



**University
of Victoria**

Centre for Addictions
Research of BC

ANNUAL REPORT

04/01/16 - 03/31/2017

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.

GUIDING PRINCIPLES

The work of the Centre for Addictions Research of BC (CARBC) will continue to be guided by the following principles:

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, cannabis 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.



**University
of Victoria**

Centre for Addictions
Research of BC

CONTENTS

Message from the Chair

Message from the Director

Our People and Partners

KEY RESULTS AREA 1: **Building Capacity**

KEY RESULTS AREA 2: **Engaging Academic Expertise**

KEY RESULTS AREA 3: **Implementing Quality Research**

KEY RESULTS AREA 4: **Dissemination**

KEY RESULTS AREA 5: **Knowledge Mobilization**

Cover Photo Credit: John Dorocicz

Message from the Advisory Board Chair

Welcome to the 2016-17 Annual Report of the Centre for Addictions Research of BC. In this latest account of our activities, you will find detailed information on each of the Centre's key result areas: building capacity, conducting research, disseminating research findings, and improving public policy and practice.

Our network of dedicated and hardworking staff, expert researchers and dazzling students, and invaluable community research and funding partners, have had an outstanding year of achievements. Among the myriad highlights at CARBC, I wish to mention the following:



- 30 graduate students under supervision from faculty in multiple relevant disciplines (with success in applying for external scholarships)
- \$3.3 million in new funding
- 100 peer-reviewed publications in high quality journals
- the five-year external review of the Centre was successfully completed, which had many complimentary things to say about our work and its wide impact and also raised concerns about taking steps urgently needed to renew and refresh the CARBC academy as several CARBC-affiliated faculty approach retirement
- 545 stories generated in the traditional media, including numerous interviews for CBC Radio and TV and national papers such as *The Globe and Mail*
- a growing social media presence through our Twitter and Facebook accounts

On effectively disseminating research via social media, I would highlight the work of two graduate students here. One is Renee O'Leary's (Social Dimensions of Health) report on e-cigarettes and harm reduction ("Clearing the Air around E-cigarettes") was retweeted around the world from Afghanistan to Zimbabwe. The other is Audra Roemer's (Psychology) systematic review published in the *Journal of Studies on Alcohol and Drugs* was the top downloaded and cited article for that journal last year.

The scope of our work has become increasingly national and international, which has led to consideration of a new name reflecting this new focus.

On behalf of the Advisory Board, I wish to thank and congratulate all those who have made this another outstanding year at CARBC.

Michael J. Prince, PhD

Lansdowne Professor of Social Policy, University of Victoria
Chair, CARBC Advisory Board

Message from the Director

Welcome to this latest chronicle of the amazing productivity of our faculty, staff and students and the impacts of their work on harm reduction, prevention and treatment of problems relating to substance use in Canada. I am happy to report that in 2016 we passed a five-year review conducted by a panel of three independent scientists chaired by Dr Robert Mann, Senior Scientist with the Centre for Addiction and Mental Health. Along with a recommendation (“unanimously and strongly”) that the Centre’s status as a research centre of the University of Victoria be renewed, a number of specific recommendations were made with an eye to our future sustainability. Principally, it was recommended that the Centre’s leadership needs to be engaged in the faculty hiring process at the University in keeping with the Centre’s foundational Memorandum of Understanding which undertook to create seven affiliated faculty appointments as a condition of accepting an endowment of \$10.55 million. It suggested some urgency given a number of pending retirements from the existing faculty based at the Centre. It also made recommendations for the University to ensure improved benefits and pensions for staff employed at its research centres and for additional space to be provided to house the growing active membership of the Centre. I am happy to report that a process is underway in collaboration with the offices of the Vice President of Research and also the Provost to explore continuation of UVic faculty affiliated with CARBC. In addition, we have been supported to expand our Victoria office space a little which is most welcome.



A process has been underway to identify a new name for the Centre given concerns about the connotations of the outdated term “addiction” and the provincial designation. We are awaiting approval of a new name (the Canadian Institute for Substance Use Research) by the University Senate. This name was adopted after a lengthy consultation process with the full membership and Advisory Board of CARBC. Many letters of support for the name change were gratefully received both from within UVic and from significant national bodies concerned with substance use policy, health and research.

Following the Review, the CARBC Faculty and Advisory Board engaged in the preparation of a strategic plan for 2017-2021. This document is available on request. With the pending legalisation of cannabis, we made an important strategic decision to add cannabis producers and retailers to the list of commercial vested interest groups from whom we will not accept funding nor have as members those who have done so. We are only too aware of how powerful industry interests can potentially distort the focus and dissemination of research. Other such groups include the alcohol, tobacco, gambling and pharmaceutical industries.

Tim Stockwell, PhD
Director, CARBC
Professor, Department of Psychology
University of Victoria

Welcome

OUR PEOPLE AND PARTNERS

Directors and Faculty

Dr Tim Stockwell
Director, Scientist (Psychology)



Tim Stockwell



Scott Macdonald

Dr Scott Macdonald
Assistant Director for Research,
Scientist (Health Information
Science)

Dan Reist
Assistant Director for Knowledge
Exchange



Dan Reist



Cecilia Benoit

Dr Cecilia Benoit
Scientist (Sociology)

Dr Cheryl Cherpitel
Scientist (Nursing)



Cheryl Cherpitel



Mikael Jansson

Dr Mikael Jansson
Scientist (Sociology)

Dr Marjorie MacDonald
Scientist (Nursing)



Marjorie MacDonald



Bernie Pauly

Dr Bernie Pauly
Scientist (Nursing)

Dr Eric Roth
Scientist (Anthropology)



Eric Roth



Karen Urbanoski

Dr Karen Urbanoski
Scientist (Public Health & Social
Policy)

Dr Jinhui Zhao
Scientist



Jinhui Zhao



Gordon Barnes

Scientist Emeritus

Dr Gordon Barnes
Professor Emeritus (Child and
Youth Care)

Staff (Victoria)

Katrina Barber
Research Assistant

Meaghan Brown
Research Assistant

Randi Brown
Research Assistant

Emma Carter
Administrator

Geoff Cross
Research Assistant

Charlotte Czerwinski
Work study student

Megan Deyman
Research Assistant

Stephanie Dion
Work study student

Ben Donoghue
Research Assistant

John Dorocicz
IT Support

Rebecca Elliot
Work study student

Jackson Flagg
Research Assistant

Amanda Farrell-Low
Communications Officer

Ari Franklin
Research Assistant

Catherine Hacksel
Research Assistant

Adele Horbulyk
Work study student



Katrina Barber



Meaghan Brown



Randi Brown



Emma Carter



Geoff Cross



Megan Deyman



Stephanie Dion



Jackson Flagg



Amanda Farrell-Low



Dakota Inglis



Andrew Ivsins



Caitlin Janzen



Chantele Joordens



Alex Kent



Bonnie Kryswaty



Samantha Magnus

Dakota Inglis
Research Associate

Andrew Ivsins
Research Assistant

Caitlin Janzen
Research Coordinator

Chantele Joordens
Research Associate

Chelsie Kadgien
Transcriptionist

Alex Kent
Research Assistant

Bonnie Kryswaty
Research Assistant

Megan Lowe
Work study

Celeste Macevicius
Transcriptionist

Samantha Magnus
Research Assistant

Staff (Victoria), cont'd

Renay Maurice
Research Assistant

Megan Mills
Research Assistant

Shane Morrissey
Research Assistant

Chris Pauley
Research Assistant

Jessica Pitman
Research Assistant

Tina Revai
Research Assistant

Jeremy Riishede
Administrative Coordinator/
Research Assistant

Sana Shahram
Research Associate

Lindsay Shaw
Research Assistant

Adam Sherk
Research Associate

Justin Sorge
Research Associate

Heather Strosher
Research Coordinator

Leah Shumka
Research Associate



Renay Maurice



Chris Pauley



Tina Revai



Jeremy Riishede



Sana Shahram



Lindsay Shaw



Adam Sherk



Justin Sorge



Heather Strosher



Leah Shumka



Michaela Smith



Jen Theil



Joanne Thompson



Kate Vallance



Thea van Roode



Jonathan Woods

Michaela Smith
Research Assistant

Jen Theil
Assistant to the Director

Joanne Thompson
Research Assistant

Kate Vallance
Research Associate

Thea van Roode
Research Coordinator

Jonathan Woods
Communications Coordinator

Staff (Vancouver)

Cindy Andrew
Program Consultant,
Helping Schools

Nicole Bodner
Research Assistant

Dr Tim Dyck
Research Associate

Kristina Jenei
Research Assistant

Gaelle Nicolussi Rossi
Research Assistant

Bette Reimer
Research Associate

Catriona Remocker
Research Associate

Cathy Spence
Assistant to Dan Reist



Cindy Andrew



Nicole Bodner



Tim Dyck



Kristina Jenei



Gaelle Nicolussi Rossi



Bette Reimer



Catriona Remocker



Cathy Spence

Post-Doctoral Fellows

Dr Mahboubeh Asgari
(Education)

Dr Sana Shahram
(Nursing)

Dr Trudy Norman
(Nursing)



Mahboubeh Asgari



Sana Shahram



Trudy Norman

Site Director

Dr Russ Callaghan
Associate Professor,
Northern Medical
Program,
University of Northern
British Columbia



Russ Callaghan

Advisory Board

Dr Lynne Belle-Isle

Project Consultant, Canadian AIDS Society

Dr Laurence Bosley

Director, Addictions Services, Island Health

Dr Russ Callaghan

Associate Professor, Northern Medical Program, University of Northern British Columbia

Chief Del Manak

Chief Constable, Victoria Police Department

Inspector Scott McGregor

Community Services Division, Victoria Police Department

Dr Perry Kendall

Provincial Health Officer, BC Ministry of Health

Andrea Langlois

International Centre for Ethnobotanical Education

Philippe Lucas

Vice President, Patient Services, Tilray

Erika Mundel

Senior Policy Analyst, First Nations Health Authority

Warren O'Briain

Executive Director, Communicable Disease Prevention, Harm Reduction and Mental Health, BC Ministry of Health



Lynne Belle-Isle



Russ Callaghan



Scott McGregor



Perry Kendall



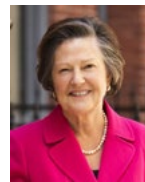
Andrea Langlois



Philippe Lucas



Michael Prince



Sandra Richardson



Oliver Schmitdke

Dr Michael Prince, Chair

Lansdowne Professor of Social Policy, University of Victoria

Sandra Richardson

Chief Executive Officer, Victoria Foundation

Dr Oliver Schmitdke

Associate Vice President, Research, University of Victoria

Collaborating Scientists

Dr Jeffrey Brubacher

Emergency Physician and
Researcher,
Vancouver General Hospital



Jeffrey Brubacher



Jane Buxton

Dr Jane Buxton

Professor, School of Population
and Public Health, University
of British Columbia, Physician
Epidemiologist, Harm Reduction
Lead, BC Centre for Disease Control



Bonnie Leadbeater



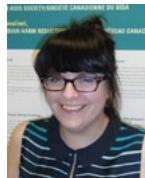
Lenora Marcellus

Dr Bonnie Leadbeater

Professor, Department of
Psychology, University of Victoria

Dr Lenora Marcellus

Associate Professor, School of
Nursing, University of Victoria



Amanda Slaunwhite



Gerald Thomas

Dr Amanda Slaunwhite

Post-Doctoral Fellow, Department
of Sociology, University of New
Brunswick

Dr Gerald Thomas

Director, Alcohol & Gambling
Policy, Healthy Living & Health
Promotion, BC Ministry of Health



Bruce Wallace

Dr Bruce Wallace

Assistant Professor, School of Social
Work, University of Victoria

Research Affiliates

Dr Lynne Belle-Isle

Project Consultant, Canadian AIDS Society

Clifton Chow

Research Coordinator, Youth Addictions, Vancouver Coastal Health Authority

Dr Anne George

Associate Professor, Pediatrics, School of Population and Public Health, Faculty of Medicine, University of British Columbia

Alissa Greer

Research Coordinator, BC Centre for Disease Control

Dr Marvin Krank

Professor, Psychology, University of British Columbia, Okanagan

Dr Nathan Lachowsky

Assistant Professor, School of Public Health and Social Policy, University of Victoria

Philippe Lucas

Vice President, Patient Services, Tilray

Samantha Magnus

Health Information Analyst, Methodologies and Cross Sector Analysis, BC Ministry of Health

Dr Megan McLarnon

Assistant Professor of Clinical Practice and Director of Clinical Training, Department of Psychology, Simon Fraser University



Lynne Belle-Isle



Clifton Chow



Anne George



Alissa Greer



Marvin Krank



Nathan Lachowsky



Philippe Lucas



Samantha Magnus



Megan McLarnon



Ingrid Pacey



Kathleen Perkin



Rachel Phillips

Dr Ingrid Pacey

Psychiatrist, Vancouver, BC

Kathleen Perkin

Manager, Harm Reduction Policy, BC Ministry of Health

Dr Rachel Phillips

Executive Director, PEERS Victoria Resources Society

Research Affiliates cont'd

Dr Diane Rothon
Physician



Diane Rothon



Deborah Rutman

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

Dr Kara Thompson
Assistant Professor, Department
of Psychology, St Francis Xavier
University



Kara Thompson



Mikhail Torban

Dr Mikhail Torban
Researcher

Dr Zach Walsh
Assistant Professor, Psychology,
Co-Director, Centre for the
Advancement of Psychological
Science and Law, University of
British Columbia



Zach Walsh



Ashley Wettlaufer

Ashley Wettlaufer
Research Coordinator, Centre for
Addiction and Mental Health,
Ontario



Erica Woodin

Dr Erica Woodin
Associate Professor, Department of
Psychology, University of Victoria

Graduate Students

Katrina Barber

Social Dimensions of Health
Program (MA),
University of Victoria

Dr Lynne Belle-Isle

Social Dimensions of Health
Program (PhD),
University of Victoria

Robert Birch

Social Dimensions of Health
Program (MA),
University of Victoria

Meaghan Brown

School of Nursing (MN),
University of Victoria

Kelly Davidson

School of Health Information
Science (MSc),
University of Victoria

Megan Deyman

School of Public Health & Social
Policy (MPH),
University of Victoria

Nozomi Franco Cea

School of Child and Youth Care
(PhD),
University of Victoria

Phuc Dang

Social Dimensions of Health
Program (PhD),
University of Victoria

Dr Jessica Fitterer

Department of Geography (PhD),
University of Victoria



Katrina Barber



Lynne Belle-Isle



Robert Birch



Meaghan Brown



Megan Deyman



Phuc Dang



Jessica Fitterer



Andrew Ivsins



Sarah Janewski



Chantele Joordens



Vandana Joshi



Alex Kent

Peter Greenwell

Department of Sociology (PhD),
University of Victoria

Andrew Ivsins

Department of Sociology (PhD),
University of Victoria

Sarah Janewski

Social Dimensions of Health
Program (MA),
University of Victoria

Bethany Jeal

School of Nursing (MN),
University of Victoria

Chantele Joordens

Social Dimensions of Health
Program (PhD),
University of Victoria

Vandana Joshi

Social Dimensions of Health
Program (PhD),
University of Victoria

Alex Kent

School of Public Health and Social
Policy (MA), University of Victoria

Graduate Students Cont'd

Philippe Lucas

Social Dimensions of Health Program (PhD), University of Victoria

Antonio Marante

School of Health Information Science (MSc), University of Victoria

Renay Maurice

Department of Sociology (MA), University of Victoria

Heather McArel

School of Public Health and Social Policy (MPH), University of Victoria

Renee O'Leary

Social Dimensions of Health Program (PhD), University of Victoria

Tina Revai

School of Nursing (MN), University of Victoria

Audra Roemer

Department of Psychology (PhD), University of Victoria

Barbara Romano

School of Nursing (MN), University of Victoria

Marion Selfridge

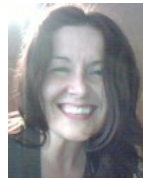
Social Dimensions of Health Program (PhD), University of Victoria

Lindsay Shaw

Department of Anthropology (MA), University of Victoria



Philippe Lucas



Renay Maurice



Heather McArel



Renee O'Leary



Tina Revai



Audra Roemer



Marion Selfridge



Lindsay Shaw



Adam Sherk



Krystal Summers



Sarah Wojcik

Adam Sherk

Social Dimensions of Health Program (PhD), University of Victoria

Krystal Summers

Social Dimensions of Health Program, University of Victoria

Lee Taylor

School of Health Information Science (MSc), University of Victoria

Sarah Wojcik

Social Dimensions of Health Program (MA), University of Victoria

Undergraduate Students

Andrea Appollos
School of Nursing (BA, Honours)

Nate Bomans
School of Nursing (BA, Honours)

Charlotte Czerwinski
Faculty of Kinesiology (BA, Honours)



Randi Brown



Sasha Goatley

Randi Brown
School of Nursing (BA, Honours)

Sasha Goatley
Department of Psychology
(BA Honours)

Megan Lowe
School of Health Information
Science (BA, Honours)

Volunteers

Kiran Bhangu
Harpreet Bhela
Andrew Boyce
Cynthia Chao
Megan Deyman
Amanda Farrell-Low
James Fraser

Sasha Goatley
Eric Huang
Dakota Inglis
Rae Ismail
Jacob Koudys
Hana Mildenburg
Sam Perreault

Lindsay Shaw
Hannah van Mook
Nicole Vishnevsky
Nicole Warren
Janithri Withanage
Kara Whitlock
Cathy Zwicker

CARBC volunteers
undertaking cultural
sensitivity and
naloxone training



COLLABORATING CENTRES

Canada

Canadian Centre on Substance use and Addiction, Ottawa, ON
Centre for Addiction and Mental Health, Institute for Mental Health Policy Research, Toronto, ON
Propel Centre for Population Health Impact at the University of Waterloo, ON.

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, 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:

AIDS Vancouver Island
Burnside Gorge Community Association
CRD Child and Youth Network
CRD Healthy Schools
Greater Victoria Coalition to End Homelessness
Office of the Superintendent of Motor Vehicles, BC
Our Place Society
Peers Victoria Resource Society
Society of Living Intravenous Drug Users (SOLID)
Together Against Poverty Society
Victoria Cool Aid Society
Tri-District (Sooke, Greater Victoria, Saanich School Districts) Interagency Committee

Vancouver:

Dr. Peter Centre
Drug Users Resource Centre (DURC)
Eastside Illicit Drinkers for Education
Health Initiatives for Men (HIM)
Portland Hotel Society
Positive Living Society of BC
Providence Health Care
Qmunity
School District #42 (Maple Ridge)
Vancouver Area Network of Drug Users (VANDU)
Vancouver Coastal Health
YouthCo AIDS Society

CARBC Scientist Cecilia Benoit with staff at the PEERS Victoria Resource Society (photo: UVic Photo Services)



British Columbia:

Bridge for Health (through PHABC)	BC School Centred Mental Health Coalition
BC Centre for Disease Control	Fraser Health
BC Centre for Excellence in HIV/AIDS	Healthy Schools BC
BC Centre on Substance Use	Interior Health
BC Healthy Living Alliance (through PHABC)	Northern Health Authority
BC Mental Health and Substance Use Collaborative	Office of the Provincial Health Officer, BC Ministry of Health
BC Ministry of Health	Provincial Health Services Authority (PHSA)
BC Ministry of Justice	Public Health Association of British Columbia (PHABC)
BC National Collaborating Centre for Aboriginal Health	Vancouver Island Health Authority (VIHA)
BC Poverty Reduction Coalition (through PHABC)	

Rest of Canada:

CAN, Canadian Association of People who use Drugs	ON, Haldimand-Norfolk Public Health
ON, Canadian Centre for Justice Statistics (CCJS), Statistics Canada	ON, Ministry of Transportation, Government of Ontario
CAN, Canadian Centre on Substance Abuse, Ottawa	ON, National Collaborating Centre for Methods and Tools
CAN, Canadian Drug Policy Coalition	ON, Ottawa Inner City Health, Ottawa
CAN, Canadian Institute for Health Information (CIHI)	ON, Propel Centre for Population Health Impact, University of Waterloo
CAN, MADD Canada	ON, Public Health, Ontario
CAN, National Collaborating Centre for Determinants of Health	ON, Shelter House (Kwae Kii Win Centre), Thunder Bay
CAN, Public Health Agency of Canada, Ottawa	ON, Toronto Public Health
ON, Art Manuel House, Toronto	ON, Wesley Urban Ministries, Hamilton
ON, Canadian Mental Health Association, Sudbury Branch	NS, Dalhousie University
ON, Centre for Addiction and Mental Health, Toronto	NS, National Collaborating Centre for Determinants of Health
ON, City of Toronto/Seaton House Annex Harm Reduction Program, Toronto	NS, St. Francis Xavier University
ON, Haven Toronto, Toronto	QC, Institut National de Santé Publique du Québec (INSPQ)
ON, Good Shepherd Ministries, Toronto	QC, National Collaborating Centre for Healthy Public Policy
	YK, Yukon Liquor Corporation

“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

We were successful in a wide range of research and knowledge exchange funding applications worth approximate \$3.3 million over the years for which they were awarded. There was a good mix of formal peer reviewed research funding as well as several major government contracts. This new work reflects emerging priorities in the Canadian substance use field such as responding to the opioid crisis, supporting Canadian jurisdictions to introduce legal cannabis, evaluating evidence-based alcohol policies and assessing patterns of use, harms and economic costs associated with use of different psychoactive substances.

Successful applications to funding competitions

Assessing the harms and costs of substance use in Canada. Canadian Centre for Substance Use and Addictions (CCSA), \$130,000 from 2016 to 2017.

A rapid evidence assessment of literature on best practices in the care of infants with prenatal substance exposure in foster care. Ministry of Children & Family Development (MCFD)/UVic Shared Research Grant, \$10,000, from 2016 to 2017.

Alcohol and other drug surveillance and policy interventions. BC Provincial Health Services Authority, \$184,000, from 2017 to 2018.

An evaluation of the experimental introduction of alcohol warning labels in a Canadian jurisdiction. Health Canada Substance Use and Addiction Programme, Sub-Award with Public Health Ontario, \$25,000 for 2017.

Promoting health and reducing harm through public policy and citizen engagement. Health Canada, Substance Use and Addiction Program, \$1,478,504, from 2017 to 2019.

Navigating the ethics of inpatient syringe exchange in a large acute care hospital. Canadian Institutes of Health Research (CIHR), Catalyst Grant, \$99,921, from 2016 to 2018.

Managed Alcohol Programs: Evaluation

Effectiveness and Policy Implications. Canadian Institutes of Health Research (CIHR), Partnerships for Health System Improvement (PHSI) Grant \$400,000, Michael Smith Foundation for Health Research (MSFHR) \$80,000, the Centre for Addiction and Mental Health (CAMH) \$15,000 from 2016 to 2019.

AIDS Vancouver Island: An Evaluation of Harm Reduction Services. Island Health, \$5,000, from 2016 - 2017.

Making It Work: Supporting Community Approaches to Integrated Service Models for People Living with HIV, HCV, Ill Mental Health, and/or Problematic Substance Use. Canadian Institutes of Health Research, Catalyst Grant: HIV/AIDS Community-Based Research, \$33,000, from 2016 – 2017.

Victoria Site- Canadian Research Initiative on Substance Misuse. BC Centre for Excellence in HIV/AIDS \$5,000, Centre for Addictions Research of BC \$5,000, UVic Provost's Community Engaged Scholar Award \$2,500, and YES2SCS \$6000, from 2016 to 2017.

Substance Use Patterns Among Homeless Populations (Point in Time Count 2016). UVic Provost's Community Engaged Scholar Award, \$2,000, 2016.

Peer engagement in harm reduction: development, implementation and evaluation of best practice guidelines for BC. 3rd year renewal. Peter Wall Institute for Advanced Studies, \$50,000, from 2016-2017.

A Program of REACH 2.0. Canadian Institutes of Health Research (CIHR), \$1,500, from January 2017 to December 2021.

Assessing community readiness for harm reduction services for people who use drugs in Northern BC Communities. Health Research Institute Seed Grant, \$10,000 January 2016 to December 2016.

Reducing the stigma of substance use and building capacity in patient-oriented primary care research. Canadian Institutes of Health Research (CIHR)/UVic/ Island Health Authority (IHA), Strategy for Patient-Oriented Research (SPOR) – Patient-Oriented Research Collaboration Grants 2016, \$50,000, from March 2017 to February 2018.

Investing in Police and Non-Profit Organizational Partnerships to Enhance Responses to Sexual Assault of Sex Workers. Justice Canada Victims, \$184,119, from January 2017 to December 2019.

Commissioned contracts won and other grants

Opioid overdose response: Supporting community dialogues. BC Ministry of Public Safety and Solicitor General, \$290,000, 2017.

BC Partners for Mental Health and Addiction, BC Mental Health Society Branch, BC Mental Health and Substance Use Services, Provincial Health Services Authority, \$240,424, from 2016 to 2017.

Competencies and curricular resources related to responsible and problem gambling. BC Gaming Policy Enforcement Branch, \$47,000 from 2016 to 2017.

Support Province in Reducing Harm related to Substance Use. Ministry of Health, \$20,000, from 2016 to 2017.

Total Income for 2016/2017

The chart below identifies our major sources of income (including funds carried forward) during the 2016/17 fiscal year. Combined surpluses (or deficits) carried forward and new revenue for the fiscal year was a total of \$3,458,987. A large proportion of funding (39%) came from peer-reviewed grants (mostly CIHR), closely followed by funds from knowledge exchange and other contracts.

CARBC 16/17 Revenue and Carry Forward Summary

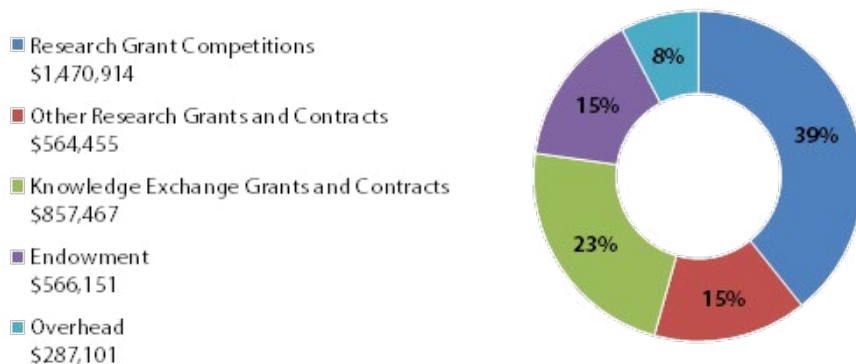


Table 1: Performance Indicators for Key Result Area 1 (Building Capacity)

	OBJECTIVES	PERFORMANCE INDICATORS
1.1	To maintain or increase national and international funding for substance use and health research at CARBC	<p>Maintain or increase funding for substance use research won by CARBC scientists from (a) Canadian and international peer reviewed sources (b) Canadian and international contracts</p> <p>Benchmarks: (a) \$750,000 (b) \$150,000 per annum 2016/2017: (a) \$2,796,488 (b) \$597,424</p>
1.2	To maintain or increase funding for knowledge exchange concerning substance use and health promotion at CARBC	<p>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</p> <p>Benchmarks: (a) \$1,250,000 (b) \$1,250,000 per annum 2016/2017: (a) \$1,806,004 (b) \$597,424</p>
1.3	To maintain or increase the number of national and international funding applications for long term research programs addressing research areas of high priority in Canada	<p>Maintain or increase number of funding applications for new research programs identified in one or more identified priority areas (see Key Result Area 2)</p> <p>Benchmark: 15 applications 2016/2017: 27</p>
1.4	To achieve successful national and international collaborations with researchers and community partners on projects that will lead to increased capacity and increased expertise in addictions research	<p>Number of projects initiated that involve (a) community partners (b) researchers with relevant expertise who are new to substance use and addictions research</p> <p>Benchmarks: (a) 12 (b) 6 2016/2017: (a) 17 (b) 15</p>

“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

We continue to engage a wide network of scholars from UVic and other universities in our research programs as well as a good number of graduate students from a wide array of relevant disciplines. We do, however, anticipate challenges ahead with sustaining our faculty as a number of our Scientists approach retirement. At the end of 2016 we said goodbye to Dr Cheryl Cherpitel who had served as a CARBC Scientist for over seven years. She is continuing her world-class research program on alcohol and injuries with the Alcohol Research Group in Emeryville, California. CARBC Faculty members Bernie Pauly and Cecilia Benoit received provincial and national awards this year.

Honours and Awards

Dr Cecilia Benoit 2017 Provost’s Community Engaged Scholar award, University of Victoria, Victoria, BC.

Dr Cecilia Benoit 2016 Governor General’s Award in Commemoration of the Persons Case, Status of Women Canada, Ottawa, Ontario.

Dr Bernie Pauly 2016 Island Health Research Scholar in Residence, Island Health, Victoria, BC.

Dr Bernie Pauly 2016 Sharon Martin Award for Community Development, Public Health Association of BC, Victoria, BC.

Dr Bernie Pauly 2016 B.C. Community Achievement Award, BC Achievement Foundation, Vancouver, BC.

Dr Tim Stockwell 2016 Social Science Award for Excellence in Research, University of Victoria, Victoria, BC.

Bernie Pauly
receiving her 2016
BC Community
Achievement
Award at
Government House



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

	OBJECTIVES	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	<p>Maintain or increase number of (a) PhD qualified researchers and affiliates within CARBC each year (b) postdoctoral fellows with CARBC</p> <p>Benchmarks: 12 / 3</p> <p>2016/2017: (a) 33 (b) 3</p>
2.2	To attract and retain high quality students from a broad range of disciplines to the BC substance use and addictions field	<p>Maintain or increase number of CARBC graduate students under supervision per year</p> <p>Benchmark: 25</p> <p>2016/2017: 29</p>
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, nationally and internationally	<p>Maintain or increase number of research staff and/or students attending conferences or training events</p> <p>Benchmark: 15</p> <p>2016/2017: 18</p> <p>Contributions to graduate research training programs using substance use examples or content by CARBC faculty at UVic and other Canadian universities</p> <p>Benchmarks: a) 5 courses taught b) 5 guest lectures presented per annum</p> <p>2016/2017: (a) 6 (b) 14</p>

CARBC Scientist Cecilia Benoit receiving her 2016 *Governor General's Award in Commemoration of the Persons Case* from David Johnston, (now former) Governor General of Canada, in recognition of her "outstanding contribution to the goal of equality for women and girls in Canada." (photo: MCpl Vincent Carboneau - Rideau Hall)



“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

CARBC Faculty and collaborators engaged in a wide variety of research, mostly with practical policy and practice applications. Increasingly this research has had a national and international focus. Examples include a close collaboration with the Canadian Centre on Substance Use and Addictions to re-estimate the economic costs of substance use for all Canadian jurisdictions broken down by specific drug type, including alcohol, cannabis, tobacco, opioid drugs and psycho stimulants. We received a commission from the Swedish government to lead an international panel of alcohol research experts on a project designed to estimate the public health and safety benefits of their government alcohol monopoly. Our research on Managed Alcohol Programs has been widely disseminated and picked up not only across Canada but in several other countries.

RESEARCH PRIORITY 1

SUBSTANCE USE PATTERNS AND RELATED HARMS

CARBC PROJECTS

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. (PI), Cherpitel, C. (Co-PI), Macdonald, S., Brubacher, J., Brache, K., Zhao, J. & Maclure, M.

Funding body: Canadian Institutes of Health Research (CIHR) operating grant

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 is applying a 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 4,000 Emergency Room 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 emergency department 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: Data collection completed, data have been cleaned, one journal article has been published and others are under preparation.

Clearing the Air: a systematic review of the evidence on the harms and benefits of e-cigarettes and vapour devices

Investigators: MacDonald, M. (PI), Stockwell, T. (Co-PI), O'Leary, R., & Reist, D.

Funding body: Canadian Institutes of Health Research (CIHR)

Background: This meta-narrative review was prompted by the rise in the use of e-cigarettes and other vapour devices, and the divide within the public health community over how vapour devices will impact the tobacco epidemic. The purpose of this knowledge synthesis project was to conduct a meta-narrative systematic review in which we have endeavored to explain the discrepancies in the literature and contribute to resolving the conflict in public health over this issue. An integrated knowledge translation approach is central to our knowledge synthesis project.

Progress to date: The final report was released with considerable media attention in January of 2017 and the executive summary is available on the CARBC website: <http://www.uvic.ca/research/centres/carbc/assets/docs/report-clearing-the-air-review-exec-summary.pdf> A protocol paper was published in the journal Systematic Reviews in 2016.

ADDICTION

Health hazards of vaping are overblown



ANDRÉ PICARD
apicard@globeandmail.com

It's time to stop vilifying vaping. The scientific evidence is mounting that:

1) E-cigarettes are not a gateway drug that entice young people to take up smoking;

2) Vapour devices are at least as effective as other nicotine replacements products such as patches and gum in helping smokers quit;

3) Vapour from e-cigarettes contains significantly fewer toxins than smoke from tobacco cigarettes;

4) Second-hand exposure to vapour is far less harmful than exposure to second-hand smoke.

"The public has been misled about the risks of e-cigarettes,"

says Tim Stockwell, director of the Centre for Addiction Research of B.C. at the University of Victoria.

"Many people think they are as dangerous as smoking tobacco, but the evidence shows this is completely false."

Dr. Stockwell is not just blowing smoke. He and fellow CARBC researchers have just produced one of the most comprehensive reviews of the research to date and it shows unequivocally that vaping is replacing, not promoting, smoking.

The most encouraging aspect of the report, entitled *Clearing the Air*, is that it seems to debunk the notion that e-cigarettes will entice young people, get them hooked on nicotine and then see them embrace smoking.

In fact, the evidence points to precisely the opposite trend. Between 2003 and 2013, teen e-cigarette use rose from 1.5 per cent to 16 per cent; during that same period, teen smoking rates fell to 9.3 per cent from 15.8 per cent.

Further, a comparison of smoking rates between U.S. states that restrict e-cigarette sales to youth and those that do not showed that smoking rates rose in the former and fell in the latter. This suggests that banning e-cigarette sales to teens actually might increase teen smoking.

In Canada, teen smoking rates fell a full percentage point from 2013-15, from 10.7 per cent to 9.7 per cent. During that period, there were no significant new anti-smoking interventions, but the popularity of vaping grew markedly. Is that a coincidence?

It is notable, too, that, in Canada, 72 per cent of teens who vape say they use products that don't contain nicotine. (Technically, nicotine-based products are banned in Canada, though they are easy to get.)

"Fears of a gateway effect are unjustified and overblown," says Marjorie MacDonald, a CARBC scientist and the study's principal investigator. "From a public health perspective, it's positive to

see youth moving toward a less harmful substitute to tobacco smoking."

The new review by CARBC researchers also addresses the claims that vaping is a health hazard. E-cigarettes do not deliver tar or carbon monoxide, and contain only 18 of the 79 toxins in cigarettes. There are concerns that vaping may expose users to metals and particulate matter, but the researchers note that this could be addressed with regulation.

Another much-debated issue is second-hand exposure but, again, the evidence seems clear. Vapour contains "exponentially lower levels of cancer-causing agents" than cigarettes, and vapour dissipates in about 30 seconds, compared to 18-20 minutes for tobacco smoke.

So while vaping should not be encouraged for non-smokers, it is clearly a good alternative for smokers, especially heavy smokers.

Finally, is vaping an effective smoking-cessation method?

While there are many heartfelt testimonials, the evidence is unclear. Studies report quit rates ranging from 7.3 per cent to 36 per cent with e-cigarettes. But "quitting" can range from a few days to a year or more, and there are no good data on relapse.

What is indisputable is that quitting smoking is hard, and for those who try, vaping is no less effective than other methods; also, when people vape, they smoke less, even if they don't manage to quit altogether.

In other words, harm is reduced. Yet public health officials are quite divided on vaping. Far too many have embraced an abstinence-only approach rather than a harm-reduction philosophy. This is curious because no one knows better than public health experts that prohibition doesn't work.

Smoking is deadly. Vaping is almost certainly not.

We should be encouraging those with a lethal addiction to choose the lesser of two evils.

CARBC's "Clearing the Air" report was picked up by the *Globe & Mail's* national health reporter, André Picard (January 24, 2017)

The economic costs of substance use in Canada

Investigators: Stockwell, T., Young, M. & Macdonald, S. (PIs), Sher, A., Wallingford, S., Sorge, J., Kent, P., Dorocicz, J., Fairbank, J. & Zhao, J. (Co-Is)

Funding bodies: Health Canada and Canadian Centre on Substance Use and Addiction (CCSA)

Background: This project aims to update estimates last made for Canada in 2006 by Rehm et al. We will update methods and data sources and, as well, provide detailed estimates for the territories as well as all provinces and Canada as a whole. A further refinement will be making cost estimates for five types of currently illicit drug, namely cannabis, cocaine, heroin, other opioids and amphetamine type drugs. Estimates will be made for alcohol and tobacco as well. The work is funded by a grant from Health Canada's Substance Use and Addiction Program, held by CCSA. The results will be made available on an interactive website as well as through a report.

Progress to date: The methodology has been developed and data requests are currently being negotiated. A draft version of the Internet-based tool to display the results has been created.

Canadian Student Tobacco, Alcohol and Drug Survey

Principal Investigator: Manske, S. (PI), **MacDonald, M.** (Co-I's), **Thompson, J.**, Thompson-Haile, A., Zehr, W., MacKenzie, A., McGrath, E., Card, A., Asbridge, M., Mancuso, M., Murnaghan, D., Montreuil, A., Bourhis, R., Muhajarine, N., Wild, C., Schonlau, M., Brown, S., Elton-Marshall, T., MacDonald, J. & Turner, D.

Funding Body: Health Canada

Background: The Canadian Student Tobacco, Alcohol, and Drugs Survey (CSTADS) is a survey conducted in grades 6-12 (grade 6-secondary V in Quebec) every other year. CSTADS (formerly the Youth Smoking Survey (YSS)) collects data on youth substance use, and other areas identified by schools as priorities, such as bullying, mental health and how connected students feel to their school.

CSTADS will provide Health Canada, provinces, schools, communities, and parents with timely and reliable data on tobacco, alcohol and drug use in addition to other related issues about Canadian students. School-aged children and youth are generally recognized as most at risk for experimenting with tobacco products, alcohol and drugs. With a consistent measure of student substance use it is possible to examine the factors that influence youth behaviour with respect to tobacco, alcohol and drug use.

The Propel Centre for Population Health Impact at the University of Waterloo has been centrally coordinating the implementation of CSTADS since 2004, and works with provincial partners to implement the project in each province.

Progress to Date: 2018-19 will be the third year that CSTADS in BC has been affiliated with CARBC. In 2016-17, recruitment of schools took place in the spring and fall with data collection beginning in October and continuing through to May of 2017. A publication based on data from the 2014-15 cycle of CSTADS has just been published in the *Canadian Medical Association Journal* (CMAJ) Open.

2016 Greater Victoria Unsheltered and Sheltered Point-in-Time Count Substance Use Survey

Investigators: Pauly, B. [PI], **Stockwell, T.**, Albert, M. [Victoria Community Council], **Barber, K., Vallance, K., Chow, C., Wallace, B., Wettlaufer, A.**

Funding body: Provost's Community Engaged Scholar Award, \$2,000, University of Victoria.

Background: Accurate estimates of prevalence of substance use, and harms of substance use are limited as many studies identify substance use as a criterion for participation, thus likely inflating the true prevalence estimates. In February, 2016, a federal Point-in-Time Homelessness Count occurred across the county, and in Victoria, BC, a substance use survey was piloted during the Point-in-Time Count. The brief substance use survey was optional and participants received an additional honorarium for participation. The goal of this survey was to estimate prevalence of substance use among those experiencing homelessness, with the criterion of participation being homelessness, not substance use, in order to obtain more accurate prevalence estimates.

Progress to date: Data collection completed, data have been cleaned and a descriptive analysis generated. These findings have been shared with key community partners and a publication drafted.



Tim Stockwell



Bernie Pauly



Katrina Barber



Kate Vallance



Clifton Chow



Bruce Wallace



Ashley Wettlaufer

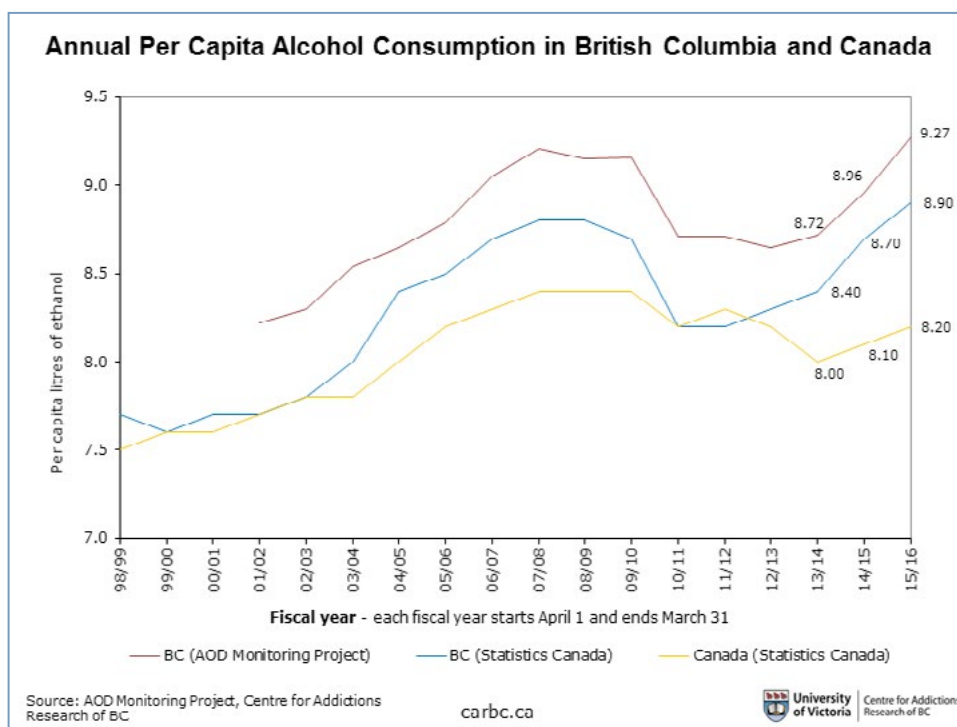
BC Alcohol and Other Drug Monitoring Project

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

Funding bodies in 2016/17: BC Provincial Health Services Authority 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 British Columbia and some elements were 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.

Progress to date: 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 5 health authorities. Data on per capita sales of alcohol are similarly reported across the province. Over 5,000 interviews have been completed since 2008 on high-risk populations of substance users to monitor patterns of use, related harms and use of harm reduction services. Numerous journal articles, in-house statistical bulletins and reports have been completed. Data sets have been made available to faculty and graduate students at UVic, other post-secondary institutions and to visitors to our website via an interactive web-based tool: <http://www.uvic.ca/research/centres/carbc/stats/aod-trend-analyzer/index.php>.



CARBC Volunteers

We were very lucky to have close to 20 volunteers work on a variety of CARBC projects over the past year. Volunteers conducted face-to-face interviews for the High Risk Populations Monitoring Study and contributed in many other ways including helping with data cleaning and data entry, conducting literature reviews and assisting with bulletins. Thank you all of our wonderful volunteers – we couldn't do it without you!

CARBC AFFILIATED PROJECTS

Systematic review of cannabis as a complement to or substitute for alcohol and opioids

Investigators: Lucas P., Walsh, Z., Reiman, A.

Background: There is a growing body of evidence that cannabis may act as a substitute for the use of other drugs, particularly alcohol and opiates. This research is a Systematic Review of longitudinal studies in humans examining the complementary or substitutive relationships between cannabis/marijuana and licit and illicit opioids and alcohol.

Progress to date: Core search of Medline/PubMed and Web of Science conducted, independent review of the study results done, and analysis of qualifying studies underway.

Evaluation of the effect of cannabis legalization on road safety

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

Funding bodies: Canadian Institutes of Health Research

Background: Marijuana is the second most widely used recreational drug in the world after alcohol. It impairs the skills required for safe driving, and increases the risk of car crashes. The Canadian federal government will introduce laws to legalize marijuana in April 2017. It will then take approximately 18 months for the laws to be passed and put into force. Legalization of marijuana may result in more car crashes caused by drivers who are impaired by marijuana and this potential problem should be evaluated. Since 2011, the CIHR funded "Cannabis and Motor Vehicle Crashes" (CMVC) study has collected data on how often injured drivers in British Columbia test positive for marijuana, alcohol, and other drugs. This presents a unique opportunity. We propose to continue the same procedures as the CMVC study to investigate changes in the percentage of injured drivers who test positive for recent marijuana use following legalization of cannabis. Our aim is to inform policy targeting marijuana impaired driving. Our primary objective is to compare the percentage of injured drivers who test positive for marijuana after it is legalized versus before it was legalized. Our second objective is to get better estimates of how the risk of having a car crash varies with higher levels of THC (the active ingredient of marijuana). This information might help establish legal limits for driving after using marijuana.

Adolescent injury, substance use, and mental health: An exploration of rates, determinants, and comorbidities in Canadian survey data.

Investigators: Asbridge, M., Co-Is: Illie, G., Fitzpatrick, C., Macdonald, S., Mann, R., Fuselli, P.

Funding bodies: Canadian Institutes of Health Research

Background: This analysis of secondary data sets is designed to achieve three objectives: 1. What is the self-reported prevalence of intentional and unintentional injury among Canadians 11-19 years of age? 2. What social determinants affect the rates and distribution of injury among Canadian adolescents? 3. What is the relationship between injury and poor mental health and substance use?

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 30 countries.

Progress to date: This grant has been funded for another five years, with continuing analysis of alcohol and injury. Analysis is focusing on the risk of injury from alcohol, controlling for context of drinking and injury and the impact of regional/local policies on prevalence and risk of alcohol-related injuries across emergency rooms in 30 countries.



Cheryl Cherpitel

RESEARCH PRIORITY 2

EDUCATIONAL, LEGISLATIVE AND REGULATORY STRATEGIES

CARBC PROJECTS

Police discretion with high risk substance using youth

Investigator: Macdonald, S. (PI), Pauly, B., Hardy, C., Roth, E., Wortley, S., Jansson, M., Baron, S., Stockwell, T., Lee, Z., Reist, D., Benoit, C., Lachowsky, N., & Urbanoski, K.

Funding bodies: Social Sciences and Humanities Research Council (SSHRC)

Background: The purpose of this research is to learn more about circumstances of interactions between the police and substance using youth and how these experiences affect their lives in regard to two major issues: (1) street checks, the practice of stopping, questioning and documenting (i.e. carding) individuals when no particular offense is being investigated, and (2) police discretion on whether to charge individuals caught for possession of drugs. The study group is youth aged 16 to 30 who used illicit drugs at least once per week in the prior 6 months. Interviews will be conducted with 450 youth from three BC communities: Victoria, Chilliwack and Prince George.

Progress to date: Data collection instruments and procedures have been developed and ethical approval to proceed with the study has been received.



Scott Macdonald



Bernie Pauly



Eric Roth



Mikael Jansson



Tim Stockwell



Dan Reist



Cecilia Benoit



Nathan Lachowsky



Karen Urbanoski

The impact of minimum pricing on low, medium and high income areas of British Columbia

Investigators: Stockwell, T. (PI) & Zhao, J. (Co-I)

Funding body: Scottish Government

Background: CARBC was commissioned to reanalyse a unique data set we hold on minimum alcohol prices and alcohol-attributable hospital stays in British Columbia. The Scottish government passed legislation in 2012 to introduce a minimum unit price for alcohol but has been challenged by alcohol industry groups in the British and European courts for the right to implement this policy. We have contributed evidence that increased minimum prices reduce alcohol-attributable hospital stays and deaths. We were asked to see how this effect varied across regions of the province with low, medium and high income. Opponents of the policy measure, including alcohol industry representatives, have suggested that higher prices for alcohol would have negative effects on people with low income.

Progress to date: Our analysis found that in low-income regions there were substantially greater reductions in alcohol-attributable hospital admissions when minimum prices were increased. We argued that minimum pricing helps to reduce health disparities across income groups. We completed a report for the Scottish government, a conference presentation and have an article in press with the journal *Addiction*.

Evaluation of the public health impacts of Systembolaget, the Swedish government alcohol monopoly

Investigators: Stockwell, T. & Chikritzhs, T. (PIs), Andreasson, S., Angus, C., Holder, H., Holmes, J., Lemar, P., Makela, P., Meier, P., Norstrom, T., Ramstedt, M., Sherk, A.

Funding body: Systembolaget, Swedish Government.

Background: CARBC has been commissioned to lead this international project which aims to estimate the public health impacts of Sweden's government alcohol monopoly. This is the third in a series of reports on this topic. Over the course of 12 months, we will oversee systematic reviews of the effectiveness of the types of policies implemented by Systembolaget; the extent of implementation of these policies in Sweden will be estimated against a counterfactual scenario of the liquor distribution system being totally privatised; various analytic approaches will be used to estimate firstly changes in per capita alcohol consumption and then resulting impacts on health and social outcomes in two scenarios involving liquor privatisation.

Progress to date: The project has been successfully completed with report summaries posted on the internet in Swedish and English along with a full English report available on request. The results have been presented to the funder and at a Swedish alcohol conference. A paper was presented at an international conference and journal articles are in preparation.



A study of unintended consequences of increased minimum alcohol prices in a population of street involved alcohol dependent drinkers

Investigators: Stockwell, T. & Pauly, P. (PIs), Barber, K., Chow, C., Ivsins, A., Vallance, K.

Funding body: Victoria Foundation

Background: CARBC research has demonstrated major population level health and safety benefits from the introduction and raising of minimum alcohol prices with studies in British Columbia and Saskatchewan. A number of Canadian provinces and also jurisdictions overseas are considering either introducing or further strengthening minimum alcohol prices. However, the fear is often expressed that there may be adverse impacts on vulnerable populations who have severe alcohol use disorders. It is speculated that it may drive such individuals to seek out more dangerous non-beverage alcohol, to rebudget money for groceries and family necessities and possibly also commit crimes in order to afford to keep drinking. We were advised that the BC government intended to update minimum prices and ensure their enforcement in private liquor stores which are generally the source of the cheapest available alcohol in BC. A cohort of 60 street involved drinkers with severe alcohol dependence was recruited, half in Victoria and half in Vancouver, who are being followed up on three occasions prior and then one month after the proposed increases in the minimum alcohol prices to test the veracity of these concerns.

Progress to date: Data collection has been completed and a conference paper prepared.

The Protection of Communities and Exploited Persons Act: A structural intervention impacting health equity for sex workers

Investigators: Benoit, C., (NPA), Atchison, C., Jansson, M., Reist, D. (Co-PIs); Abel, G., Aveline, D., Casey, L., Field, E., Magnus, S., Orchard, T., Phillips, R., Reimer, W., Shaver, F.

Funding body: Canadian Institutes of Health Research (CIHR), Operating Grant

Background: Sex workers, as a group, experience common barriers to health and wellbeing, including pervasive stigma and discrimination in health care and social services. At the same time, they also report many individual differences in health, and in the vulnerabilities and risk factors they experience. The implementation of The Protection of Communities and Exploited Persons Act (PCEPA) in December 2014, amended the Criminal Code to criminalize—for the first time in Canada—the purchase of sexual services, and to further modify certain prohibitions related to advertising and communicating the sale of sexual services. This project examines whether the PCEPA—a natural experiment out of the control of the research team—has alleviated or exacerbated health inequities for sex workers as compared to before the new laws were implemented. We will compare policing and outcomes associated with the practices surrounding the sale of sexual services by sex workers of different genders and working in diverse venues before and after the implementation of PCEPA. The proposed research promises to a) advance our knowledge of health equity for marginalized populations; b) reduce avoidable risks and unmet health needs for sex workers in Canada; and c) develop community-based policies and practices in an effort to reduce the health inequities which exist between sex workers and other Canadians.

Progress to date: We have obtained ethics approval from the University of Victoria for this study and have started the data collection, data entry and transcription.

Municipal alcohol policies in BC: exploring best practices

Investigators: Stockwell, T. (PI) & Vallance, K. (Co-I).

Funding body: BC Ministry of Health and BC Healthy Communities

Background: Municipal alcohol policies are sometimes developed formally, usually with a focus on how alcohol is allowed to be served on municipally owned premises and, as well, when special occasion licenses can be granted for one off events held in a municipality. There are also opportunities for municipal governments to influence the price, availability and promotion of alcohol in its local communities. The agency BC Healthy Communities has funded a BC-wide project that provides support funding to municipalities to develop their own municipal alcohol policy. CARBC was commissioned with the task of evaluating the extent to which this opportunity was taken up, the policies contained and the perceptions of key stakeholders regarding usefulness and effectiveness.

Progress to date: The project has been completed, a conference presentation given and a report provided to the BC Ministry of Health.

RESEARCH PRIORITY 3

COMMUNITY-BASED PREVENTION PROGRAMS

CARBC PROJECTS

Working together: evaluating an integrated model of care for people experiencing homelessness and substance use problems

Investigators: Pauly, B., Lynn, D. [Co-PIs], Anderson, M., Barber, K., Goble, C., Hall, S., Hobbs, H., Jensen, K., Thomas, S., Thompson, T. & Wallace, B.

Funding body: Island Health Collaborative Grant, \$14,995, from 2015-2016.

Background: People who are homeless and using substances often experience poorer health and barriers to accessing health care services. In order to address these challenges, there has been increasing attention to integration of a range of services and thereby increasing access to health services and resources for better health and the importance of harm reduction approaches. A primary outcome of this project has been to develop a strong research team that spans health and community sectors and with capacity for realist evaluation. With this critical groundwork in place, we undertook an integrated literature review of the implementation of harm reduction to inform the development of a longer term research proposal.

Progress to date: The team has completed realist evaluation training as well as training in the conduct of literature reviews. Our team has completed an integrative literature review of the implementation of evidence based harm reduction interventions that prevent harms of illicit drug use including supervised injection services, safer crack use, overdose prevention programs, opioid substitution therapy and needle exchange. KT summaries on harm reduction philosophy and policy and peer intervention have been developed.

Sex workers as educators: networking HIV prevention strategies

Investigators: Benoit, C. (Nominated PI), Reading, C. (PI), Jansson, M., Atchison, C., Shumka, L. (Co-Is), Phillips, R., Potvin, N., Clouthier, D., Salvati, S. & Belle-Isle, L. (KUs).

Funding body: Canadian Institutes of Health Research (CIHR)

Background: This study was initiated by Prostitutes Empowerment Education and Resource Society (PEERS) Victoria as an opportunity to increase the effectiveness of HIV/AIDS prevention and treatment services for sex workers in the Victoria metropolitan area. The team will first summarize the scholarly literature on the topic of HIV/AIDS, other risk factors including substance use and sex work, as well as analyze relevant data on sex workers, clients, intimate partners and managers from a recently completed team grant research project on health and safety in the Canadian sex industry. The research summary will subsequently support the piloting of a peer-based knowledge exchange initiative led by sex workers which targets their personal and workplace networks. The project will additionally launch a training day for service providers. The training event will combine curriculum on emerging trends in research evidence linked to sexual and general health and violence and substance use harm reduction, as well as innovations in peer-based leadership.

Progress to date: The team first summarized the scholarly literature on the topic of sexual health and HIV/AIDS, other risk factors including substance use and sex work, as well as analyzed relevant data on sex workers, clients, intimate partners and managers from a recently completed team grant research project on health and safety in the Canadian sex industry. The research summary subsequently supported the piloting of a peer-based knowledge exchange initiative led by sex workers which targets their personal and workplace networks. The training portion and the intervention stage is completed. Various knowledge exchange strategies were organized, including a training day for health and social care providers. The training event combined curriculum on emerging trends in research evidence linked to sexual and general health and violence and substance use harm reduction, as well as innovations in peer-based leadership. The data collection is also completed and the team has submitted articles to academic journals. Further articles are planned and a further grant application for interventions across Canada based on the knowledge obtained so far in this project. A CARBC bulletin has also been prepared.

Background

SOCIAL marginalization and a criminalized working environment create elevated risks for sex workers and reduce their access to health promotion and prevention services compared to the general population (1-6). Community engagement-based health promotion programs that prioritize the engagement of members of the targeted population in the development and delivery of the programs have been shown to be effective (5-7). Planned initiatives aim at establishing supportive relationships that enable sex workers to access health and social resources (8-9). This bulletin summarizes findings from a pilot peer health education program in an urban centre in Canada, designed with and for sex workers, aimed to enhance community empowerment to enable them to shape their practices around health promotion and prevention strategies, and to contribute to improving access to health and social services within their communities.

Training sessions covered a range of topics:

- Empowerment Approaches to Sex Work
- Resourcing Ourselves in Gender and Sexuality
- Harcourting Ourselves to Indigenous Communities
- Clients, Health and Safety
- Health and Social Service Mapping Sexual Health for Sex Workers
- Harm Reduction
- Overdose Prevention and Naloxone Training
- Meet and Greet with Health and Social Services
- Peer support
- Debriefing & Reflection

Methods

This program was piloted in Canada's diverse geographic and cultural landscape, public and justice officials and health and social service providers have worked cooperatively to improve the health and safety of sex workers. It adopted a community-based participatory research approach guided by a research team comprising sex workers, representatives from service organizations and healthcare clinics for marginalized populations, health service managers and researchers. Based on evidence related to the effectiveness of community engagement interventions with sex workers, training curricula and evaluation plans were developed in consultation with the research team. The training program was offered as a local sex worker organization and consisted of 16 2-hour sessions, followed by 8 weeks of interaction in the community, during which participants took part in weekly 2-hour debriefing sessions. Trainers received a cash honorarium at the end of each session. Sessions were facilitated by members of the research team, local service providers and community members with lived experience. The curriculum was flexible and adapted as it was delivered, based on input from participants. The research was approved by the ethics review board of the first author's university.

Participants were recruited through a filing process via various local community-based organizations, local escort agencies, and online for sex workers to see to find clients. Criteria included interest in improving health and access to health care services for sex workers, being 18 years of age or older, currently engaged in sex work in the research setting, and having strong leadership skills and networking abilities. Trainers were noted in age, gender, sexual orientation, indigenous cultural background, socioeconomic status, and sex work history. Their sex work locations ranged from independent indoor, outdoor, escort agency to independent outdoor. Some worked full-time, others part-time and some were transitioning out of sex work.

Data were collected from December 2015 to June 2016 through qualitative semi-structured interviews (N=14) with the participants prior to the training, after the training and at the end of the 8-week intervention phase (journal kept by the participants and project coordinator throughout the training program and feedback forms collected from the participants after each training and debriefing session. All information was transcribed and reduced. Thematic analysis was performed (10) and identified themes are presented in the findings. Interrater reliability was strengthened through independent coding by the first three authors and comparison and discussion for agreements. The authors draw upon conceptual frameworks of community empowerment and transformative learning to help frame the analysis (11-18).

FINDINGS

1 Reduced Internalized Stigma & Improved Self-Esteem
"That action doesn't define me"

2 Increased Critical Consciousness
"Divide the black and white and open that gray area"

Methods

This program was piloted in Canada's diverse geographic and cultural landscape, public and justice officials and health and social service providers have worked cooperatively to improve the health and safety of sex workers. It adopted a community-based participatory research approach guided by a research team comprising sex workers, representatives from service organizations and healthcare clinics for marginalized populations, health service managers and researchers. Based on evidence related to the effectiveness of community engagement interventions with sex workers, training curricula and evaluation plans were developed in consultation with the research team. The training program was offered as a local sex worker organization and consisted of 16 2-hour sessions, followed by 8 weeks of interaction in the community, during which participants took part in weekly 2-hour debriefing sessions. Trainers received a cash honorarium at the end of each session. Sessions were facilitated by members of the research team, local service providers and community members with lived experience. The curriculum was flexible and adapted as it was delivered, based on input from participants. The research was approved by the ethics review board of the first author's university.

Participants were recruited through a filing process via various local community-based organizations, local escort agencies, and online for sex workers to see to find clients. Criteria included interest in improving health and access to health care services for sex workers, being 18 years of age or older, currently engaged in sex work in the research setting, and having strong leadership skills and networking abilities. Trainers were noted in age, gender, sexual orientation, indigenous cultural background, socioeconomic status, and sex work history. Their sex work locations ranged from independent indoor, outdoor, escort agency to independent outdoor. Some worked full-time, others part-time and some were transitioning out of sex work.

Data were collected from December 2015 to June 2016 through qualitative semi-structured interviews (N=14) with the participants prior to the training, after the training and at the end of the 8-week intervention phase (journal kept by the participants and project coordinator throughout the training program and feedback forms collected from the participants after each training and debriefing session. All information was transcribed and reduced. Thematic analysis was performed (10) and identified themes are presented in the findings. Interrater reliability was strengthened through independent coding by the first three authors and comparison and discussion for agreements. The authors draw upon conceptual frameworks of community empowerment and transformative learning to help frame the analysis (11-18).

CARBC Bulletin #17 summarizes Benoit et al.'s project on empowering sex workers to become peer educators

CARBC AFFILIATED PROJECTS

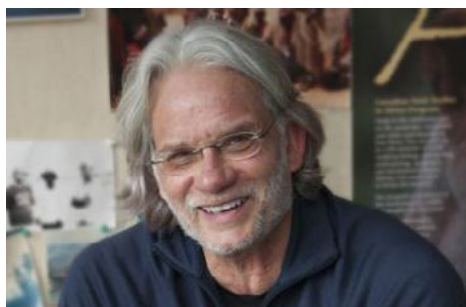
Boys' and Men's Health (Advancing Research to Improve Boys' and Men's Health) HIV Prevention for Gay and Bisexual Men: A Multi-Site Study and Development of New HIV Prevention Interventions

Investigators: Hart, T. (PI), & **Roth, E.**

Funding body: Canadian Institutes of Health Research (CIHR) Team Grant

Background: This project will focus on sexual and mental health of gay and bisexual men in Vancouver, Toronto and Montreal. It will consist of a prospective cohort study with participants completing computer-assisted interviews every six months for up to three years.

Progress to date: Dr. Roth is working with Drs. David Moore and Trevor Hart to develop the Substance Use Section of the questionnaire for this new team grant.



Eric Roth

RESEARCH PRIORITY 4

TREATMENT SYSTEMS AND PROGRAMS

CARBC PROJECTS

Compulsory addiction treatment: toward evidence-based policy and practice

Investigator: **Urbanoski, K.**, Hering, R. (Co-PIs), **Macdonald, S.**, Wild, T.

Funding body: Vancouver Island Health Authority

Background: This study consists of a systematic review of the evidence on compulsory addiction treatment programs and strategies, and an environmental scan of local practices and policies.

Progress to date: We are currently conducting a systematic review of evidence on the effectiveness of mandated treatment, considering three main types of mandates: through the legal system, employers, and child protection services. In this phase of the review, the focus is placed on methodologically strong studies that have looked at client outcomes during and following treatment. Upcoming phases of the review will focus on research studies that provide insights into how these different types of mandates work.

Managed Alcohol Programs: implementation and effectiveness

Investigators: Pauly, B., Stockwell, T. (co-PIs); Chow, C., Vallance, K., Wettlaufer, A.

Funding bodies: Canadian Institutes of Health Research (CIHR); Shelter House, Thunder Bay; Michael Smith Foundation for Health Research; Vancouver Coastal Health Authority, Canadian Mental Health Association (CMHA), Sudbury Branch

Background: Managed Alcohol Programs (MAPs) are an almost uniquely Canadian harm reduction approach to the harms of unstable housing and severe alcohol problems that have not been responsive to abstinence-based treatment. This study is rigorously evaluating MAPs in Canada; the results will be used to reduce unintended negative consequences of MAPs and inform the development of program and policy recommendations. Five MAPs in Ontario and one in British Columbia form part of the study, with additional study collaborators and knowledge users in British Columbia, Ontario, Alberta, Manitoba and Nova Scotia.

Progress to date: Data collection for Phase I has been completed in six sites with 175 MAP participants and 189 controls recruited. Eighty MAP participants and staff across the programs have completed qualitative interviews. Access to police, health and death records has been secured for all sites as part of the follow-up comparison planned between MAP participants and controls with similar profiles. The MAP Community of Practice is well established with webinars and teleconferences alternating each month to share learnings and best practices as well as exchange of research findings and ideas. We are now in Phase II of the research with a specific focus on additional data collection and analysis that will allow for a larger sample, longer term follow-up of participants and controls to determine effectiveness. As well, we are undertaking specific qualitative analysis of implementation issues and the development of Indigenous led research in collaboration with Indigenous partners. To date, we have established an Indigenous Advisory Group and relationships with Indigenous partners interested in MAP programs. <http://www.uvic.ca/research/centres/carbc/projects/active/projects/map-study.php>



CARBC research on Managed Alcohol Programs was cited in an article in The Guardian, April 2016



CARBC researchers and affiliates at the 42nd Annual Alcohol Epidemiology Symposium of the Kettil Bruun Society in Stockholm May 30- June 3, 2016. (Jinhui Zhao, Tim Stockwell, Ashley Wettlaufer, Clifton Chow, Kate Vallance, Bernie Pauly, and Adam Sherk)

An evaluation of the impact of the Sudbury Managed Alcohol Program

Investigators: Pauly, B., Stockwell, T. (co-PIs), Wettlaufer, A., Clifton, C., Vallance, K., Brown, M., Larocque, C.

Funding body: Canadian Mental Health Association (CMHA), Sudbury Branch

Background: Established in late 2015, the Sudbury Managed Alcohol Program (MAP) is one of the newest MAP's in Canada for people with severe and chronic alcohol use problems. As part of the national research study on MAPs being conducted within an overarching participatory and collaborative approach to research that involves academic and knowledge user partners (including service providers, regional and provincial policy makers), we were invited to conduct a program specific evaluation of the Sudbury MAP. As part of the national study, our goals are to 1) review and revise our established protocol for use in Phase II of a national multisite study; and 2) provide site-specific evaluation of the Sudbury MAP program. The evaluation focuses on outcomes related to housing, health, quality of life, alcohol consumption, alcohol related harms and use of health and other services.

Progress to date: The final report was presented in August, 2017.

From research to practice: addressing the gaps in entry-to-practice HIV nursing competencies in Canada

Investigators: Gagnon, M. (PI), Phillips, C., Caine, V. (Co-PI's), Anand, R., McGinn, M. (KUs), O'Bryne, P., Bungay, V., Rickards, T., Dela Cruz, A., Pauly, B., DePadua, A. (Co-Is)

Funding body: Canadian Institutes of Health Research (CIHR), Meeting, Planning and Dissemination Grant

Background: PLWH (People living with HIV) continue to encounter stigma from health care providers (including nurses, physicians, dentists, dental hygienists) largely due to insufficient knowledge and training. Education, preparation and mentorship in the delivery of and access to safe, compassionate, competent, and ethical HIV care is identified as important in addressing issues related to access and provision of healthcare. The proposed work will inform entry-level, competency-based nursing education, as well as the development of models to be designed and tested to promote knowledge uptake and translation to practice.

Progress to date: To date, a survey of Canadian nursing schools as to current HIV education and training and a systematic review of current research and gaps has been completed. A national meeting of leading nurse educators and researchers was held to examine current evidence and gaps to develop research priorities and inform core competencies for nurses. This work has been presented nationally.

Preventing and reducing harms of substance use in homeless shelter programs

Investigators: Wallace, B. (PI), McTavish, D. & Pauly, B. (Co-I)

Funding body: Vancouver Foundation, Develop Research Grant

Background: Emergency shelters provide low threshold shelter to those who are currently using substances as well as barring substance use by residents to support those who seek to avoid substance use. Under current provincial guidelines, BC shelters are expected to provide harm reduction supplies for those using substances. They also provide abstinence based supports for those who do not use substances. The issues related to substance use in shelters are complex and the shelter population is diverse. Both shelter staff and residents have identified the need to do things differently. Our research question is: What are the issues and challenges related to substance use in a shelter setting and what are strategies for addressing the harms of substance use and promoting health? We are answering this question using an overarching community based approach to research that involved the conduct of qualitative interviews and focus groups with shelter staff and residents to better understand the issues related to substance use and the implementation of harm reduction strategies in this setting.

Progress to date: From December, 2015 to January, 2016, we conducted focus groups with a total of 49 participants including shelter residents, shelter staff and harm reduction workers in one urban centre. This timing coincided with a dramatic increase of overdose deaths in the city and just prior to a public health overdose emergency being called in BC. To date, the data has been coded and one paper for publication is under review.



Bruce Wallace and Bernie Pauly were lead authors on CARBC Bulletin #15, which examined drug use and overdoses in social service agency washrooms

Every Washroom: De facto consumption sites in the epicenter of an overdose public health emergency



Supporting successful implementation of public health interventions: a realist synthesis

Investigators: MacDonald, M., Pauly, B., & Paton, A. (Co-PIs), Buchner, C., Hancock, T., Lee, V., O'Briain, W., Carroll, S., Jackson, B., Manson, H., Makaroff, K., Smith, K., Kothari, A., Martin, C. & Valaitis, R.

Funding body: Canadian Institutes of Health Research (CIHR) Knowledge Synthesis

Background: Despite public health's growing emphasis on the importance of evidence-based interventions to improve population health and reduce health inequities, a gap remains between the development of these interventions and their successful implementation. While traditional reviews have been conducted to examine effective implementation in healthcare, the relevance to public health is unclear. Furthermore, these exclude bodies of evidence that may inform on factors unique to the public health context. As realist synthesis draws on diverse data from different study designs to explain how and why observed outcomes occur in different contexts, it allows these factors to be examined. Thus, the purpose of this project is to conduct a realist synthesis of research on effective strategies to support implementation of public health interventions and better inform on factors that influence the implementation process. An integrated knowledge translation approach has been used which includes collaboration with knowledge users at every stage of the process to increase the relevance of the review to stakeholders.

Progress to date: An initial program theory was developed to guide the review process, informed by existing implementation frameworks and theories in public health. A comprehensive search of the literature was developed, piloted and revised in collaboration with a library scientist. Contexts, mechanisms, and outcomes specific to particular system-wide public health programs in these areas are being identified to produce a realist theory of supporting implementation of public health interventions. The protocol paper for this study was published in 2016 and a draft paper of the program theory is being reviewed.



CARBC Scientists and UVic Nursing faculty members Bernie Pauly (L) and Marjorie MacDonald (R), were both honoured at the 2016 Public Health Association of BC annual conference, along with UVic colleague Trevor Hancock (centre)

Island Health alcohol and other drug treatment services

Investigator: Bosley, L., Macdonald, S. (Co-PIs), Urbanoski, K., Misri, N. & Joordens, C.

Funding body: Island Health Research Support Competition

Background: The purpose of this research is to better understand the organization and delivery of health services for substance use issues in the geographic region served by Island Health. Qualitative descriptions of services delivered by 99 programs (housed in 64 agencies) in Island Health have been assembled. We plan to collect additional quantitative information on location/municipality, types of treatment (e.g., day treatment, continuing care, detox services), admission numbers by type of service and client characteristics, treatment models, length of stay, waiting lists, and suggestions for improvement of services. This information could be used for the development of more effective and efficient delivery of substance use services and to identify priorities for further research and evaluation.

Progress to date: Key providers of substance use services in the Island Health region have been identified and we have received ethical approval to proceed. A questionnaire has been sent out to the agencies and data collection is complete. We are in the process of analysing the data and plan to complete our report this year.

CARBC AFFILIATED PROJECTS

A Comparative Analysis of Provincial/Territorial Harm Reduction Policies: Implications for Expanding Access to Health Services for People who Use Illicit Drugs.

Investigators: Wild, C., & Hyshka, E. (Co-PIs), Asbridge, M., **Pauly, B.**, Dell, C., Strike, C., Hathaway, A. (Co-Is), Leibrieck, T., Cavalieri, W., MacPherson, D., Tupper, K., **Belle-Isle, L.**, & Carter, C. (KUs)

Funding Body: Canadian Institutes of Health Research (CIHR)

Background: Harm reduction services are health services that aim to reduce morbidity and mortality associated with illicit drug use and increase access to other health and social services. While there is a large evidence base as to the outcomes of harm reduction services, there is uneven and wide variability in the implementation of these services and little knowledge as to the factors that influence effective implementation. The purpose of this grant is to describe and examine provincial and territorial variations in policy frameworks related to harm reduction, and the varied frames that media, policy makers, other stakeholders and the public use to understand, communicate and advocate for or against harm reduction services. We are undertaking a mixed-methods, multiple-case-study design to compare policy frameworks and frames that affect implementation of harm reduction services in Canadian provinces and territories. For each case, we will examine provincial level harm reduction policies, interview key informants and analyze media on harm reduction services for preventing the harms of illicit drug use.

Progress to Date: More than 100 policy documents from all Canadian provincial and territorial jurisdictions were analyzed and coded for key concepts. The findings have been presented at the International Society of Drugs and Alcohol and International Harm Reduction Association conferences. Two papers have been published and both received recognition as outstanding papers. Initial steps have been taken to interview key informants and preparatory work is undertaken to conduct a public opinion survey and media analysis.

Expansion of Antiretroviral Therapy and its Impact on Vulnerable Populations in Canada and Global Settings

Investigators: Hogg, R. (PI) & **Roth, E.**

Funding Body: Canadian Institutes of Health Research (CIHR)

Background: This CIHR Foundation Grant to Dr. Robert Hogg, SFU, has continued funding for the Momentum Health Study, a cohort study of Vancouver gay and bisexual men's sexual health and substance use patterns.

Progress to Date: This year Momentum analyses were published in the following journals: *AIDS and Behavior*, *Culture, Health and Sexuality*, *Substance Use and Misuse*, *Sexually Transmitted Diseases*, *Journal of Homosexuality*, *Journal of Urban Health*, *BMC Medical Research Methodology*, *Sexual Health*, *Sexually Transmitted Infections*, and the *Journal of Medical Internet Research*.

Canadian HIV Women's Sexual and Reproductive Health Cohort Study Phase 2: Addressing priorities in women-centred HIV care across the life course.

Investigators: Loutfy, M. (PI) & **Roth, E.**

Funding Body: Canadian Institutes of Health Research (CIHR)

Background: This is a renewal of a previous CIHR grant featuring analysis of over 1,500 HIV-positive women from British Columbia, Quebec and Ontario

Progress to date: This year a latent class analysis of HIV-positive women's substance use patterns was submitted to the journal *AIDS and Behavior*, and requested revisions are now completed.



CARBC Scientist Karen Urbanoski

Healthy mothers, healthy families: Evaluating integrated treatment for pregnant and parenting women with addictions.

Investigators: Urbanoski, K. (PI), Milligan, K. (PI), Henderson, J., Niccols, A., Gomes, T., de Oliveira, C. (Co-PIs), Cain-Moroz, D. (Collaborator), Hume, L., & Acco Weston, N. (KUs).

Funding: Canadian Institutes of Health Research

Background: Among women with problems related to their substance use, the majority are of child-bearing age, meaning that many face additional challenges related to pregnancy and parenting. Yet there are numerous barriers that prevent women in this target population from seeking help. Recognition of the unique needs and challenges faced by pregnant and parenting women with addictions has led to the development of integrated treatment approaches that link addiction treatment with maternal and child health and social services. Within Ontario's addiction treatment system, approximately 20 integrated treatment programs have been in operation since 2003. On the basis of positive findings from a preliminary evaluation, programs funded through Ontario's Early Childhood Development (ECD) Addiction Initiative were provided with sustained funding in 2006, followed by additional investment in 2012. With this new funding and with many programs entering their second decade of operations, there is a high level of interest among provincial stakeholders in continuing to build and improve on what has been developed to date. We are conducting a comprehensive, mixed methods evaluation of the impact of integrated treatment for pregnant and parenting women with addictions. Our objectives are to: 1) investigate the meaning and processes of program integration within the broad network of community-based health and social services; 2) evaluate women's perceptions of care; 3) assess service capacity and client engagement in addiction treatment; and 4) evaluate maternal and child health outcomes and program cost-effectiveness. The work has a strong focus on health equity, with attention to differences in perceptions and outcomes across subgroups of the population.

Progress to date: Findings from the first, qualitative phase of this project have been published in 2 peer-reviewed articles, and were presented at the national annual conference of the Canadian Psychological Association. A comprehensive secondary analysis of administrative health data in Ontario is underway, with findings expected in the next fiscal year.

RESEARCH PRIORITY 5

SOCIAL DETERMINANTS AND CONTEXTS OF SUBSTANCE USE

CARBC PROJECTS

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. (Co-Is), O'Briain, W., Ardiles, P., Bass, L., Barnes, M., Bruce, T., Buchner, C., Campbell, J., Drasic, L., Duffell, R., Dyck, L., Easton, K., Huston, C., Jackson, B., Jiwani, B., Kwan, A., Lee, V., Makwana, J., Manson, H., Nevdoff, S., Parks, A., Pennock, M., Smith, S., Tatlock, J., Tong, S., Tyler, I. & Yarmish, K. (KUs)

Funding body: Canadian Institutes of Health Research (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 Indigenous 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: For Study 1, we have completed Phase 2 data collection and analysis (just over 100 interviews/focus groups) with the BC Health Authority and Ministry front line staff, managers, directors, and senior executives. Numerous presentations on Study 1 findings have been presented at regional, provincial and national conferences and publications are in development. For Study 2, we are in the process of analyzing social network analysis (SNA) data that focuses on inter-sectoral collaborations within the prevention of harms of substance use program and implications for the use of this methodology. For Study 3, we have updated the 2013 Health Equity Tools Inventory, including the development of a classification system and a template for assessing theoretical and practical criteria. We have developed a Health Equity tools workshop which has been delivered five times regionally provincially and nationally. Study 4 uses grounded theory to examine how public health practitioners navigate ethical issues. We have analyzed 30 interviews and developed our grounded theory. We have presented these findings at numerous conferences and have also drafted papers for publication. We have provided funding for nine student interns in collaboration with Health Authority partners. For more info please visit www.uvic.ca/elph.



The ELPH team

Socio-Cultural and Environmental Health Risks and Resilience among Street-Based Women and Transgender Sex Workers

Investigators: Orchard, T., **Benoit, C.** (PIs), Burch, M., Mohoney, R. & Oliver, V.

Funding body: Canadian Institutes of Health Research (CIHR)

Background: This study examines how socio-cultural and environmental factors influence health risks and resilience among street-based women and transgender (i.e., male to female) sex workers in the tri-city area of Kitchener-Waterloo-Cambridge (KWC), Ontario. While research exists on women and transgender sex workers, these groups are often combined in study design and data analysis and very little attention has been paid to how their unique gendered and sexual identities affect their health. There is significant heterogeneity with regard to gendered identities, economic situation and substance use concerns. Assessing how these differences impact health risk and resilience will address pressing research gaps. Study findings will also inform the development of gender-specific service and policy initiatives to address the impact of socio-cultural and environmental influences on the substance use behaviour and other health challenges of street-based women and transgender sex workers in the research area, which has been identified by local health and service providers as a pressing and unmet need for these marginalized members of society.

Progress to date: Ethical approval has been attained and interviews have been completed and transcribed. Thematic analysis of the interview data and social mapping is underway. The team is preparing articles for submission to academic journals.

Applying the Concept of Positive Deviance to Gay Men's Group Sex Events

Investigators: Roth, E. & Moore, D. (Co-PIs)

Funding body: Canadian Institutes of Health Research (CIHR) Operating Grant

Background: This grant's objectives are to delineate behavioural strategies Vancouver gay and bisexual men use to protect themselves and their sexual partners from HIV/STD infection when attending group sex events. One focus is on patterns of substance use during these events. Participants are men enrolled in the Momentum Health Study who reported attending group sex events.

Progress to date: We have secured Human Ethics approval to begin collecting qualitative data for this project and have done pre-testing in Victoria and Vancouver. We published one paper on quantitative analysis in the journal Culture, Health and Sexuality, and gave a workshop at the Vancouver Gay Men's Health Summit.

CARBC AFFILIATED PROJECTS

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: Canadian Institutes of Health Research (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: We completed four waves of structured surveys with patients at the four Primary Healthcare (PHC) sites, following a cohort of 567 patients over 2.5 years. At Wave 4 we had successfully retained 75% of the original sample. Structured surveys were also completed by staff members at the four sites prior to the intervention, following the staff education components, and at the end of the intervention. In-depth interviews were conducted with 35 staff members at the PHC sites. Analysis of each of these data sets, as well as integrated, mixed-methods analysis, is ongoing. The current focus of this project is the development of publications and KT products including a health equity toolkit. More information is available at www.equiphealthcare.ca.

An Indigenous equity lens for public health

Investigators: Loppie, C (PI) Carriere, J. (Co-PI), Kent, A., **MacDonald, M., & Pauly, B.** (Co-Is)

Funding body: Canadian Institutes of Health Research (CIHR), Planning and Dissemination Grant

Background: In Canada, decreased life expectancies and poorer health exist among Indigenous peoples compared to the general population. As these disparities often result from structural inequities, an examination of the role of public health in the perpetuation or interruption of these inequities is warranted. The proposed project will utilize existing data, gathered through the CIHR- funding ELPH (Equity Lens in Public Health) program, to undertake a pilot-case analysis of one Health Authority's activities to enhance health equity for Indigenous peoples in the province of British Columbia. During a one-day meeting, the findings of this analysis will be presented to a group (~15) of key Indigenous and non-Indigenous community, policy and professional representatives, followed by a discussion that will inform development of future research priorities and work.

Progress to date: A provincial meeting of Indigenous public health leaders was held in spring, 2016 on the traditional territory of the Musqueam peoples. An overview of the ELPH program of research, the Xpey' Relational Environments framework developed by Reading and Carriere, and a preliminary pilot case analysis of ELPH data were presented for discussion. Participants at the meeting highlighted the importance of Indigenous-led initiatives in future research endeavors, particularly the importance of undertaking research that foregrounds Indigenous health equity work. Recommendations for future work and research were identified. A publication on the Xpey' Relational Environments Framework is in press.

RESEARCH PRIORITY 6

EVALUATION OF EFFECTIVENESS OF KNOWLEDGE TRANSLATION AND EXCHANGE ACTIVITIES AND STRATEGIES

CARBC PROJECTS

The implementation of evidence-based alcohol policies in Canada: a national knowledge translation project

Investigators: **Stockwell, T.** (PI), Giesbrecht, N. (Co-PI), **Wettlaufer, A., Vallance, K.,** April, N, Asbridge, M., **Callaghan, R., Chow, C.,** Cukier, S., Dowsett-Johnson, A., Hynes, G., Mann, R., Murray, A., **Reist, D.,** Strang, R., **Thomas, G. & Thompson, K.**

Funding body: Health Canada, Substance Use and Addictions Program

Background: In this project, a national team is overseeing a rigorous assessment of the extent to which evidence-based alcohol policies are being implemented in Canadian provinces and territories. Policies being evaluated include pricing, availability, control of promotions, screening and brief interventions, impaired driving regulations and laws, drinking age laws and liquor law enforcement. In addition, the team is investigating the extent of implementation of additional strategies which support the implementation of these policies through the use of health messages, surveillance systems, a government control system for the distribution and retail sale of alcohol and a comprehensive provincial/territorial strategy. A report card will be prepared for each jurisdiction and comparisons made with a previous national exercise completed in 2013.

Progress to date: The scoring and data collection protocol has been completed and data collection is underway.

Table 3: Performance Indicators for Key Result Area 3 (Implementation of Quality Research)

	OBJECTIVES	PERFORMANCE INDICATORS
3.1	To conduct research on the patterns, distribution, determinants and consequences of substance use in Canada and internationally	Number of epidemiological projects initiated, ongoing and/or successfully completed each year in this area. Benchmark: 15 2016/2017: 10
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 in Canada and internationally	Number of CARBC special reports and commissioned reports focused on policy and practice. Benchmark: 5 2016/2017: 17
3.3	<p>To conduct research in the following other key priority areas:</p> <ul style="list-style-type: none"> • The impact of educational, legislative and regulatory strategies to minimize alcohol and other drug-related harms • Development and evaluation of more effective community prevention programs • Development and evaluation of more effective treatment systems and programs • The influence of structural determinants of social contexts of drug use on the implementation of harm reduction strategies • Research and evaluation of effectiveness of knowledge translation and exchange activities and strategies 	<ul style="list-style-type: none"> • Number of research projects ongoing and completed Benchmark: 6 2016/2017: 6 • Number of research projects ongoing and completed Benchmark: 5 2016/2017: 2 • Number of research projects ongoing and completed Benchmark: 8 2016/2017: 7 • Number of research projects ongoing and completed Benchmark: 10 2016/2017: 5 • Number of research projects ongoing and completed Benchmark: 5 2016/2017: 10
3.4	Develop and maintain significant collaborative projects with other researchers and research centres in North America and in other countries	Number of collaborative projects with other North American researchers and research agencies each year Benchmark: 10 2016/2017: 17
3.5	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 Benchmark: 5 2016/2017: 6

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

Highlights

Peer reviewed academic media

We published 100 peer-reviewed articles in 2016/17 as well as numerous book chapters, monographs, commissioned and informal reports. Graduate students research featured prominently in most cited and downloaded offerings in this year. These include PhD student, Renee O’Leary’s research monograph on the potential for vapour products to achieve tobacco harm reduction “Clearing the Air around E-cigarettes” and PhD student, Audra Roemer’s systematic review in the Journal of Studies on Alcohol and Drugs concerning the mixing of energy drinks with alcohol. CARBC Scientist Dr Jinhui Zhao was also featured as having contributed a top downloaded and cited article in 2016 from the same journal, this time concerning a study critiquing the relationship between alcohol and protection from heart disease.



CARBC PhD student Audra Roemer was lead author on a study about the effects of mixing alcohol and energy drinks (co-authored by CARBC Director Tim Stockwell). The study was one of the top downloaded articles in the Journal on Studies of Alcohol and Drugs in the first half of 2017 and also garnered international media attention, including BBC News, The Independent, Chicago Tribune, Vancouver Sun, International Business Times Australia, New York Post

Social Media

The last year saw us continue to build on and refine our social media presence. Our Twitter following increased from 1,729 to 2,025 (+17%) and our 369 tweets earned a total of 297,120 views (805/tweet (+105%)) and 3,964 engagements (such as “link clicks,” “retweets,” and “likes”; 10.7/tweet (+65%))*.

Demographically, 75% of users are from Canada (mostly BC, Vancouver, Ontario, and Ottawa), 10% from the US, 7% from the UK, and 2% from Australia. CARBC Twitter followers include: the chief statistician at Global Drug Survey, the CEO of the Registered Nurses Association of Ontario, the director of The International Centre on Human Rights and Drug Policy, musician and activist Bif Naked, the Director of Global Consumer Policy at Johnson & Johnson, the National Post health reporter, Mums Stop the Harm, Safer Cities Canada, the member of parliament for Port Coquitlam, academics and many others.

There was especially strong uptake of CARBC’s “Clearing the Air around E-cigarettes” report (O’Leary et al.), a systematic review of the harms and benefits of e-cigarette use. The eight tweets that we composed registered an impressive 57,000+ views and 921 engagements (including the UVic Twitter account), highlighting the appetite for this research amid the ongoing public health debate around vaping.

Twitter network analyses performed by The Social Media Research Foundation (California) identified CARBC as having the second greatest influence of all University of Victoria Twitter accounts, behind only the main UVic Twitter account. The CARBC research featured most highly in this analysis was “Clearing the Air around E-cigarettes” (two articles), Cecilia Benoit et al.’s study that framed sex work as an occupational choice, and CARBC’s “Patients Helping Patients Understand Opioid Substitution Treatment” Handbook (Reist et al.).

See the full analysis: <https://nodexlgraphgallery.org/Pages/Graph.aspx?graphID=96755>

The CARBC Facebook page registered a net increase of one new follower every 1.2 days during the fiscal year



The CARBC Facebook page saw an increase of 298 Likes or +29% in 2016/17, with 1,331 Likes and a page rating of 4.8 out of 5 based on nine ratings at year-end. Our 489 Facebook posts earned 366,956 views (750/post (-2%)) and 20,928 post engagements (43/post (-2%)). As with Twitter, CARBC’s “Clearing the Air around E-cigarettes” report also traveled impressively on Facebook: “Clearing the air around E-cigarettes”-related posts on a Thai vaping Facebook page and the Globe & Mail page each featured prominently. A Facebook video about the “Clearing the Air around E-cigarettes” findings produced by the Vancouver Sun and shared by The Province, The National Post, The London Free Press, and the Montreal Gazette earned over 13,000 plays.

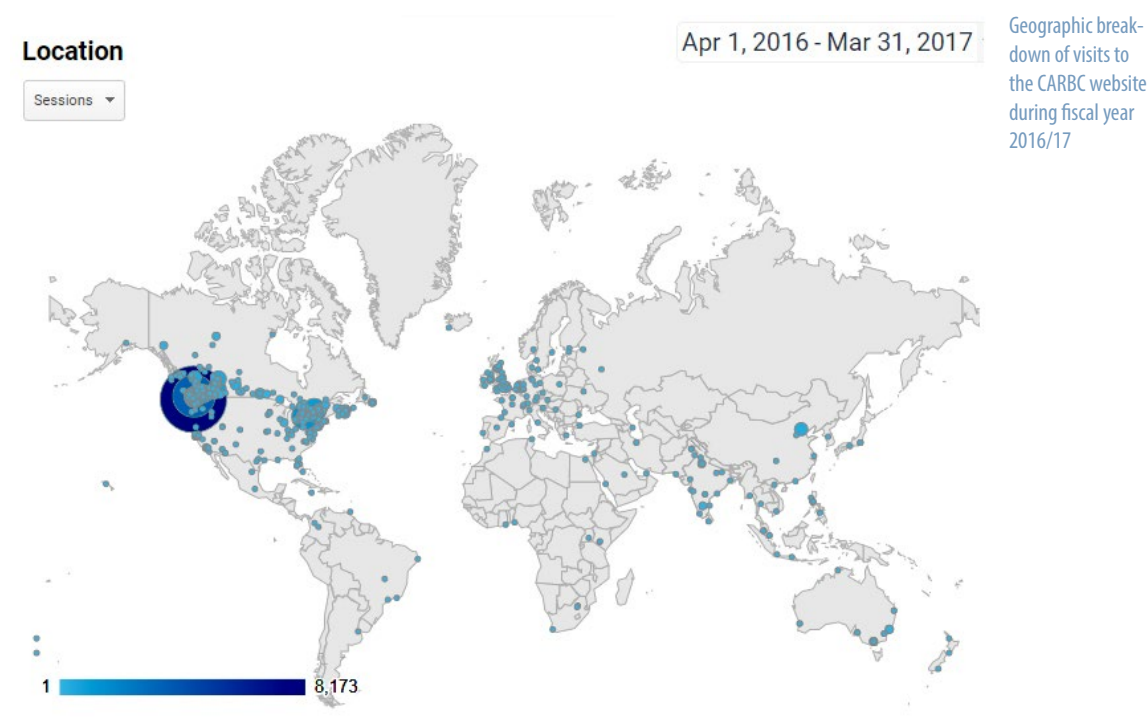
Website

During this, the first full year for which our website analytics were available, 20,121 users made 31,284 visits (86/day) and logged 88,668 page views (243/day) on the CARBC website. The top ten CARBC pages from 2016/17, in order of page views, were:

1. CARBC main page (19,388 page views)
2. Helping Schools (6,478)
3. Publications & Resources (4,081)
4. iMinds (Helping Schools) (3,293)
5. About CARBC (3,273)
6. Managed Alcohol Program project page (2,787)
7. Facts & Stats (2,657)
8. Projects (2,614)
9. Cycles (Helping Schools) (1,924)
10. Screening and Brief Intervention Tools (1,209)

The popularity of our Helping Schools resources is clearly evident from this list, and highlights the strength of CARBC's knowledge transfer efforts (spearheaded through CARBC's Vancouver office) in providing pre-secondary curriculum materials covering substance use and related topics to educators in BC and beyond.

Operationally, our website will soon be switching to an updated UVic website template which will improve our ability to track downloads of specific documents (e.g., pdfs).



Media Summary

Overall, we recorded 545+ total media hits over the past year (Table 1), including 15 TV/video news pieces, 78 radio interviews, three op-eds, and 157 articles from publications of note (a survey of notable outlets include: BBC, Business Insider, Canadian Press, CBC, Chicago Tribune, Daily Mail, De Standaard, Globe & Mail, Huffington Post, The Independent, International Business Times, Malay Mail Online, Maxim, National Post, New York Post, Philadelphia Inquirer, Scientific American, SFGate, Sky News, The Australian, The Economist, The Guardian, The Londoner, The Mirror, San Diego Union-Tribune, The Sun, The Times, US News, Wall Street Journal)

Table 4: CARBC media coverage during the 2016/17 fiscal year, by news type and outlet.

News Type	Outlet	Count
TV	CHEK	4
	CTV national	1
	CTV Vancouver	2
	CTV Vancouver Island	3
	Global News	2
	CBC national	1
	CBC "The National"	1
Web video	Ecancer.org	1
	Sub-Total	15
Radio	CFAX	23
	CBC BC Almanac	8
	CBC All Points West	6
	CBC Early Edition	5
	CBC On the Island	2
	CBC – other (Daybreak South (Kelowna), Daybreak North (northern BC), Boulevard du Pacifique, Thunder Bay, Yellowknife, Winnipeg, Windsor, Halifax, Saskatchewan, Calgary, Edmonton, etc.)	17
	other (Radio NL Kamloops, National Post radio, CKNW, NewsTalk (Calgary, St Catharines, Saskatoon/Regina, Calgary), Roundhouse Radio, etc.)	17
	Sub-Total	78
Articles	Op-Eds (Globe & Mail (national), Globe & Mail (BC), Victoria News)	3
	Publications of note (including: BBC, Business Insider, Canadian Press, CBC, Chicago Tribune, Daily Mail, De Standaard, Globe & Mail, Huffington Post, The Independent, International Business Times, Malay Mail Online, Maxim, National Post, New York Post, Philadelphia Inquirer, Scientific American, SFGate, Sky News, The Australian, The Economist, The Guardian, The Londoner, The Mirror, San Diego Union-Tribune, The Sun, The Times, US News, Wall Street Journal, etc.)	157
	Other articles	292+
	Sub-Total	452+
TOTAL		545+



During 2016/17, CARBC work was the subject of five UVic Media Releases and two UVic Media “Tips”. CARBC also disseminated one media release independently. For the three of those releases centered on research published in academic journal articles, we partnered with the journals to increase our promotional reach. Given the journal publishers’ geographical locations, London, UK, and New Jersey, in these cases and the strength of their existing networks and promotional efforts (e.g., paid placement of the releases in “EurekAlert! Science News”), these partnerships appeared especially fruitful in fostering our international reach.

2016/17 CARBC-featured media releases concerning alcohol consumption, specifically with regards to both its relationship with prostate cancer and the increased harm of mixing alcohol with energy drinks, received particularly substantial coverage among traditional news outlets and secondary, health and lifestyle-related websites internationally from Afghanistan to Zimbabwe. As

mentioned in the social media section of this summary, the CARBC Clearing the Air around E-cigarettes report proved particularly provocative on social media and blogs, especially among vaping supporters on Twitter who leveraged the report findings in the contentious debate over the still-nascent regulatory environment around vaping. Importantly, Andre Picard, national health columnist for the *Globe & Mail*, brought the findings to a more mainstream audience, using the report as the basis for an opinion piece advancing the potential public health utility of vapour devices as a harm reduction alternative to tobacco smoking. Rounding out CARBC’s top-covered media topics for the year were issues around sex work (e.g., factors related to entering the field), the legalization of cannabis, and managed alcohol programs.

A special note of commendation to CARBC Scientist Bernie Pauly and Collaborating Scientist Bruce Wallace who have tirelessly engaged the media throughout the ongoing overdose public health emergency and other related issues.

CARBC Scientist Bernie Pauly was interviewed on CBC’s “The National” regarding tent city and the homelessness situation in the Victoria region (June 28, 2016)



Table 5: CARBC media coverage during the 2016/17 fiscal year, by topic

Topic	Primary Media Count *	Additional Media Count**
Alcohol (moderate drinking, minimum pricing, privatization, health and cancer)	48	244+
Managed Alcohol Programs	16	-
Opioid crisis (including supervised consumption sites, overdose statistics, naloxone, opioid substitution handbook, etc.)	69	-
Homelessness	32	-
Cannabis (mostly legalization, impairment testing)	17	-
Sex work	18	-
E-cigs and smoking	23	?+
Energy drinks + alcohol	18	46+
Talking to kids about drugs	5	-

* notable media outlets

** "secondary" media hits (e.g., articles on health sites as part of a newswire)

CARBC PhD student Adam Sherk being interviewed by Global News regarding CARBC-led research into the effectiveness of the Swedish government alcohol monopoly



Other Dissemination Channels and Materials

Blog

During 2016/17, we published five posts on the CARBC Matters of Substance Blog. These covered a wide range of substance use related topics from both in-house and guest authors. One highlight was an exclusive interview with the Director of Policy Analysis and Public Affairs at the United Nations Office on Drugs and Crime (UNODC) in the lead up to the 2016 UN General Assembly Special Session on Drugs. The UVic blog hosting platform does not provide analytics, so it is difficult to evaluate the reach of our blog posts.



CARBC Assistant Director Dan Reist facilitating a community conversation on the opioid crisis at UVic

Public talks

CARBC hosted five free public talks during the year on a variety of topics presented by CARBC students, Scientists, and visiting scholars and recordings of these are made available on the CARBC YouTube Channel. Among the high-quality presentations, we were treated to a guest talk from renowned Australian tobacco control scholar Dr. Ron Borland on “the case for a harm reduction approach to tobacco control.” In October, as part of Homelessness Action Week, CARBC also co-hosted a screening of a local documentary film that followed several people navigating substance use and housing issues in Victoria (“Us and Them” at Cinecenta), which opened with a performance by the local Unity Drummers group and was followed by a panel discussion. In January, CARBC members led a very well-attended “community dialogue” on the opioid crises in UVic’s Student Union Building that was organized by the UVic Students’ Society and UVic Health Services.

Print/Web Collateral

CARBC published three “CARBC (Statistical) Bulletins” and three infographics last year. One bulletin, CARBC’s public health-oriented recommendations regarding the legalization of cannabis in Canada served as CARBC’s submission to the Federal Task Force on legalization. Another CARBC Bulletin about people turning to social service agency washrooms as “de-facto” drug consumption sites served as the basis of a UVic media release and accompanying op-ed in the Globe & Mail, which was timed to coincide with International Overdose Awareness day for maximum impact. That media release registered ten quality media hits and 12,000 views via UVic Twitter accounts. The infographic that we created to accompany the “Clearing the Air around E-cigarettes” report traveled well across social media, especially among the vaping community.

PUBLICATIONS

Journal Articles

- Ambrose, G., Amlani, A., & **Buxton, J.** (2016). Predictors of seeking emergency medical help during overdose events in a provincial naloxone distribution program: a retrospective analysis. *BMJ*, 6(6), e011224.
- Andreasson, S., Chikritzhs, T., Dangardt, F., Holder, H., Naimi, T. & **Stockwell, T.** (2016). Moderate alcohol consumption gives no positive effect on health. *Swedish Medical Journal*, 113, 1-4.
- Baker, T., **Stockwell, T.**, **Barnes, G.** & Haesevoets, R. (2016). Reward sensitivity of anterior cingulate cortex as an intermediate phenotype between DRD4-521T and substance misuse. *Journal of Cognitive Neuroscience*, 28 (3), 460-471.
- Belle-Isle, L., Walsh, Z., Lucas, P.**, Callaway, R., Capler, R., Kay, R., & Holtzman, S. (In press). Barriers to access for Canadians who use cannabis for therapeutic purposes. *International Journal of Drug Policy*. See summary available at <http://www.cdnaids.ca/barriers-to-access-for-canadians-who-use-cannabis-for-medical-purposes>.
- Benoit, C.**, Ouellet, N., **Jansson, M.**, **Magnus, S.**, & Smith, M. (2017). "Would you think about doing sex for money?" Structure and agency in deciding to sell sex in Canada. *Work, Employment & Society*. Online at: <http://journals.sagepub.com/doi/full/10.1177/0950017016679331>.
- Benoit, C.**, **Smith, M.**, **Jansson, M.**, **Magnus, S.**, Ouellet, N., Atchison, C., Casey, L., **Phillips, R.**, **Reimer, B.**, **Reist, D.**, & Shaver, F. (2016). Lack of confidence in police creates a 'blue' ceiling for sex workers' safety. *Canadian Public Policy/Analyse de politiques*. 42 (4): 456-468.
- Benoit, C.**, Ouellet, N. & **Jansson, M.** (2016). Unmet health care needs among sex workers in five census metropolitan areas of Canada. *Canadian Journal of Public Health*, 107 (3), e266-e271.
- Brubacher, J.**, Chan, H., Martz, W., Schreiber, W., Asbridge, M., Eppler, J., Lund, A., **Macdonald, S.**, Drummer, O., Pursell, R., Andolfatto, G., Mann, R., & Brant, R. (2016). Prevalence of alcohol and drug use in injured British Columbia drivers. *BMJ Open*, 6(3).
- Callaghan, R.**, Gatley, J., Sanches, M., Asbridge, M. & **Stockwell, T.** (2016). Impacts of drinking-age legislation on alcohol-impaired driving crimes among young people in Canada, 2009-2013. *Addiction*, 111(6), 994-1003.
- Card, K., **Lachowsky, N.**, Cui, Z., Carter, A., Armstrong, H., Shurgold, S., Moore, D., Hogg, R., & **Roth, E.** (2016). A Latent Class Analysis of Seroadaptation Among Gay and Bisexual Men. *Archives of Sexual Behavior*, 16:1-2.
- Card, K., **Lachowsky, N.**, Cui, Z., Shurgold, S., Gislason, M., Forrest, J., Rich, A., Moore, D., **Roth, E.**, & Hogg, R. (2017). Exploring the role of sex-seeking apps and websites in the social and sexual lives of gay, bisexual and other men who have sex with men: a cross-sectional study. *Sexual Health*. 14(3), 229-237. doi:10.1071/SH16150.
- Card, K., **Lachowsky, N.**, Cui, Z., Sereda, P., Rich, A., Jollimore, J., Howard, T., **Birch, R.**, Carter, A., Montaner, J., Moore, D., Hogg, R., & **Roth, E.** (2016). Seroadaptive strategies of gay & bisexual men (GBM) with the highest quartile number of sexual partners in Vancouver, Canada. *AIDS and Behavior*, 1-5. DOI 10.1007/s10461-016-1510-y.
- Cherpitel, C.**, Ye, Y., Bond, J., Woolard, R., Villalobos, S., Bernstein, J.,...Ramos, R. (2016). Brief intervention in the emergency department among Mexican-origin young adults at the U.S.-Mexico border: outcomes of a randomized controlled clinical trial using Promotores. *Alcohol and Alcoholism*, 51(2):154-63. doi: 10.1093/alcalc/agv084
- Chikritzhs, T., **Stockwell, T.** & Naimi, T. (2017). Bias in assessing effects of substance use from observational studies: what does longitudinal data tell us? *Journal of Studies on Alcohol and Drugs*, 78(3), 404-405.
- Chikritzhs, T & **Stockwell, T.** (2016). Cohort study: Late-life increases in alcohol consumption among postmenopausal women appear associated with greater breast cancer risk and less coronary heart disease risk. *Evidence-Based Medicine*.
- Closson, K., **Lachowsky, N.**, Cui, Z., Shurgold, S., Sereda, P., Rich, A., Moore, D., **Roth, E.**, & Hogg, R. (2016). Does age matter? Sexual event-level analysis of age-disparate sexual partners among gay, bisexual and other men who have sex with men (GBM) in Vancouver, Canada. *Sexually Transmitted Infections*. 2016 Nov 16:
- Crabtree, A., Latham, N., Bird, L., & **Buxton, J.** (2016). Results of a participatory needs assessment demonstrate an opportunity to involve people who use alcohol in drug user activism and harm reduction. *Harm Reduction Journal*. 13:37.

- Deonarine, A., Amlani, A., Ambrose, G., **Buxton, J.** (2016). Qualitative assessment of take-home-naloxone program participant and law enforcement interactions in British Columbia. *Harm Reduction*, 13:17.
- Edalati, H., **Walsh, Z.**, & Kosson, D. (2016). Attentional bias in psychopathy: An examination of the emotional dot-probe task in male jail inmates. *International Journal of Offender Therapy and Comparative Criminology*, 60, 1344-1357.
- Erickson, K., Jonnson, M., Langille, J., & **Walsh, Z.** (2017). Victim gender, rater attitudes, and rater violence history influence perceptions of intimate partner violence. *Violence & Victims*, 32(3):533-544. doi: 10.1891/0886-6708.
- Fitzcharles, M., Ste-Marie, P., Häuser, W., Clauw, D., Jamal, S., Karsh, J., Landry, T., McDougall, J., Le Clercq, S., Shir, Y., Shojania, K., & **Walsh, Z.** (2016). Efficacy, tolerability and safety of cannabinoid treatments in the rheumatic diseases: A systematic review of randomized controlled trials. *Arthritis Care & Research*, 68, 681-688.
- Forrest, J., **Lachowsky, N.**, Lal, A., Cui, Z., Sereda, P., Raymond, H., Ogilvie, G., **Roth, E.**, Moore, D., & Hogg, R. (2016). Factors associated with productive recruiting in a respondent-driven sample of men who have sex with men in Vancouver, Canada. *Journal of Urban Health*, 93(2), 379-387.
- Ghosh, H., Bourgeault, I., **Benoit, C.** (2017). Meeting health service needs for urban Aboriginal women with co-morbid health concerns: Creating a safe place. *Fourth World Journal*. 15 (2): 5-25.
- Giesbrecht, N., Wettlaufer, W., Thomas, G., Stockwell, T., Thompson, K.**, April, N., Asbridge, M., Cukier, S., Mann, R., McAllister, J., Murie, A., Pauley, C., Plamondon, L. & **Vallance, K.** (2016). Pricing of alcohol in Canada: A comparison of provincial policies and harm-reduction opportunities. *Drug and Alcohol Review*, 35, 289-297.
- Giesbrecht, N., Wettlaufer, A.**, Simpson, S., **Vallance, K., Stockwell, T.**, Asbridge, M., Mann, R., McAllister, J., Pauley, C., Plamondon, L., Cukier, S., **Thomas, G.**, Murie, A. & **Thompson, K.** (2016). Strategies to reduce alcohol-related harms and costs in Canada: A comparison of provincial policies. *International Journal of Alcohol and Drug Research*, 5 (2), 33-45.
- Gilmore, I., Chikritzhs, T., Gilmore, W., Jernigan, D., Naimi, T., & **Stockwell, T.** (in press) Alcohol, health and public health policy. *Nature Reviews Gastroenterology and Hepatology*.
- Greer, A.**, Luchenski, S., Amlani, A., Lacrois, K., Burmeister, C., & **Buxton, J.** (2016). Peer engagement in harm reduction strategies and services: A critical case study and evaluation framework from British Columbia, Canada. *BMC Public Health*, 16:452.
- Greer, A.**, Hu, S., Amlani, A., Moreheart, S., Sampson, O., & **Buxton, J.** (2016). Patient perspectives of methadone formulation change in British Columbia, Canada: Outcomes of a provincial survey. *Subst Abuse Treat Prev Policy*, 11:3.
- Holtzman, S., Landis L., **Walsh, Z.**, Puterman, E., Roberts, D., & Saya-Moore, K., (2016). Predictors of HIV testing among men who have sex with men: A focus on men living outside major urban centres in Canada. *AIDS Care*, 28(6):705-11. doi: 10.1080/09540121.2016.
- Homel, J., **Thompson, K.**, & **Leadbeater, B.** (2016). Trajectories of marijuana use in youth aged 15 to 25: Implications for post-secondary education experiences. *Journal of Studies on Alcohol and Drugs*, 75(4): 674–683.
- Imtiaz, S., Wells, S., & **Macdonald, S.** (2016). Sex differences among treatment clients with cocaine-related problems. *Journal of Substance Use*, 21(1): 22-228.
- Islam, N., Krajden, M., Shoveller, J., Gustafson, P., Gilbert, M., **Buxton, J.**, Wong, Tyndall, M., Janjua, N., BC-HTC Team. (2016). Incidence, risk factors and prevention of hepatitis C reinfection: A population-based cohort study. *Lancet Gastroenterology and Hepatology*, 2(3):200-210. doi: 10.1016/S2468-1253(16)30182-0
- Johnson, C., **Buxton, J.**, Harrison, S., Ahamad, K., Nolan, S., Lappalainen, L., Mead, A., McLean, M., & Wood, E. (2016). Implementation of a naloxone distribution program in an inpatient addiction service: A case study. *Canadian Journal of Addiction*, 7(1), 22-25.
- Kestler, A., **Buxton, J.**, Meckling, G., Giesler, Michelle, L., & Scheuermeyer, F. (2016). Factors associated with participation in an emergency department-based take-home naloxone program for at-risk opioid users. *Annals of Emergency Medicine*, Online.

Korcha, R., **Cherpitel, C.**, Witbrodt, J., Borges, G., Bazargan, S., Bond, J., & Gmel, G. (In press). Gender, substance use and intentional injury: An international study of emergency department patients. *Drug and Alcohol Review*.

Lachowsky, N., Dulai, J., Cui, Z., Sereda, P., Rich, A., Patterson, T., Corneil, T., Montaner, J., **Roth, E.**, Hogg, R., & Moore, D. (2017). Lifetime Doctor-Diagnosed Mental Health Conditions and Current Substance Use Among Gay and Bisexual Men Living in Vancouver, Canada. *Substance Use & Misuse*, 6:1-3.

Lachowsky, N., Lal, A., Forrest, J., Card, K., Cui, Z., Sereda, P., Rich, A., Raymond, H., **Roth, E.**, Moore, D., & Hogg, R. (2016). Including online-recruited seeds: a respondent-driven sample of men who have sex with men. *Journal of medical Internet research*, 18(3).

Lachowsky, N., Tanner, Z., Cui, Z., Sereda, P., Rich, A., Jollimore, J., Montaner, J., Hogg, R., Moore, D. & **Roth, E.** (2016). An Event-Level Analysis of Condom Use During Anal Intercourse Among Self-Reported Human Immunodeficiency Virus–Negative Gay and Bisexual Men in a Treatment as Prevention Environment. *Sexually Transmitted Diseases*, 43(12):765-70.

Lachowsky, N., Lin, S., Hull, M., Cui, Z., Sereda, P., Jollimore, J., Rich, A., Montaner, J., **Roth, E.**, Hogg, R., & Moore, D. (2016). Pre-exposure Prophylaxis Awareness Among Gay and Other Men who have Sex with Men in Vancouver, British Columbia, Canada. *AIDS and Behavior*, 20(7):1408-22.

Lachowsky, N., **Sorge, J.**, Raymond, H., Cui, Z., Sereda, P., Rich, A., **Roth, E.**, Hogg, R., & Moore, D. (2016). Does size really matter? A sensitivity analysis of number of seeds in a respondent-driven sampling study of gay, bisexual and other men who have sex with men in Vancouver, Canada. *BMC Medical Research Methodology*, 16(1), 157.

Lake, S., Kerr, T., **Buxton, J.**, Guillemi, S., Parashar, S., Montaner, J., Wood, E., & Milloy, M. (2016). Prescription opioid injection among HIV-positive people who inject drugs in a Canadian setting. *AIDS and Behaviour*, Epub ahead of print.

Lin, S., **Lachowsky, N.**, Hull, M., Rich, A., Cui, Z., Sereda, P., Jollimore, J., Stephenson, K., Thumath, M., Montaner, J., & **Roth, E.** (2016). Awareness and use of non-occupational post-exposure prophylaxis among men who have sex with men in Vancouver, Canada. *HIV medicine*, 17(9):662-673.

Lucas, P., & **Walsh, Z.** (2017). Medical cannabis access, use, and substitution for prescription opioids and other substances: A survey of authorized medical cannabis patients. *International Journal of Drug Policy*, 42, 30-35.

MacDonald, M., **Pauly, B.**, Wong, G., Schick-Makaroff, K., van Roode, T., **Wilson Strosher, H.**, Kothari, A., Valaitis, R., Manson, H., Carroll, S., Tong, S., Lee, V., Dickenson-Smith, K., Ward, M. (2016). Supporting successful implementation of public health interventions: Protocol for a realist synthesis. *Systematic Reviews*, 5, 54-64.

MacDonald, M., **O'Leary, R.**, **Stockwell, T.** & **Reist, D.** (2016). Clearing the Air: Protocol for a systematic meta-narrative review on the harms and benefits of e-cigarettes and vapour devices. *Systematic Review*, 5:85.

Magnuson, D., **Jansson, M.**, **Benoit, C.**, & **Kennedy, M.** (In Press). Caregiving in the lives of street-involved youth from foster care. *Child & Family Social Work*.

Martin, R., Turner, R., Howett, L., Howard, T., Hanberg, D., **Buxton, J.**, Moravan, V., & Oliffe, J. (2016). Twelve committed Men: the feasibility of a community-based participatory HIV-prevention intervention within a Canadian men's correctional facility. *Global Health Promotion*, <https://doi.org/10.1177/1757975916659045>.

Meixner, T., Milligan, K., **Urbanoski, K.**, McShane, K. (2016). Conceptualizing integrated service delivery for pregnant and parenting women with addiction: defining key factors and processes. *Canadian Journal of Addiction*, 7(3):57-65.

Milligan, K., Usher, A., & **Urbanoski, K.** (2016). Supporting pregnant and parenting women with substance-related problems by addressing emotion regulation and executive function needs. *Addiction Research and Theory* 2016, Epub ahead of print.

McNeil, R., Kerr, T., **Pauly, B.**, Wood, E., & Small, W. (2016). Advancing patient-centered care for structurally vulnerable drug-using populations: A qualitative study of the perspectives of people who use drugs regarding the potential integration of harm reduction interventions into hospitals. *Addiction*, 111(4), 685-694.

Martin, W., **Pauly, B.**, & **MacDonald, M.** (2016). Situational analysis for complex systems: Methodological development in public health research. *AIMS Public Health*, 3(1), 94-109.

Marcellus, L. & Cross, S. (2016). Trauma informed care in the NICU: Implications for early childhood development (Part II). *Neonatal Network*, 35(6), 359-366.

- Marcellus, L.** & MacKinnon, K. (2016). Using an informed advocacy approach to advance the practice of family-centered care. *Journal of Perinatal and Neonatal Nursing*, 30(3), 240-242.
- Marcellus, L.** & Poag, E. (2016). Adding to our practice toolkit: Using the ACTS script to address stigmatizing peer behaviors in the context of maternal substance use. *Neonatal Network*, 35(5), 327-332.
- Marcellus, L.** (2016). Guest editorial: Special issue on Neonatal Abstinence Syndrome. *Neonatal Network*, 35(5), 266-277.
- Montreuil, A., **MacDonald, M.**, Asbridge, M., Wild, T., Hammond, D., Manske, S., & Rutherford, E. (2017). Prevalence and correlates of electronic cigarette use among Canadian students: Cross-sectional findings from the 2014/2015 Canadian Student Tobacco, Alcohol and Drug Survey. *Canadian Medical Association Journal Open* 5(2), E460-E467.
- Moore, D., Cui, Z., **Lachowsky, N.**, Raymond, H., **Roth, E.**, Rich, A., Sereda, P., Howard, T., McFarland, W., Lal, A., & Montaner, J. (2016). HIV Community Viral Load and Factors Associated With Elevated Viremia Among a Community-Based Sample of Men Who Have Sex With Men in Vancouver, Canada. *JAIDS Journal of Acquired Immune Deficiency Syndrome*, 72(1):87-95.
- Naimi, T., **Stockwell, T.**, **Zhao, J.**, Xuan, Z., Dangardt, F., Saitz, R., Liang, W. & Chikritzhs, T. (2017). Selection biases in observational studies affect associations between 'moderate' alcohol consumption and mortality. *Addiction*, 112(2), 207-214.
- Naimi, T. & **Stockwell, T.** (2017). Selection bias and relationships between alcohol consumption and mortality. *Addiction*, 112(2), 220-221.
- Okano, M., Langille, J. I., & **Walsh, Z.** (2016). Psychopathy, alcohol use and intimate partner violence: Evidence from two samples. *Law & Human Behavior*, 40(5):517-23. doi: 10.1037/lhb0000192.
- Otterstatter, M., Amlani, A., Guan, H., Richardson, L., & **Buxton, J.** (2016). Illicit drug overdose deaths resulting from income assistance payments: Analysis of the 'check effect' using daily mortality data. *International Journal of Drug Policy*, 33, 83-87.
- Pauly, B.**, Gray, E., **Perkin, K.**, **Chow C.**, **Vallance, K.**, **Krysowaty, B.**, **Stockwell, T.** (2016). Finding safety: A pilot study of managed alcohol participants' perceptions of housing and quality of life. *Harm Reduction Journal*, 13(1), 1-11.
- Rabinovitch, H., **Pauly, B.**, **Zhao, J.** & Limbick, H. (2016). Assessing emergency shelter patterns to inform community solutions to address homelessness. *Housing Studies*, 31(8), 984-997.
- Reimer-Kirkham, S., Stajduhar, K. **Pauly, B.**, Giesbrecht, M., **Mollison, A.**, McNeil, R., **Wallace, B.** (2016). Death is a social justice issue: Perspectives on equity-informed palliative care. *Advances in Nursing Science*, 39(4): 293-307, doi: 10.1097/ANS.0000000000000146.
- Rich, A., **Lachowsky, N.**, Zishan, C., Sereda, P., Lal, A., Moore, D.,... Begoray, D. (In press). Anal Sex Roles Explain Substance Use Patterns among a Sample of HIV-Negative and HIV-Positive Gay, Bisexual, and Other Men who have Sex with Men in Vancouver, British Columbia, Canada. *Archives of Sexual Behaviour*. *Epub. Ahead of pub.* 1-9.
- Rich, A., Scott, K., Johnson, C., Blackwell, E., **Lachowsky, N.**, Cui, Z., Sereda, P., Moore, D., Hogg, R. & **Roth, E.** (2017). Sexual HIV risk among gay, bisexual and queer transgender men: findings from interviews in Vancouver, Canada. *Culture, Health and Sexuality*. Published online: 03 Apr 2017. <http://dx.doi.org/10.1080/13691058.2017.1299882>
- Roemer, A. & Stockwell, T.** (2017). Alcohol Mixed with Energy Drinks and Risk for Injury: A Systematic Review. *Journal of Studies on Alcohol and Drugs*, 78, 175-183.
- Roth, E.**, **Benoit, C.**, **Jansson, M.**, & Hallsgrimsdottir, H. (2017). Public Drinking Venues as Risk Environments: Commercial Sex, Alcohol and Violence in a Large Informal Settlement in Nairobi, Kenya. *Human Ecology*, 45(2):277-83.
- Rudrum, S., Oliffe, J., & **Benoit, C.** (2016). Discourses of masculinity, femininity, and sexuality in Uganda's Stand Proud, Get Circumcised campaign. *Culture, Health & Sexuality*. 8(10): 1-15.
- Selfridge, M.** (2016). Living online on the street: Street-involved youth negotiating online access on the street. *Journal of Technologies in Society*, 12(3); 35-48.

- Slaunwhite, A. & Macdonald, S.** (In press). Alcohol, isolation and access to treatment: Family physician experiences of alcohol consumption and access to healthcare in rural British Columbia. *The Journal of Rural Health*.
- Slaunwhite, A., & Macdonald, S.** (in press) Primary health care utilization for alcohol-attributed diseases in British Columbia, Canada 2001-2011. *BioMed Central Family Practice*.
- Slaunwhite, A. & Macdonald, S.** (2016). Regional variations in general practitioner visits for alcohol-attributed diseases in British Columbia, Canada. *International Journal of Mental Health and Addiction*, 14(6): 952-968.
- Stockwell, T.** (2017). What is Alcoholics Anonymous? A Path from Addiction to Recovery, *Drug and Alcohol Review*, 36: 709-710, doi:10.1111/dar.12538.
- Stockwell, T., Zhao, J., Panwar, S., Roemer, A., Naimi, T., & Chikritzhs, T.** (2016). Do “moderate” drinkers have reduced mortality risk? A systematic review and meta-analysis of alcohol consumption and all-cause mortality. *Journal of Studies on Alcohol and Drugs*, 77(2), 185-198.
- Stockwell, T., Zhao, J., Naimi, T. & Chikritzhs, T.** (2016). Stockwell et al. response: Moderate use of an “intoxicating carcinogen” has no net mortality benefit: Is this true and why does it matter? *Journal of Studies on Alcohol and Drugs*, 77(2), 205-207.
- Stockwell, T.** (2016). Commentary on Gmel et al. Are alcohol outlet densities strongly associated with alcohol-related outcomes? A critical review of recent evidence. *Drug and Alcohol Review*, 35, 55-57.
- Stockwell, T., Zhao, J., Greenfield, T., Li, J., Livingston, M. & Meng, Y.** (2016). Estimating under- and over-reporting of drinking in national surveys of alcohol consumption: Identification of consistent biases across four English-speaking countries. *Addiction*, 111(7), 1203-1213.
- Stockwell, T., Zhao, J., Sherk, A., Callaghan, R., Macdonald, S., & Gately, J.** (2016). Assessing the impacts of Saskatchewan’s minimum alcohol pricing regulations on alcohol-related crime. *Drug and Alcohol Review*, 36(4), 492-501.
- Stockwell, T. & Naimi, T.** (2016). Cohort study: Study raises new doubts regarding the hypothesised health benefits of ‘moderate’ alcohol use. *Evidence Based Medical*, 21:156. <http://dx.doi.org/10.1136/ebmed-2016-110407>.
- Stockwell, T.** (2017). Alcohol’s contribution to cancer is underestimated for exactly the same reason that its contribution to cardio-protection is overestimated. *Addiction*, 112(2), 230-231.
- Stockwell, T. & Naimi, T.** (2016). Study raises new doubts regarding the hypothesised health benefits of ‘moderate’ alcohol use. *Evidence Based Medicine*, ebmed-2016.
- Swogger, M., Montry, K., **Walsh, Z.**, & Kosson, D. S. (in press). Fantastic and uninviting behavior: Psychopathy, alcohol, and violence. *Current Drug Abuse Reviews*.
- Swogger, M., Hart, E., Priddy, B., Murray, T., Erowid, F., Erowid, E., & **Walsh, Z.** (in press). Experiences of kratom users: A qualitative analysis. *Journal of Psychoactive Drugs*.
- Taylor, D., Ho, A., Mâsse, L., Van Borek, N., Li, N., Patterson, M., Ogilvie, G., & **Buxton, J.** (2016). Assessment of capacity to consent by nurses who deliver health care to patients who misuse substances. *Global Qualitative Nursing Research*, 3, 1-9.
- Thompson, K., Stockwell, T., Wettlaufer, A., Giesbrecht, N. & Thomas, G.** (2017). Minimum Alcohol Pricing Policies in Practice: A Critical Examination of Implementation in Canada. *Journal of Public Health Policy*, 38(1): 39-57.
- Timoney, L. **Walsh, Z.**, Shea, M., Yen, S., Edelen, M., Ansell, E., Morey, L., Grilo, C., Sanislow, C., Skodol, A., Gunderson, J., McGlashan, T. (2016). Personality and life events in a personality disorder sample. *Personality Disorders: Theory, Research & Treatment*, DOI: 10.1037/per0000214.
- Urbanoski, K., van Mierlo, T., & Cunningham J.** (2016). Investigating patterns of participation in an online support group for problem drinking: a social network analysis. *International Journal of Behavioral Medicine*, DOI: 10.1007/s12529-016-9591-6.
- Vallance, K., Stockwell, T., Pauly, B., Chow, C., Gray, E., Kryswaty, B., Perkin, K. & Zhao, J.** (2016). Do managed alcohol programs change patterns of alcohol consumption and reduce related harm? A pilot study. *Harm Reduction Journal*, 13(1), 1-11.
- Vallance, K., Roth, E., Thompson, K., Chow, C., & Martin, G.** (2016). Partying last weekend: factors related to heavy episodic drinking among people who use recreational drugs. *Substance Use & Misuse*, 51(13):1731-40.

Veldhuizen, S., & **Callaghan, R.** (In press). Cause-specific mortality among people previously hospitalized with opioid-related conditions: A retrospective cohort study. *Annals of Epidemiology*.

Walsh, Z., Lucas, P., Swogger, M., Kosson, D., Thiessen, M., & Hendricks, P. (2016). Hallucinogen use and intimate partner violence: Prospective evidence consistent with protective effects among men with histories of problematic substance use. *Journal of Psychopharmacology*, 30(7):601-7. doi: 10.1177/0269881116642538.

Wild, T., **Pauly, B., Belle-Isle, L.,** Cavaliere, W., Elliott, R., Strike, C., **Tupper, K.,** Hathaway, A., Dell, C., MacPherson, D., Sinclair, C., Karekezi, K., Tan, B., & Hyshka, E. (2017). Canadian harm reduction policies: A comparative content analysis of provincial and territorial documents, 2000-2015. *International Journal of Drug Policy*, 45:9-17. doi: 10.1016/j.drugpo.2017.03.014.

Wild, T., Yuan, Y., Wolfe, J., Rush, B., & **Urbanoski, K.** (2016). Client engagement in legally-mandated addiction treatment: a prospective study using self-determination theory. *Journal of Substance Abuse Treatment*, 69:35-43.

Woodin, E., Sukhawathanakul, P., Homel, J., Caldeira, V., & **Leadbeater, B.** (2016). Pathways to romantic relational aggression through adolescent peer aggression and heavy episodic drinking. *Aggressive Behavior*, 42(6): 563-576, DOI: 10.1002/ab.21651.

Ye, Y., Bond, J., **Cherpitel, C.,** Borges, G., Monteiro, M., & **Vallance, K.** (In press). Evaluating recall bias in a case-crossover design estimating risk of injury related to alcohol: Data from six countries. *Drug and Alcohol Review*.

Zadoroznyj, M., **Benoit, C.** & Berry, S. (2016). Beyond birth: Women's concerns about post-birth care in an Australian urban community. *Women and Birth*, 29:153-9.

Zhao, J. & Stockwell, T. (2017). Alcohol Consumption and Mortality from Coronary Heart Disease: An Updated Meta-Analysis of Cohort Studies. *Journal of Studies on Alcohol and Drugs*, 78(3), 375-386.

Zhao, J., Stockwell, T., Roemer, A. & Chikritzhs, T. (2016). Is alcohol consumption a risk factor for prostate cancer? A systematic review and meta-analysis. *BMC Cancer*, 16:845.

Books

Macionis, J., **Jansson, M., Benoit, C.** & Burkowicz, J. (in press). *Society, the basics*: (6th ed.). Scarborough, Ontario: Pearson Education Canada.

Magnuson, D., Jansson, M., & Benoit, C. (2017). *'I feel like I've really grown up': The experience of emerging adulthood among street-involved youth*. Oxford University Press. New York, USA.

Book Chapters

Allan, J., Holder, M., & **Walsh, Z.** (in press). Cannabis and well-being. In V. Preedy (Ed.), *The handbook of cannabis and related pathologies: biology, diagnosis, treatment and pharmacology*. Amsterdam, Netherlands: Elsevier.

Baker, A., Black, P.J., & **Walsh, Z.** (in press). Deception. In Arrigo, B.A. & Golson, G. (Eds.). *Encyclopedia of Criminal Justice Ethics*. Thousand Oaks, CA: Sage Publications.

Benoit, C., Jansson, M. Phillips, R., Hallgrimsdottir, H., & **Vallance, K.** (2017). Social determinants of injection drug use among a community sample of sex workers: Intersections of structure and agency across the life course. In: C. Varcoe, O. Hankivsky & M. Morrow (Eds.). *Women's health in Canada: Critical theory, policy and practice* (2nd ed.). Toronto: University of Toronto Press.

Benoit, C., Carroll, D., & Westfall, R. (2017). Being there for pregnant women: Canadian midwives in Aboriginal and settler communities. In: C.Torri & J. Hornosty (Eds.). *Complementary and Alternative Medicine: Traditional Medicine and Reproductive Health*. Toronto, Ontario, Canadian Scholars' Press.

Black, P.J., & **Walsh, Z.** (in press). Police profiling. In Arrigo, B.A. & Golson, G. (Eds.). *Encyclopedia of Criminal Justice Ethics*. Thousand Oaks, CA: Sage Publications.

Bourgeault, I., **Benoit, C.,** Wrede, S., & Neiterman, E. (2016). Professions and the migration of expert labour: Towards an intersectional analysis of transnational mobility patterns and integration pathways of health professionals. In: Dent, M., Bourgeault, I., Denis J-L., Kuhlmann. (Eds.). (pp. 295-312). *The Routledge Companion to the Professions and Professionalism*. London: Routledge.

Crosby, K., Hiles, M., & **Walsh, Z.** (in press). The war on drugs. In Arrigo, B.A. & Golson, G. (Eds.). *Encyclopedia of Criminal Justice Ethics*. Thousand Oaks, CA: Sage Publications.

Casey, L., McCarthy, B., **Phillips, R., Benoit, C., Jansson, M., Magnus, S.,** Atchison, C., **Reimer, B., Reist, D.** & Shaver, F. (2017). Managing Conflict: An Examination of Three-Way Alliances in Canadian Escort and Massage Businesses. In A. Horning & A. Marcus (Eds.), *Third Party Sex Work and Pimps in the Age of Anti-trafficking* (pp. 131–149). New York: Springer.

Crosby, K., Hiles, M., & **Walsh, Z.** (in press). The war on drugs. In Arrigo, B. A. & Golson, G. (Eds.), *Encyclopedia of Criminal Justice Ethics*. Thousand Oaks, CA: Sage Publications.

Loppie, C., & **Pauly, B.** (in press). Indigenous families, substance use and child welfare. In J. Carriere & S. Strega (Eds.), *Walking this path together: Anti-racist and anti-oppressive child welfare*. Winnipeg: Fernwood Publishers.

Callaghan, R., Verdichevski, M., Fyfe, T., & Gatley, J. (In press). Does cannabis use increase the risk of developing cancer in humans? A review of literature from 2004-2014. In Preedy, V. R. (Ed.), *Handbook of cannabis and related pathologies: Biology, diagnosis, treatment and pharmacology*. London: Elsevier.

Gatley, J., & **Callaghan, R.** (In press). Tobacco-related mortality among individuals with alcohol- or drug-use disorders. In Preedy, V. R. (Ed.), *Neuropathology of Addiction (Volume 1)*. London: Elsevier.

Greer, A., Martin, G., **Joordens, C. & Macdonald, S.** (in press) Motivations for use and crack cocaine. In: Preedy, V.R. (Ed.). *Neuropathology of Drug Addictions and Substance Misuse Volume 2*. Elsevier Press.

Langille, J., Peters, L. & **Walsh, Z.** (in press). Violence against women and girls. In Arrigo, B.A. & Golson, G. (Eds.). *Encyclopedia of Criminal Justice Ethics*. Thousand Oaks, CA: Sage Publications.

Magnuson, D., Jansson, M., & Benoit, C. (2017). Foster Care as a Support System for Early Leavers. In Mann-Feder, V. (Ed.). *Leaving Care and the Transition to Adulthood: International Contributions to Theory, Research and Practice*. New York: Oxford University Press.

Marcellus, L., Poole, N., & Hemsing, N. (in press). Beyond abstinence: Harm reduction during pregnancy and early parenting. In W. Peterson & M. Faulkes, *Mothers, addiction and recovery: Finding meaning through the journey*. Bradford, ON: Demeter Press.

Monteiro, M., Rehm, J., Taylor, B., & **Stockwell, T.** (in press). *Alcohol Consumption: Overview of International trends* (3rd ed.). In S. Quah (Ed.), *International Encyclopedia of Public Health*.

Norman, T., & Pauly, B. (2016). Where's the CASH (Centralized Access to Supported Housing)? Evaluation of a single point of access to supported housing. In N. Nichols & C. Doberstein (Eds.), *Systems level responses to homelessness* (pp. 33-51). Toronto: The Homeless Hub Press. Available online: <http://homelesshub.ca/systems-responses>

Pauly, B., Perkin, K. & Cross, G. (2016). Pandemic planning and preparedness in the context of Homelessness: The case of Victoria, BC. In K. Buccieri & R. Schiff (Eds.), *Pandemic Planning & Homelessness: Lessons from H1N1 in Canada* (pp 73-98). Retrieved from <http://homelesshub.ca/resource/3-case-victoria-bc>

Peters, L., & **Walsh, Z.** (in press). Drug courts. In B. A. Arrigo & G. Golson (Eds.), *Encyclopedia of Criminal Justice Ethics*. Thousand Oaks, CA: Sage Publications.

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

Waagemakers Schiff, J., **Pauly, B.,** & Schiff, R. (2016). Health needs and analysis of pandemic planning in four Canadian cities. In K. Buccieri & R. Schiff (Eds.), *Pandemic Planning & Homelessness: Lessons from H1N1 in Canada* (pp 163-184). Retrieved from <http://homelesshub.ca/resource/7-health-needs-and-analysis-pandemic-planning-four-canadian-cities>

Commissioned and Special Reports

Albert, M., **Pauly, B.,** Hunt-Jinnouchi, F., Penna, T., & Pagan, F. (2016). *More than a number: 2016 Greater Victoria Point in Time Count technical report*. Victoria, BC: Homeless Partnering Strategy, Employment and Social Development Canada.

Albert, M., Penna, T., Pagan, F., & **Pauly, B.** (2016). *More than a number: 2016 Greater Victoria Point in Time Count summary report*. Victoria, BC: Homeless Partnering Strategy, Employment and Social Development Canada. Retrieved from: <https://www.crd.bc.ca/docs/default-source/housing-pdf/pitcount-report26apr2016.pdf?sfvrsn=2>

Andréasson, S., Chikritzhs, T., Dangardt, F., Holder, H., Naimi, T. & **Stockwell, T.** (2016) *Alcohol and Cancer*. International Organisation of Good Templars-NTO, the Swedish Society of Medicine and CERA.

Davis, A., Amlani, A., & **Buxton, J.** (2016) Substance use trends in BC: A survey of harm reduction clients. Overall results for British Columbia: 2015. Vancouver, BC: BC Centre for Disease Control. http://www.bccdc.ca/resource-gallery/Documents/Educational%20Materials/Epid/Other/2015_Report_July%204_LATEST.pdf

Greer, A., & Buxton, J. (2016, May). A guide for paying peer research assistants. Vancouver, BC: British Columbia Centre for Disease Control. <http://www.bccdc.ca/resource-gallery/Documents/Statistics%20and%20Research/Statistics%20and%20Reports/Epid/Other/A%20guide%20for%20paying%20peer%20research%20assistants%20May%202016.pdf>

Greer, A., Amlani, A., Buxton, J., & the PEEP team. (2016, October). Peer Engagement Best Practices: A Guide for Health Authorities and other providers. Vancouver, BC: BC Centre for Disease Control.

Frankish J., Stirling B., Gaetz, S., Krausz, M., **Norman, T., Patterson, M., Pauly, B., Somers, J., Strehlau, V., Tsemberis, S., & Zabkiewicz, D.** (2016). A scoping review on the measurement of community integration of homeless persons: Final technical report. Vancouver, BC: University of British Columbia.

Hammond, K., Gagne, L., **Pauly, B., & Stockwell, T.** (2016). A cost-benefit analysis of a Canadian Managed Alcohol Program. Victoria, BC: Centre for Addictions Research of BC, University of Victoria.

Klassen, D., & **Buxton, J.** (2016) Overdose recognition and response in the BC Take home naloxone program. Review of data to July 2016. Vancouver, BC: BC Centre for Disease Control. http://www.bccdc.ca/resource-gallery/Documents/Educational%20Materials/Epid/Other/THN%20report%20Aug_final.pdf

Macdonald, S., Stockwell, T., Reist, D., Belle-Isle, L., Benoit, C., Callaghan, R., Cherpitel, C., Dyck, T., Jansson, M., Pauly, B., Roth, E., Vallance, K., & Zhao, J. (2016). Submission to the Task Force on Marijuana Legalization and Regulation in Canada, Legalization of Cannabis in Canada: Implementation strategies and public health. Victoria, BC: Centre for Addictions Research of BC, University of Victoria.

Marcellus, L. (2016). Supporting families at Sheway and beyond: Self, recovery, family and home. A three year longitudinal study of early parenting experiences. Victoria, BC: University of Victoria.

Norman, T., Pauly, B., Wallace, B., & Barber, K. (2016, August). AIDS Vancouver Island (AVI), harm reduction services: An evaluation. Victoria, BC: Centre for Addictions Research of BC, University of Victoria.

Pauly, B., Cross, G., & Weiss, D. (2016). No vacancy: Affordability and homelessness in Vancouver. Vancouver, BC: Union Gospel Mission.

Pauly, B. (2016, July). Expert Report, Victoria Tent City Injunction Hearing. BC Supreme Court.

Stockwell, T., Pauly, B., Barber, K. & Vallance, K. (2016). Centre for Addictions Research of BC's Alcohol and Other Drug (AOD) High Risk Populations Monitoring Study: Results from questions on access to harm reduction services and substance use in bathrooms among adults who use substances in street-based settings. Victoria BC: Centre for Addictions Research of BC report for AIDS Vancouver Island.

CARBC Bulletins

Macdonald, S., Stockwell, T., Reist, D., Belle-Isle, L., Benoit, C., Callaghan, R., Cherpitel, C., Dyck, T., Jansson, M., Pauly, B., Roth, E., Vallance, K. & Zhao, J. (2016). Legalization of Cannabis in Canada: Implementation strategies and public health. Centre for Addictions Research of BC Bulletin #16, Victoria, BC: University of Victoria.

Wallace, B., Pauly, B., Barber, K., Vallance, K., Patterson, J. & Stockwell, T. (2016). Every washroom: De facto consumption sites in the epicenter of an overdose public health emergency. Centre for Addictions Research of BC Bulletin #15, Victoria, BC: University of Victoria.

Belle-Isle, L., Pauly, B., Benoit, C., Hall, B., Lacroix, K., LeBlanc, S., Sproule, R., Cater, J., Johnson, M., & Dupuis, G. (2016). From one ally to another: Practice guidelines to better include people who use drugs at your decision-making tables Centre for Addictions Research of BC Bulletin #14. Victoria, BC: University of Victoria.

CARBC Blogs

See: <https://onlineacademiccommunity.uvic.ca/carbc>

Dyck, T. (2017). Alcohol health promotion: not just harm reduction.

Holmes, J. (2016). Minimum unit pricing for alcohol: Why reports of its illegality were premature.

Michelow, W. (2016). Avoiding Harm from Misrepresented Drugs.

Belle-Isle, L. (2016). Actions speak louder than words: How to include people who use drugs in decisions that affect them.

CARBC (2016). UNGASS 2016: Q&A with Jean-Luc Lemahieu, Director of Policy Analysis and Public Affairs UNODC.

Infographics

See <https://www.uvic.ca/research/centres/carbc/publications/infographics/index.php> to view:

Clearing the Air around e-Cigarettes: Their harm reduction potential (2017)

Is Alcohol a Risk Factor for Prostate Cancer? (2016)

Inside a Managed Alcohol Program (2016)

Opinion Editorials and Letters to News Outlets

Pauly, B., Thumath, M., & Gagnon, M. (2016, December 23). Changes to Canada's drug policy will take time to translate into action. *The Globe and Mail*. Available online: <http://www.theglobeandmail.com/opinion/changing-drug-policy-will-take-time-to-translate-into-action/article33427442/>

Pauly, B. (2016, December 19). Comment: We need to shift thinking on homelessness. *Times Colonist*. Available online: <http://www.timescolonist.com/opinion/letters/we-need-to-shift-thinking-on-homelessness-1.4973947>

Pauly, B., & Gurstein, P. (2016, October 11). The link between Vancouver's homelessness and soaring housing prices. *The Globe and Mail*. Available online: <http://www.theglobeandmail.com/opinion/the-link-between-vancouver-homelessness-and-soaring-housing-prices/article32304886/>

Wallace B., & Pauly, B. (2016, August 31). Washroom overdoses call for action in Victoria. *The Globe and Mail*. Available online: <http://www.theglobeandmail.com/opinion/washroom-overdoses-call-for-action-in-victoria/article31653726/>

Reimer-Kirkham, S., Stajduhar, K., **Pauly, B.**, Giesbrecht, M., **Mollison, A.**, McNeil, R., & **Wallace B.** (2016, November 8). Death is a social justice issue: Perspectives on equity-informed palliative care [Web log post]. Retrieved from <https://ansjournalblog.com/2016/11/08/death-is-a-social-justice-issue/>

Pauly, B. (2016, July 25). Overdose deaths in BC- time to scale up supervised consumption services [Web log post]. Retrieved from <http://www.arnbc.ca/blog/supervised-consumption-services/>

CARBC Student Dissertations

Belle-Isle, L. (2016) At the table with people who use illegal drugs: Transforming power inequities. Social Dimensions of Health Research, PhD Dissertation.

Goatley, S. (2016) "Do bars comply with National standards for alcohol advertising? Investigating social media and a culture of immoderation among the student population. Psychology Honours Dissertation.

Invited Presentations

Benoit, C. (2017, April). Dilemma of disclosure of Parkinson's. Victoria Epilepsy & Parkinson's Centre. West Shore, Victoria, British Columbia.

Benoit, C. (2017, April). Prostitution stigma as a major determinant of sex workers' health. Closing Address. Social Dimensions of Health Student Conference: Connecting Health Across All Topics, April 6, University of Victoria, Victoria, British Columbia.

Benoit, C. (2017, April). The costs and benefits of disclosure of Parkinson identity. Victoria Epilepsy & Parkinson's Centre, Sidney, British Columbia.

Benoit, C. (2017, March). Lack of confidence in police creates a 'blue ceiling' for sex workers' safety. Bureau of Sociology Students (BOSS), University of Victoria, Victoria, British Columbia.

Benoit, C. (2017, March). Challenges & benefits of academic-community engaged research. Graduate research seminar, University of Victoria, Victoria, British Columbia.

Benoit, C. (2017, March). A long-view on community-engagement with Peers Victoria. Visual Storytelling: a glimpse into world-changing research. Ideafest, University of Victoria, Victoria, British Columbia.

Benoit, C., & Reist, D. (2017, January). "I'm a prostitute, so, can you check me?" Exploring sex work stigma in health care. Webinar. Canadian Public Health Association, Ottawa, Ontario.

Benoit, C. (2016, November). Building capacity for community based research (CBR) with marginalized populations. Symposium & book launch. UVic Office of Community-University Engagement, University of Victoria, Victoria, British Columbia.

McCarthy, B., Carter, A., **Benoit, C., & Jansson, M.** (2016, November). Sex Work: Crime or Employment? The American Society of Criminology, New Orleans, Louisiana.

Casey, L., McCarthy, B., **Phillips, R., Benoit, C., Jansson, M., Magnus, S.,** Atchison, D., **Reimer, B., Reist, D., & Shaver, F.** (2016, November). Managing conflict: An examination of three-way alliances in Canadian escort and massage businesses. The American Society of Criminology, New Orleans, Louisiana.

Benoit, C. (2016, November). Health & health equity for pregnant & early parenting families facing substance use & other challenges. Invited talk in the Midwifery Program, College of Nursing, Faculty of Health Sciences, University of Manitoba, Winnipeg, Manitoba.

Ghosh, H., Bourgeault, I., & **Benoit, C.** (2016, May). Identifying the health service needs for co-occurring health conditions among urban Aboriginal women. Indigenous Health Conference, Toronto, Ontario.

Belle-Isle, L., Pauly, B., & Benoit, C. (2016, April). At decision-making tables with people who use illegal drugs: Transforming power inequities. CUVIC 2016: Reconciliation, Innovation and Transformation through Engagement conference, University of Victoria, Victoria, British Columbia.

Belle-Isle, L., Benoit, C., & Pauly, B. (2016, May). From One ally to another: Practical guidelines to better include people who use drugs at decision-making tables. Canadian Association of HIV Research, Winnipeg, Manitoba.

Buxton, J. (2016, September). Standing committee on Health re Bill C-224 Good Samaritan Act, Ottawa, Ontario.

CARBC Director Tim Stockwell and Scientist Bernie Pauly presenting on managed alcohol programs Sept 9th, 2016 at the Greater Victoria Public Library, as part of UVic Continuing Studies' Deans' Lunchtime Lecture Series



Buxton, J. (2016, September). Public Health and substance-related harms. Epidemiology in Action, Seminar for Canadian Field Epidemiology Program, Ottawa, Ontario.

Buxton, J. (2016, October). Collecting provincial data: Opportunities and challenges after declaring a public health emergency. CIHR Best Brains meeting re National Drug Observatory, Ottawa, Ontario.

Buxton, J. (2016, October). Responding to the overdose crisis in BC. Grey Nuns Hospital Grand Rounds, Edmonton, Alberta.

Buxton, J. (2016, October). Alberta Health Service/Chief Medical Health Officer and Medical Examiner, Edmonton, Alberta.

Buxton, J. (2016, July). Synthetic opioids in counterfeit pharmaceuticals and street drugs. The situation in Canada. US National Drug Early Warning System Webinar. Online.

Buxton, J. (2016, May). Manitoba fentanyl task force re BC PH Emergency.

Buxton, J. (2016, May). Saving lives with naloxone. Western Canada Addictions Forum, Vernon, British Columbia.

Pauly, B. (2016, November). Nurses and health equity researchers: Allies, advocates or activists? Invited presentation to the University of Saskatchewan Faculty of Nursing and webcast to Prince Albert and Regina, Saskatoon, Saskatchewan.



CARBC PhD student Marion Selfridge presenting at the Victoria Public Library on her research into the use of social media by street-involved youth

Buxton, J. (2016, November). National opioid crisis summit presentation re naloxone. Ottawa, Ontario.

Buxton, J. (2016, November). Using evidence to inform naloxone distribution and policy. Canadian Field Epidemiology Program Webinar.

Pauly, B. (2016, November). Do Managed Alcohol Programs prevent the harms of alcohol dependence and homelessness? Plenary presentation at the Saskatoon Regional Housing Conference, Saskatoon, Saskatchewan.

Pauly, B. (2016, November). Can research have impact? The role of the Island Health scholar in residence. Invited presentation to Island Health and the general public at Island Health Knowledge to Action Month, Victoria, British Columbia.

Pauly, B. (2016, October). Is health equity a priority in BC? Invited presentation at the British Columbia Centre for Disease Control's Grand Rounds, Vancouver, British Columbia.

Pauly, B. (2016, September). Taking it to the streets: Enhancing healthcare for people experiencing homelessness. Invited presentation at the University of Victoria and Island Health's Health Talk series, Victoria, British Columbia.

Pauly, B. & Stockwell, T. (2016, September). Do Managed Alcohol Programs prevent harms for people with alcohol dependence? Invited presentation at the University of Victoria's Dean's Lunchtime Lecture Series, Greater Victoria Library, Victoria, British Columbia.

Pauly, B. (2016, November). The role of the expert witness and Super Intent City. Presentation to third year law students. University of Victoria, British Columbia.

Pauly, B. (2016, October). Homelessness, health equity, and public health. UVic Guest Lecture to Health and Society 200 Undergraduate Class. University of Victoria, British Columbia.

Pauly, B. (2016, September). Building a program of research: Health equity, homelessness, and substance use. Presentation to PhD Seminar, University of Victoria, British Columbia.

Reist, D. (2017, March). Rethinking our systems: Is it time to throw in the towel? Ontario DTFP Conference, Toronto, Ontario.

Stockwell, T. (2016, December). Alcohol attributable cancer in Sweden: Prevalence and prevention. Presentation to the Swedish Alcohol Interest Parliamentary group, Swedish Parliament, Stockholm, Sweden.

Stockwell, T. (2016, November). Minimum unit pricing for alcohol: The most cost-effective cancer prevention strategy of all? Invited presentation to the 2016 UK National Cancer Research Institute Annual Conference, Liverpool, United Kingdom.

Stockwell, T. (2016, September). Considerations when selecting a meta-analysis for CHD. Invited presentation to the US Centers for Disease Control Epidemiology Section, Atlanta, Georgia.

Stockwell, T. (2016, May). Responding to alcohol-related harms in the 21st Century: What does the evidence tell us? Invited presentation to An Alcohol Strategy for Ontario. Toronto, Ontario.

Stockwell, T. (2016, May). Second-hand effects of alcohol consumption: Can we prevent harm to others? Keynote presentation to STAD Annual Symposium of Prevention of Alcohol Related Problems, Stockholm, Sweden.

Wallace, B., Pauly, B., Kerr, T., Patterson, J., & Kennedy, M. (2016, October). Implementing supervised consumption sites: A survey of people who inject drugs. Invited presentation to Island Health, the Victoria Police Department, and the City of Victoria, Victoria, British Columbia.

Other Conference and Seminar Presentations

Amlani, A., **Greer, A.**, Newman, C., Leblanc, B., Lacroix, K., Burmeister, C., & **Buxton, J.** (2016, June). Participant, peer and PEEP: Engaging people who have used illicit drugs in qualitative research. Poster presentation Canadian Public Health Association (CPHA) annual conference; Public Health 2016, Toronto, Ontario.

Belle-Isle, L. (2017, March). Guest lecturer. Biology 334 – Plants and People. Cannabis, People, Politics, and the Law: What's all the buzz about? University of Victoria, Victoria, British Columbia.

Belle-Isle, L. (2016, November). Beyond the Joint Workshop. Spectrum Community School. Panelist. Victoria, British Columbia.

Belle-Isle, L., Pauly, B., Benoit, C. (2016, May). From One Ally to Another: Practical Guidelines to Better Include People who Use Drugs at Decision-making Tables. Oral Presentation, CAHR 2016 Conference, Winnipeg, Manitoba.

Belle-Isle, L., Pauly, B., & Benoit, C. (2016, April). At decision-making tables with people who use illegal drugs: Transforming power inequities. Paper presentation at Community University Victoria (CUVIC) Conference: Reconciliation, Innovation and Transformation through Engagement, Victoria, British Columbia.

Belle-Isle, L., Pauly, B., Benoit, C. (2016, April). At Decision-making Tables with People who Use Illegal Drugs: Transforming Power Inequities. CUVIC Conference 2016, University of Victoria, Victoria, British Columbia.

Belle-Isle, L. (2016, June). Panelist on "Cannabis: The Road to Regulation". 2nd National Conference on Charting the Future of Drug Policy in Canada on "Decriminalization and Regulation: A Public Health and Human Rights Approach. Toronto, Ontario.

Casey, L., McCarthy, B., **Phillips, R., Benoit, C., Jansson, M., Magnus, S.**, Atchison, D., **Reimer, B., Reist, D.**, & Shaver, F. (2016, November). Managing conflict: An examination of three-way alliances in Canadian escort and massage businesses. The American Society of Criminology. New Orleans, Louisiana.

Benoit, C., Smith, S., **Magnus, S., & Jansson, M.** (2016, October). "Oh yeah, I'm a prostitute. So, can you check me?" The costs and benefits of disclosing sex work in health care encounters. Qualitative Health Research Conference, Kelowna, British Columbia.

Burgess, H., **Buxton, J.**, & PEEPs. (2016, December). Knowledge translation of stigma and trust findings from an evaluation of harm reduction services in BC. Poster presentation Public Health Association of BC (PHABC) Conference 2016 Strengthening Healthy Development: Education and Public Health in Partnership. Richmond, British Columbia.

Buxton, J., Amlani, A., **Greer, A.**, Mobach, J., & PEEP Research Team. (2016, June). PEEPing into the lives of people who use drugs and understanding how their experiences are shaped by provider attitudes. Oral presentation Canadian Public Health Association (CPHA) annual conference; Public Health 2016, Toronto, Ontario.

Chow, C., Wettlaufer, A., Zhao, J., Stockwell, T., & Pauly, B. (2016, May). Counting the cold ones: Measuring total alcohol consumption of Managed Alcohol Program participants, a comparison of methods. Paper presentation at the 42nd Annual Alcohol Epidemiology Symposium of the Kettil Bruun Society, Stockholm, Sweden.

Crabtree, A., Latham, N., & **Buxton, J.** (2016, June). Working with people who drink non-beverage alcohol to describe perceived harms and proposed harm reduction initiatives Poster presentation Canadian Public Health Association (CPHA) annual conference; Public Health 2016, Toronto, Ontario.

Dang, P., & Pauly, B. (2016, December). Leading the way: Exploring the role of education & collaboration in ELPH internships. Oral presentation at the Public Health Association of British Columbia Annual Conference, Vancouver, British Columbia.

CARBC PhD student and Research Affiliate Lynne Belle-Isle with CARBC Scientist and supervisor Cecilia Benoit, after presenting a talk about best practices for including people with lived experience in decision making



Deonarine, A., Ambrose, G., Amlani, A., & **Buxton, J.** (2016, November). Take Home Naloxone program participants' perspectives and program evaluation regarding contacting emergency services during an overdose event. Oral presentation National Harm Reduction Conference, San Diego, California.

Deonarine, A., Amlani, A., & **Buxton, J.** (2016, June). Qualitative assessment of take-home-naloxone program participant and law enforcement interactions in British Columbia. Poster presentation Canadian Public Health Association (CPHA) annual conference; Public Health 2016, Toronto, Ontario.

Durante, E., Mitchell, K., Pelatt, K., & **Buxton, J.** (2016, November). "O.D. Be Gone!" a.k.a. Naloxone and the Inner City Youth Experience in Vancouver, BC. Oral presentation National Harm Reduction Conference, San Diego, California.

Dyck, L., Pauly, B., Revai, T., & Dang, P. (2016, December). Metaphor as a teaching tool for health equity. Public Health Association of British Columbia Annual Conference, Vancouver, British Columbia.

Farnan, P., **Reist, D.**, Beharrell, T., **Kendall, P.** (2017, February). Ally of Change Panel: Science, Addiction and Law. Bottom Line Conference, Vancouver, British Columbia.

Gibson, E., **Greer, A., & Buxton, J.** (2016, December). Paying people with lived experience in community based work: challenges and opportunities for inclusion and equity. Poster presentation Patient Experience Summit 2016 Fraser Health, Vancouver, British Columbia.

Gibson, E., Amlani, A., **Greer, A.**, Newman, C., Leblanc, B., Lacroix, K., Burmeister, C., & **Buxton, J.** (2016, December). *PEEPing into the lives of people who use drugs: results from the BC Peer Engagement and Evaluation Project.* Oral presentation Patient Experience Summit 2016 Fraser Health, Vancouver, British Columbia.

Greer, A., & Buxton, J. (2016, June). Paying people with lived experiences in community based work: Challenges and opportunities for inclusion and equity. Poster presentation CPHA annual conference; Public Health 2016, Toronto, Ontario.

Greer, A., Amlani, A., Burmeister, C., Lampkin, H., Newman, C., LaCroix, K., LeBlanc, B., & **Buxton J.** (2016, December). Peer Engagement Best Practice Guidelines for British Columbia Oral presentation Public Health Association of BC (PHABC) Conference 2016 Strengthening Healthy Development: Education and Public Health in Partnership, Richmond, British Columbia.

Greer A., Amlani, A., & **Buxton J.** (2016, December). Paying people with lived experience in community based work: challenges and opportunities for inclusion and equity. Poster presentation Public Health Association of BC (PHABC) Conference 2016 Strengthening Healthy Development: Education and Public Health in Partnership, Richmond, British Columbia.

Greer A., Amlani, A., Newman, C., Burmeister, C., LaCroix, K., Lampkin, H., LeBlanc, B., & **Buxton J.** (2016, December). Experiences in harm reduction services: the impact of provider's attitudes and stigma Poster presentation Public Health Association of BC (PHABC) Conference 2016 Strengthening Healthy Development: Education and Public Health in Partnership, Richmond, British Columbia.

Greer, A., Amlani, A., & **Buxton, J.** (2016, June). Patient perspectives and outcomes of a provincial methadone formulation change in BC. Poster presentation CPHA annual conference; Public Health 2016, Toronto, Ontario.

Greer, A., & Buxton, J. (2016, November). Paying people with lived experience in community based work: challenges and opportunities for inclusion and equity. Poster presentation National Harm Reduction Conference, San Diego, California, USA.

Greer, A., Luchenski, S., Amlani, A., Burmeister, C., Lacroix, K., & **Buxton, J.** (2016, May). Peer engagement in harm reduction policy, practice, and research: A critical case study from British Columbia, Canada. Oral presentation International Society for the study of Drug Policy. Sydney, Australia.

Hudak, M. & **Marcellus, L.** (2016, June). . Emerging treatment variations in Neonatal Abstinence Syndrome: What impacts thresholds for pharmacologic care? 19th Annual Advanced Practice Neonatal Forum, Washington, District of Columbia.

Islam, N., Krajden, M., Shoveller, J., Gustafson, P., Gilbert, M., Wong, J., **Buxton, J.**, Tyndall, M., & Janjua, N. (2016, October). Impact of drug use and opioid substitution therapy on hepatitis C reinfection. Oral presentation American Association of Study Liver Diseases; The Liver Meeting, Boston, Massachusetts.

Jansson, M., Benoit, C., Magnus, S., & Smith, M. (2016, October). Trustworthy care: towards a framework for sex worker friendly health services. Qualitative Health Research Conference, Kelowna, British Columbia.

Kestler, A., Scheuermeyer, F., Meckling, G., Giesler, A., Lee, M., & **Buxton, J.** (2016, April). Factors associated with take-home naloxone acceptance among opioid users in a Canadian emergency department. Poster presentation International Conference on Emergency Medicine, Cape Town, South Africa.

Kuo, M., Janjua, N., Yu, A., Islam, N., Samji, H., **Buxton, J.**, Butt, Z., Tyndall, M., Wong, J., Krajden, M., & The BC-HTC Team. (2016, May). Assessment of Injection Drug Use Based on Diagnostic Codes in Administrative Datasets. Poster presentation 25th Annual Conference on HIV/AIDS Research CAHR 2016, Winnipeg, Manitoba.

Martin, R., Korchinski, M., Young, P., Smith, M., Janssen, P., Buchanan, M., **Buxton, J.**, Condello, L., Fels, L., Leggo, C., & Ramsden, V. (2016, March). Unlocking the Gates to Health - peer health mentoring for women who are leaving a Canadian provincial correctional facility. Oral presentation 9th Academic and Health Policy Conference of Correctional Health, Baltimore, Maryland, USA.

McCarthy, B., Carter, A., **Benoit, C.**, **Jansson, M.** (2016, November). Sex Work: Crime or Employment? The American Society of Criminology. New Orleans, Louisiana.

McLarnon, M. (2017, March). Trauma-informed mental health series: Working with refugees. Half-day workshop, DIVERSEcity, Surrey, British Columbia.

McLarnon, M. (2017, February). Ethics and safe use of technology in clinical practice. One-day workshop. Vancouver Coastal Health, Vancouver, British Columbia.

McLarnon, M. (2016, May). May 2016 Sex, death, and money: Difficult issues in psychotherapy. One-day workshop. University of British Columbia, Vancouver, British Columbia.

Milne, R., Drost, A., Lundgren, K., **Selfridge, M.**, Fraser, C. (2016, September). Improved access to HCV treatment for substance users: The impact of on-site transient elastography in an inner city community health centre. 5th International Symposium on Hepatitis Care in Substance Users, Oslo, Norway.

MacDonald, M., & **Pauly, B.** (2016, July). Developing public health policy research frameworks with concept mapping. Online presentation at 2016 Improving Health Equity, PHSSR Research in Progress Webinar. Available online: <http://www.publichealthsystems.org/phssr-research-progress-webinars#2016Equity>

MacDonald, M., **Pauly, B.**, **Revai, T.**, & **Marcellus, L.** (2016, December). Relational ethics: A promising approach for addressing the everyday tensions of public health practice. Paper presentation at the Public Health Association of British Columbia Conference, Vancouver, British Columbia.

Marcellus, L. (2016, June). Supporting women with substance use disorders: Strategies for the NICU team. Poster presentation at the 19th Annual Advanced Practice Neonatal Forum, Washington, District of Columbia.

Marcellus, L. (2016, June). Research and innovations in clinical practice symposium: A national survey of nursing care of infants with prenatal substance exposure in Canadian NICUs. Poster presentation at the 19th Annual Advanced Practice Neonatal Forum, Washington, District of Columbia.

Marcellus, L., Loutit, T., & Cross, S. (2016, June). A national survey of nursing care of infants with prenatal substance exposure in Canadian NICUs. Poster presentation at the 19th Annual Advanced Practice Neonatal Forum, Washington, District of Columbia.

Marcellus, L., Loutit, T., & Cross, S. (2016, August). A national survey of nursing care of infants with prenatal substance exposure in Canadian NICUs. Poster presentation at the Council of International Neonatal Nurses Annual Conference, Vancouver, British Columbia.

OliFFE, J., Martin, R., Howett, L., Hanberg, D., Latimer, C., **Buxton, J.**, Taylor, W., Myers, N., Leggo, C., Fels, L., & Tyndall, T. (2016, March). Formerly incarcerated men give voice to their health priorities. Oral presentation 9th Academic and Health Policy Conference of Correctional Health, Baltimore, Maryland.

Otterstatter, M., Amlani, A., Guan, H., Richardson, L., & **Buxton, J.** (2016, November). Illicit drug overdose deaths resulting from income assistance payments: Analysis of the 'check effect' using daily mortality data. Poster presentation National Harm Reduction Conference, San Diego, California.

Otterstatter, M., Amlani, A., Guan, H., Richardson, L., & **Buxton, J.** (2016, June). Illicit drug overdose deaths resulting from income assistance payments: Analysis of the 'check effect' using daily mortality data. Poster presentation Canadian Public Health Association (CPHA) annual conference; Public Health 2016, Toronto, Ontario.

Pauly, B., Martin, W., MacDonald, M., Marcellus, L., & Revai, T. (2016, May). Ethical issues of public health practitioners in promoting health equity. International Union for Health Promotion and Education, Curitiba, Brazil.

Pauly, B., Stockwell, T., Vallance, K., Wettlaufer, A., Chow, C., Brown, R., Evans, J., Gray, E., Krysovaty, B., Ivsins, A., Schiff, R. (May, 2016). Rethinking Alcohol Harm Reduction: An Overview of Managed Alcohol Programs in Canada. Kettil Bruun Society 42nd Annual Epidemiology Symposium, Stockholm, Sweden.

Pauly, B., & National MAP Research Team. (2016, May). Considering alcohol harm reduction: Managed Alcohol Programs in Canada. Online presentation at 9th Managed Alcohol Programs Community of Practice Webinar, Victoria, British Columbia.

Pauly, B., Martin, W., MacDonald, M., Marcellus, L., & Revai, T. (2016, December). Relational ethics: Promising approach for addressing everyday ethical tensions in public health practice. Public Health Association of British Columbia Annual Conference, Vancouver, British Columbia.

Pauly, B., MacDonald, M., Shahram, S., Norman, T., Deyman, M., & Brown, M. (2016, December). Is health equity a priority in BC? Breakfast Session at the Public Health Association of British Columbia Annual Conference, Vancouver, British Columbia.

Pauly, B., MacDonald, M., Hancock, T., Bersenev, S., Rishede, J., & Allan, D. (2016, June). Got your health equity glasses?: Getting clarity on health equity tools. Poster presentation at Pathways to Health Equity: Levelling the Playing Field, Winnipeg, Manitoba.

Pauly, B. (2016, May). The power of peers: Learnings from community-based research in mental health and substance use. Paper presentation at Making the Change: Patient-Oriented Research, Five Days in May Research Month 2016, Island Health, Victoria BC. Available online: <https://vimeo.com/166863101>

Pearce, L., **Rothson, D., Buxton, J.** (2016, December). Evaluating take home naloxone in prison: learning from one year of experience in BC Corrections. Poster presentation PHABC Conference 2016 Strengthening Healthy Development: Education and Public Health in Partnership, Richmond, British Columbia.

Piggott, T., **Buxton, J., Dickson, C., Luchak, M., Shore, B., AFMC Engaging Medical Students in Public Health Working Group.** (2016, April). Best practices in public health electives for medical student. Poster presentation Canadian Conference on Medical Education, Accountability from Self to Society. Montreal, Quebec.

Reist, D. (2016, April, 14) Workshop and consultation (full day) with School District #42 (Maple Ridge) on theory and practice of drug education and the development of classroom resources to be implemented in the district. Maple Ridge, British Columbia.

Reist, D. (2016, April, 11) Professional learning workshop with School District #5 (Southeast Kootenay) on theory and practice of effective drug education. Cranbrook, British Columbia.

Revai, T., Pauly, B., Allan, D., Martin, W., MacDonald, M., & Marcellus, L. (2016, May). Ethical issues of public health practitioners in promoting health equity. Paper presentation at the Pathways to Health Equity: Levelling the Playing Field, Winnipeg, Manitoba.

Roemer, A. (2016). Alcohol and Injury: The role of mental health, energy drinks, and other risk factors. Lecture given at the BC Injury and Prevention Alliance webinar, Vancouver, British Columbia.

Selfridge, M. (2016, June 23). And we screamed at the sky – Holding space for narratives of grief and trauma from street-involved youth. Narrative Matters Conference. Victoria, British Columbia.

Selfridge, M. (2016, April 24). "Is that how you want their family to find out?" Exploring the "rules," of grieving online. #YTHLive, the youth + tech + health conference. San Francisco, California.

Selfridge, M. (2016, April 7). Paper dissolves or dies, but Facebook is always there: Street-involved youth and digital technology. CARBC-sponsored public lecture, Greater Victoria Public Library. Victoria, British Columbia.

Selfridge, M. (2016, April 1). Grieving online. 2016 Annual Meeting of the Society for Applied Anthropology, Vancouver, British Columbia.



CARBC Scientist Bernie
Pauly at a public discussion
at Victoria City Hall in
her role as Island Health
Scholar in Residence

Sinclair, C., Wild, C., MacPherson, D., **Belle-Isle, L.**, Cavalieri, W., Elliott, R., McBride, K., **Pauly, B.**, Strike, C., Tupper, K., Karekezi, K., Tan, B., Asbridge, M., Dell, C., Hathaway, A., Smith, C., Hyshka, E. (2016, June). A Comparative Analysis of Provincial/Territorial Harm Reduction Policy: Implications for Expanding Access to Health Services for People who use Illicit Drug. Poster presentation at the Canadian Public Health Association Conference, Toronto, Ontario.

Stockwell, T. (2016, June). Do managed alcohol programs (MAPs) reduce consumption and harm? Presented at the 42nd Annual Alcohol Epidemiology Symposium of the Kettil Bruun Society, University of Stockholm, Sweden.

Stockwell, T. (2016, June). Psychology and the use of research to inform public health responses to alcohol related problems. Invited presentation to the Canadian Psychological Association Annual Convention, Victoria, British Columbia.

Stockwell, T. (2016, April). Why benefits of “moderate drinking” may be over estimated – and risks underestimated. Invited presentation to Alcohol Policy 17, Washington, District of Columbia.

Stockwell, T., Pauly, B., Chow, C., Erickson, R., Kryswaty, B., Roemer, A., Vallance, K., Wettlaufer, A., & Zhao, J. (2016, May). Does managing the consumption of people with severe alcohol dependence reduce harm? A comparison of participants in six Canadian Managed Alcohol Programs with locally recruited controls. Presentation at 9th Managed Alcohol Programs Community of Practice Webinar, Victoria, British Columbia.

Urbanoski, K., Kenaszchuk, C., & Wild, T. (2016, June). A population-based investigation of the use of compulsory addiction treatment. Oral presentation at: 6th International Conference on Self-Determination Theory, Victoria, British Columbia.

Vallance, K., Romanovska, I., **Stockwell, T.,** Hammond, D., Rosella, L., Zuo, F., Simniceanu, A., White, C. & Hobin, E. (2016 June). Put a Label on It: Testing and refining content and design of enhanced labels on alcohol containers. The Kettil Bruun Society for Social and Epidemiological Research on Alcohol, May 30- June 3, 2016: Stockholm, Sweden.

Wallace, B., Pauly, B., Barber, K., & Patterson, J. (2016, November). BC's overdose public emergency: Impacts on shelters and services responding to homelessness and substance use in Victoria BC. Paper presented at the BC Non-Profit Housing Association's Affordable Housing Conference 2016, Vancouver, British Columbia.

Wild, C., MacPherson, D., **Belle-Isle, L.,** Cavalieri, W., Elliott, R., McBride, K., **Pauly, B.,** Strike, C., Tupper, K., Sinclair, C., Karekezi, K., Tan, B., Asbridge, M., Dell, C., Hathaway, A., Smith, C., & Hyshka, E.. (2016, May). Harm reduction policy across Canada: A descriptive analysis. Oral presentation at The International Society for the Study of Drug Policy Conference, Sydney, Australia.

CARBC Sponsored Conferences and Seminars

Public Seminars

MacDonald, M. (2017, February). *Not Just Blowing Smoke: Prevalence and Correlates of Vaping among Secondary School Students*. University of Victoria, Victoria, British Columbia.

Young, J. (2016, September). *Barriers to accessing methamphetamine treatment: A systematic review and meta-analysis*. Royal Jubilee Hospital, Victoria, British Columbia.

Borland, R. (2016, July) *The case for a harm reduction approach to tobacco control and the potential role of vapourised nicotine*. University of Victoria, Victoria, British Columbia..

Belle-Isle, L. (2016, June). *From one ally to another. Practice guidelines to better include people who use drugs at your decision-making tables*. Royal Jubilee Hospital, Victoria, British Columbia.

Selfridge, M. (2016, April). *Paper dissolves or dies, but Facebook is always there: Street-involved youth and digital technology*. Greater Victoria Public Library, Victoria, British Columbia.

Table 6: Performance Indicators for Key Result Area 4 (Dissemination)

	OBJECTIVES	PERFORMANCE INDICATORS
4.1	To publish research findings in international peer reviewed journal articles	<p>Number of articles published each year by CARBC researchers and students in peer reviewed journals</p> <p>Benchmark: 70 2016/2017: 100</p>
4.2	To publish research findings in book chapters, books and research monographs	<p>Number of book chapters, books or research monographs published by CARBC researchers and students each year</p> <p>Benchmark: 25 2016/2017: 27</p>
4.3	To disseminate research findings through reports, systematic reviews and other resources, nationally and internationally	<p>Number of reports, systematic reviews or other resources published each year</p> <p>Benchmark: 35 2016/2017: 38</p>
4.4	To achieve a high academic impact for CARBC addictions-related research so that it is well known, frequently requested and often cited internationally	<p>Number of citations in peer reviewed journals of research by CARBC scientists and graduate students per year</p> <p>Benchmark: 1,000 2016/2017: 2,363</p>
4.5	To conduct seminars, workshops, lectures and occasional conferences on related policy, practice and research	<ul style="list-style-type: none"> • Number of public research seminars, symposia, workshops 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 <p>Benchmarks: 5 / 25 / 35 2016/2017: 45/55/79</p>

“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

Our work continues to focus on three settings for knowledge mobilization: schools, campuses and communities. A key accomplishment was the completion of the Patients Helping Patients handbook. The CARBC knowledge mobilization team supported a group of opioid substitution therapy patients to write this guide for other patients. Ten thousand copies have been distributed and the demand for print copies is still high even though the resource is also available online.

In the school setting, work on iMinds continued with the development of 36 new classroom learning resources including a new line of gambling-related resources. Highlights from the campus setting included the development of a stakeholder engagement video displaying the work of 5 involved campuses and exploring the question of substance use culture change and publishing the first in a series of substance use policy discussion papers.

CARBC Assistant Director Dan Reist and Al Fowler deliver copies of their handbook, “Patients Helping Patients Understand Opioid Substitution Treatment,” to the Connections clinic in Vancouver’s Downtown Eastside. (Photo: Jeff Vinnick)



CURRENT PROJECTS

Alcohol and Other Drug Screening and Education

Investigators: Dyck, T. & Reist, D.

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

Background: Alcohol and other drug screening and education is an ongoing project aimed at increasing the reach of assessment tools and harm reduction information to help more people in BC take more control over their health. Promoting health through screening and education is in keeping with the recommendations in *Healthy Minds, Healthy People: A ten-year plan to address mental health and substance use in British Columbia*.

Among other recommendations, the publication encourages BC agencies to take action to improve the reach of self-management and supported self-management tools, prevent substance-related problems and reduce costs to government by screening for hazardous drinking, and encourage uptake of evidence-based substance use information through [heretohelp](#) and other reputable web portals.

Activities this year: In 2016-17 our activities included:

- writing a [blog posting](#) on [Matters of Substance](#) encouraging critical thinking about screening and health promotion
- providing perspective to three campuses in particular around a health promotion approach to doing screening and supporting harm reduction
- continuing to commend a motivational interviewing orientation to clinicians serving at the annual [Beyond the Blues](#) community outreach through which 180 individuals received alcohol or drug use screens at 70 community sites in BC and the Yukon
- maintaining our screening and brief intervention tools pages (805 visits; 2,263 downloads) and our [Alcohol Reality Check](#) online screening app (240 individuals completed the screen from January to March 2017; data for previous nine months is not available)



Building capacity for effective drug education

Investigators: Reist, D., Andrew, C., Reimer, B., Asgari, M., Bodner, N., Nicolussi, G., & Jackson, N.

Funding bodies: BC Ministry of Education

Background: The objective of this multi-year project was to develop a system by which a common understanding consistent with current provincial health and education policy and the skills necessary for effective implementation of drug education can be nurtured and sustained through structures and mechanisms within school districts, health authorities and communities.

The project recognized the existence of drug content expertise within the health system and education process expertise within the education system. Recognizing that education is largely relational and needs to promote inquiry and dialogue rather than didactic instruction, the project sought to maximize educational effectiveness by leveraging the capacity with health to support effective pedagogical efforts within education.

During the period of the project, a significant re-design of the BC curriculum was being undertaken by the BC Ministry of Education. This re-design, in many ways, was aligned with the efforts this project was pursuing relative to drug education (emphasis on inquiry and competency development).

Activities this year: During the first three months of fiscal year 2016-17, as the project was winding down, activities included:

- Completing the development of classroom resources informed by the project
- Conducting key informant interviews with the implementation partners in nine BC school districts
- Participating in a multi-project Knowledge Transfer and Exchange (KTE) event involving other Health Canada funded projects in BC

Outputs from this project have been rolled into the [Helping Schools](#) and [iMinds](#) collections of professional learning and classroom resources. Key lessons learned from the project include:

- When working with communities we must work within their timeframe and context. This often takes more time than we anticipate for plans to be developed and implemented. Other priorities and complications often require attention. Patience and flexibility are critical to success.
- Relationships matter. Where good working relationships were already in place (e.g., between health and education; between administration and teachers) things progressed much more quickly than when they were not. Building understanding and positive relationships is an essential part of the work.
- Changing community systems is a lot like motivating personal change. Open questions, active listening, developing discrepancy, rolling with resistance and empowering others are transferable skills that work in both environments.

CARBC Helping Schools
Program Consultant Cindy
Andrew (L) works with
partners to help parents
address substance use
with their kids



iMinds drug education

Investigators: Reist, D., Asgari, M., Andrew, C., Bodner, N., Nicolussi, G., & Reimer, B.

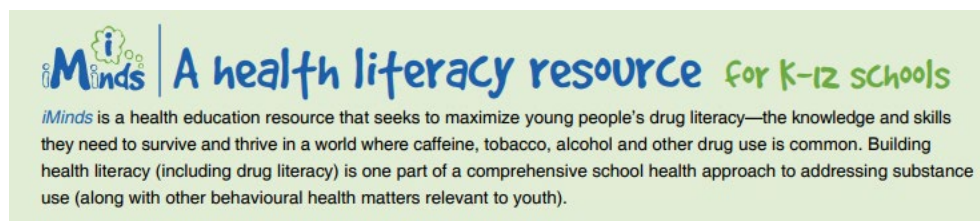
Funding body: BC Ministry of Health

Background: This project develops classroom learning resources to promote effective drug education. This focuses on maximizing young people's drug literacy—the knowledge and skills they need to survive and thrive in a world where caffeine, tobacco, alcohol, and other drug use are common. The goal is to encourage students to both express and think critically about their current drug-related beliefs, attitudes and behaviours.

Drugs touch virtually every aspect of human life. The opportunities for education are equally diverse. *iMinds* consists of a wide range of learning ideas that can be easily adapted and used in various curricular areas such as Social Studies, English Language Arts, Science and other subjects and settings. Resources are available in both English and French.

Activities this year: In 2016-17 our activities included:

- Consultation with School District #42 (Maple Ridge) and Alouette Addiction Services to develop lesson ideas and learning resources to support their joint initiative designed to build teacher capacity in delivering effective drug education in elementary schools
- Development of 21 new (total 45) drug-related [classroom learning resources](#)
- Further development of the online [Drug History Timeline](#)



iMinds gambling education

Investigators: Reist, D., Andrew, C., Asgari, M., Bodner, N., Nicolussi, G., & Reimer, B.

Funding body: BC Ministry of Justice

Background: This project develops classroom learning resources to promote effective gambling education. It sets out to improve students' gambling literacy—the knowledge and skills they need to survive and thrive in a world where gaming and gambling are common recreational activities. The goal is to encourage students to both express and think critically about their current gambling-related beliefs, attitudes and behaviours.

Gaming and gambling touch virtually every aspect of human life. The opportunities for education are equally diverse. *iMinds* consists of a wide range of learning ideas that can be easily adapted and used in various curricular areas such as Social Studies, English Language Arts, Mathematics and other subjects and settings.

Activities this year: In 2016-17 our activities included:

- Development of 15 new (total 20) gambling-related [classroom learning resources](#)
- Development of a professional learning package for gambling prevention support workers

Opioid overdose crisis response

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

Funding body: BC Ministry of Health

Background: The Opioid Overdose Crisis Response projects were a collection of initiatives aligned with the priorities of the Joint Task Force on Overdose Response. At the direction of the BC Ministry of Health, funding from the "Preventing Harms from Substance Use" contract was re-directed toward these projects.

Activities this year: In 2016-17 our activities included:

- Preparing a set of [parenting articles](#) for HealthLinkBC
- Working with a group of opioid substitution therapy (OST) patients to complete the [Patients Helping Patients](#) handbook
- Providing consultation to the CAI OPEN (Community Action Initiative Overdose Prevention and Education Network) project
- Preparing a draft [community dialogue guide](#)
- Responding to the media and providing balanced information on prevention and health promotion in light of the opioid overdose crisis
- Assisting in the preparation of a community overdose prevention guide
- Providing consultation and support to community-based systems (including schools) on responding to the opioid overdose crisis



A Public Health Guide to Developing a COMMUNITY OVERDOSE RESPONSE PLAN



Bernie Pauly, RN, Ph.D, Paul Hasselback, MD, MSc, FRCPC, Dan Reist, MTh

Opioid dialogues

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

Funding bodies: BC Ministry of Public Safety and Solicitor General

Background: CARBC has been provided with funds from the Ministry of Public Safety and Solicitor General as part of the province's commitment under the Joint Task Force on Overdose Response to develop and administer a grant program to support community dialogues.

Dialogue is a method of communication that involves two-way conversation where people not only speak to each other but also really listen. This kind of listening involves empathy. Each partner in a dialogue is curious about the experiences of the other partners – about their assumptions, beliefs and values. The goal is to leave the conversation with a better understanding.

Dialogue to address the opioid crisis is far more than talking about drugs. Since addiction is not simply about drugs but results from a breakdown in the fabric or connectedness of human community, the dialogue needs to help us understand each other and build social relationships that support individual needs, preferences and autonomy. The breakdown of this integration of the community and all its members is at the root of addiction. Dialogue is an important tool in re-building this integration.

Activities this year: Our efforts in 2016/17 focused on

- Preparing a call for community coalitions from every region of the province to submit a letter of interest in engaging their community in dialogue about opioid and other drug use
- Developing a [guide to community dialogue](#) and preparing a webinar on the topic



Changing the Culture of Substance Use on Campus (CCSU)

Investigators: Remocker, C., Dyck, T., Reist, D., Joosse, S., Streach, S. and Morris, J.

Funding body: BC Ministry of Health

Background: Nested within the [Healthy Minds | Healthy Campuses](#) provincial community of practice project, Changing the Culture of Substance Use is a project that works with post-secondary institutions to assess and address the factors that promote healthier relationships with substances on campus. The project involves developing campus networks that are curious about the role substances play on campus and how we can shape a positive campus culture with staff and students alike. The project works with key campus stakeholders to develop an array of vibrant resources and tools housed in an online social learning repository for promoting campus-wide wellness using a socio-ecological approach.

Activities this year: In 2016-17 our activities included:

- co-fostering capacity building with leaders in 15 post-secondary institutions across BC to collaborate in developing substance use strategies that support the health and well-being of all campus members
- co-creating a CCSU project stakeholder engagement video, displaying the work of 5 involved campuses and exploring the question of substance use culture change
- co-developing, co-creating and publishing 3 evidence-informed tools and the first in a series of substance use policy discussion papers - for a total of 5 promising practice guides, 6 supportive tools for campuses and 9 national webinars shared on the Healthy Minds|Healthy Campuses (HM|HC) website
- Attendance and presentation on campus-based project work at 2 national conferences
- supporting campus-based health promotion, community dialogue and immediate responses to the fentanyl crisis

CARBC Assistant Director
Dan Reist in a screenshot
from the CCSU video,
“Under our Influence:
Shifting a Culture”



Gambling online resource

Investigators: Reist, D., Asgari, M., Reimer, B., & Nicolussi, G.

Funding bodies: BC Ministry of Justice

Background: This project, funded by the BC Ministry of Justice, involves developing and producing an online gambling health promotion resources in consultation with the BC Responsible and Problem Gambling Program. The resource is intended to meet the needs of British Columbians interested in accessing educational and supportive materials to help them manage their lives relative to gambling and to access resources in their communities and through the treatment system as needed.

Activities this year: This project began at the very end of the fiscal year. Activities in 2016-17 included:

- Consultation with the BC Responsible and Problem Gambling Program
- Developing a partnership with Walden Media Group to assist in developing the resources

Healthy Minds | Healthy Campuses

Investigators: Morris, J., Reist, D., Remocker, C., Dyck, T., Joosse, S. and Streach, S.

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



Background: [Healthy Minds](#) | [Healthy Campuses](#) is a province-wide network promoting campus mental health and reducing risky substance use. The project is based on the notion that success in a post-secondary institution, as in any workplace, requires attending to the collective well-being of the campus itself as well as the well-being of individuals.

Activities this year: The project is co-led with the Canadian Mental Health Association, BC Division. Our contribution to this project in 2016-17 has involved:

- Ongoing refinement and development of the new community website, communication platform and resource repository
- Co-leading and developing several nationally-attended community webinars and additional synchronous learning events centred on substance use, particularly alcohol and cannabis, and community engagement
- Assisting in planning and supporting the development of substance use-related content for the annual community Summit, held in April 2017
- Meeting and working with individual campuses in BC to develop strategies and tools for addressing substance use concerns, particularly alcohol, and encourage uptake of a socio-ecological approach to responding to challenges around inappropriate substance use and related behaviours
- Identifying and articulating evidence-based promising practices around core facets of campus health promotion (e.g., health capacity, inclusion and connectedness, risk management, and regulation and support)
- Providing consultation and developing tools and resources to support implementation of these promising practices, as well as links to relevant literature articles

healthycampuses.ca/summit/2017

On April 3 and 4, 2017, the Healthy Minds | Healthy Campuses annual Summit engaged members of the BC post-secondary community and beyond in the theme:

Ideas to Action: Strategies for Systemic Change and Measuring Impact

And, for the first time, members of the K-12 community were invited to help bridge the gaps in mental health and substance use services and support.

Highlights by the numbers

194 participants	20 BC public post-secondary institutions	19 community and government organizations	8 school districts, Boards, and K-12 stakeholders	28 sessions
---------------------	---	--	--	----------------



Healthy Relationships with Food and Substances on Campus

Investigators: Reimer, B., Remocker, C., Dyck, T., Reist, D., Streach, S. Hudson, M., Hine, S., and Kohl, L.

Funding body: BC Mental Health Society Branch

Background: This project aims to develop a strategy for addressing the intersection of eating difficulties and substance use problems in the post-secondary setting. The project involves bringing campus stakeholders together to discuss the complex intersections of food and substance use on campus, and to identify prevention and intervention strategies to reduce harm and promote health. While students often experience a continuum of healthy to unhealthy relationships with food and substances, the co-occurrence of “binge eating” and “binge drinking” is associated with increased risk and harm. In fact, many of the behaviours traditionally associated with unhealthy patterns of alcohol consumption (especially problems at work or school and regretted sexual activity) are increased when “binge eating” and “binge drinking” occur together.

Activities this year: Our efforts in 2016/17 focused on

- connecting with campus stakeholders, including residence, health promotion and food services personnel, to explore their interest in participating in a collective discussion toward influencing policy around food and substance use in the post-secondary context,
- bringing campus stakeholders together to discuss: 1) food and substance use policy work they would be interested in pursuing in their own campus context, 2) how the project team might support them, and 3) ways colleagues from fellow campuses might support each other, and
- planning, jointly with campus colleagues, a food and substance use dialogue session at the 2017 Healthy Minds | Healthy Campuses Summit.

Helping Communities

Investigators: Reist, D., Reimer, B., Dyck, T., Andrew, C., Bodner, N. and Souza, E.

Funding body: BC Ministry of Health

Background: Helping Communities and Supporting Systems is an ongoing project aimed at promoting a health promotion approach and helping organizations and other stakeholders develop tools and mechanisms for addressing the impact of alcohol and other drug use on individuals, families and neighbourhoods in BC. This ongoing project involves working with communities and systems throughout the province to promote health and well-being relative to substance use. The project revolves around the notion that drug-related problems in our society are more than a matter of personal responsibility. An individual's choices about alcohol and other drugs—including when, where and how to use them—are strongly influenced by social and environmental factors in their community. The project focuses on four core areas of health:

- Health capacity: shaping the community environment to make it conducive to health as well as developing the knowledge and skills that allow individuals to take control of their own health
- Inclusion and connectedness: offering a variety of means and contexts to help citizens feel connected to each other and to the community
- Managing risk: promoting safer contexts and less risky behaviour among individuals
- Interventions: regulating the community environment and supporting individual behaviour change

Activities this year: Activities in 2016-17 involved providing consultation and support to a wide range of community members and agencies and participation on:

- BC Mental Health and Substance Use Health Literacy Network (member)
- BC Partners for Mental Health and Addictions Information (member)
- BC School-Centred Mental Health Coalition (member)
- Child and Youth Mental Health and Substance Use Collaborative (co-chair of Substance Use Faculty)
- Mandatory Display Provincial Advisory Committee, Ministry of Finance
- Public Health Association of BC (board member, co-chair of Capacity Building Committee)

Helping Schools

Investigators: Reist, D., Reimer, B., Andrew, C. Nicolussi, G. and Bodner, N.

Funding bodies: BC Mental Health Society Branch, BC Ministry of Health, BC Ministry of Finance and Health Canada

Background: [Helping Schools](#) is an ongoing project aimed at assessing evidence, identifying promising practices, developing resources to support effective responses to substance use (and other potentially addictive behaviours), and providing consultation and support to educators and their partners—parents, health professionals and others in the school community. These activities support comprehensive school health, an ecological approach that does not focus simply on “fixing” students but aims to change the school environment and actively engage students in the learning process. Rather than relying solely on a drug education program to teach children how to make healthy choices, the whole-school approach encourages the school itself—its structures, policies, procedures, staff and partners—to operate in a healthy way and thereby both model and promote “health.” Although comprehensive school health programs have components that address individual competence and resilience, they also focus on changing the culture of the school to encourage greater school attachment and involvement. Together, these factors have been shown to reduce alienation from the school and from the values of the larger society, improve academic performance and increase health and wellness.



Activities this year In 2016-17 our activities included:

- A focus on professional learning with the development of two self-guided inquiry group guides for teachers and other educators. One guide on engaged philosophical inquiry and the other on building resilience, both will be published soon
- Development of a peer mentoring guide, also coming soon
- Providing consultation and support to teachers and other school professionals and to school districts and their partners throughout BC

Here to Help Information Products

Investigators: Reimer, B., Reist, D. & Remocker, C.

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



Background: Here to Help is an ongoing project aimed at helping all people in the province learn how to better prevent and manage mental health and substance use issues—at home, in the workplace and in the community. Our part in the project involves developing and updating substance use information products for distribution on the [heretohelp](#) website. These activities support health literacy, the knowledge and skills people need to maximize their health within their environments. Drug literacy, a type of health literacy, means imparting the knowledge and skills needed to effectively navigate a world in which psychoactive substances are present and commonly used. This project therefore plays a key role in helping people in the province make better decisions about substance use in the context of their own unique situations.

Activities this year: Our efforts in 2016/17 focused on

- engaging with individuals from multicultural organizations to understand needs related to linguistically and culturally appropriate mental health and substance use resources for BC residents whose primary language is not English and, begin to identify priorities, strategies and formats for resources,
- developing content for the “Ask Us” section of the website: 1) How do I know if I’m drinking too much? 2) If cannabis is dangerous, why are we legalizing it? and 3) How can I convince my kids not to use drugs?
- contributing two resources to the website: *Patients Helping Patients Understand Opiate Substitution Treatment* and a French translation of *Understanding Substance Use: A health promotion perspective*, and
- creating a consultation draft of *Let’s Talk About Drugs: A guide to community dialogue*.

Visions: BC’s Mental Health and Addictions Journal

Investigators: Reimer, B. and Reist, D.

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

Background: This is an ongoing project aimed at increasing the representation of substance-related information in the award-winning quarterly magazine. It is written by and for a range of BC audiences: people who have experienced mental health or substance use problems, their family and friends, service providers, community advocates, leaders and decision-makers. *Visions* is a central knowledge exchange vehicle of the BC Partners for Mental Health and Addictions Information. The magazine creates a place where many perspectives on mental health and substance use issues can be heard. As one of seven BC partners, CARBC contributes articles that focus on substance use and socio-ecological approaches to understanding, addressing and managing substance use issues. This project therefore plays a key role in helping to build a shared understanding of substance use from a health promotion perspective.

Activities this year: Our efforts in 2016/17 focused on

- increasing the representation of information about substance use in the journal,
- contributing to the Editorial Board for the four issues produced this year,
- providing articles for three of the issues, and
- promoting the journal through our networks.

New or Revised Health Promotion Resources

Understanding Substance Use: a health promotion perspective

Memberships

Andrew, C.	BC School-Connected Mental Health Coalition (BCSCMHC)
Andrew, C.	BCSCMHC Summer Institute on Promoting the Mental Health of Young People
Andrew, C.	BC School Connectedness Project
Belle-Isle, L.	Chair, National Steering Committee for the Canadian Drug Policy Coalition
Belle-Isle, L.	Canadian Institutes of Health Research (CIHR) Review Committee Member, HIV/AIDS Community-Based Research Program
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.	HerWay Home Community Advisory Committee, Victoria, BC
Benoit, C.	HerWay Home Communications Committee, Victoria, BC
Benoit, C.	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
Benoit, C.	Member, Canadian Academy of Health Sciences Victoria Chapter, University of Victoria, Victoria, BC
Benoit, C.	Member of Expert Review Panel, Strategic Clusters program, Québec Research Fund - Society and Culture (FRQSC), Montreal, Quebec
Brubacher, J.	Chair, British Columbia Road Safety Strategy, Research and Data Committee
Brubacher, J.	Doctors of British Columbia, Emergency Medical Services Committee
Callaghan, R.	University of Northern BC Associate Research Ethics Board member,
Callaghan, R.	University of Northern BC Animal Care and Use Committee (ACUC)
Callaghan, R.	University of Northern BC Branch Regional Data Centre Steering Committee Member
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
Cherpitel, C.	International Network on Brief for Alcohol Problems Committee on Conflict or Interest
Dyck, T.	Healthy Minds Healthy Campuses Lead Team
Jansson, M.	Capital Region Action Team on Sexually Exploited Youth (CRAT)
Leadbeater, B.	Canadian Psychological Association
Leadbeater, B.	Society for Research in Child Development.
Leadbeater, B.	Society for Research on Adolescence. Chair, Social Policy Awards Committee
Macdonald, S.	Kettil Bruun Society for Social and Epidemiologic Research on Alcohol
Pauly, B.	Steering Committee Member, Canadian Observatory on Homelessness
Pauly, B.	Greater Victoria Coalition to End Homelessness Governance Review
Pauly, B.	Steering Committee, Pacific Housing Research Network
Pauly, B.	Island Health Mental Health and Substance Use Committee

Pauly, B.	Member, Housing First Regional Design and Integration Team, Greater Victoria Coalition to End Homelessness.
Pauly, B.	Board Member, Society for Living Illicit Drug Users
Pauly, B.	Member, Abstract Review Committee, Symposium on Housing Research in BC, Pacific Housing Research Network
Pauly, B.	Member, Registered Nurses of Ontario Supervised Injection Services Best Practices Guidelines Panel
Reimer, B.	BC Mental Health and Substance Use Provincial Health Literacy Network
Reimer, B.	BC Partners for Mental Health and Addictions Information
Reimer, B.	Substance Abuse Librarians and Information Specialists
Reist, D.	BC Health Literacy Network
Reist, D.	Child and Youth Mental Health and Substance Use Collaborative
Reist, D.	Mandatory Display Provincial Advisory Committee, Ministry of Finance
Roth, E.	Vice-Chair, Human Ethics Committee, Office of Research Services
Slaunwhite, A.	Academic Advisory Board, Child and Youth Advocate of New Brunswick
Stockwell, T.	National Alcohol Strategy Advisory Committee
Stockwell, T.	Scientific Advisory Board, Alcohol Research Group, Emeryville, CA
Stockwell, T.	World Health Organization Technical Advisory Group on Alcohol and Drug Epidemiology
Stockwell, T.	Canadian Institute for Health Information, Alcohol Indicator Advisory Group
Vallance, K.	Alberta Municipal Alcohol Policy Project Advisory Board
Vallance, K.	Drug Overdose and Alert Partnership
Woodin, E.M.	American Psychological Association
Woodin, E.M.	Association for the Advancement of Behavioral and Cognitive Therapies
Woodin, E.M.	Canadian Psychological Association
Woodin, E.M.	Society for Prevention Research
Woodin, E.M.	Society for a Science of Clinical Psychology
Woodin, E.M.	Board Member, LifeRing Canada Peer Support for Secular Recovery
Zhao, J.	Kettil Bruun Society for Social and Epidemiological Research on Alcohol

Table 7: Performance Indicators for Key Result Area 5 (Knowledge Mobilization)

	OBJECTIVES	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 in Canada and internationally	<ul style="list-style-type: none"> Number of projects in which CARBC members collaborate with policy makers or practitioners Number of policy proposals contributed to by CARBC members each year Number of provincial or national committees, advisory boards, communities of practice or other such bodies on which CARBC members are active <p><i>Benchmark:</i> 20 / 5 / 25 2016/2017: 23 / 21 / 51</p>
5.2	To develop and promote resources with the potential to make direct contributions to policies, programs or service delivery systems in Canada and internationally	<ul style="list-style-type: none"> Number of resources completed in any one year <p><i>Benchmark:</i> 30 2016/2017: 65</p>
5.3	To provide broad access to balanced factual information on substance use and related harms and health promotion approaches through a variety of knowledge exchange strategies	<ul style="list-style-type: none"> Number of visits to CARBC websites each year Number of presentations/workshops/displays each year Number of media interviews or citations resulting from CARBC activities each year Number of articles (blogs, magazine, newsletter, OpEd, policy briefs, etc.) published each year Number of consultations provided each year <p><i>Benchmarks:</i> 30,000 / 15 / 150 / 15 / 15 2016/2017: 31,284 / 50+ / 545 / 29 / 80</p>



**University
of Victoria**

**Centre for Addictions
Research of BC**

Research and Administration Office **Vancouver Office**

University of Victoria	909-510 Burrard St
PO Box 1700 STN CSC	Vancouver BC V6C 3A8
Victoria BC V8W 2Y2	Phone: 604.408.7753
Phone: 250.472.5445	Fax: 604.408.7731
Fax: 250.472.5321	Email: carbcvan@uvic.ca
Email: carbc@uvic.ca	

www.carbc.ca



[carbc_uvic](#)



[carbc.uvic](#)

