA.

Our students continue to make significant contributions to our research programs. For example: Montana Osiowy (psychology) demonstrated how adding standard drink labels on alcohol containers can assist drinkers comply with Canadian low-risk drinking guidelines; Kara Thompson (psychology) led a pilot study for an international team into how parents set rules for their teenagers around drinking and how they perceive the rule setting of other parents; Amanda Slaunwhite (geography) is developing an innovative method of estimating substance use treatment needs across the province; and Rene O’Leary won a prestigious scholarship to investigate networks of influence which support the global tobacco industry.

Faculty Profile - Dr. Eric Roth, PhD



Dr. Eric Roth is a physical anthropologist trained in anthropological demography. For over 20 years, he has worked in small communities in northern Kenya, and his current research interests focus on the social epidemiology of HIV/AIDS in Kenya and British Columbia. This in-depth international scholarship has created links to cross-discipline work bringing medical personnel and social scientists together to work on HIV/AIDS. Since joining CARBC in 2011, Eric has contributed to our capacity building by capitalizing on the enthusiasm and curiosity of undergrads, and pioneering the arrangement of course credits for volunteers in research work with CARBC. In turn, this has built strong linkages to future graduate students and recruited talented research staff. Last year he supervised two anthropology graduates, Jane Drengson and Kimberly Sharpe, who conducted their Masters dissertations analyzing data from female sex workers interviewed in bars in Kibera, Kenya to explore a variety of harm reduction themes.

Table 2: Performance Indicators for Key Result Area 2 (Engaging Academic Expertise)

| OBJECTIVE | PERFORMANCE INDICATORS |
|--|--|
| 2.1 To attract and retain high quality researchers from a broad range of disciplines to the BC substance use and addictions field | Maintain or increase number of PhD-qualified researchers and affiliates within CARBC each year Maintain or increase number of postdoctoral fellows with CARBC <i>Benchmarks:</i> 11/3 <i>2012/2013: 29/3</i> |
| 2.2 To attract and retain high quality students from a broad range of disciplines to the BC substance use and addictions field | Maintain or increase number of CARBC students under supervision per year <i>Benchmark:</i> 14 <i>2012/2013: 35 graduate and 3 undergraduate</i> |
| 2.3 To provide training opportunities and programs for the development of additional research skills among CARBC staff, students and affiliates, taking advantage of existing opportunities through CIHR and research partners | Contributions to graduate research training programs within CARBC and also university departments at UVic and other BC universities Contribute to graduate training in SDHR program at UVic <i>Benchmarks:</i> 4/8 <i>2012/2013: 30/8</i> |
| 2.4 To provide mentorship to new researchers and support to existing researchers across a range of community settings | Attract new substance use researchers to work on CARBC projects under supervision <i>Benchmark:</i> 6 per year <i>2012/2013: 8</i> |



3

KEY RESULTS AREA: *Implementation of Quality Research*

“To conduct high quality research that increases understanding of substance use, addiction and related harms in order to inform effective responses and promote health.”

HIGHLIGHTS

There has been a significant increase in the range of CARBC-related research focusing on vulnerable and/or marginalized populations. Drs. Benoit and Mikael Jansson are leading a substantial CIHR-funded project across multiple Canadian sites to explore the broad dimensions and contexts contributing to health and safety outcomes among workers in the sex industry, including a focus on substance use. They have personally conducted interviews with more than 200 sex workers in Victoria, Montreal, St. John's, Kitchener, Waterloo, Fort McMurray and Calgary. Dr. Pauly is leading a large CIHR-funded partnership of community stakeholders and researchers to address health inequities in different populations within the context of the BC Government's 10-year plan for mental health and substance use. Drs. Pauly and Stockwell have also collaborated with health authorities and community agencies in BC and Ontario in the evaluation of managed alcohol programs, in which alcohol is provided in a controlled setting to individuals in supportive housing with severe alcohol problems who have refused or failed with abstinence approaches. We also continue to focus on substance use issues and policies such as Dr. Macdonald's collaboration with the BC Police Traffic Branch to evaluate the Government of British Columbia's impaired driving laws. Another example is work recently completed on the impact of minimum alcohol pricing in Canadian jurisdictions on population levels of consumption, alcohol-related hospitalizations and deaths led by Dr. Stockwell. UBC-based research affiliate Dr. Jane Buxton has been involved with evaluating the introduction of a drug user take-home Naloxone program designed to ensure this medication is more likely to be available at the times and places where overdose events occur.

Faculty Profile - Dr. Scott Macdonald, PhD



Scott Macdonald is currently the Assistant Director of Research at the Centre for Addictions Research of BC. Dr. Macdonald has focused his career on research issues in the substance use and abuse field, and recently received national media attention for his research showing BC's drinking and driving laws with immediate consequences for drinking drivers save lives and reduce injuries. In June, Dr. Macdonald released an evaluation of the impact of the BC Immediate Roadside Prohibition program designed to reduce drinking and driving. The research found a 23% decline in injuries and over 40% reduction in deaths. Scott believes that much of CARBC research should be of interest to the general public and the government as it conducts applied research with policy implications for improving the health of our citizens.

RESEARCH PRIORITY 1:

SUBSTANCE USE PATTERNS AND RELATED HARMS

CARBC PROJECTS

Alcohol, Drug Use and Injury in the Emergency Department

Investigators: Cherpitel, C.J. (PI), Brubacher, J., Macdonald, S., Stenstrom, R. & Grafstein, E.

Funding body: CIHR

Background: This is a study of alcohol and other drug use and injury in two emergency departments in Vancouver, BC, funded through the CIHR's New Emerging Team grant.

Progress to date: Two papers have been published from these data, and the data are continuing to be used in the Cross-National Analysis of Alcohol and Injury project.

Alcohol, Energy Drinks and Other Stimulants: An Emergency Room Study Assessing the Effects of Gender, Context and Substance Use on Injury Risk

Investigators: Stockwell, T. (nominated PI) & Cherpitel, C. (co-PI)

Funding body: CIHR operating grant, \$522,556 from 2012 to 2016.

Background: There is increasing concern about the role of energy drinks mixed with alcohol as contributors to increased risk-taking behaviour and related injuries. This study will apply methodology previously used extensively by the research team to assess injury risk from alcohol consumption among individuals attending emergency departments to explore whether consumption of energy drinks adds to further risk. Approximately 1,200 ER attendees will be interviewed and relative risk assessed both by using injured individuals as their own controls (case crossover design) and also individuals presenting to the ER with illnesses as controls (case-control design). The differential effects of gender, age, personality and setting will be examined. In addition to assessing the risk of combining alcohol with energy drinks, other alcohol/drug combinations will be assessed with a focus on other stimulants such as amphetamines and cocaine.

Progress to date: Ethics clearance has been obtained from the University and the two health authorities where the data will be collected.

Alcohol and Energy Drink Use: Personality, Drinking Patterns and Risk Behaviours

Investigators: Brache, K. & Stockwell, T.

Funding body: Social Sciences and Humanities Research Council

Background: Research has shown that individuals who mix alcohol and energy drinks tend to drink more heavily and are at increased risk of experiencing several harmful outcomes (e.g., injury, drinking and driving, sexual assault), compared to individuals who only consume alcohol. The vast majority of this research has focused on college students. The aims of the current study are to investigate the relationship between alcohol mixed with energy drink use and several associated variables (e.g., heavy drinking, alcohol use disorders, risk behaviours, personality) in a representative Canadian sample and a young adult community sample. The current study will also investigate the use of alcohol mixed with energy drinks in UVic students, with a particular focus on their motivations for use.

Progress to date: Data collection has been completed for this project. Currently, the data is being analyzed and summarized as part of a dissertation.

Alternative Measures of Alcohol Use across Adolescence and Emerging Adulthood: Implications for Predicting Alcohol-Related Problems

Investigator: Thompson, K.

Funding body: Canadian Institute of Health Research

Background: The use of alternative alcohol indices in developmental research may generate conflicting findings in the literature. This study examined the longitudinal associations among four dimensions of alcohol involvement from age 15-25 and compared their ability to predict alcohol-related problems in emerging adulthood. Four dimensions of alcohol use were compared: frequency, quantity, heavy episodic drinking and volume. The findings showed that, while correlated over time, dimensions of alcohol involvement significantly differed in their average rate of growth and in the prediction of alcohol-related problems in emerging adulthood. Using measures of heavy episodic drinking and volume may improve our understanding of how alcohol use and alcohol-related problems unfold over the course of adolescence and emerging adulthood. However, reliance on drinking frequency as the only measure of alcohol consumption may be problematic.

Progress to date: Paper submitted for publication.

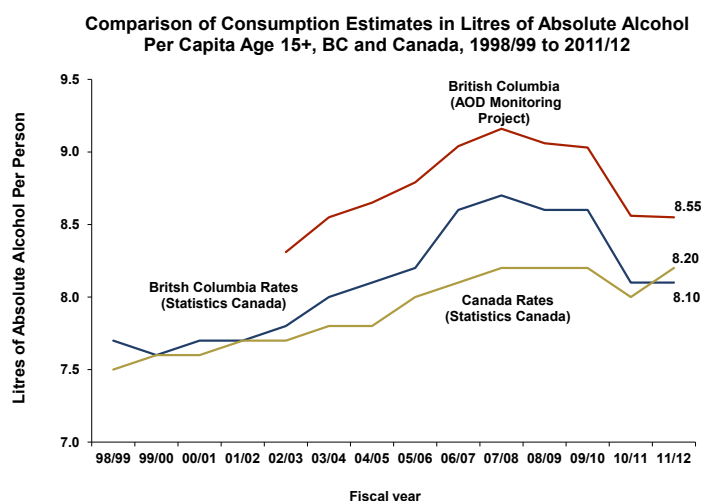
BC Alcohol and Other Drug Monitoring Project

Investigators: Stockwell, T. (PI), Macdonald, S., Vallance, K., Ivsins, A., Chow, C., Buxton, J., Tu, A., Martin, G. & Dorocic, J.

Funding bodies in 2012/2013: BC Mental Health Foundation and the BC Ministry of Health

Background: CARBC was awarded a contract from the Provincial Health Services Authority and Health Canada to pilot a comprehensive alcohol and other drug epidemiological monitoring system for Canada in 2007. Subsequently a number of other funding partners contributed to the full roll-out of this system for BC and, more recently, some elements have been implemented in other Canadian provinces. Key components include rates of hospitalization and death caused by different substances, both legal and illegal, all by local health area; types of drugs seized by police; per capita alcohol sales by local health area; substances used by individuals attending emergency rooms in Victoria and Vancouver; patterns and contexts of use; and harms experienced by high-risk drug-using populations in Victoria and Vancouver. Elements of the program are now being implemented in other Canadian provinces.

Progress to date: Data on rates of hospital admissions and deaths from alcohol, tobacco and illicit drugs are reported on the project website for BC's 89 local health areas, 16 health service delivery areas and five health authorities. Data on per capita sales of alcohol are similarly reported across the province. More than 4,000 interviews have been completed since 2008 on high-risk populations of substance users in Victoria and Vancouver to monitor patterns of use, related harms and use of harm reduction services. Data collection for Vancouver has now been taken over by a private market research company as part of a national high-risk population survey which now operates in seven Canadian cities. Numerous journal articles, in-house statistical bulletins and reports have been prepared and disseminated. Datasets have been made available to faculty and graduate students at UVic as well as other post-secondary institutions. Source: BC Alcohol and Other Drug Monitoring Project (see www.AODMonitoring.ca)



Source: BC Alcohol and Other Drug Monitoring Project

Measures of Alcohol Consumption in Surveys and Relevant Methodological Issues

Investigators: Stockwell, T. & Zhao, J.

Funding body: Centre for Addictions Research of BC

Background: The conventional method of measuring alcohol consumption—such as the quantity-frequency approach in surveys—tended to underestimate per capita alcohol consumption. The “yesterday” approach can provide a more accurate estimate of alcohol consumption in population surveys. The beverage specific yesterday approach was used in the 2008 and 2009 Canadian Alcohol and Drug Use Monitoring Surveys. This study is to investigate the coverage of alcohol consumption, using the beverage-specific yesterday (BSY) approach in the surveys, and compare the yesterday with other methods in assessing the accuracy of self-reported alcohol consumption.

Progress to date: Data and statistical analysis has been done and two papers are being prepared and presented at the 2013 Kettil Bruun Society Conference in Kampala, Uganda.



Tim Stockwell



Jinhui Zhao

Patterns and Consequences of Cocaine and Alcohol Use for Treatment Clients

Investigators: Macdonald, S. (PI), Borges, G., Callaghan, R., Roth, E., Salmon, A., Stockwell, T. & Wells, S.

Funding body: CIHR

Background: Research has shown that treatment populations frequently use alcohol and cocaine simultaneously (i.e., on the same occasion) and concurrently (i.e., on separate occasions). The aims of this study are twofold: 1) to describe the patterns, functions and contexts of alcohol and cocaine use among treatment clients, and 2) to identify acute and long-term differences among the three groups defined by their primary use of alcohol alone, cocaine alone or simultaneous use of cocaine and alcohol. Gender differences will be examined among these aforementioned dimensions. Groups of treatment clients who primarily use cocaine alone (n= 200), alcohol alone (n=200) or cocaine and alcohol simultaneously (n=200) will complete a self-administered questionnaire.

Progress to date: Data collection for this study is completed. Two conference papers have been completed, and two journal papers have been submitted for review. Four additional papers are being prepared.

CARBC AFFILIATED PROJECTS

Cannabis and Motor Vehicle Crashes: A Multicentre Culpability Study

Investigators: Brubacher, J., Asbridge, M., Brant, R., Mann, R., Martz, W., Andolfatto, G., Bryan, S., Drummer, O., Macdonald, S., Purssell, R. & Schreiber, W.

Funding body: CIHR

Background: Cannabis is the most commonly used illicit drug in Canada and many drivers, especially young adults, report driving after using cannabis. Although there is abundant experimental evidence that cannabis, either alone or in combination with alcohol, impairs the psychomotor skills required for safe driving, epidemiological data on the contribution of cannabis to car crashes is mixed. This uncertainty hinders the ability of traffic safety policymakers to develop effective, evidence-based traffic laws or road safety campaigns targeting people who drive while impaired by cannabis. The primary objective of the study is to determine whether injured drivers who used cannabis before an MVC are more likely to have caused the crash than those who did not. Our aim is to improve traffic safety by providing current North American data that can be used to inform the development of evidence-based road safety policy targeting people who drive while impaired by cannabis.

Progress to date: The study has been launched in trauma centres across BC. We have collected data from approximately 1,000 injured drivers. Our goal is to obtain data from 3,000 injured drivers.

Cannabis as a Substitute for Alcohol and Other Drugs: A Compassion Club-based Survey of Substitution Effect in Canadian Medical Cannabis Patients

Investigator: Lucas, P.

Background: This study examines self-assessed changes in licit and illicit substance use of 400 medical cannabis patients in BC.

Progress to date: Data gathering for the study was completed in February 2011. Data analysis has been completed and a paper submitted for publication.

Cross-National Analysis of Alcohol and Injury

Investigator: Cherpitel, C.

Funding body: National Institutes of Alcohol Abuse and Alcoholism

Background: The study consists of a cross-national analysis of admissions for alcohol and injury at emergency departments in 25 countries.

Progress to date: Data are continuing to be analyzed from ER studies covering 38 ER sites across 18 countries, including analyses of drinking patterns and risk of injury, others' drinking, dose-response relationships, injury severity and disability, drug use and injury, methodological issues related to study design and risk of injury, and the concordance of ICD-10 Y90 with Y91 codes for alcohol intoxication in injury.

Investigating and Addressing Injection Drug Use and Other Harms among Street-Involved Youth: The ARYS Project

Investigators: Debeck, K., Brook, A., Wood, E. (PIs), **Buxton, J.**, Hadland, S., Harrigan, P., Strathdee, S., Kerr, T., Shoveller, J., Shannon, K., Tyndall, M., Montaner, J., Strathdee, S. & Roy, E. (Co-Is)

Funding body: CIHR, Operating Grant

Background: The At Risk Youth Study (ARYS) is a study of risk factors related to drug use among high-risk youth being conducted by researchers at the BC Centre for Excellence in HIV/AIDS. The project involves participation of over 500 young drug users who live in the Vancouver area. The aim of the study is to evaluate the rates and correlates of initiation into injection drug use among high-risk youth. In addition to the project's goal, ARYS:

- identifies social demographic and behavioural determinants in participants who have recently tested HIV positive
- provides ongoing information and support to community members, service providers and government ministries involved in combating health and social problems among street youth
- inform interventions to address issues and gaps in service and treatment

Substance Use during the Transition to Parenthood: Links with Domestic Violence and Relationship Distress

Investigator: Woodin, E.

Funding body: Social Sciences and Humanities Research Council

Background: The problematic use of alcohol places both men and women at increased risk for problems in their intimate relationships, including domestic violence and relationship distress. Although overall rates of alcohol use decline for most couples during the transition to first-time parenthood, previous research has demonstrated that *problematic* alcohol use increases significantly for both men and women after childbirth. The purpose of the current study was to examine trajectories of alcohol use and misuse in a sample of 100 couples experiencing the transition to parenthood. Alcohol use during pregnancy was significantly predicted by pre-pregnancy alcohol use for both men and women, and older age and less acceptance of the pregnancy were also significant multivariate predictors of women's alcohol use during pregnancy. Further, alcohol misuse was a significant longitudinal predictor of domestic violence perpetration for both men and women across the transition to parenthood, and alcohol misuse was longitudinally related to partner relationship dissatisfaction, as well as to a greater risk of separation/divorce during the first two years of parenthood. Thus, the misuse of alcohol represents a significant and potentially modifiable risk factor for relationship instability during a particularly sensitive developmental period.

Progress to date: Three waves of data spanning the prenatal to two-year postnatal time periods have been collected, and a follow-up data collection at four years postnatal is ongoing. Several manuscripts are currently in preparation regarding the prenatal and longitudinal associations between alcohol use and family functioning.

Systematic Error and Confounding: Meta-Analyses of Alcohol and Disease

Investigators: Fillmore, K., Chikritzhs, T. (Co-PIs), & **Stockwell, T. (Co-I)**,

Funding body: US National Institutes of Health

Background: This is a collaborative work that was led by Dr. Kaye Fillmore from the University of California, San Francisco campus until her death in early 2013. It was initially funded for a two-year period by a prestigious Challenge Grant from the US National Institutes of Health. Following this, the team was successful in applying for a three-year continuation to conduct a meta-analysis and explore sources of variation in the relationships reported between levels of alcohol consumption and different disease outcomes. This new grant focuses on additional disease outcomes including breast cancer, dementia, coronary heart disease, diabetes, stroke and all-cause mortality. There will be a particular focus on exploring reasons for heterogeneity in study findings and the continuing focus on methodological biases which may result in the false appearance of health benefits for light to moderate drinking.

Progress to date: During 2012/2013, the principal activity was completing a review of coding of all studies and study protocols in readiness for final analyses and paper preparation in 2013/2014.

RESEARCH PRIORITY 2:

STUDIES OF THE NEUROSCIENCE AND LEARNING BASES FOR DRUG-SEEKING BEHAVIOUR

CARBC AFFILIATED PROJECTS

Examining the Effects of Alcohol Misuse on the Neuropsychological and Neuropathological Outcome from Traumatic Brain Injury: A Longitudinal Study

Investigators: Lange, R. (PI), **Brubacher, J.**, Iverson, G., Madler, B., Heran, M., McKay, A. & Andolfatto, G.

Funding body: CIHR, Operating Grant

Background: Traumatic brain injury (TBI) is a leading cause of death and disability in persons under the age of 50 and alcohol misuse is a significant risk factor. Between 37-53% of patients presenting to the emergency department with a TBI are intoxicated. Day-of-injury alcohol intoxication has significant implications for the diagnosis, management, treatment and recovery from TBI. Patients who are intoxicated at the time of injury are more difficult to manage and treat, have a slower acute recovery, and place an increased economic burden on the healthcare system. However, the mechanism for these effects is poorly understood. Some researchers have suggested that patients who are intoxicated at the time of injury experience an increased magnitude of brain injury due to a variety of negative physiological responses to ethanol (e.g., hemodynamic and respiratory depression). Others have suggested that worse outcome following intoxicated-TBI simply reflects the negative effects of pre-injury alcohol misuse that is common in these patients. The diagnostic, management and treatment implications of these two explanations are vastly dissimilar. A greater understanding of their relative contribution to TBI outcome will facilitate the development of more effective treatment and rehabilitation options for these patients. The objective of this project is to disentangle the contributions of day-of-injury alcohol intoxication and pre-injury alcohol misuse on outcome from TBI. We will study outcome from TBI during the first 12 months post-injury (i.e., the most critical period of the recovery trajectory) using a multidisciplinary approach that examines neurocognitive (e.g., attention, memory), neurobehavioural (e.g., emotional and quality of life factors) and neuropathological (i.e., white matter integrity in the corpus callosum) outcome variables.

Progress to date: We are recruiting participants and on track to meet our recruitment objectives.

Individual Differences in Substance Abuse and Addiction: At the Intersection of Brain, Cognition, Genetics and Personality

Investigators: Holroyd, C.B. (PI), Barnes, G.E., Macleod, P.M. & Stockwell, T.

Funding body: CIHR

Background: This study asks why do only some people who use drugs actually become addicted, considering harmful substance use is a major public health concern? Can sufficient exposure to substances of abuse cause anyone to become dependent or do addicts simply lack the will power to resist? In this research, we understand addiction to involve a set of complicated processes including biological, behavioural, cognitive, social and personality-related factors. Notably, all addictive substances act on a neural system for reinforcement learning called the midbrain dopamine system, which projects to and regulates the brain's system for cognitive control, called frontal cortex. Further, the development and expression of the dopamine system is determined in part by genetic factors that vary across individuals such that dopamine-related genes are partly responsible for addiction-proneness. We have recently found that young adults who are dependent on substances of abuse produce an abnormal brainwave response to reinforcing events and, further, that they behave abnormally on a decision-making task that is diagnostic of dopamine dysfunction. In this project, we propose to conduct a series of experiments that will investigate whether this atypical brain response is: 1) associated with abnormal reinforcement learning, 2) elicited by drug rewards, 3) present in adolescence even before significant substance use, and 4) associated with genes that code for the expression of the dopamine system. In so doing, we hope to tease apart biological, cognitive and personality-related factors underlying substance abuse that will be amenable to treatment.

Progress to date: *Study 1* has been published and presented at several national and international conferences. Our investigation revealed two groups of dependent individuals, one characterized by disrupted dopamine-dependent reward learning and the other by disrupted error learning associated with depression-proneness. *Study 2* data collection has been completed and we are in the process of writing up the report. Our previous two studies indicate that the reward positivity (RP), an ERP measure of a cortical mechanism for dopamine-dependent reward processing, is selectively disrupted in substance-dependent users. In this study, we investigated whether this disruption reflected a decreased value of "normal" rewards relative to drug-related rewards. The results indicated substance-dependent smokers, compared to non-dependent smokers, showed a reduced RP to earning money relative to earning cigarette puffs. *Study 3* is in progress. *Study 4* has been submitted for publication and has been presented at several national and international conferences. Our results bridge the gap between genes and behaviour by revealing several dopamine-related neural pathways underlying individual differences in substance dependence, and illustrate how future interventions might be individually tailored for specific genetic, cognitive and personality profiles that acknowledge the heterogeneity of the addicted population.

RESEARCH PRIORITY 3:

EDUCATIONAL, LEGISLATIVE AND REGULATORY STRATEGIES

CARBC PROJECTS

Alcohol Outlet Privatization: The British Columbia Experiment

Investigators: Treno, A., Martin, A., Gruenewald, P., Macdonald, S. & Stockwell, T.

Funding body: National Institutes of Alcohol Abuse and Alcoholism

Background: This international collaborative project led by the Prevention Research Center of the Pacific Institute for Research and Evaluation involves a detailed examination of the public health and safety impacts of the partial privatization of the BC liquor market since 2000. Additional data will be collected regarding variations in drink prices as a consequence of partial privatization and variations in health and crime outcomes in different parts of the province over time as they relate to changing outlet densities and patterns of sales.

Progress to date: This project has now been formally completed and several papers have been either published or submitted for publication. These have focused on the relationship between privatization of the BC liquor market and outcomes such as increased alcohol-related mortality, morbidity and crime.

Does Minimum Pricing Reduce the Burden of Disease and Illness Attributable to Alcohol?

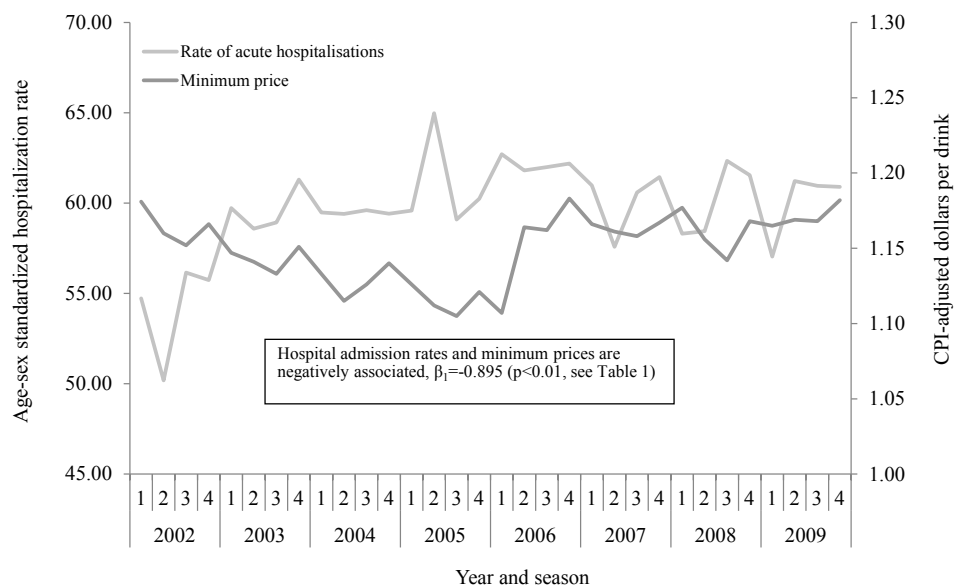
Investigators: Stockwell T. (PI), Auld, C., Brennan, A., Buxton, J., Giesbrecht, N., Macdonald, S., Meier, P. & Thomas, G.

Funding body: CIHR

Background: The central hypothesis underlying these studies is that restricting the availability of cheap alcohol is an effective strategy to prevent and reduce many kinds of alcohol-related harm. The following linked questions are addressed: How is the price paid for alcohol in Canada related to gender, age, level of drinking and experience of alcohol-related problems? How effective have Canadian minimum pricing regulations been at reducing alcohol consumption and the related burden of disease and injury? How would alternative minimum pricing regulations impact the burden of disease and injury from alcohol in a Canadian jurisdiction? The research program aims to move alcohol research and policy debates beyond the broad non-specific objective of raising the price of alcohol to a focused examination of a strategy likely to be more targeted to public health and safety problems caused by excessive alcohol consumption.

Progress to date: This project has generated five peer-reviewed journal articles, one book chapter and a CARBC technical report. A knowledge translation event was held in Toronto in December 2012 which was well attended both in person and virtually, with over 400 people accessing the video link. The material has been widely publicized, especially in the United Kingdom and Australia where minimum pricing policies are being actively discussed.

Rates of acute alcohol attributable hospitalization and CPI-adjusted minimum alcohol prices in British Columbia, 2002-2009



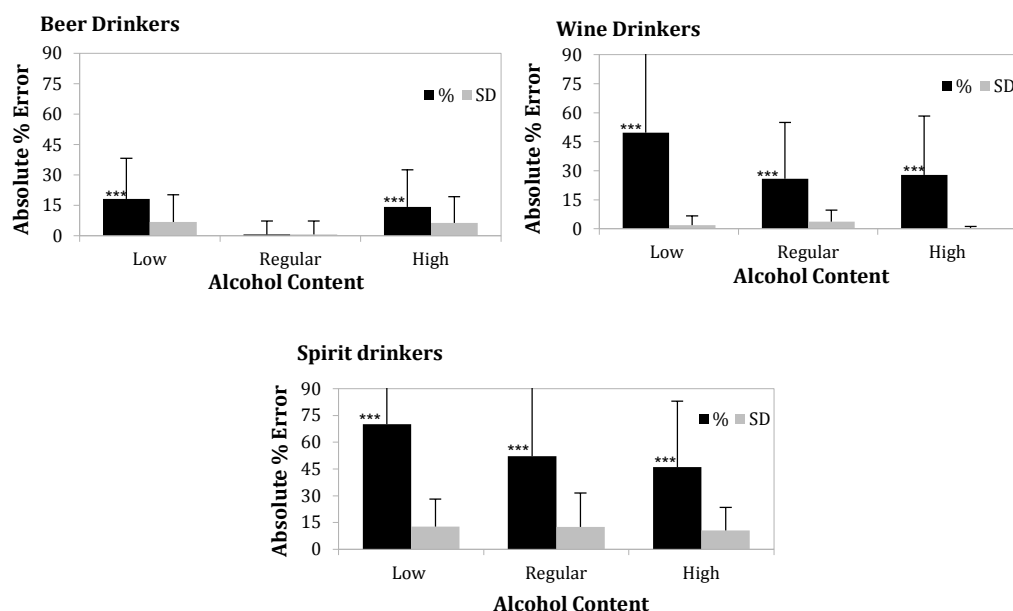
Source: Minimum alcohol prices and outlet densities in British Columbia, Canada: Estimated impacts on alcohol-attributable hospital admissions. American Journal of Public Health (see <http://ajph.aphapublications.org/doi/pdf/10.2105/AJPH.2013.301289>)

How Much Did You Actually Drink Last Night? The Effect of Standard Drink Labelling on an Alcohol Estimation Task

Investigators: Osiowy, M., Stockwell, T. (PIs), Zhao, J., Thompson, K. & Moore, S. (Co-Is)

Background: The wide range of available alcohol container sizes and alcoholic strengths present a challenge to drinkers who wish to adhere to low-risk drinking guidelines expressed in terms of numbers of “standard drinks.” Our study investigated whether beer, wine and spirit drinkers are better able to estimate personal alcohol consumption when presented with containers with standard drink (SD) than with percent alcohol by volume (%ABV) labels.

Progress to date: We recruited 301 beer, wine and spirit drinkers outside of two private liquor stores in Victoria, BC and they participated in our experiment. Results revealed that beer, wine and spirit drinkers were much more accurate at estimating the SD content of their preferred beverages when provided with SD compared to %ABV labels. Furthermore, the majority of the sample supported the idea of SD labelling on alcoholic beverages in Canada. The results have been presented at the Psychology Students of Vancouver Island poster session, a CARBC in-house talk, and a Network of African Science Academies conference. One paper has been submitted for publication.



The absolute % error of beer (top left), wine (top right) and spirit (bottom) drinkers when presented with SD and %ABV labels on alcoholic beverages of varying strengths

Reducing Alcohol-Related Problems by Implementing Evidence-Based Tools that Translate Research Knowledge into Prevention Practices

Investigators: Giesbrecht, N. [PI], April, N., Asbridge, M., Cukier, S., Mann, R., Shield, K. & Stockwell, T.

Funding body: CIHR, Operating Grant, \$161,234

Background: This two-year project brought together a collaborative team across multiple Canadian provinces that developed a set of detailed procedures and protocols for rating the quality of provincial alcohol policies in 10 key evidence-based domains (e.g., pricing, availability, brief interventions, control of liquor distribution, provincial strategy, controls on advertising and impaired driving interventions). Data were collected with the assistance of contacts in relevant health and liquor administration departments of each provincial government, data summaries were checked, and a detailed report card for all provinces prepared for wide dissemination.

Progress to date: The main report has been completed and disseminated through a video-linked seminar. Provincial summary reports are now being prepared for local dissemination.

The Impact of Immediate Roadside Prohibitions for Drinking Drivers on Alcohol-Related Collisions

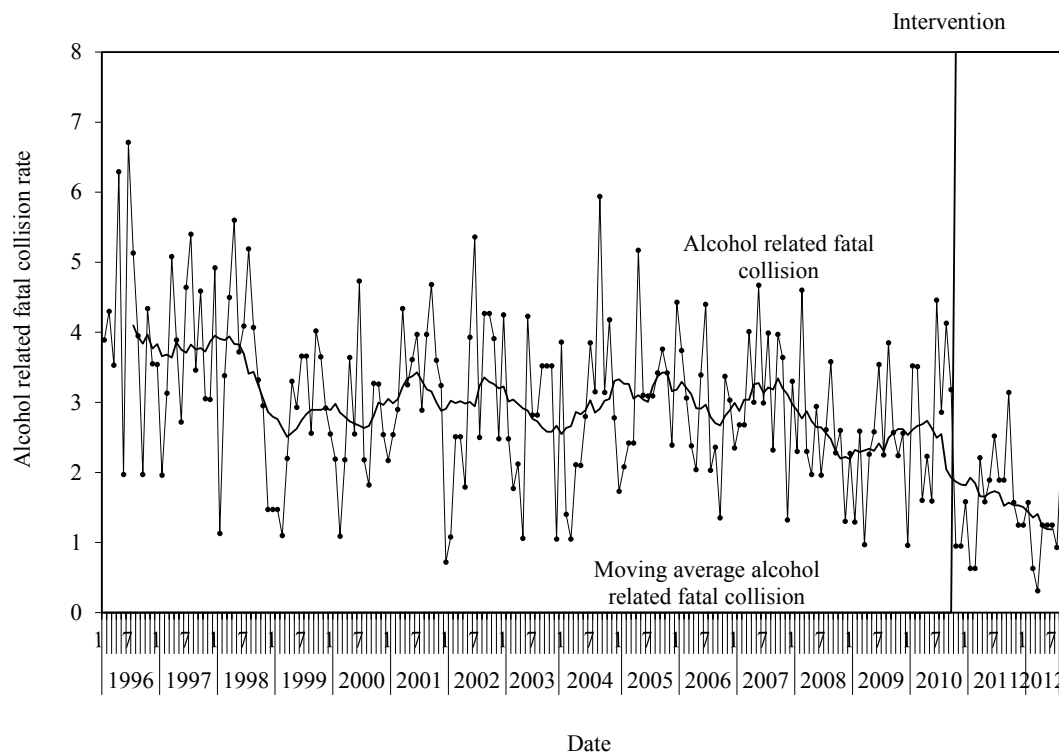
Investigators: Macdonald, S., Zhao, J., Martin, G., Brubacher, J., Stockwell, T., Arason, N., Steinmetz, S. & Chan, H.

Funding body: CARBC Endowment Fund

Background: On September 20, 2010, the BC Government introduced new laws for drivers with blood alcohol content (BAC) levels above .05% alcohol. The purpose of this project is to assess the impact of these new regulatory sanctions on alcohol-related collisions.

Progress to date: Data has been collected on alcohol-related crashes for 15 years before the intervention and one year after. Initial ARIMA time series analyses show significant declines in alcohol-related fatalities and injuries associated with the intervention. An article was published in the journal *Accident Analysis and Prevention* indicating fatal alcohol-related crashes decreased by 40% after the new laws were introduced.

Monthly alcohol-related fatal collision rate per 1,000,000 licensed drivers in BC, 1996-2012



Source: Macdonald, S., Zhao, J., Martin, G., Brubacher, J., Stockwell, T., Arason, N., Steinmetz, S. & Chan, H. (2013). The impact of Immediate Roadside Prohibitions for drinking drivers on alcohol-related collisions. *Accident, Analysis and Prevention*. See: www.sciencedirect.com/science/article/pii/S0001457513002030



Scott Macdonald



Jinhui Zhao



Gina Martin

CARBC AFFILIATED PROJECTS

Evaluation of Traffic Safety Interventions in British Columbia.

Investigators: Brubacher, J. (PI), Schuurman, N., Macdonald, S., Purssel, R., Brasher, P., Desapriya, E., Pike, I. & Asbridge, M. (Co-Is).

Funding body: CIHR, Operating Grant, \$149,868, from April 1, 2012 to March 31, 2014.

Background: Motor vehicle crashes (MVCs) are the leading cause of death for young adults. Each year in Canada, 125,000 MVCs result in over 12,000 serious injuries and 2,400 fatalities. The societal costs of MVCs in Canada (2004) was estimated at \$63 billion. The British Columbia (BC) road fatality rate (8.1 per 100,000 people) is above the national average (7.3) and far higher than in countries with the safest roads (e.g., Netherlands at 4.3). Preventable driver factors, especially speeding, impaired driving and distracted driving, play a role in most fatal or injury crashes. Laws targeting unsafe driver behaviour are one of the most effective ways of reducing crashes. In 2010, BC amended its Motor Vehicle Act to include the strongest laws against unsafe driver behaviour in North America. These laws were subject to a court challenge and some sections of the new laws were ruled unconstitutional (November 30, 2011) and are now on hold pending additional amendments to BC's Motor Vehicle Act. This situation is being watched closely by other provinces. Alberta passed similar legislation (December 6, 2011). Alberta's new laws have come into effect and are also meeting resistance. Given this rapidly evolving situation, BC's new traffic laws must be objectively evaluated in a timely fashion. Our team will work closely with government and community road safety stakeholders to evaluate process and outcome with attention to how implementation and contextual factors may modify the outcome. Our results will inform BC's road safety strategy and will be relevant for road safety policymakers and stakeholders from Alberta and other jurisdictions.

Progress to date: A preliminary analysis has been completed under the direction of Dr. MacDonald. This analysis found a 40.5% reduction in fatal alcohol-related crashes during the first two years following the new laws. In-depth evaluations are being completed.

Medical Cannabis Standards, Engagement, Evaluation, Dissemination (SEED) Project

Investigators: Walsh, Z., Capler, R. & Lucas, P.

Funding body: Peter Wall Solutions Initiative

Background: Zack Walsh (PI) and medical cannabis community liaison in UBC-affiliated community-based research project to assist the Canadian Association of Medical Cannabis Dispensaries with the creation of standards and an associated certification program for dispensaries in BC.

Progress to date: Work involves review of standards and certification process, organizing broad-based stakeholder consultations, and developing an evaluation strategy to monitor the impact on dispensaries, patients and communities.



Zach Walsh



Philippe Lucas



Jeffrey Brubacher

RESEARCH PRIORITY 4:

COMMUNITY-BASED PREVENTION PROGRAMS

CARBC AFFILIATED PROJECTS

Acting Together on Youth and Violence: Community-University Research Alliance (CURA)

Investigators: Bhatt, G., Tweed, R., Dooley, S. & **Macdonald, S.**

Funding body: SSHRC

Background: Identify culturally relevant protective factors and youth strengths that help prevent involvement of youth in gang-related violence. Make recommendations to modify existing programs to better target the identified protective factors. Disseminate knowledge through training workshops for service and program agencies, as well as through ongoing community conversations and through academic, public and electronic media, including a website. Empower the community for evidence-based advocacy to influence lawmakers, policymakers and program funders. Improve the media images of our community and youth.

Progress to date: Six sub-studies have been planned, with data collection completed for two studies and ongoing fieldwork for the remaining four studies. Several community events, conference presentations and papers have been completed.

A Mixed Method Evaluation of the Impact of the Dr. Peter Centre on Health Care Access and Outcomes for Persons Living with HIV/AIDS Who Use Illicit Drugs

Investigators: Barrios, R. & Hogg, R.S. (PIs), **Pauly, B. (Co-I)**

Funding body: CIHR, Partnership for Health System Improvement Grant

Background: The availability of highly active antiretroviral therapy (HAART) has produced significant health benefits for persons living with HIV/AIDS. Unfortunately, many people living with HIV/AIDS face substantial barriers to accessing and adhering to HIV-related healthcare and support services, and typically experience sub-optimal treatment outcomes, even in BC where HIV treatment is free of charge. The focus of this study is to determine the effectiveness of integrated healthcare and harm reduction programming on HIV/AIDS-related outcomes for people living with HIV/AIDS who face multiple and complex barriers to optimal treatment experiences. The study will be conducted at the Dr. Peter Centre which offers low barrier access to services, including services that reduce environmental risk factors and drug-related harms for people living with HIV/AIDS.



Bernie Pauly



Scott Macdonald

Effects of HAART Expansion on Community Levels of HIV Viral Load and HIV Risk Behaviours Among MSM in British Columbia (1) / HAART Optimism, Drug Use and Risky Sexual Behaviour (2)

Investigators: Hogg, R., Moore, D., Montaner, J., **Roth, E. & Michelow, W.**

Funding bodies: (1) CIHR / (2) National Institutes of Health

Background: These related longitudinal projects are both run through the BC Centre for Excellence in HIV/AIDS at St. Paul's Hospital in Vancouver. Both focus on understanding the effects of the diffusion of antiretroviral drugs or HAART (Highly Active Anti-Retroviral Therapy) among men who have sex with men (MSM) in Greater Vancouver. The project's main hypothesis is that substance use, associated with treatment optimism, will result in increased high-risk sexual behaviour for this population.

Progress to date: The project, now named MOMENTUM, is utilizing respondent-driven sampling methodologies to recruit MSM and has now recruited 400 participants. This recruitment strategy was aided by formative research that identified social and sexual networks within the Vancouver MSM community and explored the role of substance use patterns, ethnicity and HIV status on their formation. Paper and poster presentations on this work were presented at the 22nd Annual Canadian Conference on HIV/AIDS Research in Vancouver and at the Ontario HIV Trials Network Conference in Toronto in November. One paper on this formative research has been submitted for journal review.

FASD Action Fund Program Evaluation

Investigators: **George, A.**, Hardy, C. & Clark, E.

Funding body: Victoria Foundation

Background: The \$7 million Fetal Alcohol Spectrum Disorder Action Fund administered by the Victoria Foundation provided grants to 22 demonstration projects, with the goal of preventing and improving care for FASD-affected children and youth and their families.

Progress to date: Completed. Final report submitted June 2012.

HIV Prevention for People Who Use Drugs: A Cross Canada Meeting to Plan the Research Project

Investigators: Strike, C., Hopkins, S. (PIs), **Buxton, J.**, Leonard, L., Millson, M. & Young, S. (Co-Is)

Funding body: CIHR, Planning Grants – Priority Announcement: HIV/AIDS

Background: Developing cross-Canada best practices document.

Progress to date: Final editing before publication.

Kenya Free of AIDS: Harnessing Interdisciplinary Science for HIV Prevention

Investigators: Morris, M., Ngugi, E., **Benoit, C.**, Hallgrimsdottir, H., **Jansson, M. & Roth, E.**

Funding body: National Institutes of Health

Background: Kenya Free of AIDS is an NIH Centre grant (R24) linking the Universities of Nairobi, Washington and Kenya to provide multidisciplinary research and training in HIV and AIDS. The program includes four field-based pilot studies. Project 4, entitled *Exploration of Kenyan Female Commercial Sex Workers and Their Male Partners: Life Course and Harm Reduction Approaches*, focuses on understanding the social epidemiology of Kenyan female sex workers.

Progress to date: Three field seasons have been successfully completed. In the first, we adopted respondent-driven sampling techniques to recruit 160 female sex workers from the informal urban settlement of Kibera, Nairobi, Kenya, and an additional 160 women who had never engaged in commercial sex work. The second field season produced a sample of 220 men recruited from Kibera bars to identify male clients of female sex workers. In the third season, we interviewed 30 HIV+ Kibera female sex workers to assess the social and epidemiological consequences of having romantic partners. The team presented two papers at the Annual Review Meeting, University of Nairobi STD/AIDS Collaborative Group, Nairobi, Kenya. Data from this project currently form the material for two MA theses in the Social Dimensions of Health program at UVic. Two peer-reviewed articles on this work have appeared in *Human Ecology* and *Culture, Health and Sexuality*, and two others are in submission.

Population Health Interventions to End Homelessness

Investigators: Hwang, S. (PI), Aubry, T., **Benoit, C.**, Dunn, J., Farrell, S., Hoch, J., Hubley, A., Hulchanski, J., Klodawsky, F., Maclaurin, B., Palepu, A., Shapcott, M., Stergiopoulos, V. & Worthington, C. (Co-Is).

Funding body: CIHR

Background: Local coordinators are continuing to identify and code key documents, including municipal HAPs, public consultation reports about the HAPs, progress or evaluation reports, NHI/HPS reports, other municipal policy documents related to HAPs, reports written by community organizations involved in homelessness and housing issues, and provincial and federal policy statements or documents about homelessness and housing issues. Site coordinators are reviewing the history of HPS funding to develop a conceptual framework for policy directions that have informed past and current HAPs or community plans.

Progress to date: A database has been created to collect population-level data from each city beginning from 2005 to the present. Site coordinators are finalizing their list of key informants for interviews. An interview guide is being prepared which will include targeted questions focused on the political landscape in each city.

Staying Safe in Vancouver: Identifying Strategies by Long-Term Injection Drug Users to Avoid HIV and HCV Infection

Investigators: Salmon, A. (PI), Buxton, J., Pauly, B., Snow, M., Friedman, S., Meteau-Gelebert, P. & Money, D.

Funding body: CIHR

Background: While much is known about the factors which increase risk for both infections among injection drug users, relatively little is known about the life circumstances or prevention practices that are associated with remaining uninfected despite long and sustained periods of injection drug use. Research on HIV non-infection has to date focused on biological mechanisms that may promote resilience. However, significant gaps in knowledge exist regarding patterns of long-term behaviour and social interaction that can lead to strategies and practices of risk avoidance. We will address this gap by comparing data from in-depth life history interviews with two groups of long-term injection drug users: people who have remained uninfected with neither HIV nor HCV, and people who are co-infected with both HIV and HCV. The purpose of this study is to identify how some people who inject drugs have managed to avoid becoming infected with either HIV or HCV, in spite of having injected drugs for many years in a locality in which the majority of people who inject drugs have acquired HCV and a substantial minority have become infected with HIV.

Progress to date: In a review of several cohorts of people who inject drugs in Vancouver, the prevalence of HIV and Hep C made it difficult to recruit individuals who were HIV and Hep C negative. This was particularly difficult given that a primary focus of this study was to understand the gendered context of injection drug use and HIV transmission. Multiple strategies for recruitment were employed. A final report and paper are under development to highlight the challenges of using cohort data and sampling challenges in an area with high rates of HIV and Hep C.

Youth Injection Prevention Project Dissemination

Investigators: Buxton, J., Saewyc, E., Taylor, D., Smith, A. & Martin, R.

Funding body: Vancouver Foundation

Background: Taking the results of focus groups and interviews performed in Lower Mainland about what prevents youth from injecting drugs through workshops around BC.

Progress to date: Completed.

RESEARCH PRIORITY 5:

TREATMENT SYSTEMS AND PROGRAMS

CARBC PROJECTS

An Evaluation of the Kwaie Kii Win Centre Alcohol Management Program, Thunder Bay, Ontario

Investigators: Stockwell, T., Pauly, B. (Co-PIs), Gray, E., Chow, C., Perkin, K., Vallance, K., Hajdu, P. & Krysowaty, B.

Funding body: Shelter House, Thunder Bay, \$37,540, February to December 2013

Background: During the preparation of a CIHR funding proposal, Drs. Pauly and Stockwell made contact with this project in Thunder Bay. In addition to participating in the proposal, the management of the project requested CARBC to develop a proposal to implement an evaluation of their Manage Alcohol Program which is now going forward as a pilot for what is hoped to be a national multisite evaluation.

Progress to date: A research coordinator has been appointed and baseline interviews conducted with MAP participants and controls in neighbouring agencies.

Fostering Cultural Safety in Nursing Practice with People Experiencing Problematic Substance Use

Investigators: Pauly, B., MacCall, J. (Co-PIs), Browne, A. (Co-I), Parker, J. (coordinator), Ashley Mollison (RA) & Catherine McLaren (RA)

Funding body: Michael Smith Foundation for Health Research

Background: People experiencing substance use problems often face difficulties in accessing and using healthcare services because of stigma and discrimination associated with drug use and poverty. Healthcare providers, including registered nurses, often report difficulties providing care in such situations, and individuals with problematic



Bernie Pauly



Clifton Chow



Kate Vallance



Kathleen Perkin



Corrine Lowen



Cecilia Benoit

substance use often report very negative experiences with healthcare. As a result, people who use substances may delay, discontinue or avoid seeking healthcare, resulting in increased costs to the healthcare system. Cultural safety is a framework for practice that has been used successfully in other settings for delivery of care to marginalized populations. However, it has not been examined in the nursing care of people with substance use problems. The purpose of this project is to generate new knowledge that will foster understanding of what constitutes safe nursing care in acute care settings for people who are experiencing problematic substance use and social disadvantage.

Progress to date: Nurse and peer advisory groups were established and have met regularly to inform data collection and analysis, as well as to guide knowledge translation activities. Interviews were conducted with 15 patients, 12 front-line nurses and 7 nurse managers or nurse educators. Members of the research team completed over 300 hours of participant observation and reviewed policy and other documents. Data analysis is complete. We hosted two policy forums (one in Vancouver and one in Victoria) where we shared findings and revised our emerging recommendations with peers, front-line nurses, nursing managers and educators. We are developing papers for publication, conference presentations, and knowledge translation summaries to enhance uptake of key findings and recommendations across BC, Canada and internationally (including a presentation at the Harm Reduction International Conference in June 2013).

Intensive Case Management and Assertive Outreach Program Standards and Guidelines

Investigators: Pauly, B., Lowen, C., Perkin, K. & Jackson, N.

Funding body: BC Mental Health Foundation

Background: There are a variety of models for integration of primary care, mental health and substance use services. For those with severe and persistent problems, a fully integrated system of care that includes both services and housing is needed. Intensive case management and assertive community treatment are two recommended models of wrap-around services for those with severe and persistent problems. In this project, the focus will be on development of intensive case management program standards and guidelines that provide an alternative to clinical case management and assertive community treatment in terms of differing case loads, intensity of involvement, incorporation of an assertive outreach component, and as part of an integrated approach to care delivery.

Progress to date: Standards and guidelines for intensive case management have been developed. These guidelines were informed by a literature review of intensive case management, interviews with key informants who have expertise in service design, an expert steering committee, and client user groups.

Interventions to Promote Health and Healthy Equity for Pregnant and Early Parenting Women Facing Substance Use and Other Challenges

Investigators: Benoit, C., Marcellus, L. (Co-PIs), Anderson, K., Hallgrimsdottir, H. & MacKinnon, K.

Funding body: CIHR, Operating Grant on Population Health Intervention Research

Background: The HerWay Home (HWH) program is a first-stage intervention that recently emerged in the Capital Regional District of Victoria, BC to deliver better care to pregnant and early parenting women facing substance use and other challenges. This grant provides funds to investigate from the earliest stages the benefits and challenges of the unique human resources framework employed by the HWH program.

Progress to date: To date, interviews have been conducted with 82 representatives from health and social service providers. The data have been analyzed and written-up for five conference presentations, two posters, and two journal articles.

Pilot Evaluation of a BC Managed Alcohol Program

Investigators: Stockwell, T., Pauly, B., Chow, C., Vallance, K., Perkin, K., Hacksel, C. & Joe, R.

Funding body: Vancouver Coastal Health

Background: Managed Alcohol Programs (MAPs) operate in other parts of Canada, though to date only one evaluation has previously been published. This indicated that an Ontario-based program successfully helped previously homeless alcohol-dependent men to reduce their consumption and experience fewer acute alcohol-related problems. The program involved offering them sheltered accommodation along with controlled access to alcohol in hourly doses. This harm reduction approach is being increasingly considered in BC as a means of responding to people with unstable housing and severe alcohol problems who appear unable or unwilling to engage in abstinence treatment. Related motivation is to encourage reduced use of non-beverage sources of alcohol such as methylated spirits, rubbing alcohol, hand sanitizer and mouthwash. This project involved baseline three-month and six-month assessments of a small number of individuals participating in a new BC MAP covering physical health, mental health, patterns of alcohol use and use of services.

Progress to date: Baseline and six month follow-up data have been collected and analyzed. The final report has been submitted to Vancouver Coastal Health Authority and Portland Hotel Society.

Treatment and Prevention of Illicit Substance Use among Pregnant and Early Parenting Women

Investigators: Benoit, C., Marcellus, L. (Co-PIs), Anderson, K., Hallgrimsdottir, H. & MacKinnon, K.

Funding body: Queen Alexandra Hospital Foundation, United Way of Greater Victoria, a private donation, and CIHR Catalyst Grant: Prevention and Treatment of Illicit Substance Use

Background: This grant is for the development of a peer-based arm of the HerWay Home (HWH) program. The HWH program first emerged as a grassroots idea in the Capital Regional District of Victoria, BC in 2007. A multi-agency collaboration of more than 30 agencies joined together to build an alternative care model for pregnant and early parenting women who use substances and face multiple life challenges. The program is just opening its doors and offers a variety of programs and services designed to meet the diverse needs of the local community. The HWH program model is designed to be cross-sectoral, community-based, single access ("one-stop shop") and culturally safe. The theoretical foundations of service and care delivery are: women-centred, child-focused, family-oriented, trauma-informed and harm reduction. The HWH core program services will include basic needs support (e.g., nutrition and child minding), primary health and perinatal services, counselling for substance use, trauma and mental health counselling, and a housing allowance component. Short-term stabilization housing for women exiting detox and second stage supportive housing with wrap-around services are planned for 2013. HWH's planning phase has been supported by research from two CIHR-funded grants aimed at developing a workable human resources framework, including identification of barriers to and facilitators of teamwork among a mix of providers.

Progress to date: The primary objectives of the grant have been fulfilled with regard to establishing a peer-based arm of the HWH planning group and collecting pertinent service data from the HWH target population. To date, 36 interviews (28 females, 8 males) have been conducted with the HWH target population. These interviews have focused on learning about the demographic background of the HWH target population, their perinatal and parenting service experiences, preferences and goals, their experiences regarding related social determinants of health (housing, economic security, social support, exposure to violence), their current involvement with local services, and their perceptions and experiences regarding substance use. Drawing on this data, the research team has been able to inform in an in-depth way ongoing planning for HWH. In addition to participating in community and executive planning meetings for this new service, the research team has developed publications and presentations regarding the demographic background of HWH clientele, their service preferences and their conceptualization of substance use. The data have been analyzed and written-up for three conference presentations, two posters, and one journal article.

CARBC AFFILIATED PROJECTS

A Comparison of the Effects of Smoked Whole-Plant Cannabis of Different THC Concentrations in Non-Treatment Naive Patients with Chronic Pain – The Vancouver Island Compassion Society

Investigator: Lucas, P. (PI)

Funding body: Marijuana Policy Project

Background: This research is an ongoing examination of the effects of smoked cannabis on chronic pain.

Progress to date: Ethics approval received. Project on stand-by pending proposed Health Canada changes to Canadian cannabis supply options.

Canadian HIV Women and Reproductive Health Cohort Study, a Canadian Observational Cohort (CANOC) Affiliated Study

Investigators: Loutfy, M.R., Kaida, A., Hogg R. & Roth, E.

Funding body: CIHR, Health Research Operating Grant

Background: A longitudinal study of Canadian HIV+ women recruited from previous cohorts in Ontario, Quebec and British Columbia, this project is concerned with identifying barriers and pathways to health services.

Progress to date: Initial work has focused on completing a study instrument. Eric Roth was the team leader for producing the questionnaire section on substance use, working with Dr. Eliza Lloyd-Smith and Allison Carter, MPH, both of the BC Centre for Excellence in HIV/AIDS. This section was completed successfully and the project will start collecting data this summer.

Cannabis Access for Medical Purposes Survey (CAMPS)

Investigators: Walsh, Z., Callaway, R., Belle-Isle, L., Capler, R., Holtzman, S., Kay, B., Lucas, P., Marshall, J., Stratton, T. & Woodworth, M.

Funding body: Institute for Healthy Living and Chronic Disease Prevention

Background: Co-researcher (Zach Walsh, PI) in a community-based study of self-identified medical cannabis patients in Canada. The primary focus of this study is a comprehensive national online survey designed to document day-to-day realities of Canada's medical cannabis patient community, and to identify and potentially address barriers blocking safe access to medical cannabis. This study is affiliated with the University of British Columbia.

Progress to date: 600+ survey responses so far. Preliminary data analysis is currently underway.



Philippe Lucas



Eric Roth



Zach Walsh



Lynne Belle-Isle

Equity-Oriented Primary Healthcare Interventions for Marginalized Populations: Addressing Structural Inequities and Structural Violence.

Investigators: Browne, A., Varcoe, C., Ford-Gilboe, M. (Co-PIs), **Pauly, B.**, Campbell, P., Godwin, O., Jackson, B., Krause, M., Littlejohn, D., Pahal, P., Varley, L., Wallace, B., Ward, C., Whynot, E., Herbert, C., Lavoie, J., MacDonald, M., Syme, V., Tu, D., Wathen, N. & Wong, S. (Co-Is).

Funding body: CIHR

Background: *Equity-Oriented Primary Healthcare Interventions for Marginalized Populations: Addressing Structural Inequities and Structural Violence* (EQUIP) seeks to contribute new knowledge about innovative primary healthcare interventions to mitigate the effects of structural inequities and structural violence for marginalized populations and the policy environments needed to support such programming. The focus of the research is the impact of an intervention for staff working at primary healthcare clinics working with marginalized populations. The intervention includes staff training on equity, cultural competence and trauma- and violence-informed care. The researchers will examine the effects of this intervention on changes in the way staff provide healthcare. This research is being conducted at two sites in BC (including Victoria) and two in Ontario.

Progress to date: The first phase of data collection at the BC sites is complete, and researchers are now doing preliminary analysis and planning for further data collection in BC and Ontario.

LifeRing Canada: Member Survey of a Secular Peer Support Program for Sobriety

Investigator: Sotskova, A.

Funding body: University of Victoria Internal Research Grant

Background: Peer support groups (PSGs) for addiction recovery are the most common source for aftercare services once professional treatment has ended, and a significant number of individuals who seek help for a substance-related problem only seek that help from peer support organizations. In the last two decades, a different culture of “recovery” from substance misuse has led to the emergence of new PSGs. However, very few research studies to date have examined how more recent, typically secular PSGs work, what aspects of them attract participants, and what participants find helpful about the groups. Further, very little is known as to whether theories that have been applied to clinical treatment, such as the Stages of Change model, apply to the peer support environment. LifeRing is a secular PSG that views substance misuse as a learned habit that can be changed through taking responsibility for one’s actions and actively engaging with sober peers. The proposed study will examine the demographics of LifeRing participants residing in Vancouver Island, how motivation to stay sober and active participation in the LifeRing program relate to participants’ perception of the organization’s meetings, and what LifeRing members find beneficial about attending the program. To examine these questions, the current study will explore quantitative and qualitative data from 50 LifeRing participants residing on Vancouver Island.

Progress to date: Data is now collected and will be analyzed as part of a doctoral dissertation and eventual publication. Preliminary data has also been presented to LifeRing Canada stakeholders.

Observational Study of Ayahuasca-Assisted Therapy for Addiction and Patterns of Dependence

Investigators: Thomas, G., Lucas, P., Capler, R., Tupper, K. & Martin, G.

Funding body: Multidisciplinary Association for Psychedelic Studies (MAPS)

Background: Coordinator and co-researcher (Gerald Thomas is PI) of a study examines the outcomes of ayahuasca-assisted therapy on compulsive behaviours.

Progress to date: Article from project is currently in press, entitled Ayahuasca-assisted therapy for addiction: Results from a preliminary observational study in Canada. *Current Drug Abuse Reviews*.

Quality of Service Assessment of Health Canada's Marijuana Medical Access Division

Investigators: Lucas, P. & Hathaway, A.

Funding body: McMaster Arts Research Council

Background: Consisting of an online survey coupled with 25 semi-structured interviews of federally authorized medical cannabis patients, this is the first attempt to solicit feedback on Canada's federal medical cannabis program from end users.

Progress to date: Results published in *Harm Reduction Journal*.

RESEARCH PRIORITY 6:

SOCIAL DETERMINANTS AND CONTEXTS OF SUBSTANCE USE

CARBC PROJECTS

Contexts of Vulnerabilities, Resiliencies and Care among People in the Sex Industry

Investigators: Benoit, C. (PI), Abel, G., Atchison, C., Davies, S., Goodyear, M., Hallgrimsdottir, H., Jansson, M., McCarthy, B., Pacey, K., Phillips, R., Reist, D., Roth, E., Shabna, A., Shannon, K., Shaver, F. & Spittal, P.

Funding body: CIHR, Research Team Grant: Violence, Gender and Health

Background: The priority that Canadians place on health is reflected in the dramatic decrease in premature mortality and increase in disability-adjusted life expectancy in recent decades. Yet these benefits are not shared equally by all Canadians. This research program focuses on the sources of differences in health and safety among one of these groups: sex workers, many of whom face elevated risks of problematic substance use, unsafe working conditions, violence and premature death. Though research has explored the current legislative context of prostitution in Canada, few studies have systematically investigated the work of police, regulatory agencies and social service providers, as well as the behaviours of customers, managers and intimate partners as social determinants of sex workers' risk behaviours (including problematic substance use), workplace safety, and health and well-being in public and private life.

Progress to date: We have conducted approximately 200 interviews so far with sex workers in Victoria, Montreal, St. John's, Kitchener, Waterloo, Fort McMurray and Calgary. Interviewing will continue until late-June 2013. We have also conducted a smaller sample of interviews with intimate partners, managers of sex work establishments, police and other outreach workers. A third team face-to-face is planned for end of May 2013. A major national report is being prepared for the fall of 2013. The preliminary data have been analyzed and written-up for nine conference presentations and two posters. Journal articles are in preparation.



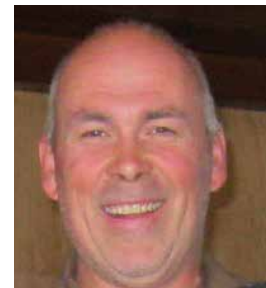
Cecilia Benoit



Rachel Phillips



Eric Roth



Mikael Jansson

Development of a Report on Housing and Social Supports

Investigators: Pauly, B. & Wynn-Williams, A. (Co-PIs), Jackson, N. & Cross, G.

Funding body: Greater Victoria Coalition to End Homelessness

Background: Each year the Greater Victoria Coalition to End Homelessness, in partnership with CARBC, releases a report detailing housing and social supports in the Victoria, BC area. The goal of the report is to monitor structural determinants that impact homelessness and housing stability in Greater Victoria. Analysis is based on data gathered from approximately 20 agencies and focuses on the social conditions that shape access to and resources for housing, the extent of homelessness in our community, and an overview of community responses to the social conditions that impact homelessness. The 2012/13 report will include significant input from individuals who have experience of homelessness, through the involvement of the Social Inclusion Team at the Greater Victoria Coalition to End Homelessness.

Progress to date: A 2012/2013 report will be released in September 2013. It will be available on the Coalition to End Homelessness' website (see <http://victoriahomelessness.ca/>).

Engendering Dialogue and Meaningful Participation among Constituencies Working Toward Ending Homelessness in Victoria, BC: Phase Two

Investigators: Norman, T. & Pauly, B. (Supervisor), Marks, H. (Peer Researcher), Palazzo, D. (Research Assistant), Riishede, J. (Transcriptionist), Kadgien, C. (Transcriptionist)

Funding body: MITACS

Background: This is the second phase of a project on how best to include the perspectives and input of people who have experienced homelessness in strategies to end homelessness. The focus is on finding out what principles organizations can use to create an environment that facilitates participation by people who have experienced homelessness. Sixty-two people took part in seven focus groups on this topic during December 2012 and January 2013.

Progress to date: Data analysis is in the final stages with project completion planned for June 30, 2013. A paper for publication will be developed over the summer of 2013.

Equity Lens in Public Health (ELPH): Reducing Health Inequities: The Contribution of Core Public Health Services in BC

Investigators: Pauly, B., MacDonald, M., Hancock, T. (Co-PIs), Ostry, A., George, A., Wharf-Higgins, J., Marcellus, L., Hayes, M., Carroll, S., Corneil, T., Jackson, B. (Co-Is), Wallace, B. (Post-Doctoral Fellow), Perkin, K., Riishede, J., Lowen, C., Martin, W., Zeisser, C. (Research Staff), Cusack, E. (Masters Fellow), Beveridge, R. (PhD Fellow), Kadgien, C. (Transcriptionist)

Principal Knowledge User: O'Briain, W.

Knowledge Users and Collaborators: Ardiles, P., Bass, L., Barnes, M., Bruce, T., Buchner, C., Campbell, J., Cheadle, T., Drasic, L., Duffell, R., Dyck, L., Easton, K., Herel, M., Huston, C., Jiwani, B., Kwan, A., Lee, V., Makwana, J., Manson, H., Martin, C., May-Hadford, J., McGuire, N., Nevdoff, S., Parks, A., Pennock, M., Shaw, K., Smith, S., Tatlock, J., Tong, S., Tyler, I., Yarmish, K.

Funding body: CIHR

Background: In BC there are significant differences in life expectancy among geographic regions. People with low incomes have significantly poorer health than people with high incomes. Of particular concern is that many Aboriginal peoples have lower life expectancies and poorer health than the general population. Several Canadian reports have recommended strengthening the public health system to increase health equity by closing the gap on differences in health outcomes. The recent and important development of *Healthy Minds, Healthy People: A Ten-Year*

Plan to Address Mental Health and Substance Use in British Columbia and the associated public health renewal processes have been identified as a key area for research to strengthen public health action to reduce health inequities. The overall purpose of this project is to explore and foster learning about the use of an equity lens during a period of complex system change in public health in BC, including the implementation of the 10-year plan. Our aim is to produce new knowledge for reducing systemic health inequities, especially in two key areas: mental health promotion and prevention of harms of substance use. This project includes four studies to be carried out over five years, and is linked to the Core Public Health Functions Research Initiative (CPHFRI).

Progress to date: We are preparing the first version of an inventory of health equity tools and analyzing public health policy documents, as well as conducting interviews on health equity as a priority in the health authorities. We will be welcoming a doctoral fellow in the fall of 2013. For more info, go to <http://www.uvic.ca/research/projects/elph/>.

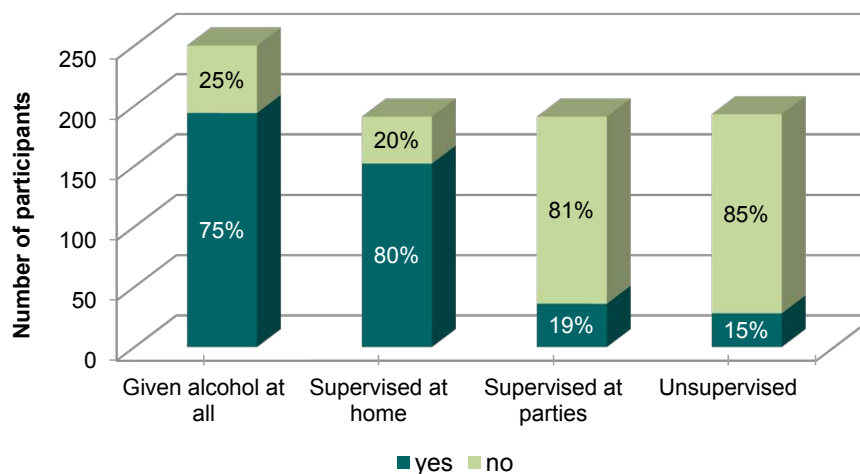
Parents' Attitudes, Beliefs and Practices around Adolescent Alcohol Use: A Pilot Study

Investigators: Thompson, K., Stockwell, T., Gilligan, C., Kypros, K. & Vallance, K.

Funding body: CARBC Endowment Fund

Background: The objective of this study is to understand more about parents' attitudes and behaviours around adolescent drinking, how parents make decisions about alcohol use for their teenage children, as well as their perceptions of other parents' practices. More specifically, this study assessed: (1) parents' knowledge and attitudes about alcohol legislation, (2) parents' behaviours/norms regarding rule setting and supplying alcohol to their teens (i.e., how much alcohol is supplied by parents, where it is consumed, and under what circumstances of supervision), and (3) parents' perceptions of the attitudes and behaviours of other parents. We hope this will be the first steps of a much larger study involving many schools.

Progress to date: Data analysis is underway and the results have been presented at the Society for Research on Child Development Conference (April 2013) and the Society for Prevention Conference (May, 2013).



Kara Thompson



Tim Stockwell



Kate Vallance

Protection for All: Sex Industry Health, Safety and Human Rights

Investigators: Shannon, K., **Benoit, C. (Co-PIs)**, Atchison, C., **Casey, L.**, Davis, S., O'Doherty, S. & Shaver, F.M.

Funding body: CIHR, Health Ethics Catalyst Grant

Background: The project aims to (a) review evidence-based best practices and policies aimed at reducing harms, including problematic drug use, and promote the health and safety of sex industry workers, (b) facilitate ongoing public dialogue on these issues as a neglected ethical human-rights-based issue, and (c) develop evidence-based outputs for delivery to all stakeholders (key outputs will include policy briefs, public summary report, academic peer-reviewed publications and a critical anthology of the expert summit proceedings) and the development of guidelines for a community-based ethical review process.

Progress to date: The team developed a city licensing interview guide based on its meetings with police and by-law officers, and interviews have been conducted in Vancouver, Prince George and Toronto about the impact of regulation of sex-oriented businesses (establishments where sex or sexual services are exchanged for money, including strip bars, exotic dance clubs, massage parlours, escort agencies, etc.) on sex workers' safety. In the past few months, the researchers have analyzed the data collected in Vancouver and Prince George and written it into a regional report for British Columbia. A national experts' meeting took place in March 2013 and a final report was published. Journal articles are being prepared for submission to peer-reviewed journals.

Rural MSM/Gay Men on Vancouver Island

Investigators: Roth, E. & Birch, R.

Funding body: UVic Internal Research Grant

Background: Health research on MSM/gay/bisexual men has focused almost exclusively on large urban centres which have historic gay communities. As a result, we know little about what being gay in a rural setting entails.

Progress to date: A CARBC collaboration with AIDS Vancouver Island, this project hosted a workshop on rural gay men on Salt Spring Island and recruited 12 men for future interviews about gay men's culture, health and community. These interviews will take place this spring/summer and provide data for one Master's degree for a student in anthropology.

Street Youth's Transitions to Adulthood

Investigators: Jansson, M. (PI), **Benoit, C.**, Hallgrimsdottir, H. & **Roth, E.**

Funding body: SSHRC

Background: This project focuses on the risky behaviours, health and well-being of former and current street-involved youth as they transition to adulthood. We aim to better understand the long-term consequences of disadvantages in early childhood and youth. Extensive qualitative and quantitative data are being collected on current substance use patterns as well as long-term health and well-being. Youth were aged 14-18 when they originally joined the research project and are interviewed every few months for as long as they are willing to participate. Over 750 interviews have been conducted with more than 275 different youth. We work with five community partners: Victoria Youth Clinic; Victoria Youth Empowerment Society; Greater Victoria Child and Family Counselling Association; Prostitutes Empowerment, Education and Resource Society; and Victoria Native Friendship Centre.

Progress to date: Interviewing, coding and data entry are proceeding as planned and the research team, including community partners, have presented a number of conference papers based on preliminary data gathered for the project and also published papers in peer-reviewed journals. Other presentations and papers are in preparation.

The Effects of Educational Pathways on Developmental Shifts in Alcohol Use

Investigator: Thompson, K.

Funding body: CIHR

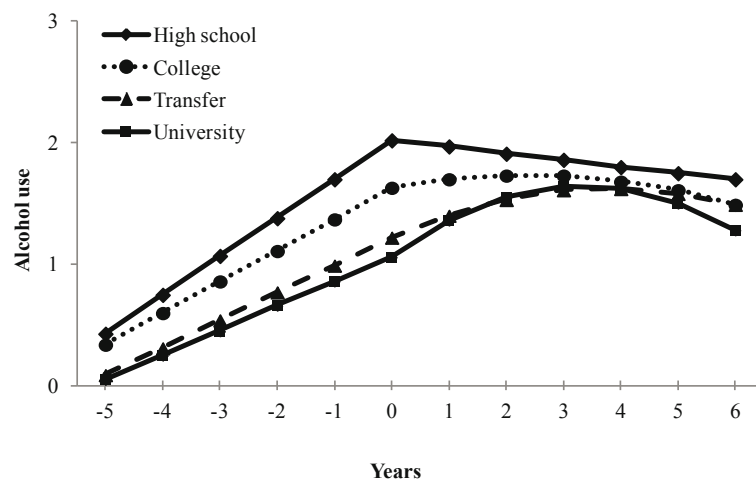
Background: This study examined whether there are significant group differences in patterns of alcohol use between those following different educational pathways (no post-secondary education, 2-year college students, 4-year university students, and 2-to-4-year transfer students). The findings showed that those who attended college had significantly higher levels of binge drinking at the time of PSE enrollment compared to university and transfer students, and university students showed the greatest increase in heavy drinking after enrollment. However, group differences in heavy drinking among educational groups were completely mediated by the age of participants at the time of enrollment in post-secondary education. Overall the findings showed that entry into any type of PSE results in an increase in alcohol consumption; however, this increase is less for those who are older when they enroll. For individuals who do not attend PSE, they have started to decline in consumption by age 19. The findings suggest that alcohol interventions should target all adolescents in high school and those entering into PSE during emerging adulthood.



Kara Thompson

Progress to date: Manuscript is in preparation.

The trajectory of heavy episodic drinking during adolescence and emerging adulthood for youth in different educational pathways



The Role of Transitional Housing in Health and Recovery from Homelessness, Poor Health and Substance Use

Investigators: Pauly, B., Wallace, B., Ostry, A., Matwychuk, M., Ranftt, M., Yurkowsky, J., Cochrine, E., Janzen, C. (Coordinator), Riishede, J. (Transcriptionist) & Kadgien, C. (Transcriptionist)

Funding body: Vancouver Foundation

Background: In assisting individuals to transition from homeless to housed, we need a good understanding of what works and for whom. In 2008, the Victoria Cool Aid Society initiated an innovative transitional shelter program for people recovering from homelessness, poor health and substance use. The program was expanded in 2010. Transitional shelters are one approach to supporting men and women in their efforts to leave emergency shelters and enter housing. Although transitional shelters have been demonstrated to be effective in fostering transitions, little is known about staff and resident perspectives on the role of transitional shelter programs or how experiences may vary with gender and substance use background. Within a framework of community-based participatory research (CBPR), this project explores the role of transitional shelters both from the perspectives of individuals who are or have been in transitional shelters and front-line workers. We are specifically seeking to answer the question: What are the factors in transitional shelter that foster or inhibit transitions out of homelessness for men and women and those with or without problematic substance use?

Progress to date: Data collection from residents and staff are complete. Resident interviews have been analyzed and presented to the resident and staff advisory. Analysis of the staff perspectives is currently in process.

CARBC AFFILIATED PROJECTS

The Cedar Project: Exploring Vulnerabilities to HIV, HCV, and STIs among Young Aboriginal People Who Use Drugs in Urban and Rural Settings

Investigators: Spittal, P., Christian, W., Schechter, M. (PIs) & Pauly, B. (Co-I)

Funding body: CIHR

Background: The Cedar Project is a longitudinal study investigating the high rates of HIV and Hepatitis C infection among young Aboriginal people. The researchers pay particular attention to the effects of having a parent or grandparent who attended a residential school, involvement with the child welfare system and illicit drug use, and look at the relationship between these factors and vulnerability to Hepatitis C and HIV infection.

Progress to date: This project has been active in Vancouver and Prince George, and a Kamloops site is being added. The study currently has 600 participants, and this is expected to increase with the addition of the Kamloops site.



Caitlin Janzen



Jeremy Riishede



Bernie Pauly



Bruce Wallace

RESEARCH PRIORITY 7:

EVALUATION OF EFFECTIVENESS OF KNOWLEDGE TRANSLATION AND EXCHANGE ACTIVITIES AND STRATEGIES

CARBC PROJECTS

AME Evaluation

Investigators: Reist, D. & Remocker, C.

Funding body: BC Ministry for Children and Family Development

Background: In 2010, CARBC developed the AME (Awareness, Motivation, Engagement) program for the BC Ministry for Children and Family Development, Youth Justice Policy and Program Support. The program was designed to support youth probation officers to effectively address substance use issues with young people in the community. The Ministry has commissioned an evaluation to assist in fine-tuning the program and assessing its impact before expanding its application.

Progress to date: Data was collected from the caseloads of six AME-trained probation officers and six officers who had not received the AME training. Data is being analyzed and a final report will be available in the first quarter of 2013/2014.

Building Capacity Among People Who Use Drugs: Reducing Stigma and Fostering Inclusion of Experiential Knowledge in Harm Research, Policy Development and Service Delivery

Investigators: Pauly, B. (PI), Belle-Isle, L., Wilson, M. & Mollison, A. (Co-Is)

Funding body: CIHR, HIV/AIDS Priority Announcement Planning Grant

Background: Harm reduction services, such as needle exchange services, supervised consumption sites and provision of safer crack smoking supplies, are essential healthcare services to prevent the harms of substance use for people who use illicit drugs. The stigma associated with illicit drug use has limited or slowed the development and implementation of harm reduction and primary health services for people who use drugs. One response is to strengthen the capacity of people who use illicit drugs, and who are subsequently at risk of HIV/AIDS, to participate in policy and program decisions that affect them. A primary activity of the grant is to facilitate people who use illicit drugs in organizing a national meeting for Canadian organizations of people who use drugs. The objective of the meeting is to build partnerships, collaborate in the production of a peer-based framework for the inclusion of people who use illicit drugs in research and policy, and identify future research priorities. This is a unique opportunity for peer-run drug user organizations to further development of principles and practices for social inclusion and to develop partnerships for future research and policy work. The outcome of the two-day meeting, in October 2013 will be the production of a national report outlining peer-designed recommendations and effective practices for the meaningful inclusion of people who use illicit drugs in research and policy, as well as future research directions.

Progress to date: A Victoria-based peer steering committee, consisting of people who use drugs, has been established to lead and host the national meeting and meets every two weeks. A national advisory committee, comprising organizations of people who use drugs and relevant advocacy organizations from across Canada, has been meeting monthly. The date for the symposium has been set for October 16/17, 2013, and the committees are now in the process of finalizing the program for the symposium. A pre and post survey of organizations of people who use drugs is planned for August 2013 and February 2014.

Sts'ailes Primary Healthcare Project: Lessons from a Participatory Knowledge Exchange Project with a BC Aboriginal Community

Investigator: Anderson, J.F. (PI)

Funding body: CIHR

Background: The purpose of the project is to produce a knowledge synthesis of Aboriginal community health centre models— including addiction and mental health issues—that respond to the needs of Sts'ailes and the Fraser Health Authority. The knowledge synthesis will inform the development of a community health centre that facilitates access to and continuity of healthcare services to Sts'ailes community members and neighbouring Aboriginal and non-Aboriginal communities through the translation of Aboriginal health services knowledge into policy and practice.

Progress to date: A final report has been released summarizing the new knowledge legacy created by the project, along with recommendations for knowledge transfer activities intended to facilitate the development of a healthcare centre that reflects the values and healthcare needs of the community. During the project, our Aboriginal student researcher completed her MPH degree at UBC, and our academic research associate has begun her PhD at UBC in the School of Population and Public Health and has recently received a three-year CIHR doctoral award.

Learn more about the three knowledge exchange projects with an evaluation component incorporated in Key Result Area 4: Helping Schools, the AME project for young offenders, and the substance impaired driving project for Health Canada.

CARBC AFFILIATED PROJECTS

CCENDU Project- Webpage Development for Reporting Drug Overdose Data and Alerts

Investigator: Buxton, J. (PI)

Funding body: Canadian Centre for Substance Abuse

Background: This is a password-protected website for the BC Drug Overdose and Alert partnership with regular and drug overdose and alert details.

Progress to date: Completed.

Opioid-Dependent Users on Methadone: A Knowledge Synthesis of Formal Interventions Aimed at Methadone Retention and Improved Health

Investigators: Jackson, L., Davison, C. (PIs), **Buxton, J.**, Bailey, D., Dingwell, J., Dykeman, M., Gahagan, J., Gallant, K., Gossop, M., Hodder, S., Karabanow, J., Keough, F., Kirkland, S., Leaonard, L., MacIsaac, C., Martin, F., Neves, K., Porter, C., Sketris, I. & Warren, D. (Co-Is)

Funding body: CIHR, Knowledge Synthesis Grant

Background: Realist review of the methadone treatment literature.

Progress to date: Ongoing.

Table 3: Performance Indicators for Key Results Area 3 (Implementing Quality Research)

| OBJECTIVE | | PERFORMANCE INDICATORS |
|-----------|--|---|
| 3.1 | To conduct research on the patterns, distribution, determinants and consequences of substance use | Number of epidemiological projects initiated, ongoing and/or successfully completed each year in this area <i>Benchmark: 15</i> 2012/2013: 16 |
| 3.2 | To conduct research that is valued by stakeholders as being of high quality, responsive to emerging issues and relevant to public policy and practice | Number of CARBC special reports and commissioned reports focused on policy and practice <i>Benchmark: 5</i> 2012/2013: 12 |
| 3.3 | To identify key strategic research opportunities that will inform policy, practice, strategy development and implementation | Number of research projects initiated in response to emerging issues and opportunities that are consistent with this Plan <i>Benchmark: 5</i> 2012/2013: 12 |
| 3.4 | To conduct research in the following key priority areas: | |
| | 1. Province-wide monitoring of alcohol, tobacco, gambling and other drug use patterns and related harms | Number of research projects ongoing and completed <i>Benchmark: 10</i> 2012/2013: 16 |
| | 2. Studies of the neuroscience and learning bases for drug-seeking behaviour | Number of research projects ongoing and completed <i>Benchmark: 2</i> 2012/2013: 5 |
| | 3. The impact of educational, legislative and regulatory strategies to minimize alcohol and other drug-related harms | Number of research projects ongoing and completed <i>Benchmark: 6</i> 2012/2013: 8 |
| | 4. Development and evaluation of more effective community prevention programs | Number of research projects ongoing and completed <i>Benchmark: 5</i> 2012/2013: 9 |
| | 5. Development and evaluation of more effective treatment systems and programs | Number of research projects ongoing and completed <i>Benchmark: 8</i> 2012/2013: 12 |
| | 6. Investigation of the influence of structural determinants and the social contexts of drug use on the implementation of strategies designed to reduce and prevent harmful drug use | Number of research projects ongoing and completed <i>Benchmark: 10</i> 2012/2013: 11 |
| 3.5 | 7. Research and evaluation of effectiveness of knowledge translation and exchange activities and strategies | Number of research projects ongoing and completed <i>Benchmark: 5</i> 2012/2013: 8 |
| | Develop and maintain significant collaborative projects with other researchers and research centres in BC working on harm reduction, substance use and related areas | Number of collaborative projects with other BC-based researchers and research agencies each year <i>Benchmark: 20</i> 2012/2013: 44 |
| 3.6 | Develop and maintain research projects that engage researchers from several relevant disciplines and which integrate different disciplinary perspectives | Number of collaborative projects involving multi-disciplinary participation with individuals and other centres both at UVic and other BC campuses and research settings <i>Benchmark: 25</i> 2012/2013: 41 |
| 3.7 | Develop and maintain significant collaborative projects with other researchers and research centres in North America | Number of collaborative projects with other North American researchers and research agencies each year <i>Benchmark: 10</i> 2012/2013: 13 |
| 3.8 | Develop collaborative projects with international organizations such as WHO and the International Harm Reduction Association | Number of collaborations with WHO and other international organizations each year <i>Benchmark: 5</i> 2012/2013: 5 |

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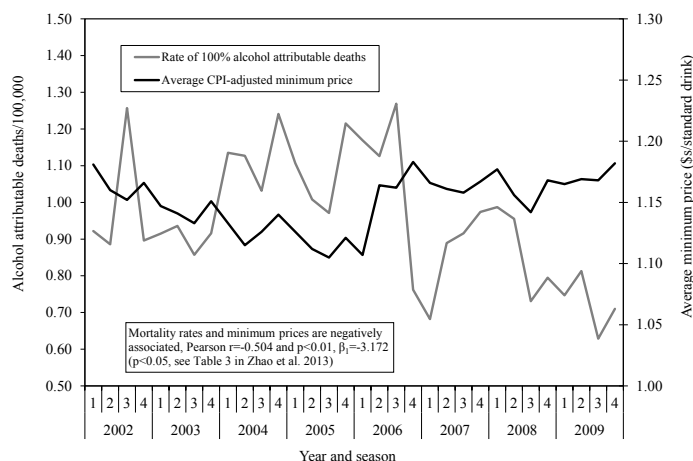
KEY RESULTS AREA:
Dissemination

“To disseminate research findings that increase understanding of substance use and addiction, to increase awareness of related harms, and to identify effective responses.”

HIGHLIGHTS

This year CARBC continued its strong tradition of dissemination through publications and presentations on a wide range of issues. Summarizing this diversity in a few sentences is not easy; however, some themes emerge that seem to reflect both the values of CARBC and the growing interest in our communities. The interest in understanding and addressing homelessness is revealed in the research and in the invited presentations. Several other contexts or populations of vulnerability are also explored, including poverty, homelessness, sex work, youth, and injection drug use, to name a few. Many dimensions of alcohol use are reflected, but a significant number of studies relate to cannabis, stimulant use or other psychoactive substances. Many of the articles, books, reports and presentations are not limited to describing the problems but focus on policies or interventions to support wellness or to facilitate change. We also are proud of the interactive website we have created to update latest trends in patterns of substance use and related harms using data from the BC Alcohol and Other Drug Monitoring Project (for examples, see below). We have access to world class data on the harms from alcohol, tobacco and illicit drugs as well as on actual sales of alcohol. Our Alcohol and Other Drug Monitoring Project website reports data on per capita alcohol consumption for the province about one year ahead of Statistics Canada and with greater precision (e.g., by incorporating data on UBrew and UVin sales and more precise estimates of the average alcohol content of different beverages).

Rates of 100% alcohol attributable deaths and CPI-adjusted minimum alcohol prices in British Columbia, 2002-2009



Source: Stockwell, T., Zhao, J., Martin, G., Macdonald, S., Vallance, K., Treno, A., Ponicki, W., Tu, A. & Buxton, J. (2013). Misleading UK alcohol industry criticism of Canadian research on minimum pricing. *Addiction* (see: <http://onlinelibrary.wiley.com/doi/10.1111/add.12178/pdf>).

Faculty Profile - Dr. Cheryl Cherpitel, PhD

Senior Scientist, Associate Director of the National Alcohol Research Center, and Director of the WHO Collaborating Centre on Alcohol Epidemiology and Injury



The CARBC network of faculty spans the disciplines of sociology, psychology, nursing, epidemiology, anthropology, economics and community medicine and scholars from around the world, giving a truly multi-disciplinary approach to its work.

Dr. Cherpitel's current work focuses on the association of alcohol consumption and injuries and studies over 30 years of data from 75 emergency rooms across 25 countries. This work has been undertaken in conjunction with the World Health Organization (WHO) and the Pan American Health Organization. She has recently been involved in training people in a number of countries in the Americas in conducting these ER studies,

and editing a new book on alcohol and injuries in the Americas which focuses on the burden of disease related to injury morbidity which alcohol places on the low and middle income countries in this region. This research informs potential prevention, intervention and policy strategies for reducing harmful drinking resulting in injury in the region, and citations from this work reflect on the high calibre of research undertaken at the university.

Research by CARBC faculty helps develop curricula and course content, contributes to the intellectual climate of the institution, and elevates the academic reputation of CARBC at the University of Victoria.

PUBLICATIONS

Journal Articles

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Books and Reports

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Brubacher, J.R., Martz, W., Schreiber, S. & Purssell, R. *Alcohol, Cannabis and Other Drug Use Among Injured Drivers*. Prepared for Transport Canada.

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Macionis, J.J., **Jansson, S.M.** & **Benoit, C.M.** (2012). *Society, the Basics: Fifth Canadian Edition*. Scarborough, Ontario: Pearson Education Canada.

Norman, T. & **Pauly, B.** (2012). *Promising Practices for Meaningful Participation Among Constituencies Working Toward Ending Homelessness in Victoria, BC - Phase One: A Review of the Literature*. Victoria, BC: Greater Victoria Coalition to End Homelessness.

Pauly, B. (2012). Harm Reduction Through a Social Justice Lens (Homeless Hub research summary series). Research paper summary by Homeless Hub.

Pauly, B. (In Press). The multiple and intersecting stigmas of homelessness. *The Wiley-Blackwell Encyclopedia of Health, Illness, Behavior, and Society*.

Pauly, B., Carlson, E. & Perkin, K. (2012). *Strategies to End Homelessness: Current Approaches to Evaluation*. Toronto, ON: Canadian Homelessness Research Network Press.

Pauly, B., Jackson, N., Wynn-Williams, A. & Stiles, K. (2012). *Quiet Crisis: Homelessness and At Risk in Greater Victoria*. Victoria, BC: Greater Victoria Coalition to End Homelessness.

Book Chapters

Andreuccetti, G. & **Cherpitel, C.** (In Press). Historical perspective on alcohol and injuries based on emergency room studies conducted in the Americas. In **Cherpitel, C.J.**, Borges, G., Giesbrecht, N., Monteiro, M. & **Stockwell, T.** (Editors), *Prevention of Alcohol-Related Injuries in the Americas: From Evidence to Policy Action* (Chapter 4). Washington DC: Pan American Health Organization.

Andreuccetti, G., Gawryszewski, V., Diehl, A. & **Cherpitel, C.J.** (In Press). Alcohol's causal role in violence and road traffic accidents in the Americas. In **Cherpitel, C.J.**, Borges, G., Giesbrecht, N., Monteiro, M. & **Stockwell, T.** (Editors), *Prevention of Alcohol-Related Injuries in the Americas: From Evidence to Policy Action* (Chapter 3). Washington DC: Pan American Health Organization.

Borges, G., **Cherpitel, C.J.**, Paltoo, M. & de Bradshaw, A. (In Press). Emergency department studies in the Americas: Context and methods in two countries. In **Cherpitel, C.J.**, Borges, G., Giesbrecht, N., Monteiro, M. & **Stockwell, T.** (Editors), *Prevention of Alcohol-Related Injuries in the Americas: From Evidence to Policy Action* (Chapter 5). Washington DC: Pan American Health Organization.

Borges, G., Orozco, R. & **Macdonald, S.** (In Press). Comparison of relative risk across 10 countries. In **Cherpitel, C.J.**, Borges, G., Giesbrecht, N., Monteiro, M. & **Stockwell, T.** (Editors), *Prevention of Alcohol-Related Injuries in the Americas: From Evidence to Policy Action* (Chapter 7). Washington DC: Pan American Health Organization.

Cherpitel, C.J. & Ye, Y. (In Press). Drinking patterns as predictors of alcohol-related injury in the Americas. In **Cherpitel, C.J.**, Borges, G., Giesbrecht, N., Monteiro, M. & **Stockwell, T.** (Editors), *Prevention of Alcohol-Related Injuries in the Americas: From Evidence to Policy Action* (Chapter 11). Washington DC: Pan American Health Organization.

Cremonte, M., Monteiro, M. & **Cherpitel, C.J.** (In Press). Intervention to reduce alcohol-related injury in the ED. In **Cherpitel, C.J.**, Borges, G., Giesbrecht, N., Monteiro, M. & **Stockwell, T.** (Editors), *Prevention of Alcohol-Related Injuries in the Americas: From Evidence to Policy Action* (Chapter 15). Washington DC: Pan American Health Organization.

Macdonald, S., Greer, A., **Brubacher, J.**, **Cherpitel, C.**, **Stockwell, T.** & **Zeisser, C.** (In Press). Alcohol consumption and injury. In Lowenfels, A. (Ed), *Alcohol: Science, Policy and Public Health*, Oxford University Press.

Macdonald, S. & Sharpe, K. (In Press). Drug testing in the workplace: Issues, answers and the Canadian perspective. In Csiernik, R. (Ed), *Wellness, Work and Employee Assistance Programs*. Toronto, ON: Canadian Scholars Press.

Pauly, B. (In Press). Close to the street: Nursing care for people marginalized by homelessness and substance use. In Younger, M. & Hwang, S. (Eds), *Homelessness and Health in Canada*.

Pauly, B. & Varcoe, C. (In Press). Vulnerable populations and nursing: Vulnerability as a health equity concern. In Gregory, D., Raymond-Seniuk, C. & Patrick, L. (Eds), *Fundamentals: Perspectives on the Art and Science of Canadian Nursing*.

Stockwell, T. (In Press). International policies to reduce alcohol consumption and related harm (Ed). *Encyclopaedia of Addictive Behaviours* (Chapter 74). Elsevier Press.

Stockwell, T. (In Press). Alcohol policy in the 21st century: The need for a public discourse informed by science. In Dias, P.C. & del Castillo, P.A.G. (Eds) *Encyclopaedia of Alcohol and Drugs*. Edições Pedagogo, Lda, Portugal.

Stockwell, T. (In Press). Strategies to prevent alcohol-related injury which are targeted to high-risk products, settings and populations. In Cherpitel, C.J. et al (Eds).

Prevention of Alcohol-Related Injuries in the Americas: From Evidence to Policy Action. Washington DC: Pan American Health Organization.

Vallance, K. & **Stockwell, T.** (In Press). Surveillance systems and trauma care, what can be done in the ED? In Cherpitel, C.J. et al (Eds). *Prevention of Alcohol-Related Injuries in the Americas: From Evidence to Policy Action*. Washington DC: Pan American Health Organization.

Ye, Y., **Cherpitel, C.J.** & **Macdonald, S.** (In Press). Comparison of prevalence of alcohol-related injuries across 10 countries. In **Cherpitel, C.J.**, Borges, G., Giesbrecht, N., Monteiro, M. & **Stockwell, T.** (Eds). *Prevention of Alcohol-Related Injuries in the Americas: From Evidence to Policy Action* (Chapter 6). Washington DC: Pan American Health Organization.

Ye, Y., **Cherpitel, C.J.** & **Macdonald, S.** (In Press). Alcohol-related injuries in Americas: Variations by causes and countries. In **Cherpitel, C.J.**, Borges, G., Giesbrecht, N., Monteiro, M. & **Stockwell, T.** (Eds). *Prevention of Alcohol-Related Injuries in the Americas: From Evidence to Policy Action*. Washington DC: Pan American Health Organization.

CARBC Occasional Reports, Bulletins and Informal Publications

Belle-Isle, L. (2013). Housing Our Most Marginalized: A Housing First Approach. *Visions*, 8(1), 26-27.

George, A., Hardy, C., Clark, E., Tu, A. & Fetterly, C. (2012). Evaluation of the Victoria Foundation \$7M Fetal Alcohol Spectrum Disorder (FASD) Action Fund 2012. Prince George, BC.

Hill-McManus, D., Brennan, A., **Stockwell, T.**, Giesbrecht, N., **Thomas, G.**, **Zhao, J.**, **Martin, G.** & Wettlaufer, A. (2012). Model-Based Appraisal of Alcohol Minimum Pricing in Ontario and British Columbia: A Canadian Adaptation of the Sheffield Alcohol Policy Model Version 2. Technical Report. Victoria, BC: Centre for Addictions Research of BC.

Pakula, B. & **Anderson, J.F.** (2013). Sts'ailes Primary Healthcare Project: HIPP: Sts'ailes, B.

Pauly, B. (2013). Homelessness: What are we talking about and what do we know? *Visions*, 8(1), 5-6.

Vallance, K., **Martin, G.**, **Stockwell, T.**, **Macdonald, S.**, Chow, C., **Ivins, A.**, **Buxton, J.**, **Tu, A.**, Sandhu, J., Chu, T. & Fair, B. (2012). Overdose Events in British Columbia: Trends in Substances Involved, Contexts and Responses. CARBC Statistical Bulletin #8, Victoria, BC: Centre for Addictions Research of BC

CARBC Student Dissertations

Belle-Isle, L., PhD. *Enhancing HIV/AIDS community-based organizations' capacity to engage in community-based research to address social and health inequities.* Social Dimensions of Health.

Baker, T., PhD. *Genetics, drugs, and cognitive control: Uncovering individual differences in substance dependence.* Psychology.

Brache, K., PhD. *Alcohol and energy drinks.* Psychology.

Casey, L., PhD. *The intersection of gender, mobility and geographical location: An examination of three 'hidden' social determinants of health among sex workers.* Social Dimensions of Health.

Coghlan, M., PhD. *Gendered dynamics of crack/cocaine use among sex workers and other low prestige workers.* Sociology.

Fuller, N., PhD. *The relevance and significance of spirituality in drug and alcohol addictions and recovery from addiction: An exploratory qualitative study.* Nursing, Midwifery and Health.

Holtom, A., MA. *Addressing problematic substance use among street-involved youth through harm reduction strategies.* Social Dimensions of Health.

Ivsins, A., PhD. *The social-structural production of drug-use-related health risk among street-involved non-injection illicit drug users.* Sociology.

Kennedy, M.C., MA. *Social support as a predictor of substance use, mental health and mental well-being among street-involved youth: A longitudinal examination.* Social Dimensions of Health.

Osiowy, M., BSc-Honours. *The effects of standard drink labels on alcohol consumers' ability to estimate the number of standard drinks they have consumed.* Psychology.

Ordell, L., MA. *Social determinants of violence and resiliency among a diverse sample of sex workers.* Sociology.

Taylor, J., PhD. *The needs of veterans with mental health and substance use problems in the Scottish prison service.* Nursing, Midwifery and Health.

Thompson, K., PhD. *The trajectory of alcohol use in emerging adulthood: Investigating the roles of alcohol measurement and educational pathways.* Psychology.

Wake, C., PhD. *Barriers faced by female sex workers with HIV/AIDS in Kibera, Kenya.* Social Dimensions of Health.

Wood, J., BA-Honours. *Relative reward valuation in individuals who smoke.* Psychology.

Zaretsky, N., MA. *Male sex workers' negotiations of safety and health.* Sociology.

Invited Presentations

Belle-Isle, L. (2012, December). Beyond the Joint Workshop. Spectrum Community School.

Benoit, C. (2013, March). Contexts of Health, Safety and Resiliency in the Canadian Sex Industry. MUN Sociology Speaker Series, Memorial University, St. John's, NL.

Benoit, C. (2013, February). Social Constructions of Substance Use during Pregnancy and Early Parenthood: Provider and Client Perspectives. Boyle Street Community Centre, Edmonton, AB.

Benoit, C. (2013, January). Understanding Substance Use among Pregnant and Early Parenting Women. 3rd Annual Substance Abuse Prevention & Treatment Initiative Workshop, Ottawa, ON.

Benoit, C. (2013, January). Sex Work in Canada: Whose Social Problem? Lecture in Social Problems class, Keyano College, Ft. McMurray, AB.

Benoit, C. (2013, January). Understanding Sex Work in Canada. Lecture Series, Keyano College, Ft. McMurray, AB.

Benoit, C. (2012, May). Regulating Sex Work: International Development and Knowledge Gaps. Team Grant Meeting II Gender, Violence & Health, SFU, Vancouver, BC.

Benoit, C. (2012, May). Project II: Sex Worker Survey. Team Grant Meeting II Gender, Violence & Health, SFU, Vancouver, BC.

Benoit, C., Atchison, C., Jansson, M., Walby, K., Phillips, R., Shaver, F., Jackson, L., Spittal, P., Casey, L. & McCarthy, W. (2012, October). Developing Composite Measures that Account for the Intersectional Impact of Gender and Sexuality on Violence and Resilience in the Sex Industry. Advancing Excellence in Gender, Sex and Health Research, Montreal, QC.

Benoit, C., Marcellus, L., Davoren, J., Seymour, A. & Tatlock, J. (2012, September). Finding HerWay Home: Working Together to Address Substance Use, Mental Health and Violence in the Perinatal Period. Ministry of Children and Family Development Lunch and Learn talk, Victoria, BC.

- Benoit, C., Roth, E., Hallgrimsdottir, H., Jansson, M., Ngugi, E. & Sharpe, K.** (2012, December). Intimate Partnerships and Gendered Inequities among HIV+ Female Sex Workers in Kibera, Kenya. Paper presented at the CIHR Conference, Advancing Excellence in Gender, Sex and Health Research, Montreal, QC.
- Benoit, C., Stengel, C., Marcellus, L., Hallgrimsdottir, H., Anderson, J., MacKinnon, K., Phillips, R. & Dearman, S.** (2012, October). Analyzing the 'Talk' about Determinants of Substance Use for Pregnant and Early Parenting Women. Third Biennial Bilingual Conference of the Canadian Society for Sociology of Health, Ottawa, ON.
- Brubacher, J.** (2013, February). Drug Driving: Evidence from Research. Canadian Crown Counsel Workshop on Drugs and Driving, sponsored by the RCMP, Vancouver, BC.
- Brubacher, J.** (2012, October). Cannabis and Motor Vehicle Crashes. UBC MD-PhD program, Vancouver, BC.
- Brubacher, J.** (2012, September). Drug Driving. UBC trauma rounds, Vancouver, BC.
- Brubacher, J.** (2012, May). Drug Driving. BC Chiefs of Police, Fairmont Hotel, Vancouver, BC.
- Buxton, J.** (March, 2013). Eyes Wide Open: The BC Take-Home Naloxone Program. Webinar across Canada.
- Buxton, J.** (March, 2013). Harm Reduction in BC and Naloxone Program. BC Ministry of Health.
- Buxton, J.** (October, 2012). Disease Prevention and Control. SFU, BC.
- Cherpitel, C.** (2012, August). Alcohol and Injury in Latin America and the Caribbean. Pan American Network on Alcohol and Public Health, Mexico City, Mexico.
- Dartnell, M., **Reist, D.**, Rawnsley, D., Elwood, S. & Coutu, D. (October, 2012). Keeping Youth Connected, Healthy and Learning. A webinar hosted by CARBC and the Vancouver Island Health Authority.
- Gutray, B. & **Reist, D.** (October, 2012). The Journey in BC: Substance Use, Addictive Behaviours and Mental Health. A presentation at the National Conference of the Canadian Mental Health Association.
- Holroyd, C.** (2013). The Reward Positivity: An ERP Measure of Reward Processing. Department of Psychology, Stanford University, Palo Alto, CA.
- Holroyd, C.** (2013). An Electrophysiological Measure of Reward Processing in Normal and Atypical Populations. Department of Psychiatry, University of California, San Francisco, CA.
- Jackson, L. & **Jansson, M.** (2012, June) Sex Workers' Romantic Relationships. CIHR Team Grant Meeting, UVic, BC.
- Kennedy, M.C., **Jansson, M., Benoit, C.** & Magnusson, D. (2012, October). Social Support and the Health of Street-Involved Youth. Third Biennial Bilingual Conference of the Canadian Society for Sociology of Health, Ottawa, ON.
- MacDonald, M. & **Pauly, B.** (2013, February). Public Health Ethics. Workshop for Public Health Nursing Leaders group at the Public Health Association of BC 2012 Conference, Vancouver, BC.
- Macdonald, S.** (2013, February). Alcohol and Public Health. Division of Medical Sciences, UVic, BC.
- Macdonald, S.** (2012, September). Issues of Drug Testing in the Workplace. Presentation to the Power Workers Union, Toronto, ON.
- Magnusson, D. & **Jansson, M.** (2012, July). Pathways and Consequences of Instability in the Lives of Street-Involved Youth. 22nd Biennial Meeting of the International Society for the Study of Behavioural Development, Edmonton, AB.
- McCarthy, B., **Benoit, C. & Jansson, M.** (2012, July). Factors Linked to Selection into Sex Work: A Comparative Study of Three Service Occupations. 22nd Biennial Meeting of the International Society for the Study of Behavioural Development, Edmonton, AB.
- Pauly, B.** (2013, March). Community-Based Research Approaches to Evaluation of Homelessness Initiatives. Keynote address at the Walking the Community Engagement Talk conference, Kwantlen Polytechnic University, Vancouver, BC.
- Pauly, B., Belle-Isle, L. & Reist, D.** (2013, March). Approaches to Addressing Substance Use in Housing Programs: A Workshop on Substance Use, Harm Reduction and Housing First. Calgary Homeless Foundation, Calgary, AB.
- Pauly, B.** (2013, March). Panel member for screening of the film *The House I Live In*. Centre for Addictions Research, UVic, BC.
- Pauly, B.** (2013, March). Harm Reduction Through a Social Justice Lens. UVic, BC.
- Pauly, B.** (2013, March). Homelessness and Health: The Role of Healthcare Providers. Healthcare research at UVic, a faculty development event, UVic, BC.
- Pauly, B., Reist, D., Belle Isle, L. & Schactman, C.** (2013, February). Housing and Harm Reduction: What is the Role of Harm Reduction in Ending Homelessness? SSHRC-funded Lunch and Learn series on Housing and Economic Vulnerability. York, ON.

Pauly, B. (2012, November). Quiet Crisis: Homeless and At Risk in Greater Victoria. Together Against Poverty Annual General Meeting, Victoria, BC.

Pauly, B. (2012, October). Re(Imaging) and Re(Imaging): Societal Inclusion as a Response to Youth Homelessness. Belonging: A Victoria Youth Homelessness Summit, Victoria, BC.

Pauly, B. (2012, June). The Challenge for Nurses: Navigating Institutional Policies and a Social Justice Mandate. Canadian Nurses Association's Biennial Convention, Vancouver, BC.

Pauly, B. & Goldstone, I. (2012, June). Global Health Nursing: Understanding the Links between Health Equity and Human Rights. Drug policy session, Canadian Nurses Association, Vancouver, BC.

Pauly, B. (2012, May). Stigma and Substance Use: Toward Safer Environments. Keynote address at the Addictions Ontario 44th Annual Conference, Toronto, ON.

Pauly, B. (2012, May). The Socio-Political Context of HIV/AIDS: Vulnerability and Health Equity: Change the Course of HIVstory, Canadian Association of Nurses in AIDS Care 20th Annual Conference, Victoria, BC.

Pauly, B. (2012, May). Community-Based Research in an Earthquake. Universities Without Walls: The Next Generation of HIV Researchers in Canada, UVic, BC.

Pauly, B., Henry, R. & Krancevic, J. (2013, March). Street Stories. International Symposium on Knowledge Democracy: Decolonizing the University through Community Partnerships, Office of Community-Based Research, UVic, BC.

Pauly, B., McCall, J., Parker, J., Browne, A., McLaren, C. & Mollison A. (2012, May). Fostering Cultural Safety in Nursing Practice in Relation to Substance Use. Nursing Education and Research Rounds (NEARR), BC web session hosted on InspireNet.

Pauly, B., Stockwell, T., Vallance, K., Chow, C. & Perkin, M. (2012, November). Substance Use and Housing: Preliminary Results of an Evaluation of a Managed Alcohol Program. Paper presentation at the Calgary Homeless Foundation Research Symposium, Calgary, AB.

Phillips, R., McCarthy, W., Jansson, M. & Benoit, C. (2012, October). A Gendered Analysis of Trauma as a Determinant of Mental Health and Substance Use among Lower Prestige Service Workers. Third Biennial Bilingual Conference of the Canadian Society for Sociology of Health, Ottawa, ON.

Reist, D. (2012, October). Substance Use as a Complex Social Issue: Some Good News for Communities. An interactive workshop hosted by Alberta Health Services at the Fall 2012 Coalitions Connect event, Calgary, AB.

Reist, D. (2012, July). Health Communication: Theories, Models, Implications. A keynote address at the 2012 Summer School, Public Health Association of BC, Vancouver, BC.

Reist, D., Dyck, T. & Remocker, C. (2012, September). HMHC Summit 2012. Presentation and workshop on Changing the Culture of Substance Use on Campus, Victoria, BC.

Stockwell, T. (2013, February). How should we regulate cannabis as a legal product in order to reduce harm? Cannabis Legalization: A Conversation about Marijuana Policy Reform – Is BC Next? UVic, BC.

Stockwell, T. (2013, January). Alcohol Dependence: The Concept, its Utility and Measurement. Griffith Edwards, the ARU, and the National Addiction Centre, Institute of Psychiatry, London, UK.

Stockwell, T. (2012, November). Alcohol Supply, Demand and Harm Reduction: What is the Best Cocktail of Policies to Manage our Favourite Drug? 50th Anniversary Deans' Lecture Series, Legacy Art Gallery, Victoria, BC.

Stockwell, T. (2012, August). Implementing Policies on Alcohol Pricing and Taxation. Presentation to the 1st Meeting of the Pan American Network on Alcohol and Public Health, Mexico City, Mexico.

Thomas, G. (2012, October). Municipal Responses to Alcohol: From MAPs to Shifting the Drinking Culture. Workshop, Midland, ON.

Other Conference and Seminar Presentations

Ardiles, P., **Pauly, B.**, MacDonald, M., O'Brian, W. & Hancock, T. (2013, January). Promoting Health Equity through a Population and Public Health Approach to Address Mental Health and Substance Use. Abstract published for the 2nd Latin American and Caribbean Conference on Global Health, Santiago, Chile.

Barnes, G.E. (In Press). Personality, Life Stress, Alcohol Consumption and Alcohol Problems in a Large Community Sample of Vancouver Couples. Proceedings of the 3rd World Conference on Psychology, Counselling and Guidance, Procedia Social and Behavioral Sciences, Amsterdam, Elsevier.

Barnes, G.E. (2012). Personality, Life Stress, Alcohol Consumption and Alcohol Problems in Vancouver Couples. Presented at the 3rd World Conference on Psychology, Counselling and Guidance, Epehesus-Izmir, Turkey.

- Benoit, C., Phillips, R., Zazueta, P. & Spittal, P.** (2012). Nuancing Understanding of Vulnerability and Resistance to Violence in a National Sample of Female, Male and Transgendered Sex Workers. Poster presentation at Critical Inquiries in Mental Health Inequities: Exploring Methodologies for Social Justice. Centre for the Study of Gender, Social Inequities and Mental Health, SFU, Vancouver, BC.
- Brache, K., Stockwell, T. & Zhao, J.** (2012, June). Investigating Alcohol and Energy Drink Use, Heavy Drinking and Impaired Driving in a Canadian Sample. 38th Annual Alcohol Epidemiology Symposium of the Kettil Bruun Society (KBS), Stavanger, Norway.
- Buxton, J., Tzemis, D., Tang, W., Yu, A. & Krajden, M.** (2013, April). The BC Harm Reduction Supply Distribution Program: Preventing HIV and HCV in British Columbia. Poster presentation at 22nd Annual Canadian Conference on HIV/AIDS Research (CAHR 2013), Vancouver, BC.
- Buxton, J.A.** (2012). A Survey on Drug Use among Harm Reduction Clients in BC. Poster presentation at PHABC conference "Reorienting Health Services: Aligning Primary Healthcare and Public Health in Pursuit of Health for All," Burnaby, BC.
- Cherpitel, C.** (2012, October). Trends in Alcohol- and Drug-Related ED and Primary Care Visits: Data from Four U.S. National Surveys (1995-2010). American Public Health Association Annual Meeting, San Francisco, CA.
- Cherpitel, C.** (2012, September). Risk of Injury from Alcohol and Drinking Patterns as Predictors of Alcohol-Related Injury in Asia. International Society for Biomedical Research on Alcoholism World Congress, Sapporo, Japan.
- Cherpitel, C.** (2012, June). Drinking Patterns as Predictors of Alcohol-Related Injury in the Americas. Research Society on Alcoholism Annual Meeting, San Francisco, CA.
- Cherpitel, C.** (2012, June). Attribution of Alcohol to Violence-Related Injury: Self and Others Drinking in the Event. Kettil Bruun Society for Social and Epidemiological Research on Alcohol, Stavanger, Norway.
- Forrest, J., Stevenson, B., Pai, J., Michelow, W., **Roth, E., Rich, A., Raymond, H., Moore, D. & Hogg, R.** (2012, November). Challenges and Opportunities in Using Respondent-Driven Sampling to Recruit MSM for HIV Bio-Behavioural Research. Paper presented at 2012 Ontario HIV Treatment Network Conference, Toronto, ON.
- Fujita, M., **Roth, E., Lo, Y.J., Hurst, C., Vollner, J. & Kendall, A.** (2012, March). Poor Mothers Give Richer Milk for Daughters than Sons: A Test of the Trivers-Willard Hypothesis on Milk Fat Concentrations in Northern Kenya. Poster presentation at Canadian Association of Physical Anthropology Conference, Victoria, BC.
- George, A., Hardy, C. & Clark, E.** (2012, August). Perceptions of Needs regarding FASD across the Province of British Columbia, Canada. Poster presented at International Congress on Circumpolar Health 15 (ICCH15), Fairbanks, AK.
- Gibson, E., Tzemis, D. & **Buxton, J.A.** (2012, November). Increasing Access to Naloxone in BC. 9th National Harm Reduction Conference, From Public Health to Social Justice, Portland, OR.
- Hardy, C. & George, A.** (2012, June). Supports for People with FASD in Rural and Urban British Columbia. Poster presented at the 73rd Annual Convention of the Canadian Psychological Association, Halifax, NS.
- Macdonald, S., Callaghan, R., Borges, G., Martin, G., Pakula, B., Roth, E., Salmon, A., Stockwell, T. & Wells, S.** (2012, June). Health Profiles of Substance Abuse Clients with Problems for Alcohol, Cocaine and Simultaneous Use of Cocaine and Alcohol. 36th Annual Alcohol Epidemiology Symposium of the Kettil Bruun Society, Stavanger, Norway.
- Manson, H., **Pauly, B.** & Pinto, A. (2012, September). Equity in Public Health Standards: A Qualitative Document Analysis of Policies from Two Canadian Provinces. Paper presented at Public Health Ontario Rounds, Toronto, ON.
- McCall, J., **Pauly, B., Browne, A., Parker, J., Mollison, A. & McLaren, C.** (2013, February). Update on the Cultural Safety Project: Relational Continuity. Paper presentation at Minding the Gap: Continuity of Care, 18th Annual Ethel Johns Research Forum, Vancouver, BC.
- Parkes, T.** (2012, May). Between a Rock and a Hard Place: A Spatial Analysis of Methadone Maintenance Treatment in Rural British Columbia, Canada. Paper presented to International Society for the Study of Drug Policy, Canterbury, UK.
- Parkes, T., Eadie, D., Atherton, I., Petrie, D. & Evans, J.** (2012, April). An Evaluation to Assess the Implementation of NHS-Delivered Alcohol Brief Interventions in Primary Care in Scotland. Scottish School of Primary Care Annual Conference, Glasgow, Scotland.
- Parkes, T., Eadie, D., Atherton, I., Petrie, D. & Evans, J.** (2012, September). An Evaluation to Assess the Implementation of NHS-Delivered Alcohol Brief Interventions in Scotland. INEBRIA International Network on Brief Interventions for Alcohol and Other Drugs 9th Conference, Barcelona, Spain.

Pauly, B., Langlois, A., Perkin, K., **Benoit, C., Jansson, M., Salmon, A. & Reist, D.** (2012, June). Ways of Seeing: Media Representations of Substance Use and People Who Use Drugs in Victoria. Community presentation to key local stakeholders of the research project Factors Affecting Community Acceptance of Programs Aimed at Preventing HIV/AIDS Associated with Injection Drug Use by B. Pauly and A. Langlois, Victoria, BC.

Pauly, B., McCall, J. & Browne, A. (2013, March). Cultural Safety in Nursing Practice with People Who Use Drugs. Policy Forum at St. Paul's Hospital, Vancouver, BC.

Pauly, B., McCall, J., Parker, J., Browne, A., McLaren, C. & Mollison, A. (2012, November). Fostering Cultural Safety in Nursing Practice with People Who Use Drugs. Paper presentation at Connect 2012, 3rd Annual InspireNet Conference, Vancouver, BC.

Reist, D. (2012, August). Helping Without Harming: Building Connections, Avoiding Punitive Measures. Workshop at the Promoting Mental Health in BC Schools Summer Institute 2012, Vancouver, BC.

Roth, E., Ngugi, E., **Benoit, C., Jansson, M.** & Hallsgrímdóttir, H. (2012, January). Partners and Clients of Female Sex Workers in Kibera, Nairobi. World Health Organization/University of Nairobi Conference, Kenya.

Roth, E., Ngugi, E., **Benoit, C., Jansson, M.** & Hallsgrímdóttir, H. (2012, January). Family Kinship Patterns and the entry into Sex Work among Women in Kibera, Nairobi, Kenya. Paper presented at the World Health Organization/University of Nairobi Conference, Kenya.

Sharpe, K., **Benoit, C.,** Ngugi, E., Hallsgrímdóttir, H., **Janssen, M. & Roth, E.** (2012, November). Lessons Learned from Research with HIV+ Female Sex Workers in Kibera, a Large Informal Settlement in Nairobi, Kenya. Paper presented at 2012 Ontario HIV Treatment Network Conference, Toronto, ON.

Storch, J., Schick-Makaroff, K., **Pauly, B.** & Newton, L. (2013, February). Can We Expect Ethical Leadership From Formal Nurse Leaders? Abstract published for the Western & Northwestern Region Canadian Association of Schools of Nursing Conference, Edmonton, AB.

Stockwell, T. (2012, June). Minimum Alcohol Prices and Outlet Densities: Impacts on Alcohol Attributable Hospitalizations. Paper presented at the 38th Annual Meeting of the Kettil Bruun Society for Social and Epidemiological Research on Alcohol, Stavanger, Norway.

Stockwell, T. (2012, June). Strategies to Reduce Alcohol-Related Injuries: What Works? Paper presented at the 35th Scientific Meeting of the Research Society on Alcoholism, San Francisco, CA.

Ti, L., Tzemis, D., Kuo, M. & **Buxton J.** (2012, June). Engaging People Who Use Drugs in Policy and Program

Development: A Community-Based Approach. CPHA Conference, Public Health in Canada: Creating and Sustaining Healthy Environments, Edmonton, AB.

Tzemis, D., Kuo, M. & **Buxton J.** (2012, June). Understanding Public Attitudes Towards Harm Reduction in British Columbia: Leading the Way for Effective Harm Reduction Messaging and Advocacy. CPHA Conference, Public Health in Canada: Creating and Sustaining Healthy Environments, Edmonton, AB.

Tzemis, D. & **Buxton J.A.** (2012, November). A Survey on Drug Use among Harm Reduction Clients in BC, 2012. Poster presentation, PHABC Conference, Reorienting Health Services: Aligning Primary Healthcare and Public Health in Pursuit of Health for All, Burnaby, BC.

Tzemis, D., Gibson, E. & **Buxton J.A.** (2012, November). Increasing Access to Naloxone in BC: How Primary Healthcare Can Address the Public Health Issue of Opioid Overdose. Poster presentation, PHABC Conference, Reorienting Health Services: Aligning Primary Healthcare and Public Health in Pursuit of Health for All, Burnaby, BC.

Zhao, J., Stockwell, T., Martin, G., Macdonald, S., Valance, K., Treno, A., Ponicki, W., Tu, A. & **Buxton, J.** (2012, June). The Relationship between Changes to Minimum Alcohol Price, Outlet Densities and Alcohol-Related Death in British Columbia, 2002-2009. 38th Annual Alcohol Epidemiology Symposium of the Kettil Bruun Society, Stavanger, Norway.

CARBC Sponsored Conferences and Seminars

Benoit, C., McCarthy, B. & **Jansson, M.** (2012, April). Stigma, Service Work and Substance Use. Invited presentation, in-house CARBC lecture series, UVic, BC.

Drucker, E. (2012, April). The Epidemiology of Mass Incarceration in America. Free public lecture, UVic, BC.

Idea Fest (2013, March). Open House: Putting Substance Use Research to Work. Centre for Addictions Research of BC, UVic, BC.

Macdonald, S. (2012, June). The Impact of Immediate Roadside Prohibitions on Alcohol-Related Collisions. Presentation to the Board of Directors, Centre for Addictions Research of BC, Victoria, BC.

Pauly, B. (2013, March). Panel member for screening of the film *The House I Live In*, presented by the Centre for Addictions Research, UVic, BC.

Stockwell, T. (2012, December). Putting Our Alcohol Monopolies to Work: Canadian Case Studies of Minimum Price Policies in Action. Alcohol Pricing and Public Health Seminar, Centre for Addiction and Mental Health, Toronto, ON.

HONOURS AND AWARDS

| | |
|---------------|---|
| Pauly, B. | Queen Elizabeth II Diamond Jubilee Medal for contributions to nursing |
| Stockwell, T. | Fellow, Canadian Academy of Health Sciences |
| Stockwell, T. | Recipient of E.M. Jellinek Memorial Award for Social, Cultural and Policy Research on Alcohol |

MEDIA COVERAGE

Last year our media coverage covered a wide range of topics, although coverage of harm reduction issues in relation to both alcohol and illicit drugs, alcohol policy (mainly pricing and privatization) and reports from our BC Alcohol and Other Drug Monitoring Project were the most numerous. The majority of recorded media hits were either newspaper (approximately 63%) or radio (approximately 25%), with the others being television and online resources.

| Story/Topic | Electronic (TV/Radio) | Internet (Blogs, YouTube, etc.) | Newspaper |
|---|-----------------------|---------------------------------|------------|
| Youth substance use | 1 | | 1 |
| Homelessness | 6 | | 5 |
| Minimum alcohol prices, taxes | 16 | 8 | 105 |
| Managed alcohol programs | 2 | | 1 |
| Substance use and sex industry | 3 | 1 | 3 |
| Legal status of drugs, medical marijuana | 6 | | |
| Violence | 3 | 1 | 2 |
| Vulnerable populations | 1 | | 1 |
| Alcohol policy and prevention | 3 | | |
| Liquor privatization | 1 | | |
| Harm reduction services (Insite, safe crack use kits, needle exchanges) | 3 | 1 | 2 |
| Alcohol and drug overdose | 4 | | 2 |
| Alcohol and other drug trends | 1 | | |
| Substance use harms and benefits | 2 | 1 | 3 |
| Substance use treatment | 3 | 2 | 2 |
| Tobacco policies | 2 | | |
| Prescription drugs | 1 | | |
| Mental health | 1 | | |
| Parenting issues re alcohol and other drugs | 2 | | 1 |
| Drug education | | | 1 |
| TOTAL | 61 | 14 | 129 |

*These numbers only apply to media interviews identified by the UVic Communications Office's media monitoring service or informally by CARBC researchers. They underestimate total media coverage, particularly if UVic is not mentioned in the story.

Table 4: Performance Indicators for Key Result Area 4 (Dissemination)

| OBJECTIVE | PERFORMANCE INDICATORS |
|--|--|
| 4.1 To publish research findings in articles in peer reviewed journals | Number of articles published each year by CARBC researchers and students in peer reviewed journals <i>Benchmark: 70</i> 2012/2013: 81 |
| 4.2 To publish research findings in book chapters, books and research monographs | Number of book chapters, books or research monographs published by CARBC researchers and students each year <i>Benchmark: 25</i> 2012/2013: 31 |
| 4.3 To disseminate research findings through reports, systematic reviews and other resources | Number of reports, systematic reviews or other resources published each year <i>Benchmark: 36</i> 2012/2013: 53 |
| 4.4 To achieve a high academic impact for BC addictions-related research so that it is well known, frequently requested and often cited | Number of citations in peer reviewed journals of research by CARBC scientists and graduate students each year <i>Benchmark: 1045</i> 2012/2013: 1560 |
| 4.5 To conduct seminars, lectures and occasional conferences on the state of knowledge and its application to policy, practice and the research agenda | Number of public research seminars, symposia or conferences convened or co-convened by CARBC Number of invitations to CARBC researchers to present at conferences or symposia each year Number of papers accepted for presentation by CARBC researchers and students at conferences or symposia each year <i>Benchmarks: 5 / 25 / 35</i> 2012/2013: 6 / 56 / 39 |
| 4.6 To contribute to teaching programs on substance use and addictions for undergraduate and graduate courses/programs | Number of courses in addictions issues taught by CARBC members at UVic Number of courses in addictions issues taught by CARBC members at other campuses <i>Benchmarks: 6 / 3</i> 2012/2013: 23 / 7 |

“To contribute to constructive communication and cooperation between producers, intermediaries and users of various types of knowledge for the implementation of evidence-based policy and practice.”

HIGHLIGHTS

CARBC researchers have continued to be active in the alcohol policy arena. We have collaborated with non-government agencies in Scotland, the UK and Europe in the dissemination of our research on minimum alcohol prices and their implications for public health. There is a ready audience there for our research findings, with the European Commission becoming involved in determining the legality of such measures as well as their justification on grounds of public health. We have worked closely with the BC Police Traffic Branch in an evaluation of the 2010 impaired driving laws which amounted to a partial decriminalization of impaired driving, simultaneously reducing road trauma, criminal convictions for driving while moderately impaired, and policing costs.

The potential harm related to alcohol consumption is well documented by research carried out at CARBC and elsewhere. Making this information available in a way that actually helps people maximize their own wellness is a challenge. In attempting to meet this challenge, the Centre has developed online and paper-based alcohol screening tools and a variety of educational and brief intervention materials for both adults and teens.

Over the past year, we have seen a substantial increase in the utilization of these materials. Visits to the *Alcohol Reality Check* website increased by 62% from the previous year. A key contributor to this increase was the BingeDrinking.ca campaign, a joint project led by the Ministry of Health and involving CARBC, the Ministry of Energy, Mines & Natural Gas, Vancouver Coastal Health and Fraser Health. Referrals from BingeDrinking.ca accounted for 35% of visits to the *Alcohol Reality Check* site this year. The importance of collaboration is also illustrated by the second most significant source of traffic. Referrals from the Fraser Valley Distance Education School accounted for 22% of all visits to the site resulting in over 1,000 high school students being exposed to the screening and educational materials.

Our alcohol screening tools and educational and brief intervention materials have been utilized for several years by some of the community-based teams conducting the annual *Beyond the Blues Education and Screening Day*. CARBC provides training and support to the community partners and ensures appropriate access to the materials. The number of sites using alcohol risky drinking screens within the 2012 Screening Day increased by 7% from the previous year. The number of people screened went up 2% from the previous year. In fact, this year, for the first time, the alcohol screen was the most popular of the three screens offered (i.e., alcohol, anxiety and depression).

All of this suggests British Columbians are interested in assessing their alcohol consumption and in learning how to manage their relationship with alcohol. We will continue to explore further collaborations that will allow us to help people more effectively access, use and construct knowledge.

Other knowledge mobilization highlights this year included:

- We were able to further develop our drug education materials (iMinds and Drugs and Driving) and increase our implementation support. Through a partnership with Conseil Scolaire Francophone (School District #93), all of the iMinds modules are being translated into French. This will greatly improve the reach of iMinds, not only into French language schools, but also provide a scarce resource for French Immersion classrooms. Funding from Ministry of Health and Health Canada has allowed us to develop new modules and new web/phone apps.
- Efforts to engage school professionals and trustees in dialogue about drug policy and to examine critically current policy and practice led to an invitation to present a workshop at the annual conference of the BC School Trustees Association. Interest in the topic was high, and the workshop was over-subscribed. Further efforts are underway to work with schools and school districts to develop pragmatic tools to support the utilization of available knowledge.
- Two new documents (*Understanding Substance Use and Helping People Who Use Substances*) were developed to provide a baseline knowledge. This foundation will now be used to inform the development of further knowledge mobilization resources and processes.



Tim Dyck



Nicole Bodner



Evelyn Souza



Bette Reimer



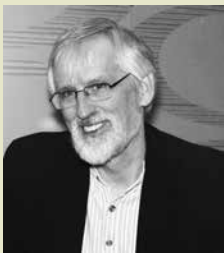
Cindy Andrew



Catriona Remocker

Faculty Profile – Dan Reist

Assistant Director (Knowledge Exchange)



Dan leads the CARBC team in Vancouver that focuses on communicating current evidence in a way that supports the evolution of effective policy and practice. Dan's work on knowledge mobilization involves understanding the meaning of the available information so that it can be used to answer real-world questions. This past year, Dan's team explored the ways helping professionals currently speak about substance use and addictions and then set out to present a coherent way of understanding these issues that could be communicated in easy-to-understand language and that was consistent with available knowledge. The results were presented in two documents: *Understanding*

Substance Use: A Health Promotion Perspective and *Helping People Who Use Substances: A Health Promotion Perspective*. These resources are now being used as the foundation for developing an eight-lesson online learning resource for community-based health and social service workers that will be pilot-tested in the fall of 2013.

SUCCESSFUL APPLICATIONS FOR KNOWLEDGE MOBILIZATION FUNDING

Development of a Report on Housing and Social Supports. Greater Victoria Coalition to End Homelessness, \$10,000 from 2012 to 2013.

Substance Impaired Driving. Health Canada Contract, \$375,025 from 2010 to 2013.

Supporting BC in Reducing Harm Related to Substance Use. BC Ministry of Health, \$788,200 from July 2011 to March 2015.

Evaluation of AME Program. Ministry of Children and Family Development Contract, \$45,000 from 2011 to 2013.

BC Partners for Mental Health and Addictions Information. BC Mental Health Society Branch, \$238,875 from 2012 to 2013.

Healthy Minds/Healthy Campuses. BC Mental Health Society Branch, \$250,000 from 2012 to 2014.

Methadone Maintenance Treatment System. Provincial Health Services Authority, \$40,000 from 2012 to 2013.

Family Resources (Legal Thinking Age). Provincial Health Services Authority, \$200,000 from 2012 to 2013.

iMinds Drug Education Resources. Project, Provincial Health Services Authority, \$60,000 from 2012 to 2013.

Skills Within Reach (online training). Canadian Mental Health Association (BC Division), \$30,000, 2013.

CURRENT PROJECTS

Addressing Substance-Impaired Driving Among Youth

Investigators: Reist, D., Dyck, T., Bodner, N. & Souza, E.

Funding body: Health Canada

Background: Recent epidemiological evidence suggests that substance-impaired driving remains a serious health and safety issue in BC. This three-year project seeks to influence social norms around substance-impaired driving for young drivers in BC aged 16-18. The project is based on a comprehensive community health approach which recognizes that substance-impaired driving is a complex social phenomenon requiring a comprehensive, multifaceted and sustained response.

Progress to date: In collaboration with 7th Floor Media at SFU, web-based and classroom learning activities have been developed and pilot tested. A smart phone app is in the final stages of development and a resource guide to support the engagement of community groups has been developed. Neither of these have been pilot-tested. While the project is now completed, CARBC will continue to promote the resources and support implementation in BC schools and communities.

A Public Health Approach to Reducing Problem Gambling in British Columbia

Investigators: Thomas, G. & Reist, D.

Funding body: Vancouver Coastal Health Authority

Background: In response to ongoing debates in Vancouver and throughout the province related to the expansion of gambling opportunities, the Chief Medical Health Officer in Vancouver Coastal Health and the Provincial Health Officer commissioned a review and analysis of the current evidence related to the public health impact of, and strategies for mitigating, problematic and pathological gambling in BC.

Activities this year: A report has been prepared that explores what is known about gambling in Canada and BC, and identifies areas that require additional research. It concludes with 16 recommendations related to the public health themes of health promotion, health protection, preventive interventions, and assessment and surveillance. These include attention to building individual resilience and community capacity, to decreasing the risks to the vulnerable, and to improving the responsiveness of the system to identify and respond to emerging problems. The report will be released by the Office of the Provincial Health Officer in 2013.



Gerald Thomas

Alcohol Education and Screening

Investigators: Dyck, T., Reist, D. & Bodner, N.

Funding body: BC Mental Health Society Branch and BC Ministry of Health

Background: CARBC has developed online alcohol screening tools and a variety of educational and brief intervention materials for both adults and teens. These materials have been adapted to paper-based versions for use in conjunction with the annual Beyond the Blues Education and Screening Day and other settings. This ongoing project seeks to increase the reach of these products.

Activities this year: In 2012-2013, CARBC worked with the Canadian Mental Health Association to incorporate the Alcohol Reality Check online screen into the Here to Help website and to support community-based screening and education. More than 5,000 individuals visited the online screening site and 413 individuals completed screens at 45 community sites (an increase of 7% over the previous year) during Beyond the Blues Education and Screening Day.

Helping Campuses (adjunct to Healthy Minds, Healthy Campuses initiative)

Investigators: Remocker, C., Dyck, T. & Reist, D.

Funding body: BC Mental Health Society Branch and BC Ministry of Health

Background: CARBC has been an active lead partner in the Healthy Minds/Healthy Campuses project of BC Partners for Mental Health and Addictions Information and has been working with individual campuses to develop strategies and tools for appropriately addressing substance use concerns (particularly alcohol). A major facet of this initiative is supporting post-secondary partners in consistently implementing a socio-ecological approach to respond to substance use challenges.

Activities this year: Efforts included ongoing communication with post-secondary institutions through consultation as well as the online resource and blog posts. In addition, CARBC worked with the Canadian Mental Health Association (BC Division) and the BC Ministry of Health to launch a new project, currently involving six institutions, to take action toward *Changing the Culture of Substance Use* on BC campuses.



Catriona Remocker

Helping Communities

Investigators: Reist, D., Reimer, B., Dyck, T., Bodner, N. & Souza, E.

Funding body: BC Ministry of Health

Background: This project involves working with communities to develop tools and materials that are accessible and useful to stakeholders throughout the province and making these available through the Helping Communities web-based resource repository. The goal of the project is to help communities address the impact of substance use on their environment and on the lives of the residents.

Activities this year: In 2012-2013, CARBC participated in several networks (including co-chairing the BC Substance Use Network) and consulted with a variety of community members and agencies on accessing and understanding available evidence and developing strategies to meet local and regional needs. CARBC also supported efforts in other provinces and at a national level designed to promote healthy community approaches to alcohol and other drug use. In particular, CARBC contributed to a national initiative exploring the integration of mental health and substance use services.

Helping Schools

Investigators: Reist, D., Andrew, C., Reimer, B. & Bodner, N.

Funding body: BC Mental Health Society Branch and BC Ministry of Health

Background: This ongoing project involves continuing to develop and promote resources that help schools address substance use in a health-promoting way.

Activities this year: Two new iMinds modules for Grades 4 and 5 were completed this year. Other additions were made to the online resource, including several guides for educators related to drug education and school policy. Additional activities included professional development for school professionals (897 participants), consultation to schools, districts and other interested stakeholders (65 schools or districts), dissemination of knowledge exchange products, and public education for parent groups and others.



Cindy Andrew

Here to Help Information Products

Investigators: Reist, D., Reimer, B., Dyck, T. & Bodner, N.

Funding body: BC Mental Health Society Branch and BC Ministry of Health

Background: Here to Help is a project of the BC Partners for Mental Health and Addictions Information that, since 2003, has been helping people live well and better prevent and manage mental health and substance use problems.

Activities this year: In 2012/2013, CARBC lead the development of a primer intended to help build a shared understanding of substance use within a positive mental health frame. Ultimately, two resources were developed: *Understanding Substance Use: A Health Promotion Perspective* and *Helping People Who Use Substances: A Health Promotion Perspective*. These resources pay particular attention to consistency with BC government policy as articulated in *Healthy Minds, Healthy People: A Ten-Year Plan to Address Mental Health and Substance Use in British Columbia*.

Improve Linkages in BC's Methadone Maintenance Treatment System

Investigators: Reist, D. & Dyck, T.

Funding body: Provincial Health Services Authority

Background: In follow-up to recent efforts to improve methadone maintenance treatment in BC, the Ministry of Health initiated efforts to consult with a wide range of stakeholders and engage in knowledge exchange and strategic planning.

Activities this year: CARBC helped prepare a background report and organized and facilitated a one-day conversation involving 48 individuals representing various provincial ministries, the health authorities, professional colleges, patients and other stakeholders. A report on the dialogue is currently in preparation.

Legal Thinking Age (family resource)

Investigators: Reist, D., Reimer, B., Dyck, T., Bodner, N. & Souza, E.

Funding body: Provincial Health Services Authority

Background: Following the successful development of bingedinking.ca, the BC Ministry of Health, together with other government colleagues, proposed the development of a resource to help parents support the development of healthy patterns of alcohol use among their children. CARBC was asked to work with Traction Creative Communication and guide the development of this resource.



Bette Reimer

Activities this year: An international scan of English language resources was completed and a plan was developed for the resource. Work began on developing materials and designing a micro-site that can be hosted within the Ministry of Health's Healthy Families BC program. The resource should be ready to launch in the fall of 2013.

Skills Within Reach (online training)

Investigator: Reist, D.

Funding body: Canadian Mental Health Association/Community Action Initiative

Background: In seeking to promote the integration of mental health and substance use services within the community sector, the Canadian Mental Health Association (BC Division) identified the need for basic training for community-based health and social service workers to support an understanding of substance use and effective ways to respond in non-clinical settings. CMHA then drew together a partnership (including CARBC), consulted further with community partners, developed a plan and obtained funding to produce an online training program that seeks to maximize reach and training effectiveness.

Activities this year: CARBC has provided expertise in educational theory, curriculum design and content articulation. An eight-lesson online course is being developed with 7th Floor Media (SFU) and should be ready to pilot-test in the fall of 2013.

Visions: BC's Mental Health and Addictions Journal

Investigators: Reist, D. & Reimer, B.

Funding body: BC Mental Health Society Branch and BC Ministry of Health

Background: *Visions* is a central knowledge exchange vehicle of the BC Partners for Mental

Health and Addictions Information and is supported by CARBC.

Activities this year: Efforts focused on increasing the representation of information about substance use in the journal. CARBC contributed to the editorial committee for all three issues produced this year, provided articles and guest editors for two issues.

NEW OR REVISED HEALTH PROMOTION RESOURCES

Understanding Substance Use: A health promotion perspective

Helping People Who Use Substances: a health promotion perspective

COMMITTEE MEMBERSHIPS

| | |
|----------------|--|
| Andrew, C. | BC School-Centred Mental Health and Substance Use Coalition |
| Anderson, J. | Advisory Committee on Opioid Dependence, College of Physicians and Surgeons of BC |
| Anderson, J. | Addictive Diseases Committee, BC Medical Association |
| Barnes, G. | Member, Centre for Youth and Society Board |
| Belle-Isle, L. | Chair, Steering Committee, Canadian Drug Policy Coalition |
| Benoit, C. | Canadian Society for the Sociology of Health |
| Benoit, C. | Sociologists for Women in Society |
| Benoit, C. | International Sociological Association, Occupational Groups Section, Social Welfare Section, Sociology of Health Section |
| Benoit, C. | International Institute of Sociology |
| Benoit, C. | American Sociological Association |
| Benoit, C. | Canadian Sociology Association |
| Benoit, C. | Canadian Public Health Association |
| Benoit, C. | Member, HerWay Home Community Advisory Meeting, Victoria, BC |
| Benoit, C. | Member, HerWay Home Communications Committee, Victoria, BC |
| Benoit, C. | Member of Genomics, Society and Ethics Advisory Committee, Genome BC |
| Benoit, C. | Advisory Board member, Canadian Society for the Sociology of Health |
| Benoit, C. | Panelist, Grand Challenge in Global Mental Health Initiative, Office for Research on Disparities and Global Mental Health, National Institute of Mental Health |
| Benoit, C. | Program Advisory Committee, IMPART: Intersections of Mental Health Perspectives in Addictions Research Training |
| Benoit, C. | International Scientific Advisory Board, NIHR King's Patient Safety and Service Quality Research Centre, King's College, London, UK |
| Cherpitel, C. | American Public Health Association Section Council: Alcohol, Tobacco and Other Drugs Section |
| Cherpitel, C. | Kettil Bruun Society for Social and Epidemiologic Research on Alcohol |

| | |
|----------------|---|
| Cherpitel, C. | College on Problems of Drug Dependence |
| Cherpitel, C. | International Network on Brief Interventions for Alcohol Problems |
| Dyck, T. | Healthy Minds/Healthy Campuses Provincial Advisory Group |
| Jansson, M. | Steering Committee, BC Inter-University Research Data Centre, UVic Branch |
| Jansson, M. | Co-Chair, Human Research Ethics Board, University of Victoria |
| Jansson, M. | Capital Region Action Team on Sexually Exploited Youth (CRAT) |
| Leadbeater, B. | Member, Canadian Psychological Association |
| Leadbeater, B. | Member, Society for Research in Child Development. |
| Leadbeater, B. | Member, Society for Research on Adolescence. Chair, Social Policy Awards Committee |
| Lucas, P. | Board of Directors, Multidisciplinary Association of Psychedelic Studies Canada |
| Lucas, P. | Board of Directors, Canadian Students for Sensible Drug Policies |
| Lucas, P. | Member, Steering Committee, Canadian Drug Policy Coalition |
| Macdonald, S. | Canadian Alcohol and Drug Use Monitoring System (CADUMS), Health Canada |
| Macdonald, S. | Canadian Community Epidemiology Network on Drug Use |
| Macdonald, S. | Faculty Member, Social Dimensions of Health, University of Victoria |
| Macdonald, S. | Kettil Bruun Society for Social and Epidemiologic Research on Alcohol |
| Marsh, D.C. | Canadian Society of Addiction Medicine |
| Marsh, D.C. | American Society of Addiction Medicine |
| Marsh, D.C. | International Harm Reduction Association |
| Marsh, D.C. | International Society of Addiction Medicine |
| Pauly, B. | BC Delegate, Mental Health Summit 2012, Winnipeg, MB |
| Pauly, B. | Member, National Advisory Committee on Prescription Substance Misuse, CCSA |
| Pauly, B. | Member, National Advisory Committee on a Public Health Approach to Illegal Substance Use, Canadian Public Health Association. |
| Pauly, B. | Member, Community Advisory Committee, UVic Housing and Homelessness Strategic Planning |
| Reimer, B. | BC Health Literacy Network |
| Reimer, B. | BC Partners for Mental Health and Addictions Information |
| Reist, D. | BC Substance Use Network |
| Reist, D. | BC Health Literacy Network |
| Reist, D. | Member, Canadian Drug Policy Coalition Policy Working Group |
| Reist, D. | Canadian Low-Risk Drinking Guidelines KE Working Group |
| Reist, D. | School-Based Mental Health and Substance Use Consortium |
| Roth, E. | Member, Graduate Committee, Department of Anthropology |
| Roth, E. | Member, Speakers' Committee, Department of Anthropology |
| Roth, E. | Member, Dean of Social Sciences' Faculty Advisory Committee |
| Stockwell, T. | National Surveillance Advisory Committee, Health Canada |
| Stockwell, T. | National Alcohol Strategy Advisory Committee |
| Stockwell, T. | Scientific Advisory Board, Alcohol Research Group, Emeryville, California |
| Stockwell, T. | Canadian Academy of Health Sciences |
| Stockwell, T. | Kettil Bruun Society for Social and Epidemiologic Research on Alcohol |
| Thomas, G. | BC Partners for Mental Health and Addictions Information |
| Zhao, J. | Kettil Bruun Society for Social and Epidemiological Research on Alcohol |

Table 5: Performance Indicators for Key Result Area 5

| OBJECTIVE | PERFORMANCE INDICATORS |
|--|--|
| 5.1 To ensure access to relevant knowledge while working in partnership with policymakers and practitioners in planning and implementing projects to address substance use | Number of projects in which CARBC members collaborate with policymakers or practitioners <i>Benchmark: 15</i> <i>2012/2013: 25</i> |
| 5.2 To provide proposals, briefings and submissions to government and parliamentary inquiries, policy advisors and relevant provincial and national committees on emerging issues related to substance use | Number of policy proposals contributed to by CARBC members each year Number of invitations received each year to make submissions to policy forums, select committees or other such bodies Number of provincial or national committees, advisory boards or other such bodies on which CARBC members are active <i>Benchmarks: 5 / 5 / 20</i> <i>2012/2013: 13 / 4 / 29</i> |
| 5.3 To develop and promote resources with the potential to make direct contributions to policies, programs or service delivery systems | Number of resources completed in any one year <i>Benchmark: 10</i> <i>2012/2013: 39</i> |
| 5.4 To facilitate mechanisms that increase the sharing of knowledge among policymakers, practitioners, researchers and community members related to challenges, trends and effective interventions for promoting health and preventing harm related to substance use | Number of networks or communities of practice in which CARBC members are active Number of multi-sectoral symposia or knowledge exchange events each year <i>Benchmarks: 20 / 1</i> <i>2012/2013: 21 / 15</i> |
| 5.5 To provide access to balanced factual information on substance use and related harms and health promotion approaches through a variety of knowledge exchange strategies | Number of visits to CARBC websites each year Number of presentations/workshops/displays each year Number of articles in the print media and interviews used by the electronic media annually as a result of CARBC activities Number of e-bulletins/blog articles published each year Publication of articles from CARBC members in magazines, newsletters, websites and non-refereed journals each year Number of consultations provided each year <i>Benchmarks: 30,000 / 15 / 150 / 10 / 5 / 10</i> <i>2012/2013: 33,917 / 25 / 204 / 39 / 7 / 10</i> |

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