OUR MISSION

To be an internationally recognized institute 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 CISUR will continue to be guided by the following principles:

• Collaborative relationships
  Dynamic, collaborative relationships are essential for maintaining relevance to the multifaceted 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, so strategies are needed to reduce harmful consequences in addition to those that aim to directly reduce or prevent high-risk behaviours.

• Informed public debate
  Commitment to informing public debate to achieve effective public policy on substance use and addictions through the communication of research findings is required.
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Message from the Advisory Board Chair

Despite the many challenges in a year dominated by COVID and also, not coincidentally, marked by tremendous and increasing substance use-related problems in British Columbia and throughout Canada, I am pleased to report that CISUR continues to be a strong leader in research, education and public engagement around the prevention and mitigation of harms from substance use.

CISUR’s work during COVID has been manifested in a variety of ways, including harm reduction activities to combat rapidly rising opioid overdoses, documenting relationships between alcohol policy relaxations, increased alcohol consumption and incident COVID cases, and studying the growth of the regulated B.C. cannabis market.

Beyond COVID, CISUR Scientists have continued to be active in applying for and receiving funding to do cutting edge and impactful research across a variety of substances in the areas of epidemiology, prevention and population health, harm reduction, treatment systems, social determinants of health and health equity. We are welcoming a new faculty member, Jaime Arredondo, this summer and have had existing faculty members and staff recognized for their outstanding work. CISUR is in solid financial condition as well.

In last year’s report, I remarked on the then-anticipated conclusion of Tim Stockwell’s remarkable tenure as CISUR Director. This came to pass, with Tim still very actively engaged as a Scientist and leading the charge on a variety of projects. I’m also happy to report that CISUR’s new Director, Tim Naimi, made it over the Canadian border last August. I wish him all the best for a happy and productive term.

As in past years, I want to offer my deep thanks to members of our Advisory Board who offer their time and expertise in helping me and CISUR navigate our way in an effort to do great research work and to maximize the benefit of that work locally and worldwide. Here’s to a hopefully great year ahead!

Michael J. Prince, Ph.D.
Lansdowne Professor of Social Policy, University of Victoria
Chair, CISUR Advisory Board
Message from the Director

What a year for the world, and for CISUR. During the 2020-2021 fiscal year, the COVID-19 epidemic and its many sequelae reverberated throughout British Columbia, the country, and the world, and continue to do so.

Other than health outcomes, including deaths, caused directly by COVID, it is arguable that some of the largest health and public health impacts of the epidemic have been felt in substance use. There has been a massive spike in overdose deaths due to a disrupted and poisoned drug supply and the disruption of social structures including treatment and prevention services, among other factors. The magnitude of this crisis has clearly dwarfed the response to it. There have also been increases in alcohol consumption, hospitalizations and deaths, and loosening of a number of effective population-based alcohol policies that seem likely to persist, and therefore adverse public health impacts long into the future.

Despite the logistical challenges, CISUR faculty and staff have concluded a successful year of impactful research work in substance use and harms and their contributing factors. Papers, grants, contracts, and awards reflecting fine work have been complemented by research translation activities such as community-based interventions and policy outreach activities. Examples of important work during the year include documenting use and harms of various substances, work on a BC-wide safer supply evaluation, the Vancouver Island Drug Checking project, managed alcohol program research dissemination, studying effects of alcohol consumption on COVID, and leading policy studies in alcohol and cannabis.

On a personal note, I am so appreciative of the opportunity to come to CISUR as its director. When our family came to Victoria on sabbatical in the fall of 2017, I was captivated by the work and mission and people that I encountered here. CISUR’s research spans the gamut from public policies and preventions to harm-reduction activities and clinical treatment services. What I think is most important about CISUR is that most of our research takes a systems approach to preventing and reducing the harms from substance use. All of us, through our varied approaches and different areas of interest, are rooted in the idea of trying to expand knowledge to make things better, not just for individuals but for the broader community. We are mindful that our research has relevance for policymaking, social determinants of health, and improving the dignity and well-being of people’s lives.

This year also marked the close of Tim Stockwell’s incredible run as CISUR’s founding director, as he stepped back after 16 years of service in this role. Through his vision, leadership, intelligence, charm and tenacity, he built CISUR into the remarkable community of mission-driven researchers that it is today. We are fortunate that he remains here as one of our distinguished Scientists. On behalf of his colleagues and friends at CISUR, we thank him for his incomparable service and ongoing contributions to our Institute.

Timothy S. Naimi, M.D., M.P.H.
Director, Canadian Institute for Substance Use Research (CISUR)
Professor, Department of Public Health and Social Policy
University of Victoria
Directors and Faculty

Dr. Timothy Naimi
Director, Scientist (Public Health & Social Policy)

Dr. Tim Stockwell
Scientist (Psychology)

Dan Reist
Assistant Director for Knowledge Exchange

Dr. Cecilia Benoit
Scientist (Sociology)

Dr. Russ Callaghan
Scientist (Professor, Northern Medical Program, UNBC)

Dr. Marilou Gagnon
Scientist (Nursing)

Dr. Mikael Jansson
Scientist (Sociology)

Dr. Marjorie MacDonald
Scientist (Nursing)

Dr. Scott Macdonald
Scientist (Health Information Science)

Dr. Bernie Pauly
Scientist (Nursing)

Dr. Karen Urbanoski
Scientist (Public Health & Social Policy)

Dr. Bruce Wallace
Scientist (Social Work)

Dr. Jinhui Zhao
Scientist

Dr. Gordon Barnes
Professor Emeritus (Child and Youth Care)
Our People & Partners

Staff (Victoria)

Stephanie Arlt
Research Assistant

Jarred Aasen
Research Assistant

Shawn Belcourt
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Cedar Bowers
Transcriptionist

Meaghan Brown
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Piotr Burek
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Fred Cameron
Community Research Assistant

Laura Cartwright
Community Research Assistant

Sam Churchill
Research Assistant

John Dorocicz
IT Support and Programming

Amanda Farrell-Low
Communications Officer/Assistant to the Director

James Fraser
Research Assistant

Sybil Goulet-Stock
Research Assistant

Brittany Graham
Research and CoP Coordinator

Daniel Gudiño
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Priscilla Healy
Research Assistant

Katherine Hogan
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Abby Hutchison
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Jeremy Kalicium
Research Assistant

Jenn Keogh
Research Assistant

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Rebecca Louw
Research Assistant

Jenny McDougall
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Phoenix Beck McGreevey
Community Research Assistant

Becky McLeod
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Celeste Macevicius
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Renay Maurice
Research Assistant

Sydele Merrigan
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Lacey Mesley
Research Assistant
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Emily Nichol  
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Alayna Payne  
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Joshua Pelletier  
Community Research Assistant

Deidre Rautenberg  
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Michaela Smith  
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Ben Stevenson  
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Ginger Sullivan  
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Joanne Thompson  
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Roisin Unsworth  
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Kate Vallance  
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Thea van Roode  
Research Coordinator

Julia Vander Heiden  
Research Assistant

Laura Vetrone  
Research Assistant
Staff (Vancouver)

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Research Associate

Dr. Tim Dyck  
Research Associate

Gaëlle Nicolussi Rossi  
Research Associate

Dr. Trudy Norman  
Research Associate

Nicole Pankratz  
Research Assistant

Cathy Spence  
Assistant to Dan Reist

Post-Doctoral Fellows

Dr. Kiffer Card  
(Public Health & Social Policy)

Dr. Gillian Kolla  
(Public Health)

Dr. Jane McCall  
(Nursing)

Dr. Marion Selfridge  
(Social Dimensions of Health)

Dr. Adam Sherk  
(Social Dimensions of Health)
Advisory Board

Dr. Bonnie Henry  
Provincial Health Officer, BC  
Ministry of Health

Dr. Brian Emerson  
Deputy Provincial Health Officer (acting), BC Ministry of Health

Dr. William Kerr  
Senior Scientist, Alcohol Research Group, Oakland, California

Gina McGowan  
Director, Research Translation and Knowledge Mobilization, Substance Use Policy, BC Ministry of Mental Health and Addictions

Dr. Cynthia Milton  
Associate Vice-President, Office of the Vice-President Research, University of Victoria

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CEO, Canadian Centre on Substance Use and Addiction, Ottawa, Ontario

Dr. Michael Prince, Chair  
Lansdowne Professor of Social Policy, University of Victoria

Sandra Richardson  
Chief Executive Officer, Victoria Foundation

Rae Samson  
Administrator, BC Interior Health Authority
**Collaborating Scientists**

**Dr. Brittany Barker**  
Health System Impact Fellow, First Nations Health Authority

**Dr. Jeffrey Brubacher**  
Emergency Physician and Researcher, Vancouver General Hospital

**Dr. Jane Buxton**  
Professor, School of Population and Public Health, University of British Columbia; Physician Epidemiologist, Harm Reduction Lead, BC Centre for Disease Control

**Dr. Erin Hobin**  
Scientist, Public Health Ontario

**Dr. Nathan Lachowsky**  
Assistant Professor, School of Public Health and Social Policy, University of Victoria

**Dr. Bonnie Leadbeater**  
Professor, Department of Psychology, University of Victoria

**Dr. Doug Magnuson**  
Professor, School of Child and Youth Care, University of Victoria

**Dr. Lenora Marcellus**  
Associate Professor, School of Nursing, University of Victoria

**Dr. Sana Shahram**  
Assistant Professor, School of Nursing, UBC Okanagan

**Dr. Amanda Slaunwhite**  
Post-Doctoral Fellow, Department of Sociology, University of New Brunswick

**Dr. Gerald Thomas**  
Director, Alcohol & Gambling Policy, Healthy Populations and Development, BC Ministry of Health
Research Affiliates

Clifton Chow
Research Coordinator, Youth Addictions, Vancouver Coastal Health Authority

Alissa Greer
BC Centre for Disease Control Harm Reduction Program Peer Engagement & Evaluation Project

Kathleen Perkin
Manager, Harm Reduction Policy, BC Ministry of Health

Dr. Rachel Phillips
Executive Director, Peers Victoria Resources Society

Dr. Diane Rothon
Physician, Drug Treatment Court

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

Dr. Zach Walsh
Co-Director, Centre for the Advancement of Psychological Science & Law

Ashley Wettlaufer
Policy Officer, Centre for Addiction and Mental Health & Canadian Centre on Substance Abuse

Dr. Erica Woodin
Associate Professor, Department of Psychology, University of Victoria
Graduate Students

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Social Dimensions of Health Program (MA), UVic

Katrina Barber
Social Dimensions of Health Program (MA), UVic

Meaghan Brown
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Hannah Dalton
School of Social Work (MSW), UVic

Kelly Davidson
School of Health Information Science (MSc), UVic

Samantha Davis
School of Social Work (MSW), UVic

James Fraser
Social Dimensions of Health Program (MA), UVic

Sybil Goulet-Stock
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Peter Greenwell
Department of Sociology (PhD), UVic

Alissa Greer
Interdisciplinary Studies (PhD), University of British Columbia

Daniel Gudiño
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Emily Shaw
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Ginger Sullivan
School of Nursing (PhD), UVic

Gioi Tran Minh
Social Dimensions of Health (MA), UVic

Roisín Unsworth
Department of Sociology (PhD), UVic

Laura Vetrone
School of Child and Youth Care, (PhD), UVic

Undergraduate Students

Lindsey McCullough
Department of Psychology, UVic

Sebastian Santana
Department of Psychology, UVic
COLLABORATING CENTRES

- Canadian Centre on Substance Use and Addiction (CCSA), Ottawa, ON
- Centre for Addiction and Mental Health, Institute for Mental Health Policy Research (CAMH), Toronto, ON
- Alcohol Research Group (ARG), National Alcohol Research Center, Berkeley, CA, USA
- National Drug Research Institute (NDRI), Curtin University, Perth, WA, Australia
- Sheffield Alcohol Research Group (SARG), School of Health and Related Research, University of Sheffield, UK

COMMUNITY COLLABORATIONS

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

**Victoria:**
- Aboriginal Coalition to End Homelessness
- AVI Health and Community Services
- Burnside Gorge Community Association
- CRD Child and Youth Network
- CRD Healthy Schools
- Greater Victoria Coalition to End Homelessness
- Her Way Home
- Our Place Society
- Peers Victoria Resources Society
- SOLID Outreach Society
- South Island Community Overdose Response Network
- Together Against Poverty Society
- Tri-District (Sooke, Greater Victoria, Saanich School Districts) Interagency Committee
- Umbrella Society
- Victoria Cool Aid Society
- Victoria Native Friendship Network

**Vancouver:**
- Canadian Students for Sensible Drug Policy
- Dr. Peter Centre
- Drug Users Resource Centre (DURC)
- Eastside Illicit Drinkers Group for Education (EIDGE)
- Health Initiatives for Men (HIM)
- PACE Society
- Portland Hotel Society
- Positive Living Society of BC
- Providence Health Care
- Qmunity
- School District #39 (Vancouver)
- Vancouver Area Network of Drug Users (VANDU)
- Vancouver Coastal Health
- YouthCo AIDS Society
Our People & Partners

British Columbia:
- Abbotsford Fentanyl Working Group
- Addiction Matters Kamloops
- Agassiz-Harrison Healthy Communities Committee
- Boundary LAT (Grand Forks)
- Bridge for Health (through PHABC)
- BC Centre for Disease Control
- BC Centre for Excellence in HIV/AIDS
- BC Centre on Substance Use
- BC Healthy Living Alliance (through PHABC)
- BC Mental Health and Substance Use Collaborative
- BC Ministry for Attorney General
- BC Ministry for Mental Health and Addictions
- BC Ministry of Health
- BC Ministry of Justice
- BC Ministry of Public Safety & Solicitor General
- BC National Collaborating Centre for Aboriginal Health
- BC Poverty Reduction Coalition (through PHABC)
- BC School Centred Mental Health Coalition
- BC/Yukon Association of Drug War Survivors
- First Nations Health Authority (Interior)
- Fraser Health
- Healthy Schools BC
- Interior Health
- Northern Health Authority
- Office of the Provincial Health Officer, BC Ministry of Health
- Provincial Health Services Authority (PHSA)
- Public Health Association of British Columbia (PHABC)
- Richmond Addiction Services Society
- School District #42 (Maple Ridge)
- School District #68 (Nanaimo-Ladysmith)
- Vancouver Coastal Health Authority
- Vancouver Island Health Authority (VIHA)
- Women's Health Research Institute (Vancouver)
- CAN, Canadian Drug Policy Coalition
- CAN, Canadian Institute for Health Information (CIHI)
- CAN, Centre of Excellence on Women's Health (CEWH)
- CAN, MADD Canada
- CAN, National Collaborating Centre for Determinants of Health
- CAN, Public Health Agency of Canada, Ottawa
- AB, SHIFT Calgary
- ON, Art Manuel House, Toronto
- ON, Butterfly – Asian and Migrant Sex Workers Support Network
- ON, Canadian Mental Health Association, Sudbury Branch
- ON, Centre for Addiction and Mental Health, Toronto
- ON, City of Toronto/Seaton House Annex Harm Reduction Program, Toronto
- ON, Haven Toronto
- ON, Good Shepherd Ministries, Toronto
- ON, Haldimand-Norfolk Public Health
- ON, Ministry of Transportation, Government of Ontario
- ON, National Collaborating Centre for Methods and Tools
- ON, Ottawa Inner City Health, Ottawa
- ON, Propel Centre for Population Health Impact, University of Waterloo
- ON, Public Health, Ontario
- ON, Ryerson University
- ON, Sex Workers Advisory Network of Sudbury
- ON, Shelter House (Kwaé Kiwi Win Centre), Thunder Bay
- ON, Toronto Public Health
- ON, Wesley Urban Ministries, Hamilton
- NF, Safe Harbour Outreach Project
- NS, Dalhousie University
- NS, National Collaborating Centre for Determinants of Health
- NS, St. Francis Xavier University
- QC, Institut National de Santé Publique du Québec (INSPPQ)
- QC, National Collaborating Centre for Healthy Public Policy
- QC, Stella, l'aime de Maimie
- YK, Yukon Liquor Corporation

Rest of Canada:
- CAN, Canadian Association of People who use Drugs
- CAN, Canadian Centre for Justice Statistics (CCJS), Statistics Canada
- CAN, Canadian Centre on Substance Abuse, Ottawa
“To build Canadian infrastructure and capacity to conduct research and knowledge exchange that will increase understanding and support more effective responses to substance use.”

Capacity building was very successful this year. CISUR faculty earned 15 new or renewed competitive grants and contracts worth approximately $3.5 million. Overall, the centre had approximately $1.1 million in income (operating funds), including carry forward from the previous year. Approximately 70% of this was from grants and contracts, and 20% was from endowment and revenue with the remainder from other sources.
Successful applications to funding competitions

- **ALCOHOL CONSUMPTION AND THE COVID-19 PANDEMIC: SYNTHESISING KNOWLEDGE FOR POLICY ACTION**
  CIHR Knowledge Synthesis Grant, $47,791, 2020-2021

- **YOUTH-LED DEVELOPMENT OF LOWER-RISK CANNABIS USE GUIDELINES FOR INDIVIDUALS AGED 13 TO 18: A PATHWAY TO BETTER MENTAL HEALTH AND WELLNESS**
  CIHR Catalyst Grant: Cannabis and Mental Health, $114,810, 2021-2022

- **DRUG CHECKING: ENHANCING SCALABILITY TO EFFECT SYSTEMS CHANGE**
  Vancouver Foundation’s Scale grants, $300,000, 2021-2024

- **INTEGRATING A LOW-BARRIER DRUG CHECKING PLATFORM INTO PUBLIC HEALTH RESPONSES TO OVERDOSE**
  CIHR/NSERC’s Collaborative Health Research Projects (CHRP), $617,900, 2020-2023

- **A MIXED METHODS EVALUATION OF RISK MITIGATION MEASURES TO ADDRESS THE DUAL PUBLIC HEALTH CRISIS OF COVID-19 AND OVERDOSE IN BC**
  Ministry of Health, $10,000, 2020-2021

- **SPECTROSCOPY FOR THE MASSES: TRAINING THE COMMUNITY TO OPERATE DRUG-CHECKING TECHNOLOGIES AS A RESPONSE TO THE OVERDOSE CRISIS.**
  Tri-Agency Institutional Programs Secretariat’s New Frontiers in Research Fund – Exploration, $250,000, 2020-2022

- **ESTIMATES OF ALCOHOL-ATTRIBUTABLE DEATHS AND YEARS OF POTENTIAL LIFE LOST IN THE UNITED STATES AND ANALYTIC METHODS**
  Centers for Disease Control and Prevention, USD$241,670, 2020-2023

Commissioned contracts won and other grants

- **EFFECTS OF COVID-19 ON ALCOHOL AND CANNABIS SALES AND ALCOHOL- AND CANNABIS-RELATED HOSPITALIZATIONS AND DEATHS IN BC**
  BC Ministry of Health, $25,000, 2021

- **ESTIMATING THE IMPACT OF COVID-19 ON ALCOHOL CONSUMPTION ACROSS CANADIAN JURISDICTIONS**
  Public Health Agency of Canada, $40,000, 2020 – 2021

- **BCMHSUS EVALUATION DEVELOPMENT**
  Provincial Health Services Authority, $45,000, 2020-2021

- **RESOURCES TO SUPPORT MUNICIPAL LEADERS IN DECISION-MAKING RELATED TO THE UNSUPERVISED PUBLIC CONSUMPTION OF ALCOHOL ON MUNICIPAL PROPERTIES**
  BC Ministry of Health, $25,000, 2021

- **PROVINCIAL PEER NETWORK EVALUATION**
  BC Centre for Disease Control, $99,997, 2020-21

- **BC PARTNERS CONTRACT**
  Provincial Health Services Authority, $246,598, 2020-2021
Total Income for 2020/21

The figure below summarises the various sources of our income which come to a total of $5,093,346 million for the 2020/21 financial year. This includes funds carried forward from previous years. The main source of income was evenly divided between competitive research grant competitions and other grants and contracts, with the rest coming from core funding and knowledge exchange grants and contracts.

CISUR 2020/21 Revenue and Carry-Forward Summary
Table 1. Performance Indicators for Key Result Area 1: Building Capacity

<table>
<thead>
<tr>
<th>OBJECTIVES</th>
<th>PERFORMANCE INDICATORS</th>
</tr>
</thead>
</table>
| **1.1** To maintain or increase national and international funding for substance use and health research at CISUR | Maintain or increase funding for substance use research won by CISUR scientists from (a) Canadian and international peer reviewed sources (b) Canadian and international contracts  
Benchmarks: (a) $750,000 (b) $150,000 per annum  
2020/2021: (a) $1,772,496 (b) $1,779,776 |
| **1.2** To maintain or increase funding for knowledge exchange concerning substance use and health promotion at CISUR | Maintain or increase funding for substance use knowledge exchange held by CISUR from (a) Canadian and international peer reviewed sources (b) Canadian and international contracts  
Benchmarks: (a) $1,250,000 (b) $1,250,000 per annum  
2020/2021: (a) $246,598 (b) $223,197 |
| **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 | Maintain or increase number of funding applications for new research programs identified in one or more identified priority areas (see Key Result Area 2)  
Benchmarks: 15 applications  
2020/2021: 19 |
| **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 | Number of projects initiated that involve (a) community partners (b) researchers with relevant expertise who are new to substance use and addictions research  
Benchmarks: (a) 1 (b) 1  
2020/2021: (a) 1 (b) 3 |
“To capitalize on the resources of Canadian universities through the recruitment of high-calibre graduate and postdoctoral students from multiple relevant disciplines to the study of substance use, addiction and harm reduction.”

**Honours and Awards**

**Bernie Pauly**
- Canadian Public Health Association’s Ron Draper Health Promotion Award
- BC Health Care Awards’ Dianna Mah-Jones Award of Excellence in Person-Centred Care

**Kiffer Card**
- 2020 CIHR-IHSPR Rising Star Award

Fred Cameron from SOLID (left), CISUR’s Bernie Pauly (centre) and Heather Hobbs from AVI Health and Community Services receiving the 2020 BC Health Care Awards Dianna Mah-Jones Award of Excellence for the Island Health Scholar in Residence Program.
### Table 2. Performance Indicators for Key Result Area 2: Engaging Academic Expertise

<table>
<thead>
<tr>
<th>OBJECTIVES</th>
<th>PERFORMANCE INDICATORS</th>
</tr>
</thead>
<tbody>
<tr>
<td>To attract and retain high quality researchers from a broad range of disciplines to the BC substance use and addictions field</td>
<td>Maintain or increase number of (a) PhD qualified researchers and (b) postdoctoral fellows within CISUR each year</td>
</tr>
<tr>
<td></td>
<td>Benchmarks: (a) 12 (b) 3 2020/2021: (a) 12 (b) 4</td>
</tr>
<tr>
<td>To attract and retain high quality students from a broad range of disciplines to the BC substance use and addictions field</td>
<td>Maintain or increase number of CISUR graduate students under supervision per year</td>
</tr>
<tr>
<td></td>
<td>Benchmark: 25 2020/2021: 26</td>
</tr>
<tr>
<td>To provide training opportunities and programs for the development of additional research skills among CISUR staff, students and affiliates, taking advantage of existing opportunities through CIHR and research partners, nationally and internationally</td>
<td>Maintain or increase number of research staff and/or students attending conferences or training events</td>
</tr>
<tr>
<td></td>
<td>Benchmark: 15 2020/2021: 23</td>
</tr>
<tr>
<td></td>
<td>Contributions to graduate research training programs using substance use examples or content by CISUR faculty at UVic and other Canadian universities</td>
</tr>
<tr>
<td></td>
<td>Benchmarks: a) 5 courses taught b) 5 guest lectures presented 2020/2021: (a) 6 (b) 3</td>
</tr>
</tbody>
</table>
CISUR had a very strong and productive year in terms of high quality, impactful research. Major active research projects cover the areas of substance use epidemiology, the effect of policies and regulatory interventions, social determinants of health, harm reduction among those with lived or living experience and/or active substance use disorders, treatment systems, community engagement and knowledge translation products and evaluations. There are currently 35 active research projects among core CISUR faculty, and 23 additional major projects among CISUR-affiliated faculty and scientists. CISUR was also nominated to be a World Health Organization Collaborating Centre for alcohol policy, with approval and teaching/collaborative activities to begin in the late spring and summer of 2021.
RESEARCH PRIORITY 1

SUBSTANCE USE PATTERNS & RELATED HARMs

A. CISUR PROJECTS

- ASSESSING THE IMPACTS OF CANNABIS LEGALIZATION ON TRAFFIC-RELATED INJURIES AMONG YOUTH AND ADULTS IN ALBERTA AND ONTARIO
  
  Investigators: Callaghan, R., (PI), Stockwell, T., Macdonald, S., & Asbridge, M
  
  Funding body: Canadian Institutes of Health Research Catalyst Grant
  
  Duration of support: 2019-2021

- EFFECTS OF COVID-19 ON ALCOHOL AND CANNABIS SALES AND ALCOHOL- AND CANNABIS-RELATED HOSPITALIZATIONS AND DEATHS IN BC
  
  
  Funding body: BC Ministry of Health
  
  Duration of support: 2021

- THE ECONOMIC COSTS OF SUBSTANCE USE IN CANADA
  
  
  Funding bodies: Health Canada and Canadian Centre on Substance Use and Addiction
  
  Duration of support: 2016-2022

- INVESTIGATING SYSTEMATIC BIAS IN STUDIES OF HEALTH BENEFITS FROM MODERATE DRINKING
  
  Investigators: Stockwell, T., Britton, A., Naimi, T., Sherk, A., & Chikritzhs, T.
  
  Funding body: CISUR endowment fund

- IMPACT OF MARIJUANA POLICIES ON ALCOHOL USE AND ALCOHOL-RELATED MORTALITY
  
  Investigator: Naimi, T. (PI)
  
  Funding body: National Institute on Alcohol Abuse and Alcoholism
  
  Duration of support: 2018-2022

- A REVIEW OF THE EVIDENCE REGARDING ALCOHOL AND COVID-19
  
  Investigators: Andreasson, S., Chikritzhs, T., Danghardt, F., Holder, H., Naimi, T., Sherk, A., & Stockwell, T.
  
  Funding body: Movendi International
  
  Duration of support: 2020-2021

- A POPULATION-BASED, RETROSPECTIVE COHORT STUDY ASSESSING THE RELATION BETWEEN CANNABIS USE AND MORBIDITY AND MORTALITY CONDITIONS AND ASSESSING THE DISTRIBUTIONAL PROFILES OF CANNABIS USE IN CANADA.
  
  Investigators: Callaghan, R. (PI) & Naimi, T.
  
  Funding body: Canadian Centre on Substance Use and Addiction (CCSA)
  
  Duration of support: 2020-2021

- ESTIMATION OF THE IMPACTS OF COVID-19 ON ALCOHOL CONSUMPTION IN BRITISH COLUMBIA
  
  
  Funding body: BC Ministry of Finance
  
  Duration of support: 2020-2021
B. CISUR AFFILIATED PROJECTS

• EVALUATION OF THE EFFECT OF CANNABIS LEGALIZATION ON ROAD SAFETY
  
  **Investigators:** Brubacher, J. (PI), Asbridge, M., Brant, R., Chan H., Erdelyi S., & MacDonald, S. (Co-Is)
  
  **Funding body:** Canadian Institutes of Health Research
  
  **Duration of support:** 2017–2022

• THE IMPACT OF PROVINCIAL CANNABIS POLICY ON IMPAIRED DRIVING
  
  
  **Funding body:** CIHR (Partnerships for Cannabis Policy Evaluation)
  
  **Duration of support:** 2020-2023

• MONITORING AND PREVENTING DRUG-IMPAIRED DRIVING IN CANADA
  
  **Investigators:** Brubacher, J. (PI), Chan, H., Erdelyi, S., Asbridge, M., Mann, R., & the Canadian Drug-Impaired Driving Research Team
  
  **Funding body:** Health Canada (Substance Use and Addictions Program)
  
  **Duration of support:** 2019-2022

• ESTIMATES OF ALCOHOL-ATTRIBUTABLE DEATHS AND YEARS OF POTENTIAL LIFE LOST IN THE UNITED STATES AND ANALYTIC METHODS
  
  **Investigators:** Naimi, T. (PI) & Sherk, A.
  
  **Funding body:** Centers for Disease Control and Prevention
  
  **Duration of support:** 2020-2023

• REVIEW OF METHODOLOGIES USED TO ESTIMATE ALCOHOL HEALTH HARMs, ANALYSIS OF LOW ALCOHOL DOSES ON HEALTH PROTECTION AND COMPARISON OF DRINKING AND ALCOHOL-CAUSED HARMs IN AUSTRALIA AND CANADA
  
  **Investigator:** Sherk, A.
  
  **Funding body:** National Drug Research Institute (Australia)
  
  **Duration of support:** 2019-2021

• A REVIEW OF THE EVIDENCE REGARDING ALCOHOL’S IMPACTS ON WOMEN’S HEALTH
  
  **Investigators:** Andreasson, S., Chikritzhs, T., Danghardt, F., Holder, H., Naimi, T., & Stockwell, T.
  
  **Funding body:** IOGT Sweden
  
  **Duration of support:** 2019-2020

• ESTIMATION OF THE IMPACTS OF COVID-19 ON ALCOHOL CONSUMPTION IN CANADIAN PROVINCES
  
  **Investigators:** Stockwell, T. (PI), Alam, F., Churchill, S., Naimi, T., Shi, Y., & Zhao, J.
  
  **Funding body:** Public Health Agency of Canada
  
  **Duration of support:** 2020-2021
Key Result Area 3: Implementation of Quality Research

RESEARCH PRIORITY 2

EDUCATIONAL, LEGISLATIVE & REGULATORY STRATEGIES

A. CISUR PROJECTS

• POLICE DISCRETION WITH HIGH RISK SUBSTANCE USING YOUTH
  Funding body: Social Sciences and Humanities Research Council (SSHRC)
  Duration of Support: 2016-2021

• ESTIMATION OF THE PERCENTAGE OF RETAIL PRICES FOR TYPICAL ALCOHOLIC DRINKS IN CANADA COMPRISING FEDERAL AND PROVINCIAL TAXES
  Investigators: Stockwell, T. (PI), Churchill, S., & Sherk, A.
  Funding body: Health Canada
  Duration of support: 2020

B. CISUR AFFILIATED PROJECTS

• ASSESSING THE IMPACT OF MINIMUM UNIT PRICING ON HOMELESS AND STREET DRINKERS: A QUALITATIVE STUDY
  Funding body: Scottish Government’s Chief Scientist Office (CSO)
  Duration of support: 2019-2023

• ESTIMATION OF THE IMPACTS ON PER CAPITA ALCOHOL CONSUMPTION, RELATED HARMs AND GOVERNMENT REVENUES OF ALTERNATIVE ALCOHOL EXCISE TAX ARRANGEMENTS
  Investigators: Stockwell, T. (PI), Churchill, S., & Sherk, A.
  Funding body: Health Canada
  Duration of support: 2020

• ALCOHOL CONSUMPTION AND THE COVID-19 PANDEMIC: SYNTHESISING KNOWLEDGE FOR POLICY ACTION
  Funding body: CIHR Knowledge Synthesis Grant
  Duration of support: 2020-2021
As we finish our second summer under the shadow of the COVID-19 pandemic and communities look for ways to allow safe social interactions, many Canadian municipalities are considering—or, like Penticton and Edmonton have already allowed—alcohol consumption in public spaces like parks, beaches and city plazas. Vancouver launched its own alcohol in parks pilot this year.

While a beer at the beach may sound like a nice idea for some, allowing drinking in these spaces may not only change their atmosphere but also be bad for public health in the long run. Researchers at UVic’s Canadian Institute for Substance Use Research (CISUR), led by director Dr. Tim Naimi, have created Not Just a Walk in the Park: Unsupervised Alcohol Consumption on Municipal Properties in BC, an evidence-based, public-health-oriented guide for municipalities as they consider allowing drinking in public outdoor spaces.

Why isn’t it a good idea to allow drinking in public spaces like parks and beaches?

A Because there are significant public-health considerations to consider. As we know, alcohol can have significant negative health effects and is responsible, even at low levels, for a wide range of diseases, including several types of cancer. And the second-hand effects of alcohol, including violence that arises from other peoples’ drinking, are especially common when it comes to drinking in public.

It also creates more of a sense of “normalization,” that we should be consuming alcohol everywhere all the time. Moreover, municipalities, which have been burdened by many stresses during COVID, will be further taxed by having to enforce or monitor drinking in public places, picking up alcohol-related trash in parks and beaches, and possibly experiencing legal liability for harms related to people becoming intoxicated on their property.

One of the main arguments for allowing this is that the hospitality industry has really suffered during COVID and this could give them a boost. How will allowing alcohol consumption in these kinds of public spaces help restaurants and pubs?

A It’s important to remember that many sectors of the alcohol industry, like alcohol
producers and liquor stores, have actually prospered during the pandemic. But for other sectors like hospitality-based businesses including restaurants and pubs, allowing drinking in public spaces could hurt, not help, them recover from the economic impact of the pandemic. That's because people who want to drink outside their homes could now purchase the cheaper alcohol from liquor stores and just drink in municipal spaces instead of patronizing restaurants and pubs, which would further divert business away from them.

Q Why is it important to provide this guidance on drinking in public municipal spaces now?

A There’s been a sense of urgency to make things better for people in response to the pandemic. I think allowing alcohol consumption in public spaces like parks, beaches and city plazas is a well-intentioned but misguided effort to do that. We should remember the COVID-19 pandemic will hopefully be ending soon, and the decisions that we rush into now may become permanent fixtures in our social landscape—and will not necessarily change them for the better when it comes to community health outcomes.

Q What recommendations do you have for municipalities considering allowing drinking in parks and beaches?

A We recommend they don’t permit it. The evidence says this isn’t a good idea for public health and wellbeing. But if they do decide to go that route, or if they already have permitted drinking in public municipal spaces and want to strengthen their policies, we have several recommendations. The primary one is to keep these initiatives temporary and/ or seasonal rather than permanent. Other recommendations include: keeping drinking to restricted times of day and areas within the municipal property; making sure governments engage with their citizens from all walks of life before, during and after authorizing it; and getting legal advice about their municipal liability. We also recommend municipalities encourage people to purchase food and alcohol from nearby restaurants, pubs and food trucks, and increase budgets for extra costs incurred by governments such as for bylaw enforcement or trash pickup.

This research was supported by the Government of BC.
RESEARCH PRIORITY 3

COMMUNITY-BASED PREVENTION PROGRAMS

A. CISUR PROJECTS

• YOUTH-LED DEVELOPMENT OF LOWER-RISK CANNABIS USE GUIDELINES FOR INDIVIDUALS AGED 13 TO 18: A PATHWAY TO BETTER MENTAL HEALTH AND WELLNESS
  Funding body: CIHR Catalyst Grant: Cannabis and Mental Health
  Duration of Support: 2021-2022

• PROVINCIAL PEER NETWORK EVALUATION
  Investigators: Pauly, B. & Urbanoski, K.
  Funding body: BC Centre for Disease Control
  Duration of support: 2020-2021

• INTEGRATION OF HIV AND HEPATITIS C CARE IN OVERDOSE PREVENTION SITES: WHAT ARE THE GAPS?
  Funding body: CIHR
  Duration of support: 2019-2021

• FEASIBILITY CHECK: EXPANSION OF DRUG CHECKING TO REACH PEOPLE WHO USE ALONE AND REDUCE OVERDOSE IN PRIVATE RESIDENCES
  Funding body: Michael Smith Foundation for Health Research, Pathway to Patient-Oriented Research (P2P) Award
  Duration of support: 2019–2020

• INTEGRATING A LOW-BARRIER DRUG CHECKING PLATFORM INTO PUBLIC HEALTH RESPONSES TO OVERDOSE
  Funding body: CIHR/NSERC’s Collaborative Health Research Projects
  Duration of support: 2020-2023

• SPECTROSCOPY FOR THE MASSES: TRAINING THE COMMUNITY TO OPERATE DRUG-CHECKING TECHNOLOGIES AS A RESPONSE TO THE OVERDOSE CRISIS
  Funding body: Tri-Agency Institutional Programs Secretariat’s New Frontiers in Research Fund – Exploration
  Duration of support: 2020-2022

• IMPLEMENTING INNOVATIONS IN DRUG CHECKING: A HARM REDUCTION PILOT IN RESPONSE TO ILLICIT DRUG OVERDOSE
  Investigators: Hore, D. & Wallace, B.
  Funding body: Health Canada’s Substance Use and Addictions Program
  Duration of support: 2018-2023

• BEYOND THE ‘MISSING WOMEN INQUIRY’: EMPOWERING SEX WORKERS AS SOCIAL JUSTICE ADVOCATES
  Investigator: Benoit, C.
  Funding body: Pierre Elliott Trudeau Foundation
  Duration of support: 2018-2022
B. CISUR AFFILIATED PROJECTS

- **HARM REDUCTION INTERVENTION FOR SEVERE DRUG AND/OR ALCOHOL DEPENDENCE AMONG PEOPLE WHO ARE HOMELESS**
  
  
  **Funding body:** National Institute for Health Research Health Technology Assessment Programme
  
  **Duration of Support:** 2018-2021

- **THE PRACTICE OF INJECTING NON-PRESCRIBED SUBSTANCES INTO INTRAVENOUS LINES: AN EXPLORATORY STUDY**
  
  **Investigators:** Nicholson, M. (PI), Gagnon, M., Connors, W., Garrod, E., Hill, J., Chow, N., & Patterson, C. (Co-Is)
  
  **Funding body:** Providence Health Care Practice-Based Research Challenge
  
  **Duration of support:** 2019-2020

- **HEALTHY PROFESSIONAL/KNOWLEDGE WORKERS: EXAMINING THE GENDERED NATURE OF MENTAL HEALTH ISSUES, LEAVES OF ABSENCE & RETURN TO WORK EXPERIENCES FROM A COMPARATIVE PERSPECTIVE**
  
  **Investigators:** Bourgeault, I. (PI) & Benoit, C. (Co-Lead)
  
  **Funding body:** SSHRC/CIHR Partnership Grant
  
  **Duration of support:** 2018-2024

- **PARTNERSHIPS FOR TRAUMA AND VIOLENCE INFORMED OUTREACH: NEW STRATEGIES TO SERVICE DELIVERY TO REDRESS VIOLENCE AGAINST WOMEN**
  
  **Investigators:** Bungay, V. (PI), Benoit, C. et al. (Co-Is).
  
  **Funding body:** Social Sciences and Humanities Research Council Partnership Development Grant
  
  **Duration of support:** 2017-2020
RESEARCH PRIORITY 4

TREATMENT SYSTEMS & PROGRAMS

A. CISUR PROJECTS

• PERSPECTIVES OF PEOPLE WHO USE DRUGS ON SAFER SUPPLY: A CONCEPT MAPPING STUDY
  
  
  Funding body: Health Canada Substance Use and Addictions Program
  
  Duration of support: 2020

• MANAGED ALCOHOL PROGRAMS: IMPLEMENTATION AND EFFECTIVENESS
  
  
  Funding bodies: Canadian Institutes of Health Research (CIHR); Michael Smith Foundation for Health Research; Vancouver Coastal Health Authority, Canadian Mental Health Association, Sudbury Branch
  
  Duration of support: 2016-2020

• THE ROLE OF CHILD PROTECTION IN SUBSTANCE USE SERVICES FOR WOMEN
  
  Investigators: Urbanoski, K. (PA), Milligan, K. (Co-A), Coombs, M., Cummings, K., Ussher, C., Goodman, D., & Seeley, T.
  
  Funding body: SSHRC Insight Grant
  
  Duration of support: 2019-2023

• CANADIAN MANAGED ALCOHOL PROGRAM STUDY: IMPLEMENTATION AND EFFECTIVENESS OF MANAGED ALCOHOL PROGRAMS
  
  
  Funding bodies: Canadian Institutes of Health Research (CIHR); Michael Smith Foundation for Health Research; Vancouver Coastal Health Authority, Canadian Mental Health Association, Sudbury Branch
  
  Duration of support: 2013-2021

• MANAGED ALCOHOL AND CANNABIS SUBSTITUTION: A FEASIBILITY STUDY
  
  
  Funding body: Canadian Institutes of Health Research Catalyst Grant: Cannabis Research in Urgent Priority Areas
  
  Duration of support: 2019-2020
Cannabis products in BC are getting cheaper and more potent, and its year-over-year sales have doubled between 2019 and 2020, according to a new report from the Canadian Institute for Substance Use Research (CISUR). In 2020, sales added up to nearly 8,000 kg of THC—equivalent to approximately 400 million joints (at 20mg of THC each) and accounted for about $290 million in gross revenue.

The report looked at sales data from the BC government, including from wholesale sales, private retailers and retail sales from BC Cannabis stores (in person and online), between legalization in Oct. 2018 and Dec. 2020. Researchers, led by CISUR director Dr. Tim Naimi, calculated the potency of all 1,811 unique products in milligrams of THC to allow comparison across products. Annual legal cannabis sales in BC rose from 64 mg of tetrahydrocannabinol (THC) per person over age 15 (a standard measure for controlled substances) in 2019 to 129 mg in 2020.

The province recently announced it would allow private retailers to offer home delivery of cannabis starting July 15, which is likely to drive sales further.

“As cannabis sales by the BC government expand, we hope there is a balance between consumer preferences, revenue considerations and public health,” says Dr. Naimi. Examples of such strong policy solutions might include cannabis-specific taxes, minimum prices per gram of THC, and potency restrictions, he says.

Some other highlights from the report:

- Flower and pre-roll products accounted for approximately 84% of all cannabis sales by THC weight.
- The largest total amount of THC was sold in the Interior Health Authority, but on a per-person basis the largest amount of THC was sold in the Northern Health Authority.
- Private retail outlets outnumber government stores by 10:1 and sell four times as much cannabis by THC weight.
- For flower, pre-roll, vape kits and vape cartridges sold at government retail stores, higher-potency products tended to be cheaper per fixed amount of THC than lower-potency products.
- Since sales were legalized, the median sales-weighted price for flowers and pre-rolls has steadily decreased, meaning consumers are buying increasingly cheaper and stronger products. For flowers, the average price including taxes is approximately 12 cents per 5 mg unit of THC, so a joint containing 20 mg of THC costs about 50 cents.
- Retail outlets for buying regulated cannabis in BC are still on the rise, as the province went from 128 private and 11 government stores in Dec. 2019 to 270 private and 25 government in Dec. 2020.

This research was supported by the Government of BC.
B. CISUR AFFILIATED PROJECTS

• **A MIXED METHODS EVALUATION OF RISK MITIGATION MEASURES TO ADDRESS THE DUAL PUBLIC HEALTH CRISIS OF COVID-19 AND OVERDOSE**
  
  **Investigators:** Slaunwhite, A. (NPA), Hongdilokkul, N., Nosyk, B., Pauly, B., & Urbanoski, K. (PAs)
  
  **Funding bodies:** CIHR, MOH, MSFHR, Victoria Hospital Foundation
  
  **Duration of support:** 2020-2021

• **A PROPOSAL TO EVALUATE SAFER SUPPLY PROGRAMS IN CANADA**
  
  
  **Funding body:** CIHR
  
  **Duration of support:** 2021-2025

• **ASSESSING THE IMPACT OF MINIMUM UNIT PRICING ON HOMELESS AND STREET DRINKERS: A QUALITATIVE STUDY**
  
  **Investigators:** Elliott, L., Emslie, C. (Co-PIs), Whiteford, M. (lead researcher), Stockwell, T., Dimova, E., Johnsen, S., Whittaker, A., Smith, I., Rush, R., & Homeless Network Scotland
  
  **Funding body:** Scottish Government’s Chief Scientist Office (CSO)
  
  **Duration of support:** 2019-2023

• **COMMUNITY-LED OPTIONS FOR ACCESS TO SUBSTITUTION THERAPIES (COAST) PROJECT**
  
  **Investigators:** Milroy, M.J., Urbanoski, K., Pauly, B. (Co-leads), Blyth, S., Magnuson, N., Phillips (SOLID) (Community Co-Leads)
  
  **Funding body:** Vancouver Foundation 2020 Convene Grant
  
  **Duration of Support:** 2020

• **EMERGENCY SAFER SUPPLY PROGRAMS (ESSPS): BRIDGING THE HIV PREVENTION, TREATMENT, AND CARE CASCADE FOR PEOPLE WHO INJECT DRUGS**
  
  **Investigators:** Strike, C., Guta, A. (PIs), Antoniou, T., Bayoumi, A., Gagnon, M., Kenny, K., Kolla, G., & Leece, P. (Co-Is)
  
  **Funding body:** Ontario HIV Treatment Network
  
  **Duration of support:** 2020-2022

• **A MANAGED ALCOHOL PROGRAM FOR AUSTRALIA**
  
  
  **Funding body:** Australian Government National Health and Research Council Partnership Project
  
  **Duration of support:** 2019-2024

• **EVALUATING VIRTUAL DRUG CONSUMPTION: A PILOT STUDY**
  
  **Investigators:** Strike, C. (PI) & Gagnon, M. (Co-Applicant)
  
  **Funding body:** Dalla Lana School of Public Health Grant
  
  **Duration of support:** 2020-2021

• **IMPLEMENTATION AND EVALUATION OF AN INDIGENOUS-SPECIFIC MANAGED ALCOHOL PROGRAM FOR THE HOMELESS INDIGENOUS POPULATION IN CALGARY, ALBERTA AND VICTORIA**
  
  **Investigators:** Milaney, K. (Nominated Principal Investigator), Nixon, L., Pauly, B. (Co-Is), & the Calgary Aboriginal Standing Committee on Homelessness and Aboriginal Coalition to End Homelessness (Victoria, BC).
  
  **Funding body:** CIHR Operating Grant
  
  **Duration of support:** 2020-2023
• MANAGED ALCOHOL PROGRAMMES: IMPLEMENTATION OF A NOVEL INTERVENTION TO HELP PREVENT INFECTION (COVID-19) FOR PEOPLE EXPERIENCING ALCOHOL DEPENDENCY AND HOMELESSNESS

**Investigators:** Parkes, T. (PI), Pauly, B., Carver, H., Miller, J., McCulloch P., & Browne T. (Co-Is)

**Funding body:** Chief Scientific Officer Scotland

**Duration of support:** 2020

• SCOPING THE FEASIBILITY AND ACCEPTABILITY OF MANAGED ALCOHOL PROGRAMMES FOR PEOPLE WHO ARE HOMELESS WITH SEVERE ALCOHOL PROBLEMS IN COMMUNITY-BASED, THIRD SECTOR SERVICES IN SCOTLAND

**Investigators:** Parkes, T. (PI), Pauly, B., Carver, H., & Matheson, C. (Co-Is)

**Funding body:** Chief Scientist Office (CSO), NHS Scotland

**Duration of support:** 2019

• WHEN PROBLEMATIC SUBSTANCE USE, PARENTING, AND CHILD WELFARE COLLIDE: GIVING VOICE TO WOMEN ON PROCESSES THAT PROMOTE FAMILY HEALTH AND WELLBEING

**Investigators:** Milligan, K (NPA), Urbanoski, K. (PA), Valeriote, H., (PKU), Dempster, J., (PKU), Buckley, L., Choma, B., Cummings, K., Goodman, D., Khoury, J., Ogilvie, S.A., & Wall-Wieler, E.

**Funding body:** CIHR, Strategy for Patient-Oriented Research (SPOR) Catalyst Grants

**Duration of support:** 2020-2021
RESEARCH PRIORITY 5

SOCIAL DETERMINANTS & CONTEXTS OF SUBSTANCE USE

A. CISUR PROJECTS

• **DECOLONIZING AND REORIENTING HEALTH SYSTEMS TOWARDS HEALTH EQUITY: THE XAɂQANAǂʔITKINIǂ (MANY WAYS OF WORKING TOGETHER) RESEARCH PROJECT**

  **Investigators:** Shahram, S., Pauly, B., Horsethief, C. (Co-PIs), Pierre, S., Kent, A., Sam, S., Bryant, L., Murray, K., Driscoll, J.  
  **Advisory Group:** Elders Advisory Council Ktunaxa Nation Council, Interior Health, National Collaborating Centre for Determinants of Health  
  **Funding body:** CIHR  
  **Duration of support:** 2019-2020

• **P2P: PEER 2 PEER SUPPORT**

  **Investigators:** Buxton, J. & Pauly, B. (Co-PIs)  
  **Funding body:** Health Canada Substance Use and Addictions Program  
  **Duration of support:** 2018-2020

• **MONITORING AND INFORMING PUBLIC HEALTH RESPONSES TO SUBSTANCE USE (BC COMMUNITY NETWORK OF SUBSTANCE USE OBSERVATORIES; AKA BC CO/LAB)**

  **Investigators:** Pauly, B. (PI), Urbanoski, K., Stockwell, T., Reist, D., Wallace, B., Shahram, S., Lachowsky, N., Sherk, A., & Buxton, J.  
  **Funding body:** Health Canada  
  **Duration of support:** 2019-2024

• **CANNABIS USE AND SYMPTOM MANAGEMENT AMONG PEOPLE LIVING WITH HIV: A CROSS-SECTIONAL SURVEY**

  **Funding body:** CIHR  
  **Duration of support:** 2018-2022

B. CISUR AFFILIATED PROJECT

• **CONVERGING EPIDEMICS AND THE HEALTH OF PEOPLE WHO USE DRUGS: USING EVIDENCE TO MOVE DECISION MAKING INTO ACTION IN THE CONTEXT OF COVID-19**

  **Funding body:** CIHR  
  **Duration of support:** 2020-2021
What’s in a name? For Co/Lab, it’s about more than summarizing the project’s official title—it embodies the collaborative approach at the heart of this project, housed at UVic’s Canadian Institute for Substance Use Research (CISUR).

Co/Lab, or the Collaborative Community Laboratory on Substance Use and Harm Reduction, brings together academics, drug user groups, service providers and policymakers with the aim to promote health and health equity for people who use drugs. The scope ranges from conducting research on services like safer supply programs to providing a roadmap on how to bring equity into public health monitoring and running an active community of practice where experts of different kinds learn from each other.

“It is kind of a community-academic-policy triad,” explains Co/Lab co-lead Karen Urbanoski, CISUR scientist, public health expert and Canada Research Chair in Substance Use, Addictions and Health Services Research. “We’ve got this perfect platform for the exchange of info and ideas. We can be responsive to community when they say ‘we need this.’”

One way Co/Lab has been responsive is to potentially influence policy in response to issues brought forward by partners. For example, after seeing political opposition to services like needle exchange programs and supervised consumption sites in some communities, the team created research summaries detailing the evidence about their effectiveness. When the provincial government began purchasing hotels to house people during COVID-19, Co/Lab created a resource outlining how to implement evidence-based harm reduction services in these types of residences—written mostly by community partners, including people with lived expertise who work in the sector.

Reducing harms from substance use: A collaborative approach to promote health and health equity for people who use drugs

By Amanda Farrell-Low

Photo: Co/Lab co-leads Drs. Karen Urbanoski and Bernie Pauly at the BC Parliament Buildings (UVic Photo Services)
“Part of the reason we are able to do this is because we have developed relationships with health authorities and people with lived experience over many years.”

Another need identified by the Co/Lab community was an evaluation of BC’s safer supply rollout, introduced last year due to concerns related to an increasingly toxic drug market, rising rates of overdoses and risks of COVID-19. Interim clinical guidance was issued to prescribers at the outset of the pandemic in March 2020 that allowed them to prescribe pharmaceutical alternatives to illicit drugs. The BC/Yukon Association of Drug War Survivors flagged the importance of evaluating the program to the co-leads. Now they and the Co/Lab team are part of a large research project, led by the BC Centre for Disease Control, looking at whether the program is meeting peoples’ needs and reducing deaths.

Urbanoski is also one of two UVic delegates tapped to attend Science Meets Parliament this year, where researchers across Canada convene in Ottawa to build stronger understanding between the scientific and political communities.

“Substance use is a major population health issue—policymakers and scientists alike are challenged with finding solutions,” says Urbanoski. “Participating in this government engagement will help me to further develop strategies for collaborating effectively with policymakers to improve population health.”

A vital part of Co/Lab’s work has been creating a new way to look at harms related to substance use. In addition to measuring metrics such as drug- and alcohol-related hospitalizations and deaths, Co/Lab has created a framework to bring equity into the picture and look at other contributing factors.

Harms of substance use aren’t just caused by drugs, says Pauly. “They are caused by policies, laws and social conditions of health, and we are working towards adding in or creating metrics that will get at some of those factors.”

Metrics include discrimination in housing policies, experiences of racism, distance to services of different kinds, or per capita police spending.

“We’re not proposing an ‘either/or’—we are saying that, in addition to counting people who experience harms using metrics like substance-related hospitalizations and deaths, we also need to measure the structures that affect their lives and health,” Urbanoski says. “We want to create evidence to help us develop these measures and put them into use. With this approach to monitoring, we will be better able to create systems that reduce health inequities.”

Co/Lab is funded by Health Canada, with sub-studies funded by Canadian Institutes of Health Research and the BC Ministry of Health.
RESEARCH PRIORITY 6

EVALUATION OF EFFECTIVENESS OF KNOWLEDGE TRANSLATION AND EXCHANGE ACTIVITIES AND STRATEGIES

B. CISUR AFFILIATED PROJECT

- CIHR CENTRE FOR REACH IN HIV/AIDS (3.0): A NATIONAL CANADIAN RESEARCH AND KNOWLEDGE MOBILIZATION NETWORK TO CONNECT PEOPLE TO TESTING AND CARE AND REDUCE STIGMA FOR STBBIS


Funding body: CIHR

Duration of support: 2019-2024

The six focus areas of the REACH 3.0 project via https://reach-nexus.webflow.io/
### Key Result Area 3: Implementation of Quality Research

<table>
<thead>
<tr>
<th>OBJECTIVES</th>
<th>PERFORMANCE INDICATORS</th>
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<tbody>
<tr>
<td><strong>3.1</strong> To conduct research on the patterns, distribution, determinants and consequences of substance use in Canada and internationally</td>
<td>Number of epidemiological projects initiated, ongoing and/or successfully completed each year in this area. Benchmark: 15 2020/2021: 15</td>
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<tr>
<td><strong>3.2</strong> 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</td>
<td>Number of CISUR special reports and commissioned reports focused on policy and practice. Benchmark: 5 2020/2021: 8</td>
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<tr>
<td><strong>3.3</strong> To conduct research in the following other key priority areas:</td>
<td>Number of research projects ongoing and completed Benchmark: 6 2020/2021: 5</td>
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<tr>
<td>• The impact of educational, legislative and regulatory strategies to minimize alcohol and other drug-related harms</td>
<td>Number of research projects ongoing and completed Benchmark: 5 2020/2021: 15</td>
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<tr>
<td>• Development and evaluation of more effective community prevention programs</td>
<td>Number of research projects ongoing and completed Benchmark: 8 2020/2021: 15</td>
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<tr>
<td>• Development and evaluation of more effective treatment systems and programs</td>
<td>Number of research projects ongoing and completed Benchmark: 10 2020/2021: 5</td>
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<td>• The influence of structural determinants of social contexts of drug use on the implementation of harm reduction strategies</td>
<td>Number of research projects ongoing and completed Benchmark: 5 2020/2021: 5</td>
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<tr>
<td>• Research and evaluation of effectiveness of knowledge translation and exchange activities and strategies</td>
<td>Number of research projects ongoing and completed Benchmark: 5 2020/2021: 5</td>
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<tr>
<td><strong>3.4</strong> Develop and maintain significant collaborative projects with other researchers and research centres in North America and in other countries</td>
<td>Number of collaborative projects with other North American researchers and research agencies each year Benchmark: 10 2020/2021: 21</td>
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<tr>
<td><strong>3.5</strong> Develop collaborative projects with international organizations such as WHO and the International Harm Reduction Association</td>
<td>Number of collaborations with WHO and other international organizations each year Benchmark: 5 2020/2021: 6</td>
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When COVID-19 hit and it became obvious that issues such as substance use, the toxic drug supply and the housing crisis were being amplified in the wake of the pandemic, CISUR researchers were often called on by media to offer their expertise in these areas. Alcohol policy and consumption was a hot topic, as data showed consumption in BC and Canada was on the rise during the pandemic, and many regions, particularly BC, loosened regulations around alcohol availability under the guise of protecting the hospitality industry. Research on the Yukon alcohol warning label study and the health impacts of drinking within Canada’s low-risk drinking guidelines was also published in mid-2020, leading to significant media coverage of that work.

At right: CISUR’s Tim Naimi was interviewed as part of a New York Times article on alcohol, cancer and warning labels.
Media coverage

CISUR top ten media topics, 2020/21

<table>
<thead>
<tr>
<th>Topic</th>
<th># of Stories</th>
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<tbody>
<tr>
<td>Alcohol policy</td>
<td>446</td>
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<tr>
<td>Alcohol consumption</td>
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<td>COVID-19</td>
<td>270</td>
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<tr>
<td>Yukon label study</td>
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<tr>
<td>Drinking guidelines</td>
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<td>Overdose Crisis</td>
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<td>CSUCH</td>
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<td>Homelessness/tent cities</td>
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</tr>
<tr>
<td>CAPE</td>
<td>21</td>
</tr>
<tr>
<td>Alcohol and cancer</td>
<td>20</td>
</tr>
</tbody>
</table>

While our overall media articles and interviews was slightly lower than last year (1021 articles vs 1631 in 2019/20), our circulation reach was actually nearly double that of 19/20 (176 million vs 88 million). This was likely due to some higher profile coverage in outlets like CBC’s national As it Happens current affairs show and The New York Times.

CISUR overall media coverage, 2020/21

<table>
<thead>
<tr>
<th>Date Range</th>
<th># Articles</th>
<th>Circulation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Apr 03, 2020 - May 06, 2020</td>
<td>230</td>
<td>17,801,705</td>
</tr>
<tr>
<td>May 07, 2020 - Jun 09, 2020</td>
<td>56</td>
<td>4,525,239</td>
</tr>
<tr>
<td>Jun 10, 2020 - Jul 13, 2020</td>
<td>196</td>
<td>41,140,684</td>
</tr>
<tr>
<td>Jul 14, 2020 - Aug 16, 2020</td>
<td>56</td>
<td>14,251,896</td>
</tr>
<tr>
<td>Aug 17, 2020 - Sep 19, 2020</td>
<td>33</td>
<td>28,076,101</td>
</tr>
<tr>
<td>Sep 20, 2020 - Oct 23, 2020</td>
<td>178</td>
<td>12,848,280</td>
</tr>
<tr>
<td>Oct 24, 2020 - Nov 25, 2020</td>
<td>116</td>
<td>6,917,715</td>
</tr>
<tr>
<td>Nov 26, 2020 - Dec 28, 2020</td>
<td>51</td>
<td>5,070,254</td>
</tr>
<tr>
<td>Dec 29, 2020 - Jan 30, 2021</td>
<td>52</td>
<td>8,304,757</td>
</tr>
<tr>
<td>Jan 31, 2021 - Mar 04, 2021</td>
<td>53</td>
<td>37,406,029</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>1,021</strong></td>
<td><strong>176,342,660</strong></td>
</tr>
</tbody>
</table>
Social Media

Our social media presence continues to slowly grow, with 2,460 Facebook and 2,931 Twitter followers.

Our most popular Facebook post was about our Youth and Police in BC Infographics, which were based on our Youth Experiences Project, which interviewed 449 BC youth aged 16-30 in Victoria, Chilliwack and Prince George to learn more about interactions between police and youth who use drugs (YWUD), including racialized youth and youth experiencing homelessness. The posts reached nearly 10,000 people and were shared 79 times.

On Twitter, our most popular post was on the findings of our Yukon labelling study results, which made over 8000 impressions and was retweeted 32 times.
Website

Our website had 38,771 visitors and 90,054 pageviews for 2020/21, which was similar to 2019/2020. Resources related to the Canadian Managed Alcohol Program Study were some of the most viewed and downloaded parts of the site, which is unsurprising given that a lot of attention was given to MAPs once COVID hit out of concern for people with severe alcohol dependence who may be experiencing homelessness being extremely vulnerable if exposed to COVID or losing access to supports.

### CISUR’s top ten most visited webpages, 2020/21

<table>
<thead>
<tr>
<th>Page Name</th>
<th>Pageviews</th>
</tr>
</thead>
<tbody>
<tr>
<td>CISUR main page</td>
<td>11,420</td>
</tr>
<tr>
<td>Canadian Managed Alcohol Programs Study</td>
<td>7,530</td>
</tr>
<tr>
<td>The sex industry in Canada</td>
<td>5,915</td>
</tr>
<tr>
<td>BC crime statistics*</td>
<td>4,375</td>
</tr>
<tr>
<td>Alcohol consumption in BC</td>
<td>2,783</td>
</tr>
<tr>
<td>iMinds</td>
<td>2,683</td>
</tr>
<tr>
<td>Cycles</td>
<td>2,352</td>
</tr>
<tr>
<td>About CISUR</td>
<td>2,345</td>
</tr>
<tr>
<td>Scientist profile: Bernie Pauly</td>
<td>2,054</td>
</tr>
<tr>
<td>CISUR projects</td>
<td>1,805</td>
</tr>
</tbody>
</table>

*page has since been archived

### CISUR’s top ten most downloaded files, 2020/21

<table>
<thead>
<tr>
<th>File Name</th>
<th>Downloads</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safer Drinking During COVID-19</td>
<td>894</td>
</tr>
<tr>
<td>Overview of MAPs in Canada</td>
<td>710</td>
</tr>
<tr>
<td>CISUR Bulletin 20: Scale up of MAPs</td>
<td>486</td>
</tr>
<tr>
<td>Operational Guidance for Implementation of Managed Alcohol for Vulnerable Populations</td>
<td>422</td>
</tr>
<tr>
<td>Cycles Guide</td>
<td>366</td>
</tr>
<tr>
<td>Helping Schools Drug Literacy Curriculum</td>
<td>302</td>
</tr>
<tr>
<td>Strategies to Reduce Alcohol-Related Harms and Costs in Canada: A Review of Provincial and Territorial Policies</td>
<td>252</td>
</tr>
<tr>
<td>CISUR Bulletin 19: Youth Experiences: How police interactions impact youth who use drugs</td>
<td>229</td>
</tr>
<tr>
<td>Strategies to Reduce Alcohol-Related Harms and Costs in Canada: A Review of Federal Policies</td>
<td>180</td>
</tr>
<tr>
<td>InterMAHP Guide</td>
<td>170</td>
</tr>
</tbody>
</table>
Other Dissemination Channels and Materials

Public talks

Despite being unable to hold in-person events due to COVID this year, CISUR organized two highly successful Substance Use Grand Round webinars in partnership with Island Health: one on Managed Alcohol Programs and another on the Vancouver Island Drug Checking Project. The BC Co/Lab project has also hosted several Community of Practice talks with both community partners and CISUR researchers, covering topics such as the Victoria SAFER safer supply program, adding equity to monitoring and the essentials of drug-user organizing.
Print/Web Collateral

The Vancouver-based Knowledge Exchange team has produced several products, including Harm Reduction: A Guide for Campus Communities and Homelessness, Mental Health and Substance Use: Understanding the Connections.

In May 2020, we created CISUR Bulletin #20: Scaling up of Managed Alcohol Programs, as well as Safer Drinking Tips During COVID-19 (a collaboration with the Eastside Illicit Drinkers Group for Education), largely in response to increased interest in MAPS and alcohol harm reduction during COVID-19. The team at the Collaborative Community Laboratory on Substance Use (Co/Lab) has created several knowledge products in 2020/2021, including An Evidence Brief: Harm Reduction Implementation Framework (HRIF); An Evidence Brief: Needle and Syringe Exchange Programs; A Brief on Methodology: Using Proximity Analysis to Study the Impact Of Substance Use Services On Local Neighbourhoods; An Evidence Brief: Supervised Consumption Sites Are Necessary Public Health Services, and Infrastructure for Harm Reduction in Residential and Hotel Settings.

The province of British Columbia commissioned two reports on unsupervised alcohol consumption on municipal properties (an evidence brief and a full policy report) as well as an overview of regulated cannabis sales in BC since legalization.
Journal Articles


Macdonald, S., Stockwell, T., & Sherk, A. (2021). “What proportion of the price of a typical Canadian alcoholic beverage is taxation and why does it matter?” Health Promotion and Chronic Disease Prevention in Canada, 41(2). https://doi.org/10.24095/hpcdpc.41.2.05


Support with Substance: Nursing PhD candidate Meaghan Brown puts managed alcohol program experience and research into practice and policy

By Amanda Farrell-Low

When Meaghan Brown graduated from nursing school, she had never heard of managed alcohol programs, or MAPs. But when she started working at a MAP at Ottawa Inner City Health as a new nurse, she immediately loved working with residents of the MAP, a program where people with severe alcohol dependence are provided with regular doses of alcohol throughout the day, paired with housing and other supports.

“I found this population was such a special population to work with. Often people in the programs have had really remarkable lives but also lot of challenges. They are such resilient people who can have the most medical and health complexities and the most barriers to accessing harm-reduction services, but are so full of character and life.”

So when it came time to think about graduate studies, MAP research was at the forefront of her mind. And one night, a leader of MAP research in Canada—Bernie Pauly, professor with UVic’s School of Nursing and a scientist with the Canadian Institute for Substance Use Research (CISUR)—happened to be visiting Brown’s work as part of her research.

“It was kind of serendipitous between me and Bernie. I recognized her from researching different supervisors,” recalls Brown. “I went up
to her and said, ‘Are you Bernie Pauly?’ and she was like, ‘Yeah.’ I said, ‘I want to do my master’s.’ She said, ‘you should apply to UVic.’ I was living in Ottawa at the time, [and] had never been to BC.”

Pauly says she was happy to offer Brown the encouragement. “I was pretty excited that a nurse with Meaghan’s experience and passion for alcohol harm reduction was interested in research and pursuing graduate studies,” she says.

Since being accepted to UVic’s master’s program in nursing and starting work on the Canadian Managed Alcohol Program Study (CMAPS), a CISUR-led study of managed alcohol programs across the country, Brown was encouraged to fast track into the PhD program because of her strong academic standing and aptitude for research. Her dissertation focuses on Indigenous-led alcohol harm reduction programs and culturally based supports. Brown has been volunteering and working with the Aboriginal Coalition to End Homelessness to build her knowledge and relationships in the community and support Indigenous-led research and programming.

“Collaborating with Indigenous organizations is very important,” says Brown. “We cannot investigate MAPs and understand the experiences of Indigenous participants, without acknowledging that we as white settler researchers are limited in our understanding and our positions within a very colonial, western research approach. We need to have those partnerships in order to be able to really centre Indigenous perspectives, knowledge and decision-making in research.”

MAPs are an alcohol harm-reduction approach that are been mostly found in Canada, with programs often flying under the radar. With the onset of COVID-19, interest in MAPs exploded as the need to support people to stay at home and restrictions and closures increased harms for an already vulnerable group. The CMAPS team, which includes Brown and Pauly, are consulting with communities from across BC and Canada on the development of MAPs. Along with other members of CMAPS and the BC Centre for Substance Use, they led the development of provincial operational guidance for managed alcohol programs during COVID-19.

“Meaghan exemplifies what we look for and encourage in graduate students at UVic and in nursing; the ability to integrate research and practice as well as policy that is dedicated to the improvement of health and services in the community and contribute to national and international knowledge,” says Pauly.

New models of MAP are emerging in response to the risks posed by COVID-19. Brown says that in Victoria, the onset of COVID-19 brought increasing community concerns about the displacement of people from tent cities and other typical shelter and support networks, with the potential of exacerbating alcohol-related harms such as severe withdrawal and ‘survival drinking’ of mouthwash or rubbing alcohol. Combined with the large migration of previously unhoused people into hotels, the city’s first MAPs were established, ranging from clinical and peer-based models. Locally, some agencies have adopted an outreach-based, scattered-site model where clients are seen by a nurse and provided with supports and alcohol where they live. This aligns with principles of Housing First, but is a new take on the established residential MAP model.

“I think we’re learning new ways of doing alcohol harm reduction, knowing that there’s a range of models from residential, to scattered, and of course community based peer-led models, which are much more based on the dignity and self-determination of the person and less clinical,” says Brown. “What I’ve been learning over time is that managed alcohol programs, particularly in my own approach to practice, there’s always room for growth. It’s always important for me to come back to harm reduction as the centre of our approach and remembering that it’s ultimately based on the choices and dignity of the person.”
**Books**


**Book Chapters**


**Commissioned and Special Reports**


CISUR Reports and Bulletins


Peer2Peer Project Compassionate Action Modules (Co-ed: Pauly, B.) (2020). A series of modules on Stigma:

- Module 1: Hierarchies of substance use. https://www.youtube.com/watch?v=zAtfgr6bN9E
- Module 2: PWUD and employment. https://www.youtube.com/watch?v=DOLNo8R-FYQ
- Module 3: Inequities faced by peers in the workplace. https://www.youtube.com/watch?v=jrTvDVh5KjM
- Module 4: PWUD and primary care. https://www.youtube.com/watch?v=jrTvDVh5KjM
- Module 5: PWUD interactions with other professionals. https://www.youtube.com/watch?v=WiyYMXXhJL0


Canadian Institute for Substance Use Research (2020). How do I know if someone has a problem with gambling? To Help. https://www.heretohelp.bc.ca/q-and-a/how-do-i-know-if-someone-has-a-problem-with-gambling


**Infographics**


**Opinion Editorials and Letters to News Outlets**


**CISUR Student Dissertations**

Invited and other Presentations


Benoit, C. (2020). Research points to the need for a BDAR provincial system. Bad Date and Aggressor Reporting Webinar. Vancouver, BC.


Cameron, F., Hore, D., & Wallace, B. (2020, October). Patient oriented research (POR) and health technology panel. Strategy for Patient Oriented Research’s Putting Patients First 2020: Connecting Face to Face in Virtual Space, Online.


Gagnon, M. & Guta, A. (Originally scheduled for May 2020 but postponed to May 2022 due to COVID-19). “It gets people through the door”: Exploring the ethics of incentives in HIV care. 14th World Conference on Bioethics, Medical Ethics and Health Law, Porto, Portugal.


Gagnon, M., Gudino, D., Guta, A., & Strike, C. (Originally scheduled for June 2020 but postponed to June 2022 due to COVID-19). What can we learn from the media coverage of cannabis legalization in Canada? 14th International Student for Sensible Drug Policy Conference, Aguascalientes, Mexico.


Kolla, G. (2020, 3 April, cancelled). Accountability and transparency in the opioid crisis. WHO Collaborating Centre for Governance, Accountability, and Transparency in the Pharmaceutical Sector, Leslie Dan School of Pharmacy, University of Toronto.


Pauly, B. (2020, April 28). Harm reduction and housing in shelters during covid-19 [Webinar], Canadian Observatory on Homelessness.


Pauly, B. (2020, October 8). xaɑqanaǂʔitkiniǂ Many ways of working together. Sharing lessons learned through community-driven, culturally-informed co-learning and co-creation of knowledge [Panel presentation], Putting Patients First: Connecting Face to Face Virtually, BC SPOR Unit Annual Conference.

Pauly, B. & Cameron, F. (2021, March 30). Safe supply would work well if findings from a concept mapping study. Presentation to VIC Safer Team.

Roisin, Amanda, Tim Naimi, and Bruce participate in a lunchtime ride during 2021’s Go By Bike Week.


Reist, D. (2020, November). Teaching resilience: Effective drug/gambling education. A professional development workshop sponsored by Saanich Schools (SD #63), Saanich, BC.

Reist, D. & Norman, T. (2021, February). Building our capacity for evaluative thinking. Workshop with BC Partners for Mental Health and Substance Use Information (online).


Stockwell, T. (2020, August). Finnish alcohol policy at the crossroads: The health, safety and economic consequences of alternative systems to manage the retail sale of alcohol [Webinar]. Presentation to the Board of Alko and Members of Parliament, Finland.


CISUR Sponsored Conferences and Seminars

Public Seminars


Urbanoski, K. (2020, November). Adding equity to monitoring (Part of the BC Co/Lab Community of Practice). Victoria, BC. https://www.youtube.com/watch?v=-0Ru-b_4CuFo

### Table 4. Performance Indicators for Key Result Area 4: Dissemination

<table>
<thead>
<tr>
<th>OBJECTIVES</th>
<th>PERFORMANCE INDICATORS</th>
</tr>
</thead>
<tbody>
<tr>
<td>To publish research findings in international peer reviewed journal articles</td>
<td>Number of articles published each year by CISUR researchers and students in peer reviewed journals</td>
</tr>
<tr>
<td></td>
<td>Benchmark: 70</td>
</tr>
<tr>
<td></td>
<td>2020/2021: 93</td>
</tr>
<tr>
<td>To publish research findings in book chapters, books and research monographs</td>
<td>Number of book chapters, books or research monographs published by CISUR researchers and students each year</td>
</tr>
<tr>
<td></td>
<td>Benchmark: 25</td>
</tr>
<tr>
<td></td>
<td>2020/2021: 8</td>
</tr>
<tr>
<td>To disseminate research findings through reports, systematic reviews and other resources, nationally and internationally</td>
<td>Number of reports, systematic reviews or other resources published each year</td>
</tr>
<tr>
<td></td>
<td>Benchmark: 35</td>
</tr>
<tr>
<td></td>
<td>2020/2021: 47</td>
</tr>
<tr>
<td>To achieve a high academic impact for CISUR addictions-related research so that it is well known, frequently requested and often cited internationally</td>
<td>Number of citations in peer reviewed journals of research by CISUR scientists and graduate students per year</td>
</tr>
<tr>
<td></td>
<td>Benchmark: 1,000</td>
</tr>
<tr>
<td></td>
<td>2020/2021: 1,473 (Web of Science search, a far more conservative source than the previously used Google Scholar; benchmark may be revisited)</td>
</tr>
<tr>
<td>To conduct seminars, workshops, lectures and occasional conferences on related policy, practice and research</td>
<td>• Number of public research seminars, symposia, workshops or conferences convened or co-convened by CISUR</td>
</tr>
<tr>
<td></td>
<td>• Number of invitations to CISUR researchers to present at conferences or symposia each year and number of papers accepted for presentation by CISUR researchers and students at conferences or symposia each year</td>
</tr>
<tr>
<td></td>
<td>Benchmarks: 5 / 70</td>
</tr>
<tr>
<td></td>
<td>2020/2021: 6 / 74</td>
</tr>
</tbody>
</table>
“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.”

Doing knowledge mobilization in the context of COVID-19 has presented both challenges and opportunities. Unable to hold the 2021 Healthy Minds | Healthy Campuses Summit at the beautiful facilities of UBC’s Loon Lake Lodge & Retreat Centre, we partnered with BCcampus to hold a completely virtual conference with 194 registrants. We experimented with a variety of tools to help increase interactivity in virtual settings. We learned, on the fly, how to create spaces for participants to engage with each other. The post event responses from participants were positive and recognized both the limitations and strengths of virtual events. In all, 83% of respondents felt the virtual Summit was a high-quality professional learning experience.

Also related to Healthy Minds | Healthy Campuses, it was a delight to see the chapter we wrote two years ago about the implementation of a hermeneutic and humanistic approach to health promotion in campus settings finally in print. We have now been invited to write another chapter for an international collection on campus mental health in which we will chart the conceptual history of Healthy Minds | Healthy Campuses.

Our work on dialogue continues, as we receive more invites to help apply a dialogic approach to the complex realities in various settings. Our latest work in this area has been to work with BC Mental Health and Substance Use Services to help address stigma and discrimination in healthcare settings by building capacity for dialogic practice. Building off our previous work, we developed a new series of print resources to support a roll-out of a training program that will use dialogue sessions with a core group of selected individuals who work in, or have lived experience as patients in, the healthcare settings to introduce them to the value of dialogue in building understanding between stakeholders with different perspectives. We will then support these individuals in a practicum as they co-facilitate dialogue sessions within the chosen practice settings. Look for a report on the results in next year’s annual report.

A final highlight was the publication on Here to Help of our paper on Homelessness, Mental Health and Substance Use: Understanding the Connections. In this we bring a health promotion lens to the complex challenges related to the intersection of these issues. We seek to unpack these complexities in a way that helps British Columbians not only understand the issues but see how they might contribute to solutions. This involves building empathy by recognizing and embracing both similarity and diversity.

Engaging in the complexities of life, without being armed with simple solutions, remains an enchantment of knowledge mobilization!
CURRENT PROJECTS

• ALCOHOL AND OTHER DRUG SCREENING AND EDUCATION

**Investigators:** Dyck, T. & Reist, D.

**Funding body:** BC Mental Health and Substance Use Services, a program of the Provincial Health Services Authority

Alcohol and other drug screening and education is an ongoing project aimed at extending the reach of assessment tools and harm reduction information to help more people in BC take greater control over their health in regard to substance use. We promote the idea that screening can function as a tool for self-management. This led us to develop a range of online screening tools that promote reflection and encourage self-directed action. We have also developed paper based screening tools that provide a gateway to conversation between people who use substances and supportive individuals (rather than function as a precursor to diagnosis). These various screening and brief intervention materials have been developed for adults and teens.

The project is nested within the Education Events project of BC Partners for Mental Health and Substance Use Information and, in particular, the Beyond the Blues education and screening days component.

In 2020-2021 our contributions included:

• Participation on the Education Events stewardship team
• Participation on the Beyond the Blues planning group
• Contribution to webinars orienting volunteer clinicians to screening at Beyond the Blues sites
• Motivational conversations at BTB events – and elsewhere (a webinar for site volunteers at Beyond the Blues education and screening events)

For a complete list of CISUR publications related to this project see Screening and brief intervention tools.
• **BC PARTNERS EVALUATION**

**Investigators:** Reist, D. & Norman, T.

**Funding body:** BC Mental Health and Substance Use Services, a program of the Provincial Health Services Authority

This project involves facilitating the development and implementation of an evaluation process for the BC Partners for Mental Health and Substance Use Information. In the past, we have introduced the BC Partners to responsive evaluation with its emphasis on understanding the phenomenological experiences of all stakeholders in an initiative in contrast to other common forms of evaluation grounded in positivist assumptions. This was laid out in an introductory paper (Introduction to Responsive Evaluation). The goal is to build capacity within BC Partners by developing evaluative thinking at all levels of governance and project planning, implementation, and assessment.

In 2020-2021 our contributions included:

- Facilitating discussions within BC Partners on the nature and application of responsive evaluation
- Presentations and workshops
  - Responsive Evaluation: The BCP Initiative (September 2020)
  - Building our Capacity for Evaluative Thinking (February 2021)
- Papers and reports
  - A guide to responsive evaluation for BC Partners programs
  - A responsive evaluation framework for the BC Partners for Mental Health and Substance Use Information
  - BC Partners evaluation project — 2020-21 report
Healthy Minds | Healthy Campuses is a province-wide community-of-practice promoting campus mental health supported by BC Partners for Mental Health and Substance Use Information. The project, which began in 2005, is based on the notion that success in a post-secondary institution, as in any setting, requires attending to the collective well-being of the campus itself as well as the well-being of individuals. It also embraces the notion that health promotion involves building the capacity of individuals and communities to take increased control of their own health and well-being. The project is directed by a Leadership Committee made up of campus representatives assisted by a Support team from CISUR and the Canadian Mental Health Association (BC Division).

In 2020-2021 our activities included:

- Working closely with the Leadership Committee to pursue various goals and objectives identified in the HM|HC Strategic Plan
- Serving on the Support Team
  - Helping to plan and deliver the 2021 HM|HC Summit on a virtual platform
  - Assisting with preparation for, promotion and provision of other online social learning events
  - Exploring potential collaborations on implementation of the Okanagan Charter
  - Encouraging campuses in critical reflection on consistent use of tools from a health promotion perspective
- Publications
  - On the value and limitations of the CCWS for HM|HC: a short commentary
  - Harm reduction: a guide for campus communities
- Presentations and workshops
  - Healthy relationships with substances in campus communities during two current crises (virtual workshop for British Columbia Federation of Students)
  - Promoting dialogue to address stigma and discrimination (dialogue session at the Healthy Minds | Healthy Campuses 2021 Summit)
HERE TO HELP (INFORMATION PRODUCTS)

Investigators: Norman, T. & Reist, D.

Funding body: BC Mental Health and Substance Use Services, a program of the Provincial Health Services Authority

Here to Help is an ongoing project of BC Partners for Mental Health and Substance Use Information. It seeks to help British Columbians and others who visit its web repository learn how to better understand and manage mental health and substance use issues—at home, in the workplace and in the community. As one of seven BC partners, CISUR serves on the project stewardship team and updates substance use information products for distribution on the website.

These activities support health literacy, the knowledge and skills people need to enhance well-being within their environments. Drug literacy, one form of health literacy, means imparting the knowledge and skills needed to effectively navigate a world where psychoactive substances are present and commonly used. This project plays a key role in helping people in the province be better informed when making decisions about substance use in the context of their own unique situations.

In 2020-2021 our contributions included:

- Participation on the project stewardship team
- Publications:
  - Homelessness, Mental Health and Substance Use: Understanding the Connections
  - How do I know if someone has a problem with gambling?

Find a complete list of CISUR publications related to this project at Here to Help
HELPING SCHOOLS

Investigators: Reist, D. & Asgari, M.

Funding bodies: BC Mental Health and Substance Use Services, a program of the Provincial Health Services Authority & Ministry of Public Safety & Solicitor General

Helping Schools is one of our core projects aimed at assessing evidence, identifying promising practices, developing resources to support effective responses to substance use and gambling, 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/gambling 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.

In 2020-2021 our activities included:

- Co-leading the BC Partners Professional learning and capacity building (K-12) project and preparing the research report
  » Professional learning within K-12 system: Report from consultations with educators and parents

- Providing consultation and support to teachers and other school professionals and to school districts and their partners, including the following
  » Supporting schools to engage in effective gambling education (web-based workshop supporting regional gambling prevention specialists)
  » Effective drug/gambling education (a professional development workshop sponsored by Saanich Schools, SD #63)
  » Direct support for a group of PHE teachers in SD #63 to develop and implement their own lessons to build drug literacy in students

Find a complete list of publications related to these projects at Helping Schools and iMinds.
• PROMOTING DIALOGUE

Investigators: Reist, D. & Asgari, M.
Funding body: BC Mental Health and Substance Use Services, a program of the Provincial Health Services Authority

Promoting Dialogue is one of our core projects that promotes the use of dialogue to develop understanding between stakeholders in various settings related to mental health and substance use issues. This project grew out of earlier projects using dialogue to address issues related to cannabis legalization and opioid overdose.

Dialogue can bring people together and bridge divides within communities. It is a manner of communication that involves two-way conversations where people not only speak to each other but also really listen. The intent is to leave the conversation with a better understanding of the topic and the different experiences and perspectives of others that might contribute to greater mutual appreciation and engagement. True dialogue is distinguished from other forms of conversation by how we view “the other.” Each partner in a dialogue is curious about the experiences of the other partners – about their assumptions, beliefs and values.

In 2020-2021 our activities involved working with the Understanding Each Other Together: A journey into our experiences of stigma to celebrate diversity and create change (UNITE) project (an initiative of BC Mental Health and Substance Use Services). Working in partnership with the project team, strategic advisors with lived experience and other BCMHSUS staff, CISUR developed a set of resources to support dialogues within healthcare settings to address stigma, discrimination and other issues and an educational philosophy and training plan for the project.
• **VISIONS: BC’S MENTAL HEALTH AND ADDICTIONS JOURNAL**

**Investigators:** Norman, T. & Reist, D.

**Funding body:** BC Mental Health and Substance Use Services, a program of the Provincial Health Services Authority

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 issues, their family and friends, service providers, community advocates, leaders, decision-makers and those who are interested in learning more about substance use.

**Visions** is a central knowledge exchange vehicle of the BC Partners for Mental Health and Substance Use 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, CISUR serves on the editorial advisory group and contributes articles that focus on substance use and socio-ecological approaches to understanding, addressing and managing substance use issues. This project plays a key role in helping to build a shared understanding of substance use from a health promotion perspective.

In 2020-2021 our contributions included:

- Participation in editorial advisory group
- Providing one staff-written article for the journal: heART space: A community art show about overdose
Memberships, Committees, Advisory Boards, other Leadership Positions

Benoit, Cecilia
- Institutional Member Representative, Royal Society of Canada Council
- Scientific Officer for the Knowledge Synthesis Network grant peer review committee, Canadian Institutes of Health Research
- Chair, External Academic Awards and Honours Committee, University of Victoria, Victoria, BC
- Academic Editor, Substance Use, Misuse and Dependence: Prevention and Treatment. PLOS ONE
- Member, College of Reviewers, CIHR, Ottawa, Ontario
- Chair, Board of the Victoria Youth Clinic Society

Callaghan, Russell
- UNBC Associate Research Ethics Board member, June 18, 2015 – Present.
- Member, College of Reviewers, Canadian Institutes of Health Research (October 1, 2017 – present).
- University of Northern British Columbia (UNBC) Research Data Centre (RDC). Advisory committee member (November 9, 2018-present)
- Population Data BC (PopData BC) steering Committee, Professional Specialization in Population Health Data Analysis Program (PHDA). Committee member (February 4, 2016-present)

Gagnon, Marilou
- Member, College of Registered Nurses of British Columbia
- Founder and President, Harm Reduction Nurses Association
- Member, Advisory Group, Supporting SCS Sustainability in Canada: Through COVID-19 and Beyond
- Member, Task Force on COVID-19, Working Group on Harm Reduction, Royal Society of Canada
- Advisory Committee, SAFER Project, AVI Health & Community Services, with funding from the Substance Use and Addictions Program (SUAP) Grant Application, Government of Canada
- Elected member, Equity Committee, Faculty Association, University of Victoria
- Committee Member, Evaluation and Strategic Planning, Canadian Institute for Substance Use Research, University of Victoria

Naimi, Tim
- Massachusetts medical license # 80922
- Georgia medical license # 052087
- Editorial Board, Journal of Studies on Alcohol and Drugs
- American Public Health Association
- Diplomate, American Board of Internal Medicine
- Diplomate, American Board of Pediatrics
- Diplomate, American Board of Preventive Medicine
- Academic Certification, Royal College of Physicians and Surgeons of Canada
- Co-Chair, Alcohol Policy 19 conference
- Member, Review Panel for Canada's Low Risk Drinking Guidelines, led by the Canadian Centre on Substance Use and Addictions
- Kettil Bruun Society for Social and Epidemiological Research on Alcohol
Pauly, Bernie
- Member, Canadian Public Health Association
- Member, Harm Reduction Nursing Association
- Member, International Harm Reduction Association
- Registered Nurse, College of Registered Nurses of B.C.
- Editorial Board, Drugs: Education, Prevention and Policy
- Special Section Editor, Alcohol Harm Reduction, Harm Reduction Journal
- Founding Editorial Board Member, Witness Journal
- Member, BC Support Unit for Patient Oriented Research Advisory Council
- Member, Canadian Association of Schools of Nursing Research and Scholarship Committee
- Canadian Association of Schools of Nursing, SUAP Advisory Committee member
- Member, RN RPN Prescribing Consultation and Education Committee

Selfridge, Marion
- Registered Social Worker, BC College of Social Workers
- Associate Member, Canadian Sex Research Forum
- Member, Canadian Anthropology Society

Sherk, Adam
- Kettil Bruun Society for Social and Epidemiological Research on Alcohol
- Member, Review Panel for Canada’s Low Risk Drinking Guidelines, led by the Canadian Centre on Substance Use and Addictions

Stockwell, Tim
- Member, Review Panel for Canada’s Low Risk Drinking Guidelines, led by the Canadian Centre on Substance Use and Addictions
- Fellow, Royal Society of Canada
- Affiliate of the BC Centre on Substance Use and the BC Node of the Canadian Research Initiative in Substance Misuse (CRISM)
- MESAS (Monitoring and Evaluation of Scotland’s Alcohol Strategy) Governance Board
- Fellow, Canadian Academy of Health Sciences
- Affiliate Investigator at VCH (Vancouver Coastal Health Research Institute)
- Member, WHO Technical Advisory Group on Alcohol and Drug Epidemiology
- Member, National Drug Surveillance Advisory Committee, Health Canada
- Research Scientist (Affiliate Status), Social Factors and Prevention Interventions Section at Centre for Addiction and Mental Health, Ontario.
- Member of the Advisory Board, Alcohol Research Group, National Alcohol Research Centre, Berkeley, CA
- Adjunct Professor, Curtin University, National Drug Research Institute, Perth, Western Australia
- Member, Kettil Bruun Society for Social and Epidemiological Research on Alcohol
- Member, Australian Professional Society on Alcohol and Other Drugs (APSAD)
Urbanoski, Karen
• Member, Canadian Public Health Association
• Member, Evaluation and Implementation Working Group, Provincial Perinatal Substance Use Project, BC Ministry of Health/Ministry of Mental Health and Addictions
• Member, Advisory Committee, Mental Health and Substance Use Provincial Peer Training Curriculum Project, BC Government/BC Campus
• Member, Core Group, Mental Health and Addictions Research Agenda, BC Ministry of Mental Health and Addictions
• Affiliate Member, Women’s Health Research Institute, BC Women’s Hospital and Health Centre, University of British Columbia
• Member, Primary and Community Care Research Advisory Committee, BC Ministry of Health
• Member, Canadian Association of Health Services and Policy Research
• Co-Chair, National Treatment Indicators Working Group, Canadian Centre on Substance Use and Addiction

Wallace, Bruce
• Registered (RSW), British Columbia College of Social Workers
• Member, Canadian Public Health Association/Public Health Association of BC
• Member, Canadian Association of Public Health Dentistry (CAPHD)

Zhao, Jinhui
• Kettil Bruun Society for Social and Epidemiological Research on Alcohol
Table 5. Performance Indicators for Key Result Area 5: Knowledge Mobilization

<table>
<thead>
<tr>
<th>OBJECTIVES</th>
<th>PERFORMANCE INDICATORS</th>
</tr>
</thead>
<tbody>
<tr>
<td>5.1 To ensure access to relevant knowledge while working in partnership with policy-makers and practitioners in planning and implementing projects to address substance use in Canada and internationally</td>
<td>• Number of projects in which CISUR members collaborate with policy makers or practitioners</td>
</tr>
<tr>
<td></td>
<td>• Number of policy proposals contributed to by CISUR members each year</td>
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<td></td>
<td>• Number of provincial or national committees, advisory boards, communities of practice or other such bodies on which CISUR members are active</td>
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<tr>
<td></td>
<td>Benchmark: 20 / 5 / 25</td>
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<td></td>
<td>2020/2021: 35+ / unknown / 68</td>
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<tr>
<td>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</td>
<td>• Number of resources completed in any one year</td>
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<td>Benchmark: 30</td>
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<td>2020/2021: ~40</td>
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<tr>
<td>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</td>
<td>• Number of visits to CISUR websites each year</td>
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<td>• Number of presentations/workshops/displays each year</td>
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<tr>
<td></td>
<td>• Number of media interviews or citations resulting from CISUR activities each year</td>
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<tr>
<td></td>
<td>Benchmarks: 30,000 / 15 / 150</td>
</tr>
<tr>
<td></td>
<td>2020/2021: 90,054 / 13 / 1,021</td>
</tr>
</tbody>
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