

CANADIAN RESEARCH INITIATIVE IN SUBSTANCE MISUSE (CRISM) 2019-2020 Annual Reporting Template

Background

CRISM is a pan-Canadian national network with four regional Nodes, each of which consists of hundreds of researchers, service providers, policy makers and people with lived experience of substance use. It was created by CIHR in 2014 to accelerate the development and integration of evidence-based interventions around substance use and funded under the Canadian Drugs and Substances Strategy (CDSS).

The Government of Canada is committed to tracking progress and regularly reporting to Canadians on the results of this strategy. CDSS research funding investments within the scope of this annual reporting exercise include:

- CRISM Regional Nodes, including demonstration projects
- OPTIMA
- Implementation Science Program (ISP)

As part of its overall response to the COVID-19 pandemic, CIHR is streamlining the annual reporting process for the 2019-2020 reporting period while still meeting the reporting requirements as part of the CDSS performance measurement strategy.

Annual Reporting Guidance

This is your guide for preparing your annual report, to be completed and submitted to Saima.Malik@cihr-irsc.gc.ca no later than **August 28, 2020 for the period covering April 1, 2019 to March 31, 2020, with the exception of publications, which will be January 1, 2019 to March 31, 2020**. This template is intended to demonstrate your progress towards the achievement of identified objectives, outcomes and impacts.

- CIHR is required to demonstrate the value-added of its research investments, the return on those investments, and their impact. High quality reporting is a critical input to these ends. Please be specific in your written report and respond to all questions. Emphasize value-added outcomes in your responses.
- For the purposes of this report, reporting at the Network level focuses on pan-Canadian activities; whereas Node-level reporting focuses on activities led by a regional Node that are not national in scope.
- Please include pertinent contextual information that will help situate your progress, especially changes in context, challenges, or obstacles that have occurred since your initial application.
- **Note:** Throughout this report, if there is any information that should not be included in the Annual Performance Report, which will be made publicly available, **please bold and underline** this information.
- Reminder: Funding recipients are required to acknowledge CIHR in any communication or publication related to the project. The contributing institutes/partners are identified on the Authorization for Funding (AFF), and decision letter.

**CANADIAN RESEARCH INITIATIVE IN SUBSTANCE MISUSE
2019-2020 Annual Report**

REPORT PREPARATION	
Please indicate who prepared this report, including contributors and what information sources were used.	
Report Lead	<p>Name, Title, telephone #, e-mail</p> <p>BC Node Evan Wood, NPI; evan.wood@bccsu.ubc.ca; 778-945-7616</p> <p>Prairie Node Cameron Wild, NPI; cam.wild@ualberta.ca; 780-492-6752</p> <p>Ontario Node Jürgen Rehm, NPI; jurgen.rehm@camh.ca; 416-535-8501 ext. 34495</p> <p>Quebec-Atlantic Node Julie Bruneau, NPI; julie.bruneau@umontreal.ca; 514-890-8000 ext. 37513</p>
Contributors	<p>Name and Title</p> <p>BC Node: https://www.bccsu.ca/about-crism-bc/ Nirupa Goel, Node Manager Kelsey Van Pelt, Project Coordinator</p> <p>Prairie Node: https://crismprairies.ca/ Denise Adams, Node Manager Colleen Dell, PI David Hodgins, PI Barb Fornssler, KTE Coordinator</p> <p>Ontario Node: http://crismontario.ca/ Farihah Ali, Node Manager Tara Elton-Marshall, PI</p> <p>Quebec-Atlantic Node: https://www.crismquebecatlantic.ca/en/ Aïssata Sako, Node Manager Jennifer Swansburg, Atlantic Coordinator Choi Man (Alice) Lam, Research Projects Coordinator Didier Jutras-Aswad, Lead Regional PI, OPTIMA Paméla Lachance-Touchette, Cannabis initiatives Project manager</p> <p>National: https://crism.ca/ OPTIMA Research team Didier Jutras-Aswad (Lead Regional PI) Jill Fikowski, National Research Coordinator Aïssata Sako, National Logistics and Operations</p>

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<p>List information sources used to prepare the report</p>	<p>Please identify all sources that were used:</p> <p><input type="checkbox"/> x Application</p> <p><input type="checkbox"/> x Work Plan</p> <p><input type="checkbox"/> x Publications: Appendix 1</p> <p><input type="checkbox"/> x Research</p> <p><input type="checkbox"/> x Consultations</p> <p><input type="checkbox"/> x Evaluation Results</p> <p><input type="checkbox"/> x Other (specify): Appendix 2: Implementation Science Program (ISP) project status table</p>
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<p>SECTION 1: Narrative Summary of Key Accomplishments</p> <p>Please provide a summary on the key accomplishments of CRISM in contributing to the goals of CDSS resulting from investments within the scope of this reporting exercise. Each fillable section not to exceed 250 words.</p>
<p>CRISM Network</p> <p>Preventing problematic drug and substance use</p> <p>CRISM activities that supported this CDSS goal include the ISP <i>At-risk Youth and Newer Users project</i>. Youth summits were held on November 12, 2019 (BC) and January 25, 2020 (AB, ON, QC, NS), and were attended by 111 youth who used/ misused opioids. Health Canada's Office of Controlled Substances invited a youth delegate: Maya Nujaim (20 years old), to attend the UN Commission on Narcotic Drugs Meeting. This WG has completed focus groups with youth across Canada and is conducting (1) a scoping literature review and (2) a critical gap analysis survey.</p> <p>Supporting measures that reduce the negative consequences of drug and substance use</p> <p>Four ISP projects directly addressed this CDSS goal, including <i>Supervised Consumption Services (SCS)</i>, <i>Drug Checking</i>, <i>Naloxone Distribution</i>, and the <i>People with Lived Expertise (PWLE) Engagement Project</i>.</p> <p>The <i>SCS project</i> has created a National Operational Guidance document as well as 20 SCS-related KT products that will be released Fall 2020. The planned survey of existing SCS has been postponed due to COVID-19 and will resume Fall 2020 or Winter 2021.</p> <p>The <i>Drug Checking ISP project</i> working group collaborated a joint in-person meeting with CCSA's National Drug Checking Working Group (IoS Conference 2019), identifying the need to standardize and centralize ways to enter and present drug checking results across jurisdictions, using a TEDI-like system, and improving data accessibility for the public. An indicator project on drug checking services is being developed to address Health Canada's research priority. An environmental scan and a systematic review are being carried out.</p> <p>The <i>Naloxone Distribution project</i> is collecting and evaluating evidence related to naloxone which will be used to create recommendations for best practice in the distribution and use of naloxone in cases of suspected opioid overdose in community settings. To ensure that first-hand knowledge and expertise is reflected, the project is extensively consulting with PWLE and take-home naloxone service users.</p>

The national PWLE project group completed their survey of 50 participants on barriers faced by harm reduction service workers and created a report and infographic. An academic article has been submitted. The group also published a Photovoice Journal documenting activism and key issues in their lives.

Supporting innovative approaches to treatment and rehabilitation

OPTIMA Trial: This reporting period saw the (1) successful completion of enrolment across all clinical sites for the trial (Total Enrolled participants = 420, Total Randomized participants = 272), (2) development of publication plan and dissemination of the Authorship & Publication policy document, (3) development of the statistical analysis plan and a data sharing platform to support access of all investigators to trial data, and (4) development of the cost effectiveness analysis plan.

ISP: Seven ISP projects directly address this goal, including: *Treatment of Opioids in Psychosocial and Recovery-based Programs (TOPP)*, *Opioid-Agonist Therapy (OAT) Treatment Protocols/Standards/Strategies for Community-Based and Residential Treatment Centres Who Serve First Nations Clients Who Misuse Opioids (TPF)*, *Expanding Access to Nurse-Led Models of Care*, *Injectable Opioid Agonist Treatment (iOAT)*, *Detoxification and Withdrawal Management (DWM)*, *Correctional Populations*, and *Expanding Access to OAT Initiation: Buprenorphine/Naloxone Rapid Access in Emergency Departments (Bup/Nal ED)*.

The [TOPP project](#) has completed a survey of treatment of individuals with OUD within psychosocial addiction treatment programs across Canada (n=202) and is currently conducting case studies of model programs; this information will inform development of best practice guidance.

The [TPF project](#) is led by the Thunderbird Partnership Foundation. Two project steps were completed during the reporting period to inform development of guidelines for treatment of OUD in Indigenous treatment centres: (1) a literature review, and (2) an environmental scan of treatment centres. The guidelines have been drafted and the project will begin pilot testing of implementation and evaluation procedures shortly. Due to community demand, the project has been expanded to include crystal methamphetamine as well as opioids.

The [iOAT project](#) working group published two complementary documents (Clinical Guideline and Operational Guidance), along with a summary article in CMAJ and a podcast. We conducted an environmental scan of all iOAT services in Canada and presented the results at the CPDD conference in June 2019 and submitted an academic article.

The [DWM project](#) has completed a national survey of withdrawal management services and is currently writing the report of the findings. The group has also begun work on the best practice document to develop recommendations related to detoxification and withdrawal management practices.

The [Corrections project](#) working group continues to actively work on the 4 independent regional projects working with correctional populations as detailed in Appendix 2.

The [Bup/Nal ED project](#) has under review (Spring 2020) a publication based on a systematic review of interventions targeting opioid use disorders initiated in emergency departments. The WG has also completed: (1) in-person survey of emergency physicians' attitudes towards initiating OAT, submitted for publication in AEM; (2) qualitative interviews of emergency physician's perspectives and attitudes towards buprenorphine initiation; and (3) is examining an emergency department program combining buprenorphine/ naloxone to-go packs and an intensive Overdose Outreach Team.

British Columbia Node

Preventing problematic drug and substance use

The BC Node of CRISM has published a number of articles and undertaken knowledge translation activities related to the prevention of prescription opioid addiction, including a recent systematic review and meta-analysis of strategies to prevent prescription opioid addiction in JAMA Network Open as well as an Insights article in the Journal of the American Medical Association on avoiding prescription opioid addiction. We have also undertaken research and knowledge mobilization in the area of preventing severe alcohol withdrawal syndrome.

Supporting measures that reduce the negative consequences of drug and substance use

We partnered with many local organizations to host a series of dialogue and learning sessions for families, caregivers, and service providers in 8 communities around BC (April-Dec 2019). In each community, we hosted 4-6 sessions that aimed to mobilize knowledge, build resilience, and build capacity and networking in order to support loved ones struggling with addiction. [Summaries](#) for each series were shared with participants.

In response to increasing momentum for illicit drug alternatives, we partnered with Vancouver Coastal Health Authority to develop a new guideline for prescribing safe medications. Due to the COVID pandemic, we pivoted this work to create a rapid document to support healthcare providers in helping their patients self-isolate and reduce the risk of COVID-19. This [Risk Mitigation guidance](#) was published in March 2020 and endorsed by the BC government, disseminated to all health authorities, and was also adapted by several other jurisdictions in Canada.

We have continued our drug checking program in 5 locations and completed 11,000 tests during this period. The study team submits a monthly report to provincial health authorities summarizing the key indicators and results of testing in their jurisdictions and issues public health notifications for particularly dangerous batches of street drugs. In addition, this work generated 5 peer-reviewed publications over the last year and launched 2 companion studies, one focused on evaluation and one on implementation.

Supporting innovative approaches to treatment and rehabilitation

CRISM BC has continued to lead ground-breaking work in clinical guidelines for substance use disorders. We completed a provincial treatment [guideline](#) for alcohol use disorder in December and have conducted training sessions for over 550 healthcare providers across BC. We also provide ongoing support to the BC government around policies and updates regarding medications for opioid use disorder, such as advocating to increase the number of [methadone formulation options](#). We also led the revision of a patient handbook for opioid users, publishing a new "[Opioids Survivor Guide](#)" in May 2019 that describes the real patient experience and the pros and cons of various treatments. In March 2020, we rapidly published a guide for prescribers on providing [opioid agonist medications](#) and how to adapt healthcare services during the pandemic.

The CRISM BC research teams have made substantial progress in participant recruitment and data analysis for several studies. The [OPAC study](#), which tracks healthcare utilization and outcomes following inpatient treatment at St. Paul's Hospital, enrolled 239 patients and presented interim data at 3 conferences. The [pRESTO](#) study is a non-inferiority randomized clinical trial that will compare slow release oral morphine vs methadone for opioid use disorder. All regulatory approvals were obtained and training activities were completed, and 27 patients were enrolled before the pandemic caused significant interruptions. The iOAT evaluation study enrolled 78 participants and completed 47 follow-up interviews. An interim data analysis was conducted and the report was distributed to policymakers, clinicians, and PWLE.

Prairie Node

Preventing problematic drug and substance use

The Prairie Node supported 7 regional projects addressing this CDSS objective. Brief descriptions of these projects are provided in the 2018-2019 report to CIHR, including: 1) *the SSMRT Project*; 2) *the CoMRAD project*; 3) *Developing Addiction Education Resources for Pharmacists*; 4) *Development and Dissemination of Podcasts on Addiction Topics*; 5) *Informing Choices - Cannabis Information Hub*; 6) *the CRISM Data Visualization project*; and 7) *Alberta Rural Development Network Rural Cannabis Education Program*.

Regarding knowledge exchange, CRISM | Prairies provided bronze level sponsorship (\$250) for the Pain and Therapeutics conference hosted by the College of Medicine at the University of Saskatchewan (October 5 2019) and hosted a table to share information about Node activities, increase membership, and ensure knowledge dissemination and uptake. Dr. Dell has been involved in the "Can Your Cannabis" campaign that took place at the University of Saskatchewan as well as production of door hangers targeted at university students that promote CRISM's Lower Risk Cannabis Use Guidelines or Canada's Low Risk Drinking Guidelines. Materials are available at: <http://www.colleendell.ca/artwork/>

Supporting measures that reduce the negative consequences of drug and substance use

CRISM | Prairies supported 9 research projects addressing the negative consequences of drug and substance use. Brief descriptions of these projects are provided in the 2018-2019 report to CIHR, including: 1) *the SSMRT Project*; 2) *the CoMRAD project*; 3) *Implementing Harm Reduction Services in Acute Care: Patient and Healthcare Provider Experiences*; 4) *Sex Work and Harm Reduction in Edmonton: Safe Spaces, Healthy Options, Secure Choices*; 5) *Naloxone Take-Home Kit Program Evaluation Studentship*; 6) *Corrections in the Time of the Opioid Crisis*; 7) *Naloxone Smart Patch Development*; 8) *Take Home Naloxone in the Royal Alexander Hospital Emergency Department*; and 9) *Safe Consumption Evaluation for Winnipeg*.

CRISM | Prairies provided direct support to harm reduction advocacy and PWLE as part of its community engagement activities. Specifically advocacy efforts for 2019-2020 included consultation and relationship building between individuals and organizations in the city of Regina, 'Making Regina a Recovery City' meeting June 27 2019 (AIDS Saskatoon - Node member: Jason Mercredi) and CRISM Prairies (Dr. Fornssler) provided presentations regarding safe consumption site application and community leadership. Approximately 35 stakeholders attended representing community-organizations, provincial and federal health services (AIDS Program South SK, All Nations Hope Network, Regina Police Services, United Way, Mental Health and Addictions provincial service providers, First Nations and Inuit Health Branch Regina, and others). The resulting advocacy group continues to build momentum for enhanced harm reduction and recovery services in Regina including 1) Facilitating relationship between the Canadian Association of People who Use Drugs (CAPUD) Saskatchewan representative (Node member: Ms. Brandi Abele) with the Public Health Agency of Canada 'Opioid Related Harms Division' (Jenny Rotondo MHSc.) for PWLE data review and consultation; and 2) Providing ongoing support for media and community relations messaging with Safe Consumption Site at AIDS Saskatoon (ie: provincial funding advocacy and alternate funding streams research).

The Prairie Node is also facilitating the ISP project titled *Sharing Knowledge and Generating New Evidence to Support Implementation of Supervised Consumption Services in Canada*, which is developing guidance documents and 20 KT products for supervised consumption sites.

Supporting innovative approaches to treatment and rehabilitation

The Prairie Node addressed this CDSS goal by supporting 8 research projects related to this CDSS goal. Brief descriptions of these projects are provided in the 2018-2019 report to CIHR, and include: 1) *Project Engage*; 2) *the Veteran's Opioid Project*; 3) *the CoMRAD project*; 4) *Piloting the Addition of Contingency Management to Best Practice Counselling as an Adjunct Treatment for Rural and Remote Disordered Gamblers and Substance Users*; 5) *Adaptation of Contingency Management to an Adolescent Treatment Setting*; 6) *Improving Success of the Methadone Clinic in Prince Albert, Saskatchewan*; 7) *Scoping Review of Evaluation Methods for Addiction and Mental Health Mobile Applications*; and 8) *Predictive Modeling for Treatment Outcomes for Amphetamine Users in Residential and Detox Programs*.

Regarding knowledge exchange, the Node is leading the project entitled *Scoping review of psychosocial interventions in the treatment of opioid use disorder*. In addition, Dr. Dell's work has contributed to informational materials on recovery including those produced by the Saskatchewan Health Authority and Canadian Centre on Substance Use & Addiction. Materials are available at: <http://www.colleendell.ca/artwork/>

The Prairie Node is also supporting one site for the OPTIMA trial (Calgary) and is facilitating two ISP projects examining treatment for OUD *Treatment of Opioids in Psychosocial and Recovery-based Programs (TOPP)* and *Opioid-Agonist Therapy (OAT) Treatment Protocols/Standards/Strategies for Community-Based and Residential Treatment Centres Who Serve First Nations Clients Who Misuse Opioids (TPF)*.

Under our Small Project Grants program we supported a clinical training program offered to Prairie front-line providers, *Rationale/early experience of Vancouver's crushed hydromorphone iOAT program*; over 80 participants attended this session.

Ontario Node

Preventing problematic drug and substance use

OCRINT supported the inception and development of 12 demonstration research projects dealing with prevention of problematic drug and substance use. Brief descriptions of these projects are provided in Table 4, including: 1) *the NIMBY project*; 2) *the Blunt Truth Evaluation*; 3) *Service Provider survey*; 4) *People with Lived Experience Interviews*; 5) *SOONER project*; 6) *Chronic Disease Self-management Experiences among Marginalized People who Use Drugs*; 7) *Impacts of Overdose Study*; 8) *Facilitating best practices in*

buprenorphine/naloxone initiation in provincial correctional facilities through the development of tools for health care staff; 9) Update of evidence-based best practice recommendations for harm reduction programs that provide harm reduction equipment to people who use drugs; 10) It takes a Village: Social Inclusion, support and purpose as a means of supporting individuals engaged in substance misuse in a Rural First Nation in Ontario; 11) Integrated Relapse Prevention Treatment Pathway for Women with Alcohol Misuse; and 12) Asset Mapping of Substance Use Prevention and Intervention Programs and Services: A Comprehensive Review of Chippewas of Nawash Unceded First Nation.

OCRINT held its second annual symposium on September 10 2019 and engaged extensively with the community to gather feedback and perspectives on research priorities to inform OCRINT research and projects, whereby each attendee filled out a survey on research priorities and had the opportunity for open discussion and dialogue.

The OCRINT leadership team members have also participated in the following committees: Elton-Marshall is a member of the Champions Circle for Cannabis Knowledge Exchange Hub and the CAMH Opioid Internal Network (COIN).

OCRINT has published dozens of peer-reviewed articles which support the prevention of problematic substance use.

Supporting measures that reduce the negative consequences of drug and substance

CRISM's Lower Risk Cannabis Use Guidelines (LRCUG) have been an essential evidence-based population-health prevention tool for cannabis use and health risks. The KT materials are available for purchase on the CAMH store. Between April 1 2019 - March 31 2020 it has distributed:

- The Blunt Truth: Useful Tips About Ways to Use Cannabis English: 26,925
- The Blunt Truth: Useful Tips About Ways to Use Cannabis French: 1,200
- 10 Ways to Reduce Risks to Your Health When Using Cannabis English: 8,650
- 10 Ways to Reduce Risks to Your Health When Using Cannabis French: 850

The by-youth-for-youth LRCUG product, Blunt Truth, has been a popular resource to support the reduction of negative consequences related to cannabis use. The team has been invited to present at:

- Knowledge Exchange Workshop for CIHR's Population Health Intervention Research on Legalization of Cannabis funding opportunity, June 2019, Ottawa;
- CCSA Issues of Substance Conference, November 2019, Ottawa;
- PHAC Public Education Partnership Symposium on Substance Use, March 2020, Ottawa

OCRINT partnered with YouthRex Research & Evaluation eXchange to develop the Cannabis Education Project. OCRINT developed one lesson of the certificate program, outlining the recommendations documented in the LRCUG. In doing so, we partnered with the Margaret and Wallace McCain Centre for Child Youth & Family Mental Health, CAMH to co-develop the lesson. The *Cannabis and Youth: A Certificate for Youth Workers* is a free certificate that provides youth workers with the knowledge and tools they need to support informed decision-making, and to educate and increase awareness among youth people. To date, 2,348 people enrolled in the Cannabis and Youth Certificate, and issued 1,039 certificates of completion.

Supporting innovative approaches to treatment and rehabilitation

Ontario is one of the four Nodes co-developing, leading, and implementing the CIHR-funded OPTIMA trial, with two sites in Ontario (Toronto and Sudbury). The OPTIMA trial provides important additional evidence on the feasibility and effectiveness of different therapeutic systems options for prescriptions opioid disorders.

The project *Facilitating best practices in buprenorphine/naloxone initiation in provincial correctional facilities* is working towards developing evidence-based tools for health care providers in provincial correctional facilities to facilitate the adoption of best practices for buprenorphine/naloxone initiation in provincial prisons in Ontario.

The *Surviving Opioid Overdose with Naloxone Education and Resuscitation (SOONER) Trial* is working to compare the effectiveness of point-of care overdose education and naloxone distribution versus referral to an existing community program in the management of simulated opioid-associated resuscitative emergencies.

The project *Chronic disease self-management experiences among marginalized people who use drugs* explores the chronic disease self-management and self-management support experiences of socioeconomically marginalized PWUD living with other chronic conditions. The project is particularly interested in understanding patient perspectives on the interplay between managing chronic conditions while also using substances, and how this relates to engaging with health and social services.

The 'Comprehensive Review with Chippewas of Nawash' project is developing an asset map of existing programs and treatment services available to people living with substance use issues in the community.

Quebec/Atlantic Node

Preventing problematic drug and substance use

SuboxED (ATalbot): Developed a clinical algorithm for dispensing take-home naloxone and prescribing buprenorphine/ naloxone in EDs. Outcomes instrumental in Ministère de Santé et Services Sociaux's decision (October 25 2019) to remove barriers by making naloxone kits available in healthcare institution pharmacies, and removing kit costs to hospitals.

SUNAR (Direction 180): Provided protocol development expertise in supporting a successful SUAP-funded project, Substance User Network of the Atlantic Region (SUNAR). Project aims: 1) increase access to evidence-informed overdose prevention efforts; and i2) engagement between PWUS, service providers and stakeholders.

Feasibility of personality-targeted interventions to reduce polysubstance abuse among OST clients (PConrod/ SStewart): [Publication](#) in *Addictive Behaviors*, 2019. Results to be disseminated to participating MMT clinics (webinar).

Univenture (SStewart): Providing implementation and organizational expertise to a \$2.5 million SSHRC grant (April 2019) which investigates the impact of adapting the [Preventure](#) program to University campuses.

4th Research Development Program (RDP) (2019-2020): Funded 5 proposals (\$10k each) addressing intervention of problematic substance use in one of two themes: Women and/or Indigenous populations.

Previous RDP selected outcomes:

Opioid Use/ Prescription for Non-Specific Low Back Pain (JHayden): 2018 RDP funded project examined the relationship between initial opioid prescription and likelihood for prolonged opioid use in ED opioid-naïve patients with low back pain. Manuscript under review, (March 2020).

Prescription Monitoring Programs (MAsbridge): 2017 RDP funded project evaluated the impact of PMP in reducing inappropriate opioid prescribing and related-harm, resulting in a successful CIHR 2018 Operating Grant. Publications: [Rhodes et al.](#); [Wilson et al.](#); 3rd publication under review (*Pain Medicine Journal*).

Supporting measures that reduce the negative consequences of drug and substance use

PreP and HCV treatment: 1) Leveraging infrastructure (training and data collection) to initiate a new HCV project at Onen'tó:kon healing lodge for rapid testing-- expanding research capacity within Indigenous communities; 2) Organizing partner of the INHSU annual conference (Montreal); responsible for the community day.

HEPCO: Prevention of drug-related harms- cohort study: Supported by CRISM infrastructure, including recruitment strategies, data collection/analysis, training, and student supervision.

Paramedic Response to Opioid Crisis: Contributed to the Canadian Standards Association and Paramedic Association of Canada working group in developing a national standard (Fall 2020) and KT tools.

Access to take home naloxone: MSc trainee completed thesis based on an observational study analysing the accessibility of naloxone to IDU research teams, including a review of node's research projects on naloxone access.

Injection Drug Use: Provided infrastructure and expertise for Dr. NBettache's CIHR-funded project: *Evaluation of an intervention project in the management and transition of care of people who use drugs hospitalized in the CHUM internal medicine unit.*

Safe Supply: Adapting BCCSU's [Risk Mitigation guidance](#), Dr. M-ÉGoyer and the Institut Universitaire sur les dépendances developed a [Safe supply clinical guidance document](#) for Québec (2020). Node supported CAPUD and the Canadian Drug Policy Coalition in the National Safe Supply Working Group to expand knowledge and support of regional initiatives. Supporting MBonn in Atlantic Safe Supply webinar.

Stimulus 2020: Stimulus National Implementation and Planning (SNIP) committee member, supporting October 2020 conference organization. Contributing to national response to the parallel public health emergencies of the toxic illegal drug market and COVID-19.

Supporting innovative approaches to treatment and rehabilitation

COAST study (LJackson/ CMaclsaac): Node providing implementation and evaluation expertise to CIHR-funded COAST project to conduct surveys and interviews with PWUS, family/ friends, identifying barriers/ facilitators to treatment programs in Atlantic Canada.

Pain Research: The HEPCO cohort/ QA node received PUDS funding (February 2020) *Chronic non-cancer pain, drug use, and related harms: Towards an optimal treatment pathway for people who use drugs in the context of the opioid crisis*, integrating pain research into node's research repertoire; Node members actively involved with the Québec Pain Research Network.

HIV Test and Prevent: M2HepPrEP increased node's capacity in conducting international level clinical trials. Recruitment: 25 PWID and 18 randomized participants (access to PrEP and HCV offered).

Treatment of Depression in Individuals with Opioid Use Disorder (Didier Jutras-Aswad): 2018 RDP funded project conducted a Canada-wide survey on the preferences of people with opioid addiction for the treatment of depression. Manuscript in progress: *Management of comorbid depression among opioid dependent patients: A patient preferences study* (Bastien et al.).

Substance use cessation therapies for those at-risk in early intervention services for psychosis (Phil Tibbo): 2018 RDP funded project conducted systematic review to address the absence/ inconsistent use of substance use cessation therapies in early intervention services for psychosis. Manuscript in progress (Crocker et al.).

Project ECHO CHUM (Extension for Community Healthcare Outcomes): Node members as ECHO team leads: Drs Dubreucq, Juteau, Talbot, Marsan (Troubles concomitants); Drs Martel-Laferrrière, Brissette (Hépatite C), Dr. Boulanger (Douleur Chronique). Node infrastructure was leveraged for the research arms of these projects.

Please confirm that 100% of the CDSS research funding supports one or more of the [CDSS goals](#). If not, please explain.

This is confirmed

SECTION 2A: Research Capacity

Please describe how and the extent to which the Nodes have strengthened research capacity, including within targeted populations (e.g., youth, Indigenous communities, correctional populations, etc.). Each fillable section is not to exceed 250 words.

British Columbia Node

The OPAC, corrections to community transition, Suboxone initiation in the ER, drug checking, pRESTO, and iOAT studies have all expanded in capacity. In total, 15 people were hired to carry out these studies, and over 50 individuals (primarily physicians, nurses, and pharmacists) were trained on these studies to support enrollment and implementation of the clinical aspects. Of those trained, 5 were PWLE. For the pRESTO study, the design and the informed consent form were reviewed by a PWLE group. The corrections community

transitions study held a summit in February 2020 to bring together all co-investigators, knowledge users, and community members to discuss the research plan.

The BC guideline for alcohol use disorder involved 39 committee members, 3 of whom identified as Indigenous, including one who was also a PWLE. Similarly, the two national iOAT guidelines involved 38 individuals, 8 of whom were PWLE and 2 who identified as Indigenous. These individuals gained experience in understanding research results and their clinical implications.

The ISP National PWLE working group (15 members) completed research on harm reduction service employees and a Photovoice project. This group also participates in other CRISM research and guideline development activities. One member is Indigenous and active recruitment for additional members is ongoing.

For the youth-focused national project, the BC group formed a Youth Advisory Committee with 10 members, to plan a youth summit related to substance use and services. This committee was involved at every stage, including determining the topics and facilitating the discussions.

We annually host a NIH-funded fellowship that trains 4 clinicians in substance use research and provide additional research training opportunities for medical students and resident physicians.

Prairie Node

Since the previous reporting period, we have increased node membership from 341 to 385 individuals affiliated with 139 institutions. To date, we have provided regional project funding of \$674,750; Node members have leveraged those funds to obtain \$2,933,550 for regional grants and contracts, over a 4-fold return on these investments.

Dr. Wild is a co-investigator on 2 youth-focused CIHR catalyst grants titled *Developing Cannabis Education and Harm Reduction Messages with Youth*, and *Secondary prevention of cannabis-related harms among youth and young adults: A pilot RCT*. A new PhD student supervised by Dr. Wild is developing her dissertation research out of the Node's SSMRT demonstration project, which focuses on cannabis harm reduction and brief intervention. We have also developed a relationship with the new RCMP K Division Community Policing Youth Strategies Program Coordinator, Deanna Hagen, as well as the Indigenous Policing team and have begun efforts to build collaborations on youth-focused addiction initiatives for rural communities in AB, including Indigenous communities.

Engagement with Indigenous stakeholders continues to be a priority and we have recently partnered with a new CRISM member in the Faculty of Education at the University of Alberta (Dr. Trudy Cardinal) to conduct Node development projects documenting the healing journeys of Indigenous PWLE.

Regional corrections populations are also addressed through our ISP projects as well as through ongoing work by node members Jones, Haggerty, Dell, and Chalmers. We have also established a relationship with newly launched RCMP programs focusing on youth and Indigenous populations and financially supported an officer training workshop titled *K Division Youth Officer Training: Trauma and Addiction*.

Ontario Node

OCRINT has supported the evaluation of the *Youth Blunt Truth* tool; the evaluation will survey those who have purchased the tool to understand the effectiveness of the tool and modifications they would suggest for future iterations.

OCRINT partnered with YouthRex to develop a certificate for youth workers, a self-guided online professional development certification that provides youth workers with evidence-based information on the health, social and legal risks associated with cannabis use.

OCRINT has supported two Indigenous-specific projects:

- 1) *It Takes a Village*: Apply best practices from existing social prescription programs to test their effectiveness in supporting individuals with lived experience of substance misuse in Whitefish River First Nation. The community-based team will test the role of increased social inclusion, social support, and a sense of purpose play in improving the quality of life of enrolled individuals and their families;
- 2) *Asset mapping of substance use prevention and intervention programs and services of Chippewas of Nawash First Nation*: Document jurisdiction mandate and accountability structure for each program and service; identify

any gaps in programs and services; develop an asset map of existing programs and services available; and create materials that ensure that service providers and community members know what is offered.

A systematic review entitled *Opioid-Related Treatment, Interventions and Outcomes among Correctional Populations* was published in December 2019. The manuscript is a systematic review of opioid use interventions delivered during and post-incarceration/release among adult correctional populations

Given the high prevalence of OUD in people who experience imprisonment, and increased risk of concomitant harms in this population, OCRINT is producing tools to support evidence-based buprenorphine/naloxone initiation to reduce harms in those imprisoned, and could impact the opioid overdose crisis in Ontario.

Quebec/Atlantic Node

Indigenous Working Group (IWG): 20+ members representing 10 Atlantic Indigenous communities (NB: Eel Ground, Burnt Church, Oromocto, Tobique, St. Mary's, Kingsclear, Red Bank; NS: Eskasoni; PEI: Mi'kmaq, Lennox Island). November 2019, February 2020 discussions led to a literature search and environmental scan to identify available trauma informed care services in substance use intervention.

Emergency Health Directors Meeting: ASako and JSwasburg invited to Emergency Health Directors Meeting (Moncton, March 2020) to understand the impact of the Indian Day School Class Action, and exchange ideas on challenges facing First Nations communities and survivors. Discussions held with Drs. DMartin and MLatimer (Dalhousie), PMagee (CAMH-NS) on IWG collaboration.

MEDTEQ: Supported Dr. ATalbot's successful MEDTEQ application on improving accessibility and quality of outpatient addiction services for the Listuguj community, furthering node's reach to northern QC Indigenous communities.

Research Development Program: Two of five submissions collaborated with Indigenous communities (MMorton-Ninomiya & Sheshatshiu and Mushuau Innu; DWendt & Eskasoni), furthering node capacity and engaging Indigenous communities.

New research expertise: Dr. NChadi, first North American pediatrician to complete Pediatric Addiction Medicine Fellowship (Boston Children's Hospital, 2019), expands node's research priorities in addressing problematic use of tobacco, e-cigarette, and marijuana in youth populations. Drs. KThompson and SEllenbogen's focus on youth/at-risk populations' substance use/mental health compliments existing node expertise.

30+ years of developing/implementing correctional programming, research, and substance abuse interventions, DVaris strengthens the node's correctional populations' research capacity. Drs. CBrunelle, NBrunelle, SBrochu, MWatt examine incarcerated drug users' care access, substance use and adolescent delinquency, and substance use/mental health among women offenders.

SECTION 2B: Research Personnel

Please list all research personnel including trainees supported by CDSS funding, including positions supported from other sources.

	Supported by CDSS funds								Supported from other sources							
	Unique # of Individuals				# of FTEs				Unique # of Individuals				# of FTEs			
Staff	BC	P	ON	QA	BC	P	ON	QA	BC	P	ON	QA	BC	P	ON	QA
• Researcher	0	2	2	1*	0	0.4	2	**	9	15	7	17	3.0	3	6	**
• Research Assistant	8	10	4	11	7.7	9	6.5		7	0	4	5	6.0	0	0	

• Research Technician	0	0	0	1	0	0	0		0	0	0	4	0	0	0	
• Other (including Research Manager)	6	5	1	5	4.45	3	0		4	2	0	1	3.0	0.4	0	
Staff Total	14	17	7	18	12.15	12.4	8.5		20	17	11	27	12.0	3.4	6	
Trainees																
• Post-Doctoral Fellow	0	0	0	5	0	0	0		1	3	0	2	0.3	3	0	
• Health Professional Fellow	0	2	0	1	0	0.4	0.83		6	0	7	1	2.9	0	1.2	
• PhD	0	3	0	8	0	3	2		0	4	0	14	0	4	0	
• Masters	0	5	0	4	0	5	3		19	10	1	7	1.9	10	1	
• Under-graduate	1	3	0	5	1	3	2.15		3	0	1	2	3.0	0	1	
• Other	0	0	0	0	0	0	2		0	0	1	0	0	0	0.2	
Trainee Total	1	13	0	21	1	13	10.8		29	17	10	26	8.1	17	3.4	

**NPI counted even though she received no specific salary for CRISM appointment.*

***As the FTE calculation process differs in all the different QA node institutions that host staff and trainees, we have elected not to include these numbers. Only a handful of staff members are not full time working 4 and 3 days a week on CRISM initiated, supported and or associated projects. All staff work on projects that intersect with CRISM specific and funded projects. The nature of our node infrastructure and the research program implies and requires that work on linked projects.*

SECTION 3: Node Membership					
Please indicate the current Node membership.					
	Current Node Membership (Number of Individuals and % of Total)				
	BC	Prairies	ON	QA	Total
• Academic Researchers	33 (15%)	189 (49%)	52 (34%)	136 (60%)	410
• Policy Maker/ Gov/ Regulatory Authority	55 (25%)	16 (4%)	12 (7%)	38 (17%)	121
• Service Providers	115 (53%)	125 (33%)	43 (28%)	83 (37%)	366
• Service Program Managers	10 (5%)	72 (19%)	7 (5%)	12 (5%)	101

<ul style="list-style-type: none"> Advocacy/ People with Lived Experience (PLE) 	22 (10%)	27 (7%)	36 (24%)	13 (6%)	98
<ul style="list-style-type: none"> Foundation/ Institute/ Education/N on-Profit 	2 (1%)	12 (3%)	1 (1%)	7 (3%)	22
<ul style="list-style-type: none"> Professional Organization 	1 (0.5%)	4 (1%)	0	2 (0.9%)	7
<ul style="list-style-type: none"> Public/ Indigenous Elders 	0	3 (1%)	0	4 (2%)	7
<ul style="list-style-type: none"> Other 	6 (3%)	7 (2%)	0	0 (0%)	13
<ul style="list-style-type: none"> Total (>100% as some members hold multiple roles)* 	219 individuals *(244 roles = 111%)	385 individuals *(455 roles = 118%)	151 individuals *(197 roles = 130%)	225 individuals *(295 roles = 131%)	780 individuals *(1145 roles)

SECTION 4: Engaging People With Lived and Living Experience and End Users

Please describe your engagement with People With Lived and Living Experience and End Users, including Indigenous communities (maximum 250 words per fillable section).

Network

Ensuring that the voices of people with lived and living experience (PWLLE) are included in Node activities is crucial for understanding and addressing the needs of those directly suffering from substance use problems as well as of their families and communities. Working relationships have been developed with individuals and advocacy groups that will allow for their participation in planning and conducting node activities.

OPTIMA: Community engagement is absolutely critical to the success of the trial. Sites continued to work very closely with local community organizations and participated in outreach efforts with teams in the community. These include but are not limited to: safe consumption services, local health authorities, and provincial outreach teams as well as PWLE such as hiring peer research assistants and engaging peer navigators. People with lived experience have been brought into recruitment efforts, oral presentations, meetings, and discussion groups. One of the OPTIMA ancillary projects uses qualitative interviews to collect perspectives of the trial from participants and study staff. It is anticipated that the results from this study will not only help inform future trial design, but ensure participant experience is understood in a clinical practice setting.

ISP: Engagement with PWLE includes:

- 1) CRISM meets with the ISP PWLE national working group monthly to discuss research ideas and drug policy. Through additional phone meetings and frequent email communication, the group has completed 2 major research projects to-date: see appendix 2;
- 2) The ISP iOAT guideline documents engaged 38 individuals (health professionals, service managers, researchers, and PWLE) through a series of meetings and review cycles. We facilitated specific meetings for 8 PWLE members for in-depth dialogue and feedback;

3) The ISP Naloxone Best Practice Guideline has formalized a partnership with the ISP PWLE group including 3 consultation processes over the course of 12 months around evidence identification and synthesis.

British Columbia Node

BCCSU and CRISM BC hosted their first conference, *Coming Together*, in May 2019. The three-day event covered research, education, and clinical care across many substance use topics. Over 600 stakeholders including healthcare providers, policy makers, over 50 PWLE, and family members attended. The keynote lecture was given by Mae Katt, a nurse from Temagami First Nation.

We co-hosted Stronger Together, a series of dialogue sessions for families and caregivers. We partnered with local/regional organizations in eight communities, including Powell River, Fort St. John, Prince George, and Surrey. In each, we hosted 4-6 sessions, with 4-22 participants. Several sessions were specifically for Indigenous family members and were co-facilitated by local Indigenous staff. Summaries were shared back with participants. Additionally, we held in-person consultation meetings throughout the year with PWLE (4 meetings), family members (4), and combined groups (2).

We convened a PWLE committee (11 members) to update a patient handbook for accessing and managing treatment for opioid use disorder. They co-created the content and design of the new Opioids Survivors Guide, with original artwork from an Indigenous artist.

Our partnership with First Nations Health Authority continued and launched several new outreach initiatives, including supporting rural and remote communities to access the BCCSU online substance use clinical education programs and fostering dialogue around stigma and supporting family members.

We have substantial public engagement through our news releases, website, Facebook, and Twitter platforms. For example, the AUD guideline webpage had 1,700 views from December-March. We have 3200 Twitter followers and sent 400 tweets; we also have 2,200 Facebook followers and posted over 100 messages.

Prairie Node

The Prairie Node engages with our members via website, newsletter and bulletins, targeted outreach, and in-person and virtual meetings. Specific knowledge user engagement examples include:

1) Outreach activities to PWLE and advocacy organizations, including: Alberta Addicts Who Advocate and Educate Responsibly (AAWEAR), Access to Medically Supervised Injection Services Edmonton (AMSISE; a coalition of Edmonton-based agencies and service providers coordinating medically-supervised injection services), Safeworks (Calgary's harm reduction program), Streetworks (Edmonton's harm reduction program), the Bissell Centre, Boyle Street Community Centre, AIDS Saskatoon, Saskatchewan Advocates for Safe Consumption (SASC), and the Manitoba Harm Reduction Network MHRN) occurs via consultative meetings, hosting information and links on our website, and specific project support. Three of our node members are also CAPUD board members;

2) New Indigenous stakeholder engagement includes partnering with a new CRISM member at the University of Alberta to conduct narrative inquiry projects focused on the healing journeys of Indigenous PWLE. During the reporting period, we have also actively pursued new or strengthened existing relationships with Indigenous stakeholders such as the AB RCMP and Indigenous Elders, including funding and attending ceremony in Maskwacis, AB, Sept 21 2019. The new relationship with AB RCMP resulted in a CRISM sponsored workshop on police and community perspectives of policing and addictions delivered by Node member Matt Ingrouille on Feb 25 2020;

3) Additional engagement that is under development is a partnership between CRISM and the Edmonton Police Service through their new Meth and Narcotics Research Sub-Committee, headed by node member Dan Jones. The first meeting was held Jan 31 2020;

4) We have also actively pursued a relationship with the Alberta International Medical Graduates Association (AMIGA) and provided an invited presentation about CRISM on Dec 4 2019 to 40 AMIGA members.

Ontario Node

We established a part-time role for a Peer Consultant. This role is held by a PWLE and provides support in the development, recruitment, engagement and consultation of the *Identifying Priorities for Drug Use Research in Ontario among People with Lived Experience* Project.

We have continued the role for a PWLE to be part of our executive OCRINT committee whereby the individual participates and is involved in decision-making of priorities moving forward.

OCRINT has actively engaged in a number of outreach activities to a number of drug user and professional organizations, including: Families for Addiction Recovery; Ontario Peer Development Initiative; The Jean Tweed Centre; George Hull Centre; Skylark Children, Youth & Families; Loft Community Services; and East Metro Youth Services. Furthermore, OCRINT connected directly (in person and/or via phone) with PWLE to discuss research priorities for OCRINT, as well as engaged with them extensively in the development of the PWLE Interview project.

PWLE also had extensive involvement in our symposium, where they were invited to present on the do's and don'ts of working with PWLE during research. We also held a roundtable discussion with them about their priorities and concerns regarding research and how OCRINT can support them.

OCRINT has also formalized partnerships with two peer-led user groups: Canadian Association of People who Use Drugs (CAPUD) and Drug Users Advocacy League (DUAL) as well as with Moms Stop the Harm.

The Naloxone ISP project worked closely with the Peer ISP group as part of the development of the best practice guideline.

Quebec/Atlantic Node

INHSU 2019 Chill space/ Connecting with Care: Leveraged node's KT expertise and PWLE network to organize a satellite community forum with INHSU 2019, showcasing living experience and community work. Node operated a harm reduction chill space, supporting the presence of 2 harm reduction specialists and providing information on harm reduction practices, overdose prevention, pharmacy access and collaborating clinics for prescriptions/urgent care in Montreal. Node connected with local community and Indigenous stakeholders to contribute to the film [Connecting with Care \(Connor Ashleigh\)](#).

Supporting 2019 Atlantic symposium attendance: 1) Seven PWLE attendance supported, representatives from REZO santé Montréal, AIRN, Avenue B, Ensemble, CAPUD/ HANDUP and Direction 180; 2) Dr. JClark (Abegweit First Nation) opened with a Welcome and Blessing. Twelve attendees from Abegweit, Esgenoopeitij, Metepenagiag, Natoaganeg, Lennox Island, Eskasoni, and representatives from Indigenous Services Canada and the PEI Mi'kmaq Family Resource Center attended, increasing attendance and collaboration from Atlantic Indigenous communities; 3) Support and travel funds provided for JRoper (Clinician), is engaged in IWG activities and plays a key role in advancing research capacity within Eskasoni.

PWLE presentation 2019 Atlantic symposium: MBonn and Dr. TBrothers presented on the opportunities and challenges in building research capacity and literacy for PWLE. CMacIsaac presented her team's work on applying funding for the Substance User Network of the Atlantic Region. PEERS Alliance, REZO santé Montréal, HANDUP held exhibits at the Symposium.

Indigenous Working Group: The IWG brought together Dr. DWendt and Eskasoni First Nation to develop a research submission to the 4th RDP, examining culturally appropriate delivery of methadone/ suboxone.

SECTION 5: Partnerships

Please list and briefly describe in the table below any new funding secured during the reporting period (including in-kind contributions) in support of the Network's objectives/activities. Additional rows may be added to the table, if needed.

	Project	Principal Researcher	Title	Funding (source, amount and duration)	Objective(s)
BC Node		Seonaid Nolan	An evaluation of the use of Community Transition Teams to improve health outcomes for individuals with an opioid use disorder following release from British Columbia Corrections	CIHR, \$99,295 total, 2 years	The project seeks to evaluate the impact of community transition care teams post release from incarceration on various health outcomes, including overdose, for people with an opioid use disorder.
		Kanna Hayashi	Vancouver Drug Users Study: The impacts of evolving drug use patterns on HIV/AIDS	NIH (NIDA), \$1,388,180/year, 5 years	Investigate the impact of rapidly evolving substance use patterns on HIV prevention and HIV-associated co-morbidities; characterize emerging drug use patterns and the associated impacts on engagement in HIV treatment; assess willingness to use, uptake of, and adherence to new and emerging HIV-focused biomedical interventions.
		Nadia Fairbairn	Mentoring the next generation of addiction clinician scientists while responding to the opioid epidemic	NIH (NIDA), \$371,402/year, 4 years	Bridge the evidence-to-practice gap in addiction medicine; Expand and continue the International Collaborative Addiction Medicine Research Fellowship; Provide fellows with research methods training, education in the ethical conduct of research, peer-reviewed publication and funding proposal development, presentation skills, and career development training
		Cheyenne Johnson	OAT 24/7 support line and Narrowing Gaps projects	BC Ministry of Health; Mental Health and Addictions ; \$3,930,000; 3 years	Expanding OAT prescriber density in underserved LHAs & preceptor recruitment and retention; Expanding Interdisciplinary education in health regions with less than 1 graduate/100,000 population; Quality improvement and building community capacity; building a Provincial 24/7 Opioid Agonist Treatment Support Line

Prairie Node	Project Grant	D. Hodgins (University of Calgary), J. Yi (Alberta Health Services)	Expanding capacity in Alberta to deliver contingency management in outpatient addiction treatment	SUAP; 3 yr; \$480,225	<p>1. To adapt and implement CM training tools developed by the CRISM Prairies CM demonstration project for use in AHS addiction services;</p> <p>2. To implement a randomized clinical effectiveness trial of CM as an adjunct treatment in Edmonton and Calgary AHS adult outpatient addiction treatment services. Specifically, Addiction Services Edmonton and the Adult Addiction Services in Calgary;</p> <p>3. To support system-wide adoption of CM throughout Alberta through a strategic knowledge exchange strategy.</p>
	Project Grant	D. Hodgins (University of Calgary), H., Kim, S. Stewart, D. King, Z. Demetrovics, H. Tavares, J. Choi	A cross national investigation of the convergence of gambling and gaming	Alberta Gambling Research Institute; 3 yr; \$159,569.	To describe the convergence of gambling and video gaming activities in the general population and student samples from Canada, Brazil, South Korea, and Australia.
	Project Grant	C. Leonard, D. Hodgins (University of Calgary)	AGRI National Project: COVID-19 supplement	Alberta Gambling Research Institute; 1 yr; \$77,025	To assess the impact on gambling in a national sample of Canadians of the pandemic lockdown, including closure of many gambling venues and promotion of online gambling options.
	Project Grant	D. Hodgins (University of Calgary), J. Yi., M. Cowie	Expanding capacity in Alberta to deliver contingency patient management in outpatient addiction treatment	Health Canada; 4 yr; \$480,225	To assess the efficacy of two versions of contingency management offered in conjunction with standard addiction treatment for individuals with concerns about their methamphetamine use.
	Project Grant	N. Dowling, S. Rodda, S., Merkouris, D. Hodgins (University of Calgary)	Addressing gambling harm to affected others: A scoping review	Victorian Responsible Gambling Foundation; 1 yr; \$26,000 AUD	This project reviews the research literature on the impact of gambling on family and friends.
	Project Grant	Barb Fornssler (University of Saskatchewan)	Perspectives Priorities and Pathways of people with lived and living experience (PWLLE) of substance use:	Saskatchewan Health Research Foundation & Saskatchewan	<p>1. To enhance health system capacity and accessibility for PWLLE of problematic substance use;</p> <p>2. To reduce stigma, enhance service availability, and amplify the voices of PWLLE in Saskatchewan;</p>

			Informing policies	Centre for Patient-Oriented Research; 2 yr; \$180,000	3. To engage people who may never have formally identified as 'patients' for problematic substance use and to identify unique barriers within three distinct socioeconomic groupings.
	Project Grant	E. Hyshka, K. Dong (University of Alberta)	Implementing supervised consumption services in acute care: Evaluating a novel opioid crisis intervention	CIHR; 1 yr; \$99,996	<p>1. To characterize the RAH SCS service model, including patient characteristics and rate of uptake;</p> <p>2. To analyze demographic and clinical differences between eligible patients who do, and do not, access the SCS;</p> <p>3. To examine patient and hospital staff perspectives on SCS implementation, operations, and impacts; and</p> <p>4. To develop patient-centered clinical guidance for delivering SCS in acute care settings.</p>
	Project Grant	J. Moe, K. Dong (University of Alberta)	Identifying Subgroups and Risk Among Frequent Emergency Department Users	Vancouver Coastal Health Research Initiative (VCHRI); 2 yr; \$75,000	<p>1. To develop variables describing visit and clinical characteristics that define patients with unique needs;</p> <p>2. To use cluster analysis to identify subgroups with unique visit patterns and clinical characteristics;</p> <p>3. Define adverse outcomes in the administrative data;</p> <p>4. Describe the risk of adverse outcomes in each subgroup of frequent ED users, with a focus on identifying low risk groups in whom safe diversion from the ED could be possible.</p>
	Project Grant	K. Corace, K. Dong (University of Alberta)	Evaluating Ontario's rapid access addiction medicine (RAAM) model of care to address the Canadian opioid crisis	CIHR; 1 yr; \$96,962	<p>To determine:</p> <p>1. The time between referral and initial assessment for people referred to RAAM clinics from the ED, primary care or other sources;</p> <p>2. If patients are satisfied and well connected to primary care when stable;</p> <p>3. If RAAM clinics reduce the frequency of 30-day ED visits/re-visits, hospitalizations and mortality;</p> <p>4. If the benefits achieved by RAAM clinics offer strong return on economic investment.</p>

	Project Grant	R. Haines-Saah, G. Salvalaggio (University of Alberta)	A Meta-Ethnography of Methamphetamine Use: Mobilizing qualitative synthesis and the lived experiences of People Who Use Drugs to inform harm reduction and public health interventions in Alberta	CIHR; 1 yr; \$80,120	<p>1. To synthesize the qualitative literature on the lived experience of methamphetamine use using a Meta-ethnographic approach;</p> <p>2. To work closely in partnership with AAWEAR, a provincial organization representing PWUD, to validate, translate and extend the synthesis findings;</p> <p>3. To develop a research agenda for addressing extant knowledge gaps on the lived experience of methamphetamine use.</p>
	Project Grant	C. Dell (University of Saskatchewan), J. Smith	Virtual Therapy Dogs in the Saskatoon Hospitals.	Tri-Hospital COVID-19 Community & Foundation Relations, 1 yr, \$1447	To offer the online therapy dog program to hospital patients and staff, with a focus on the emergency department and the mental health centre.
	Project Grant	C. Dell (University of Saskatchewan), L. Williamson, H. McKenzie	Connecting Amidst COVID-19. A Role for USask Therapy Dogs.	SHRF Research Connections COVID-19 Rapid Response, 1 yr, \$4800	<p>1. To virtually extend the sense of connection to the university by enabling students, and all people of Saskatchewan and elsewhere, to visit with the dogs online to gain comfort and support;</p> <p>2. To share evidence-informed information about pandemic-specific mental health self-care tips from the perspective of the therapy dogs.</p>
	Project Grant	E. Penz, C. Dell (University of Saskatchewan)	Animal-Assisted Therapy in Advanced Chronic Obstructive Pulmonary Disease (COPD): An Exploratory Study	Respiratory Research Centre, 2 yr, \$25,000	To offer and evaluate the role of Companion animals in the lives of COPD patients.
	Project Grant	C. Dell (University of Saskatchewan), J. Stempien	A Study of the 'Pawitive' Impacts of Therapy Dog Visits with Adult Emergency Department Patients	Royal University Hospital Foundation, 2 yr, \$20000	To offer and evaluate the role of Therapy dogs in the experiences of ED patients.

ON Node	Node Development Project	Tara Elton-Marshall and Eileen de Villa (Toronto Public Health)	Assessing 'Not In My Back Yard' (NIMBY) Perceptions Towards 'The Works' Supervised Injection Service in Toronto	\$50,000 (2019-2021)	A partnership with Toronto Public Health to address "not in my backyard" (NIMBY) attitudes among communities located near safe consumption sites in Toronto. During the launch of this project the Ontario government had cut funding for several safe consumption sites, and has stopped the planned opening of additional sites. The research team will gather data on the impact of these decisions on the communities, and will model its impact on Ontario, to inform future policies related to safe consumption sites in the province.
	Node Development Project	Joanna Henderson	Blunt Truth Evaluation	\$15,000 (2019-2020)	OCRINT is conducting an evaluation of the Blunt Truth campaign materials among organizations, services and institutions that have purchased the youth designed tool to use cannabis with lower risk (this resource is an adaptation of the Lower Risk Cannabis Use Guidelines; Fischer et al., 2017). The survey will be developed collaboratively among youth, researchers, and other stakeholders. The data collected will result in recommendations on how to improve the effectiveness and uptake for a future iteration of the tool.
	Node Development Project	Tara Elton-Marshall (CAMH) and Adrienne Spafford (Addictions and Mental Health Ontario)	Identifying Service Providers' Priorities for Drug Use Research in Ontario	\$20,000 (2019-2020)	OCRINT is working with Addictions and Mental Health Ontario to conduct a comprehensive survey of provincial service providers to identify current gaps in service access and provision for individuals who use drugs and key priorities for future research using the ConnexOntario directory. OCRINT is consulting extensively with service providers on the development of the survey. The results will inform project development and implementation in the next year.
	Node Development Project	Tara Elton-Marshall (CAMH) and Adrienne Spafford (Addictions and Mental Health Ontario)	Identifying Priorities for Drug Use Research in Ontario among People with Lived Experience	\$30,000 (2019-2020)	OCRINT is interviewing people with lived experience to identify current gaps in service access and provision for individuals who use drugs in Ontario, and to inform key priorities for future research. OCRINT is consulting extensively with peer advisors on the development of the questionnaire.
	Node Development Project	Jürgen Rehm (CAMH) and Aaron Orkin (St. Michael's Hospital)	SOONER Project	\$25,000 (2019-2020)	OCRINT will partner with the SOONER project (Surviving Opioid Overdose with Naloxone Education and Resuscitation) to conduct part of the feasibility trials, in order to prepare the scale-up of a larger trial.
	Node Development Project	Jürgen Rehm (CAMH)	Injectable Buprenorphine	\$25,000 (2019-2020)	Conduct a feasibility project on injectable buprenorphine as a harm reduction intervention.

	ment Project		Feasibility Project		
	Development/Demonstration Project	Dan Werb (St. Michael's Hospital)	'Addiction Treatment as Prevention': An Innovative Global Strategy To End the Opioid Overdose Epidemic	Leveraged Funding from St. Michael's Hospital	Using data from an international US National Institutes of Health-supported project, the team will launch an innovative intervention to stop the transition of vulnerable-particularly street youth- into drug injecting. Project will achieve two things: 1. Scale up an evidence-based and highly innovative approach to ending injection drug use initiation in Toronto and compare this approach across three other high-need cities in North America (Vancouver, Canada; San Diego, USA; and Tijuana, Mexico); second, it will do so by providing cutting-edge addiction treatment to a vulnerable group that have the greatest need and pose a high risk of initiating others into drug checking.
	Demonstration Project	Carol Strike (University of Toronto)	Update of evidence-based best practice recommendations for harm reduction programs that provide harm reduction equipment to people who use drugs	\$34,900 (2020-21)	Search for and synthesize new scientific literature and update chapter content and recommendations as indicated by the evidence related to: injection equipment (i.e., needle and syringes, cookers, filters, ascorbic acid, sterile water, alcohol swabs, tourniquet), crack cocaine smoking equipment (i.e., pipes, mouthpieces, push-sticks, screens) crystal methamphetamine smoking equipment (i.e., pipes and mouthpieces) and opioid overdose prevention, disposal and handling of used drug equipment; Convene through online-conferencing two groups of expert reviewers (service provider/policymakers and service users) to review all updates and comment on comprehensibility and usability of the recommendations; Translate the revised recommendations into French; and engage in a wide array of knowledge exchange activities to make the revised recommendations accessible across Ontario and Canada,
	Demonstration Project	Michelle Coombs (Jean Tweed Centre)	Integrated Relapse Prevention Treatment Pathway for Women with Alcohol Misuse Integrated Anti-Craving Medications Plus Counselling for Women in Community	\$34,6445 (2020-21)	Improve relapse prevention supports for women 18 years and older with substance use disorder (AUD) to support their long-term recovery through this pilot project that integrates access to anti-craving medications for relapse prevention with access to counselling delivered in person or via OTN via the Jean Tweed Centre from across the province. The evaluation will focus on measuring the impacts of this service on specific measures of recovery (e.g., symptom severity, cravings and coping, change in number of days drinking, and

			Substance Misuse Services		frequency and amount of drinking, referral to ongoing supports in client's home community), client's perceptions of the service, and barriers and enablers to its successful implementation.
	Demonstration Project	Ahmed Bayoumi (St. Michael's Hospital and University of Toronto)	Impacts of Overdose Study	\$35,000 (2020-21)	<p>Completed analyses have examined the association of overdose experiences with HIV risk behaviours (to be presented at Canadian Society for Addiction Medicine-Oct. 2019 and grief responses (to be presented at the American Public Health Association Conference-Nov. 2019), with manuscripts in progress. This proposal stems from a request from our community-based research team to add a new activity to our existing study: a participatory KTE process to inform production of community relevant KTE materials, and guide next steps for study.</p> <p>Objectives: We are proposing a participatory KTE process, where we aim:</p> <ol style="list-style-type: none"> 1. To engage community members in a community "data gallery", including facilitated dialogue; 2. To share and translate knowledge from our study through the production of manuscripts and community-informed KTE products, including participatory design of infographics. This will lay the groundwork and inform our study's next phase of developing an intervention framework, and a further community-based research project to pilot test and evaluate the intervention.
	Demonstration Project	Gerald McKinley (the University of Western Ontario)	It Takes a Village: Social Inclusion, Support and Purpose as a means of Supporting Individuals engaged in Substance Misuse in a Rural First Nation in Ontario, Canada	\$34,620 (2020-21)	<p>The purpose of our proposed program is to develop and evaluate a community-based solution which improves the quality of life for all community members. The initial pilot program will be facilitated by staff from the Whitefish River First Nation (WFRN) Health Centre to increase participant safety and evaluate support needs for service providers.</p> <p>The project will focus on qualitative data to evaluate four research questions:</p> <ol style="list-style-type: none"> 1. What do the community members believe are the causes of substance misuse? 2. How have community members responded to a family member or friend

					<p>that has experienced substance misuse?</p> <p>3. what existing best practices for social prescription programs can be scaled to work in rural First Nations communities?</p> <p>4. through which mechanisms did the intervention affect change in participants' perceived social inclusion, support, and sense of purpose?</p>
	Demonstration Project	Melody Morton (Laurier University)	Asset mapping of substance use prevention and intervention programs and services: A comprehensive review with Chippewas of Nawash Unceded First Nation	\$40,000 (2020-21)	<p>The purpose of this research is to perform a comprehensive review of substance use prevention and intervention programs and services. The objectives are:</p> <ol style="list-style-type: none"> 1. Document jurisdictional/institutional mandate and accountability structure for each program and service; 2. Identify any duplication and gaps in programs and services; 3. Develop an asset map of existing programs and services available to people living with substance use issues within the community; and 4. Create materials/products that ensure that program/services providers and community members alike know what is offered at each program and service. The data will be collected through qualitative methods.
	Demonstration Project	Lisa Boucher (Bruyere Institute)	Chronic disease self-management experiences among marginalized people who use drugs	\$29,720 (2020-21)	<p>Given the lack of literature on PWUD in the area of chronic disease self-management, a foundational understanding of the experiences and needs for self-management support among this community is required to identify or adapt existing interventions and to inform developing new initiatives.(14) As such, the primary community-identified objective is to explore the chronic disease self-management and self-management support experiences of socioeconomically marginalized PWUD living with other chronic conditions. The community is particularly interested in understanding patient perspectives on the interplay between managing chronic conditions while also using substances, and how this relates to engaging with health and social services. Thus, the present project incorporates a holistic, patient-centered approach to improving self-management services and is greatly informed by harm reduction principles.</p>

	Demonstration Project	Fiona Koumoudjian (McMaster University)	Facilitating best practices in buprenorphine/naloxone initiation in provincial correctional facilities through the development of tools for health care staff	\$35,000 (2020-21)	Activities will focus on three phases: (A) identify, review, and select knowledge, (B) adapt knowledge to local context, and (D) tailor and implement knowledge translation strategies. As noted, our research group has already completed activities on phase (C) identifying barriers and facilitators to knowledge use, and we will follow established and effective knowledge translation tools and leverage existing distribution channels to reach our end user group. Through phase (A), we will define best practices for buprenorphine/naloxone treatment initiation in provincial correctional facilities and through phases (B) and (D) we will develop tools to support uptake of best practices by health care professionals and disseminate tools to support adoption of best practices.
	CIHR Team Grant	Tara Elton-Marshall (CAMH)	Partnerships for Cannabis Policy Evaluation: Triangulating Evidence to Evaluate the Impact of Cannabis Policy in Ontario	\$509,961 (2020-2023)	To evaluate the intended and unintended impacts of cannabis policies in Ontario on the following outcomes: Consumption patterns of cannabis and other psychoactive substances, including cannabis related harm to others and impacts on mental health; impact on the health care and treatment systems; cannabis-impaired driving and injuries; and implications for positive and negative consequences of cannabis use
QANode	Project Grant	Julie Bruneau; Adelina Arteni; Stine Hoj; Didier Jutras-Aswad; Sarah Larney; Valérie Martel-Laferrrière	Characterizing mortality rates and associated modifiable determinants among people who inject drugs in a large, urban Canadian city: Implications for future population health interventions	CIHR Operating Grant: Data Analysis-Healthy Cities Intervention Research; 1 year; \$70,000	This study will capitalize on data collected as part of St. Luc/HEPCO, one of the largest prospective cohort studies of PWID, having recruited more than 4000 participants since 1992, with detailed assessment of behavioral and service use data, as well as geospatial and laboratory data. Mortality and causes of death among cohort participants will be obtained via record linkage with the Institut de la Statistique du Québec. This project will improve our understanding of how housing contexts influence this ultimate health outcome. Findings will be relevant to city planners and community organisations seeking to allocate housing solutions and services in a manner that supports our most vulnerable citizens.
	Project Grant	Julie Bruneau	Characterizing mortality rates and associated modifiable determinants among people who inject drugs in a large, urban Canadian city: Implications for future	Fonds de la Recherche en Santé du Québec; 1 year \$30,000	This study will capitalize on data collected as part of St. Luc/HEPCO, one of the largest prospective cohort studies of PWID, having recruited more than 4,000 participants since 1992, with detailed assessment of behavioral and service use data, as well as geospatial and laboratory data. Mortality and causes of death among cohort participants will be obtained via record linkage with the Institut de la Statistique du Québec. This project will improve our

			population health interventions		understanding of how housing contexts influence this ultimate health outcome. Findings will be relevant to city planners and community organisations seeking to allocate housing solutions and services in a manner that supports our most vulnerable citizens.
	Project Grant	Julie Bruneau	Canada Research Chair- Tier 1 in Addiction Medicine 2020-2027	Canada Research Chairs- CIHR funded; 7 years; \$1,400,000	
	Project Grant	Julie Bruneau; Stine Hoj	Integrating community-based recruitment with data linkage to inform and enhance scale-up of hepatitis C treatment among people who inject drugs: A pan-Canadian 'virtual' cohort study	CIHR Project Grant; 4 years; \$830,024	This study seeks to improve our understanding of the accessibility of HCV care and treatment for diverse groups of people with a history of injecting drug use, including Indigenous people and women who inject drugs. The study aims to identify modifiable barriers and facilitators to care and guide evidence-based public health interventions and policy in the new landscape of HCV therapy.
	Project Grant	Didier Jutras-Aswad	Is cannabis a useful adjunct in the treatment of symptoms of persons with multiple sclerosis? A formal trial of CBD and THC for the control of spasticity and other symptoms: assessing the clinical effects and the basic mechanisms.	CIHR Team Grant: Cannabis Research in Priority Areas- Multiple Sclerosis; 5 years; \$750,000	Assess the clinical effects of THC and CBD positive and negative, in a carefully selected cohort of PwMS with single or multiple symptoms, enrolled in a randomized, placebo-controlled, double-blinded, parallel groups trial of four weeks' duration. The main outcomes will be spasticity, with pain, sleep, mood and cognition, fatigue, and sphincteric function as secondary outcomes. The pharmacology of THC-CBD, as well as their effects on neuro-inflammation, will be explored. PwMS will be involved in all phases of the proposed study.
	Project Grant	Direction 180	Establishing a Substance User Network of the Atlantic Region (SUNAR)	SUAP; 27 months; \$519,240	1. Increase uptake of safer use practices among PWUS in the Atlantic region; 2. Increase engagement between PWUS and local/ provincial government; 3. Increase understanding among service and healthcare providers on how to engage with PWUS
	Project Grant	Marie-Claude Geoffroy	Transitioning to Adulthood: Risk and Protective	CIHR Project Grant; 4	1. To characterize the trajectories of 5 MHPs including depression, anxiety, suicidality, cannabis use and mental health services use from ages 15 to 22

			Factors for Mental Health Problems (MHPs) between Adolescence and Adulthood in a Representative Population Sample	years; \$260,101	years among children exposed to different levels of CV and 2. to identify familial, social and lifestyle factors that can modify these trajectories. In order to do so, we will assess MHPs at age 22 years and collect complementary information on CV in a well-documented Canadian birth cohort assessed repeatedly since birth.
	Project Grant	Patricia Conrod; Candice Crocker; Stéphane Potvin; Phil Tibbo	Canadian Cannabis and Psychosis Research Team (CCPRT)	CIHR Team Grant: Cannabis Research in Priority Areas-Mental Health; 5 years; \$629,668	The research team will collaborate on an integrated research program that spans animal studies, genetics studies, longitudinal developmental and clinical cohorts, big-data analytics and prevention. All participants will mutually benefit from data-pooling activities and a translational research framework, resulting in exceptional data output and knowledge for the public. The databases and knowledge generated by this team will be of high value to the clinical networks represented within the team (e.g., Canadian Consortium on Early Intervention in Psychosis), who currently seek guidance on how to manage potential cognitive and mental health consequences of cannabis use in their patients.
	Project Grant	Sherry Stewart	Univenture: A Partnership to Address Heavy Drinking and Other Substance Misuse on Canadian University Campuses	SSHRC Project Grant, Stage 2: 5 Years \$2.5 million	Multi-site Canadian project focused on adapting the personality- targeted program based on an etiologic model of substance misuse disorders, Preventure, to a University setting. A distance delivery format will be included. Through focus groups and interviews with undergrads, Student Affairs and student led organizations, information and idiosyncratic stories will be collected to assist in the adaptation of Preventure for emerging adults. The impact of the developmentally-adapted program on primary outcomes of undergrads' heavy drinking, cannabis use, uptake of prescription drugs, and secondary outcomes of undergrads' well-being and academic success will be assessed.
	Project Grant	Annie Talbot	Amélioration de l'accessibilité et de la qualité des services en médecine des toxicomanies ambulatoires auprès de la clientèle autochtone en région – co-construction	MEDTEQ; 2 years; \$306,252	The objective is to improve access to specialized care in addiction medicine in a network logic, ensuring the transversality of care and teaching trajectories are adapted to the Indigenous clients in the region, via telehealth.

			d'une trajectoire de soins, enseignement et télésanté entre la communauté de Listuguj et le CHUM		
	Project Grant	Annie Talbot	Implantation au CHUM du modèle ECHO pour la formation médicale des professionnels de santé et services sociaux de première et seconde ligne	MEDTEQ; 2 years; \$301,105	Evaluate the implementation of the ECHO model at the CHUM and in a Quebec context for the medical training of first and second-line health and social services professionals, by evaluating the ECHO CHUM hepatitis C, ECHO Chronic pain and ECHO concomitant disorders programs.
	Project Grant	Aissata Sako	Community Day/ Satellite event & Harm reduction booth at INHSU 2019	AbbVie Canada; \$7,500	Supporting the node's organization of the Community Day/ Harm reduction Chill space at INHSU 2019. The funding supported 2 harm reduction specialists to be present who provided information on harm reduction practices, overdose prevention, access to pharmacies and collaborating clinics for prescriptions and urgent care in Montreal.
	Project Grant	Michel Perreault	Troubles liés à l'usage d'opioïdes et problèmes associés: analyse de différents profils d'utilisation afin de soutenir une offre de services mieux adaptée	PUDS; 3 years; \$44,963	This study aims to develop strategies to offer services that are better adapted to the different profiles and trajectories of opioid use in order to promote access and retention for patients receiving treatment for an opioid use disorder. The populations being studied include those who have an opioid use disorder, as well as professionals working with this clientele in the domains of addiction, mental health and chronic pain.
	Project Grant	Mathieu Goyette, Jorge Flores-Aranda	Stop-Cannabis Quebec	PUDS; 2 years; \$466,044	<p>1. To culturally adapt Stop-Cannabis for young Québécois;</p> <p>2. To understand, from the point of view of young people and stakeholders, how mobile applications can be used to promote mutual aid and the development of a social network among youth with cannabis use problem (with or without a concomitant disorder);</p> <p>3. To design at least 2 modules that can be integrated with Stop Cannabis or be developed as full-fledged mobile applications aimed to support the role of peers and the development of a social network of youth with cannabis use problem (with or without a concomitant disorder).</p>

	Project Grant	Marie-Ève Goyer	Dépendance, population en situation de précarité et approvisionnement sécuritaire : Soutien aux cliniciens et aux gestionnaires du Québec - Implantation de modalités alternatives de traitement en TAO au point de service Relais, programme TUO, Direction des programmes santé mentale et dépendance	PUDS; 4 years; \$900,000	Evaluative research on OAT integration in addiction and homelessness services settings in Montréal (or in the province of Québec)
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SECTION 6A: Knowledge Translation

Please indicate the number of research contributions and products.

Knowledge Translation												
	Optima		BC		Prairies		ON		QA		ISP	
	Pub'd	Sub'd	Pub'd	Sub'd	Pub'd	Sub'd	Pub'd	Sub'd	Pub'd	Sub'd	Pub'd	Sub'd
• Peer-reviewed publications	0	0	23	0	25	0	29	16	121	4	1	2
• Books	0	0	0	0	0	0	5	0	2	0		
• Conference presentations	2	0	35	4	65	0	47	0	74	0	4	3
• Conference abstracts	0	0	14	0	1	0	9	0	17	0	2	0
• Guidelines	0	0	4	0	1	0	0	0	2	0	2	0
• Other Reports	0	0	26	0	7	0	3	0	6	0	3	0
Public Outreach and Media Coverage												
• Presentations (not included above)	0	NA	8	NA	24	NA	7	NA	8	NA	39	NA
• Newspaper	0	NA	102	NA	19	NA	17	NA	155	NA	5	NA
• TV / Radio	0	NA	15	NA	12	NA	23	NA	27	NA	1	NA
• Total	2	0	227	4	154	0	140	16	412	4	57	5

SECTION 6B: Publications Jan 1 2019 – Mar 31, 2020 are attached as appendix 1.

Please indicate all publications in the area of problematic substance use which were supported with CRISM funding during the specified reporting period. Captured publications should include work conducted by the Nodes (including demonstration projects) as well as through OPTIMA and the Implementation Science Program. If a separate attachment is appended, please ensure that all requested fields are included.

1	Title	Supported by CRISM funding <ul style="list-style-type: none">• Fully• Partially
	Journal	Number
	Primary Author Name	Page No
	Authors	Year
	URL	
	DOI	

SECTION 6C: Knowledge Translation – Supplemental Information

Please describe any additional knowledge translation activities or products (maximum 250 words).

More Information regarding projects and updates are available on the National and Node websites.

British Columbia Node

To promote awareness and uptake of the Alcohol Use Disorder (AUD) Guideline, the BC Node hosted a press conference with Minister Judy Darcy in December 2019 and conducted 29 training sessions, covering all 5 health authority regions and reached 559 healthcare providers.

Prairie Node

Our very popular node development program was put on hold Apr 1 2019 pending CRISM extension funds; the program has been reopened as of June 29 2020. A total of 19 projects were fully (12) or partially (7) funded from our Node infrastructure funds as part of our efforts to build research capacity across the Prairie Provinces.

Projects initiated this term under our *Advancement of Analytics in Addiction* program are: 1) *Predictive Modeling for Treatment Outcomes for Amphetamine Users in Residential and Detox Programs*, 2) *Alberta Rural Development Network Rural Cannabis Education Program*, and (3) *AHS Substance Abuse ICD Coding Validation*.

Ontario Node

Regular communication with Node members and stakeholders regarding ongoing projects, future collaborations, and knowledge exchange strategies occur. OCRINT has also rolled out a monthly newsletter displaying this information and disseminating node and network updates.

Drs. Rehm and Elton-Marshall represent CRISM on numerous stakeholder committees, and participation allows for routine updates on CRISM activities and potential for collaboration.

Quebec/Atlantic Node

Members and trainees presented at the 9th CanHepC symposium; Dr. Julie Bruneau sat on the 9th CSHCV

Scientific Symposium Committee (September 2019).

Node organized the INSHU 2019 Community Day (September 10) showcasing lived experience and community work. The node provided Harm Reduction space for the full conference.

3rd Atlantic symposium in Charlottetown, PEI (November 5/6th 2019). Over 120 node members attended, with 30 poster presentations and 12 speakers.

SECTION 7: Additional Information

Please add any additional comments that are relevant to the analysis of the information provided within this report.

Network

CRISM continues to host panels at provincial and national meetings/conferences to raise awareness and disseminate CRISM research and activities. These included presentations to Health Canada April 19 and July 11 2019; CSAM annual meeting October 24-27 2019, and the CCSA Issues of Substance conference November 25-27 2019.

CRISM hosted booths at the following conferences to help disseminate CRISM KT products and expand membership:

- 1) Recovery Capital: Canada's premier addiction conference: September 26-27 2019, Delta Hotel Toronto;
- 2) CMHA Conference: September 23-25 2019, Westin Harbour Castle Hotel Toronto.

OPTIMA: The trial was approaching the enrollment target of 276 participants when provinces received notification of COVID-19 pandemic procedures and health advisories. As a result, all sites closed non-essential workers in clinical sites and institutions for the trial. After consultation with the NPI, Data and Safety Monitoring Board, and the data management group, it was determined that the obtained randomization total of 272 participants was sufficient for analysis and investigators decided to stop enrolment. Adjustments were made to both local and site level procedures and participants were able to complete remaining study follow up visits remotely or in person.

Similar to last year's report, since the results of the study have not been published, no recommendations about changes to clinical practices can be expected. However, training on OPTIMA and implementation of the trial have clearly increased/improved capacity to use standardized assessment tools in clinical settings, to use evidence-based protocols and methods relevant to initiation and maintenance of OUD treatment, and the integration of flexible model of care for buprenorphine/naloxone as per OPTIMA's protocol and procedures.

The implementation of the first clinical trial (OPTIMA) under the CRISM initiative has left the network well positioned to conduct future national level projects and trials. The following were key milestones and capacity building activities:

- 1) 8 clinical sites have been trained, engaged and 110 team members total have participated in trial activities including over 40 physicians, nurses and clinic staff. These clinical sites are now familiar with and prepared for future studies and trials under the CRISM initiative;
- 2) Successful integration of a trial into a clinical care setting as a pragmatic study;
- 3) Over 10 institutions and health authorities have been engaged in various aspects of the trial including contract and agreement development, working through data stewardship legislation, and research ethics board submissions. Lessons learned from these processes cannot be underestimated as it will lead to streamlining facilitation of administrative processes in the future;
- 4) Governance and communication policy, Authorship and Publication document, planning for a publication committee for trial data and manuscripts, selection of a data-sharing platform. Data management processes for trial completion are currently underway, the creation of the infrastructure for data sharing, will benefit future projects and research;
- 5) As a result of ancillary studies that have taken place alongside the trial, collaborative partnerships with investigators and stakeholders has taken place.

An oral presentation based on the OPTIMA trial, *Recruitment of people who use drugs into clinical trials: challenges and strategies to overcome them*, was presented at the 1st BC Centre on Substance Use Conference, Vancouver, May 23-25 2019 (Nie, G, Socias, ME).

A.Sako and J.Fikowski presented OPTIMA trial implementation and management challenges at the SCT 40th Annual conference (May 2019).

Prairie Node

Examples of how CRISM Prairies leadership (including primary investigators funded by CRISM Prairies) have participated in approximately 40 stakeholder committees include:

Health Canada

- Expert Advisory Group on Safer Supply of Pharmaceuticals as Alternatives to Illegal Street Drugs, Controlled Substances and Cannabis Branch (Chair: Hyshka),
- Safe Supply Implementation Task Team, Controlled Substances and Cannabis Branch (Hyshka),

CIHR

- Institute Advisory Board, Institute of Population and Public Health (Vice-chair: Hyshka),

Canadian Drug Policy Coalition

- National Safe Supply Working Group (Hyshka),

Alberta Health

- Provincial Injectable Opioid Agonist Therapy (iOAT) Working Group (Wild),
- & Alberta Health Services and Alberta Health Take-Home Naloxone Kit Evaluation Working Group (Hyshka),

Alberta Health Services

- Supervised Injectable Opioid Agonist Therapy project group (Wild),
- Addiction Education Conference Planning Committee (Hodgins),
- Advisory Board, Provincial Concurrent Capable Learning Series (Hodgins),
- Expert Advisory Committee on Cannabis (Hyshka),
- & College of Physicians and Surgeons of Alberta's Advisory Committee for the development of a Guidance Document on Harm Reduction in Acute Care Settings (Hyshka),
- Provincial Addiction Curricula & Experiential Skill (PACES) Accreditation Committee (Hodgins, Wild),
- Addiction and Mental Health Strategic Clinical Network, Core committee (Dong, Hyshka and Wild),
- Research Partnership Program Committee (Wild, Christensen),

University of Alberta

- Campus Cannabis Advisory Committee on Cannabis Legalization (Wild),

University of Calgary

- Alcohol Advisory Committee (Hodgins),
- Expert advisory group, Assessing the cost-effectiveness of the community-based naloxone program in Alberta (Hyshka),

University of Saskatchewan

- Student Health Services, Peer Health, What's Your Cap?, Expert Staff Mentor to Committee (Dell),

British Columbia Centre for Excellence on HIV/AIDS

- Expert Advisory Committee, Towards a comprehensive performance measurement system for opioid use disorder in British Columbia (Hyshka),

Edmonton Police Services

- Methamphetamine and Narcotics Research Sub-committee (Wild, Hyshka),

City of Calgary

- Community Action on Mental Health & Addiction (CAMHA) Research & Analytics Team (Rittenbach),

CCSA

- Recovery Expert Advisory Committee (Dell),
- Working Group on Low Risk Gambling Guidelines (Hodgins),

Other

- Alberta Provincial Emerging Substances Surveillance and Analytics working group (Wild),
- Alberta Supervised Consumption Services Evaluation Methodology Review Panel (Wild),
- Community-University Partnership for the Study of Children, Youth, and Families (Hyshka),
- Institute for Health Economics' Supervised Consumption Services Provincial Evaluation Co-Investigator Group (Hyshka),
- Canadian Drug Policy Coalition's Supervised Consumption Services Knowledge Exchange Group (Hyshka),
- National working group of community, health, legal, and academic stakeholders working to establish supervised injection services in cities across Canada (Hyshka),
- Provincial Research Advisory Group member for the Calgary Counselling Centre (Rittenbach, Hodgins),
- Saskatchewan Prevention Institute, Alcohol – Let's Talk (Dell),
- Managed Alcohol Program Planning Committee, Lighthouse Saskatoon (Fornssler),
- Saskatchewan Advocates for Safe Consumption Coalition Leadership Committee Saskatoon (Fornssler),
- World Health Organization (WHO) committee on Public Health Implications of Addictive Behaviours (Hodgins),
- Canadian Psychological Association Accreditation Standards Revision Committee (Hodgins),
- International Behavioural Addictions and Impulse Control Disorders Network, Founding Member (Hodgins),
- University of British Columbia Centre for Gambling Research, Advisory Council (Hodgins),
- AMSISE working group (Hyshka)

Ontario Node

The Ontario Node office is based in Toronto, ON at the Centre for Addiction and Mental Health (CAMH).

The OCRINT will continue to develop and conduct its intervention research work supported by an exceptionally strong, advanced and supportive research environment. The OCRINT will principally be housed and coordinated at Ontario's Centre for Addiction & Mental Health (CAMH), while remote work has been active during the COVID-19 pandemic. CAMH (www.camh.ca) is Canada's largest and widely renowned addiction and mental health research hospital – affiliated with both the University of Toronto as well as WHO/PAHO as a Collaborating Centre in addictions – principally mandated with the delivery of addiction and mental health care across Ontario. With multiple research/care sites in Toronto as well as 9 other locations across Ontario, it serves almost 25,000 unique clients, furthermore featuring 460,000 outpatient visits, 3,800 inpatient admissions, and 4,800 ER service visits per year. CAMH's 'Mission' and 'Strategic Plan' emphasize a mandate of innovation and discovery towards improved addiction & mental care; its Research Division comprises ~180 independent investigators in neurobiological, clinical and socio-epidemiological sciences, generating some \$40 million in annual external funding. CAMH houses a comprehensive and integrated treatment service system for addiction as a primary disorder, comprising pharmaco-therapeutic and cognitive-behavioral treatment, and withdrawal management services for some 8,000 annual clients, offering itself as a unique laboratory for testing novel treatment interventions. CAMH's addiction treatment staff are furthermore networked (e.g., by telemedicine) with numerous hospital and community-based clinical sites across Ontario, an infrastructure through which other – e.g., remote – sites can be connected into intervention studies. Other unique research-infrastructure elements will greatly benefit the scope and potential of OCRINTs work, such as the use of a mobile lab (used in the NODUS project).

We have significantly increased our Node membership, and continue to further expand through targeted outreach (CRISM booths, word of mouth, conferences, newsletters etc.).

For the conduct of the OPTIMA study, we continue to have desk space and facility access to the two sites.

Regarding **knowledge exchange**, the NPI of Ontario has also been invited to present the following presentations related to the prevention of problematic drug and substance use:

- 1) Rehm, J. (2020, February 26). Framework Development: Common Indicators. Presentation at the CIHR- HC Evaluation Framework Meeting at Ottawa, Canada;
- 2) Rehm, J. (2019, October 8). Cannabis policy: the example of Canada. Presentation at the Public Health Thought Leadership Dialogue at the Yong Loo Lin School of Medicine of the National University of Singapore, Singapore;
- 3) Rehm, J. (2019, September 12). The treatment of and the treatment system for alcohol use disorders – what do we know, and where should we go? Grand Rounds presented at the CAMH, at Toronto, Canada;
- 4) Rehm, J. (2019, May 28). Medical cannabis. Considerations and experiences from Canada. Presentation upon invitation of the National Health Foundation (NHF) of Thailand at Bangkok, Thailand.

CRISM also hosted booths at the following conferences to help disseminate CRISM KT products and expand membership:

- 1) Recovery Capital: Canada's premier addiction conference: September 26-27 2019, Delta Hotel Toronto;
- 2) CMHA Conference: September 23-25 2019, Westin Harbour Castle Hotel Toronto

OCRINT continues to actively expand membership to ensure provincial representation of individuals from various institutions through various outreach activities, including but not limited to, conference booths, newsletters and bulletins. There have also been regular communications with current members regarding recommendations on targeted outreach. OCRINT has an open-access membership policy and those interested in joining are asked to connect with the Node Manager. Non-members are introduced to CRISM and OCRINT with an information package outlining CRISM goals, national network activities, Node-specific activities, and information on how the Node can collaborate and support stakeholder's/members interests. When appropriate, we arrange face-to-face meetings with potential members to get a better understanding of their work, share detailed information about CRISM, and engage in in-depth conversations regarding potential collaboration.

Quebec/Atlantic Node

Node NPI, Dr. Julie Bruneau, continues to demonstrate exceptional **leadership** with 1 Research Chair awarded; co-author on 2 Lancet Series articles; securing new funding; expanding the HEPCO cohort and integrating pain research; and participating in the review of the Québec COVID-19 telemedicine guideline.

Research advancement/leadership:

- 1) Dr. Julie Bruneau (NPI) was awarded a Tier I Canada Research Chair in Addiction Medicine;
- 2) Dr. Gilles Lavigne (PI) was appointed as a member of the Order of Canada for his innovative research on dental practices, and uncovering the interactions between pain and sleep disorders (July 2 2019);
- 3) Dr. Didier Jutras-Aswad (PI) was appointed to the Mental Health Commission of Canada (MHCC) Board of Directors (December 2019);
- 4) Dr. Patricia Conrod (PI) has taken on the role of Director, *Réseau Québécois sur le suicide, les troubles de l'humeur et les troubles associés (RQSHA)*, effective (April 1 2020). She is also a member of the INMHA Institute Advisory Board;
- 5) Dr. Marie-Ève Goyer (node researcher) was appointed *chef médicale des continuums de services en dépendance et en itinérance au CIUSSS du Centre-Sud-de-l'île-de-Montréal*;
- 6) Jean-François Mary (node community partner) is now the executive director of CACTUS, North America's oldest needle exchange program;
- 7) Natasha Touesnard (node community partner) is now director of CAPUD;
- 8) Dr. Mohammed Al-Hamdani (node post-doctoral fellow) received the Mitacs Award for Outstanding Innovation–Postdoctoral (November 2019);
- 9) Node manager Aïssata Sako was promoted to Research Program director, CRCHUM;
- 10) Node Senior Research Officers, Alice Lam and Rania Khemiri, were promoted as Research Coordinators.

Leveraged funding:

- 1) Node supported 6 Québec SUAP applications (HEPCO cohort/ Goyette, Flores-Aranda/ Perreault/ Goyer/ Talbot/ Bettache) and 1 Atlantic SUAP application (Direction 180) in budget and protocol writing, 5 successfully funded (\$2+ million). The node remains involved in the 5 applications providing implementation and evaluation expertise, assistance with research contracts, ethics submissions and organisational and collaboration support;
- 2) Dr. Marie-Claude Geoffroy leveraged her research funded by CRISM to successfully apply to a CIHR Project Grant in 2019;
- 3) Supported Dr. Annie Talbot's successful MEDTEQ application to improve accessibility and quality of outpatient addiction medicine services for Indigenous clients. The node will continue with organisational support and implementation and evaluation expertise to this project;
- 4) Supported Dr. Annie Talbot's MEDTEQ project; implementing an ECHO model at the CHUM for medical training of first and second line health and social services professionals. Total of funds received for 3 and 4: 500 000\$;
- 5) PUDS application for an alternative iOAT grant submitted in February resulting from EHT working group collaboration;
- 6) Dr. Julie Bruneau has been successful in securing IRSC funding (\$800,000);
- 7) Dr. Sherry Stewart's SSHRC Partnership Grant, Univenture (\$2.5 million) was supported and continues to be supported for the 5-year term.

The node's training program has over 45 post-doctoral fellows, PhD candidates, residents, Master's and undergraduate students who actively contribute to the node research capacity on intervention for substance use. Trainees are supported with access to the node research infrastructure, projects, and databases; they are also active in data collection, analysis and dissemination of research projects within the node. Producing over 25 publications and securing 2 CIHR-funding opportunities (over \$900,000), 1 SSHRC Partnership Grant, 1 Vanier Canada Doctoral Scholarship (\$150,000), 3 FRQS funding (\$110,000 for postdoctoral training; over \$119,000 for doctoral training), and 15 other research and conference awards, the trainees' successful professional advancement reflects the node's priority in contributing to the development of highly qualified trainees to strengthen the node's research capacity. The node closely supports University of Montreal, McGill, CanHepC, Dalhousie University trainees and facilitates leadership roles of junior clinicians in consultant roles for active training opportunities on HCV Care for persons who use drugs.

Highlights of node training program:

- 1) Stine Hoj and Brendan Jacka are post-doctoral fellows who have become research associates at the CRCHUM and Brown's University, respectively;
- 2) Dr. Pablo Romero Sanchiz and Dr. Raquel Nogueira Arjona are post-doctoral fellows who became research associates at Dalhousie University;
- 3) Adelina Artenie completed her PhD with Dr. Bruneau, and is completing a post-doctoral fellowship at University of Bristol;
- 4) Audrey Livet, Stephanie Nairn, Ranmalie Jayasinha are completing post-doctoral fellowships with Dr. Patricia Conrod;
- 5) Nanor Minoyan, Emmanuel Fortier, and Iuliia Makarenko are completing their PhD with Dr. Bruneau;
- 6) Tiberiu Mahu and Jason Isaaca are completing their PhD with Dr. Sherry Stewart;
- 7) Justin Dube (PhD candidate) is completing a project related to the OPTIMA data, supervised by Dr. Sherry Stewart;
- 8) Flavie Laroque and Jean-Francois Morin are completing PhDs with Dr. Patricia Conrod;

- 9) Toni Spinella is completing a PhD with Dr. Sean Barrett and Aaron Shephard completed his Experimental PhD (2019) with Dr. Sean Barrett;
- 10) Dragos Vlad is a resident / Master's student with Dr. Bruneau;
- 11) Manuela Mbacfou completed her master's practicum with the node;
- 12) Dr. Dennis Wendt's research program *The Cultural and Indigenous Research in Counselling Psychology* yields 6 trainees (2 PhD/ 3 Master's student/ 1 undergraduate student) and 5 research awards in 2019-2020; and,
- 13) Dr. Didier Jutras-Aswad's lab yields 9 trainees (5 PhD/ 3 Master's student/ 1 undergraduate student), with over 6 peer-reviewed publications, 6 publications for knowledge transfer, and 13 research and trainee awards.

Knowledge exchange and meaningful engagement:

- 1) Members and trainees presented at the 9th CanHepC symposium highlighting measures that reduce the negative consequences of drug and substance use. Dr. Julie Bruneau sat on the 9th CSHCV Scientific Symposium Committee (September 2019);
- 2) The node organized the INSHU 2019 Community Day (September 10) showcasing lived experience and community work, funding secured from ABBVIE. Eighty PWLE and community advocates participated. The node provided Harm Reduction space for the full conference;
- 3) 3rd Atlantic symposium (Charlottetown, PEI, November 5/6th 2019). 120+ node members attended, with 30 presented posters and 12 speakers. Node engaged with Atlantic addiction experts and Indigenous communities for future research collaboration. A harm reduction space was supported by PEERS Alliance, PEI node member;
- 4) Node's Knowledge Translation Agent, Valeria Saavedra, is a member of the Stimulus National Implementation and Planning Committee (SNIP) and is co-chair of the local committee in organizing the next Stimulus conference;
- 5) The node remains on the organizing committee of the Sommet sur les dépendances in Quebec, with the next symposium being planned for 2021.

Node membership has seen a dramatic growth from 136 members to 225 members due to the node's active engagement with QC-Atlantic researchers, Indigenous organizations and communities, People with Lived and Living Experience, and community organizations/ partners. Moreover, the node's growing research projects have expanded our reach and expertise to other addiction-related fields. For example, Dr. Sarah Larney's research program and publications focus on the epidemiology of harms associated with opioid use disorder and injection drug use (e.g. hepatitis C virus infection, premature mortality), and opportunities to improve outcomes through increased access to harm reduction and treatment.

The Québec-Atlantic and Ontario nodes co-lead the ISP *Detoxification and Withdrawal Management project* with the Ontario node, as a similar SUAP-funded project is being carried out in Quebec to conduct an environmental scan of public detox clinics, producing the *Guide québécois d'amélioration des pratiques sur la prise en charge du trouble lié à l'utilisation des opioïdes (TUO)*.

Data sharing: QA SuboxED project / ISP Naloxone: The scoping review of the ISP project led to a collaboration with the QA node's SuboxED project. The SuboxED project is sharing its research experience, clinical algorithm for dispensing take-home naloxone and prescribing buprenorphine/ naloxone in ED, and presentations and publication, to facilitate the review.

Evaluation of Alternative iOAT: The node will be collaborating on a PUDs funded alternative OAT implementation evaluation project (start: Fall 2020). A logic model to study the challenges of implementing innovative programs in low threshold clinics.

Cannabis harm reduction: The node is supporting Dr. Jutras-Aswad's cannabis research (2019-21) aimed at mental health impacts on youth. Publications and reports from 2021 onwards will contribute to QC Cannabis harm reduction policy.

Research Recruitment Strategies: Node research staff is implementing strategies to connect with hard-to-reach PWUD to address barriers to recruiting and enrolling women and (ethnic/ racial/ sexual) minorities in cohort and clinical trials. The training resources and tools provided by CIHR Institute of Gender and Health in primary data collection with human participants are being used and referenced by research staff. *Centre amitié autochtone, La rue des femmes. Old mission Brewery- Femmes, centre communautaire LGBTQ, Stella (travailleuse du sexe)* and *l'AQPSUD* are among the identified community resources to be invited to be part of a research advisory board for the first voices and lived experience expertise.

The Atlantic Advisory Committee expanded its committee in Summer 2019 with the addition of two new members: Gerard Yetman, Executive Director of Newfoundland & Labrador AIDS Committee (ACNL) and Dr. Amanda Hudson, Program Lead, Mental Health and Addictions, Health PEI. The Advisory Committee now has representation from each Atlantic province. Atlantic Advisory Committee members also confirmed that they will extend their Committee roles for one more year.

Node staff will be attending a CCDI Diversity and Inclusion training to equip the team with the tools in addressing equity, diversity, and inclusion challenges within research and within the workplace.

The QA node is set to host the next National Executive Committee meeting.

CRISM Annual Report Appendices

Appendix 1: CRISM Prairie Node Publications; Jan 1, 2019 - Mar 31, 2020

Appendix 2: CRISM ISP Project Status Table

CRISM BC Publications
January 1, 2019 - March 31, 2020

SECTION 6B: Publications

Please indicate all publications in the area of problematic substance use which were supported with CRISM funding during the specified reporting period (**January 1, 2019 to March 31, 2020**). Captured publications should include work conducted by the Nodes (including demonstration projects) as well as through OPTIMA and the Implementation Science Program. If a separate attachment is appended, please ensure that all requested fields are included.

1	<p>Title</p> <p>Factors associated with willingness to wear an electronic overdose detection device</p> <p>Journal</p> <p>Addiction science & clinical practice.</p> <p>Primary Author Name</p> <p>Ahamad, Keith</p> <p>Authors</p> <p>Ahamad, Keith</p> <p>Dong, Huiru</p> <p>Johnson, Cheyenne</p> <p>Hyashi, Kanna</p> <p>DeBeck, Kora</p> <p>Milloy, M J</p> <p>Wood, Evan</p> <p>URL</p> <p>https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6610816/pdf/13722_2019_Article_153.pdf</p> <p>DOI</p> <p>10.1186/s13722-019-0153-5</p>	<p>Supported by CRISM funding</p> <p><input type="checkbox"/> Fully</p> <p><input checked="" type="checkbox"/> Partially</p> <p>Number</p> <p>14(1)</p> <p>Page No</p> <p>23</p> <p>Year</p> <p>2019</p>
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CRISM BC Publications
January 1, 2019 - March 31, 2020

2

Title	Supported by CRISM funding
The tripping point: The potential role of psychedelic-assisted therapy in the response to the opioid crisis	<input type="checkbox"/> Fully <input checked="" type="checkbox"/> Partially

Journal	Number
Int J Drug Policy	14(1)

Primary Author Name	Page No
Argento, Elena	80-81

Authors	Year
Argento, Elena Tupper, Kenneth W Socias, M Eugenia	2019

URL
<https://www.sciencedirect.com/science/article/abs/pii/S0955395918302901?via%3Dihub>

DOI
10.1016/j.drugpo.2018.11.006

CRISM BC Publications
January 1, 2019 - March 31, 2020

3

Title	Supported by CRISM funding
An Acute Care Contingency Management Program for the Treatment of Stimulant Use Disorder: A Case Report	<input type="checkbox"/> Fully <input checked="" type="checkbox"/> Partially
Journal	Number
Journal of addiction medicine	
Primary Author Name	Page No
Bach, Paxton	
Authors	Year
Bach, Paxton	2020
Garrod, Emma	
Robinson, Kaye	
Fairbairn, Nadia	
URL	
DOI	
10.1097/adm.0000000000000643I	

CRISM BC Publications
January 1, 2019 - March 31, 2020

4

Title	Supported by CRISM funding
Trusting the source: The potential role of drug dealers in reducing drug-related harms via drug checking	<input type="checkbox"/> Fully <input checked="" type="checkbox"/> Partially

Journal	Number
Drug and Alcohol Dependence	198

Primary Author Name	Page No
Bardwell, Geoff	1-6

Authors	Year
Bardwell, Geoff	2019
Boyd, Jade	
Arredondo, Jaime	
McNeil, Ryan	
Kerr, Thomas	

URL
<https://pubmed.ncbi.nlm.nih.gov/30856370/>

DOI
10.1016/j.drugalcdep.2019.01.035

CRISM BC Publications
January 1, 2019 - March 31, 2020

5

Title "We don't got that kind of time, man. We're trying to get high!": Exploring potential use of drug checking technologies among structurally vulnerable people who use drugs	Supported by CRISM funding <input type="checkbox"/> Fully <input checked="" type="checkbox"/> Partially
Journal The International journal on drug policy.	Number 71
Primary Author Name Bardwell, Geoff	Page No 125-132
Authors Bardwell, Geoff Boyd, Jade Tupper, Kenneth W Kerr, Thomas	Year 2019
URL http://www.ncbi.nlm.nih.gov/pubmed/31336258	
DOI 10.1016/j.drugpo.2019.06.018	

CRISM BC Publications
January 1, 2019 - March 31, 2020

6

Title	Supported by CRISM funding
Sustained-release Oral Hydromorphone for the Treatment of Opioid Use Disorder	<input type="checkbox"/> Fully <input checked="" type="checkbox"/> Partially

Journal	Number
Journal of addiction medicine.	14(4)

Primary Author Name	Page No
Braithwaite, Vivian	345-347

Authors	Year
Braithwaite, Vivian	2019
Fairgrieve, Christopher	
Nolan, Seonaid	

URL
<https://oce-ovid-com.ezproxy.library.ubc.ca/article/01271255-202008000-00037/HTML>

DOI
10.1097/ADM.0000000000000585

CRISM BC Publications
January 1, 2019 - March 31, 2020

7

Title	Supported by CRISM funding
Hospital-Based Addiction Medicine Healthcare Providers: High Demand, Short Supply.	<input type="checkbox"/> Fully <input checked="" type="checkbox"/> Partially

Journal	Number
Journal of addiction medicine	13(4)

Primary Author Name	Page No
Hospital-Based Addiction Medicine Healthcare Providers: High Demand, Short Supply	251-252

Authors	Year
Braithwaite, Vivian Nolan, Seonaid	2019

URL
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6750948/pdf/nihms-1042043.pdf>

DOI
10.1097/adm.0000000000000488

CRISM BC Publications
January 1, 2019 - March 31, 2020

8

Title	Supported by CRISM funding
Supervised injectable opioid agonist therapy in a supported housing setting for the treatment of severe opioid use disorder	<input type="checkbox"/> Fully <input checked="" type="checkbox"/> Partially

Journal	Number
BMJ case reports	12(7)

Primary Author Name	Page No
Brar, Rupinder	251-252

Authors	Year
Brar, Rupinder	2019
Sutherland, Christy	
Nolan, Seonaid	

URL
<https://casereports.bmj.com/content/12/7/e229456>

DOI
10.1136/bcr-2019-229456

CRISM BC Publications
January 1, 2019 - March 31, 2020

9

Title	Supported by CRISM funding
Transitioning a patient from injectable opioid agonist therapy to sublingual buprenorphine/naloxone for the treatment of opioid use disorder using a microdosing approach	<input type="checkbox"/> Fully <input checked="" type="checkbox"/> Partially
Journal	Number
BMJ case reports	13(3)
Primary Author Name	Page No
Caulfield, M.D.G.	
Authors	Year
Caulfield, M.D.G.	2019
Brar, R.	
Sutherland, C.	
Nolan, S.	
URL	
https://casereports.bmj.com/content/13/3/e233715	
DOI	
10.1136/bcr-2019-233715	

CRISM BC Publications
January 1, 2019 - March 31, 2020

10	Title	Supported by CRISM funding
	Injectable opioid agonist treatment for opioid use disorder: a national clinical guideline	<input checked="" type="checkbox"/> Fully <input type="checkbox"/> Partially
	Journal	Number
	Canadian Medical Association journal	191(38)
	Primary Author Name	Page No
	Fairbairn, Nadia	E1049-E1056
	Authors	Year
	Fairbairn, Nadia	2019
	Ross, Josey	
	Trew, Michael	
	Meador, Karine	
	Turnbull, Jeff	
	MacDonald, Scott	
	Oviedo-Joekes, Eugenia	
	Le Foll, Bernard	
	Goyer, Marie-Eve	
	Perreault, Michel	
	Sutherland, Christy	
	URL	
	http://www.ncbi.nlm.nih.gov/pubmed/31548191	
	DOI	
	10.1503/cmaj.190344	

CRISM BC Publications
January 1, 2019 - March 31, 2020

11	Title	Supported by CRISM funding	
	HIV Treatment Initiation and Retention Among Individuals Initiated on Injectable Opioid Agonist Therapy for Severe Opioid Use Disorder: A Case Series	<input type="checkbox"/> Fully	<input checked="" type="checkbox"/> Partially
	Journal	Number	
	Journal of addiction medicine		
	Primary Author Name	Page No	
	Giang, Valerie		
	Authors	Year	
	Giang, Valerie	2020	
	Brar, Rupinder		
	Sutherland, Christy		
	Nolan, Seonaid		
	URL		
	https://pubmed.ncbi.nlm.nih.gov/32011407/		
	DOI		
	10.1097/adm.0000000000000609		

CRISM BC Publications
January 1, 2019 - March 31, 2020

12	Title	Supported by CRISM funding
	In-hospital training in addiction medicine: A mixed-methods study of health care provider benefits and differences	<input type="checkbox"/> Fully <input checked="" type="checkbox"/> Partially
	Journal	Number
	Substance abuse	40(2)
	Primary Author Name	Page No
	Gorfinkel, Lauren	207-213
	Authors	Year
	Gorfinkel, L.	2019
	Klimas, J.	
	Reel, B.	
	Dong, H.	
	Ahamad, K.	
	Fairgrieve, C.	
	McLean, M.	
	Mead, A.	
	Nolan, S.	
	Small, W.	
	Cullen, W.	
	Wood, E.	
	Fairbairn, N.	
	URL	
	DOI	
	10.1080/08897077.2018.1561596	

CRISM BC Publications
January 1, 2019 - March 31, 2020

13

Title	Supported by CRISM funding
Successful Management of Gamma-hydroxybutyrate (GHB) Withdrawal Using Baclofen as a Standalone Therapy: A Case Report	<input type="checkbox"/> Fully <input checked="" type="checkbox"/> Partially
Journal	Number
Journal of addiction medicine	13(5)
Primary Author Name	Page No
Habibian, Sonia	415-417
Authors	Year
Habibian, Sonia Ahamad, Keith McLean, Mark Socias, Maria Eugenia	2019
URL	
https://oce-ovid-com.ezproxy.library.ubc.ca/article/01271255-201910000-00014/HTML	
DOI	
doi: 10.1097/ADM.0000000000000514	

CRISM BC Publications
January 1, 2019 - March 31, 2020

14

Title	Supported by CRISM funding
Initiation and Rapid Titration of Methadone in an Acute Care Setting for the Treatment of Opioid Use Disorder: A Case Report	<input type="checkbox"/> Fully <input checked="" type="checkbox"/> Partially
Journal	Number
Journal of addiction medicine	13(5)
Primary Author Name	Page No
Hemmons, Patrick	408-411
Authors	Year
Hemmons, Patrick Bach, Paxton Colizza, Kate Nolan, Seonaid	2019
URL	
https://oce-ovid-com.ezproxy.library.ubc.ca/article/01271255-201910000-00012/HTML	
DOI	
10.1097/adm.0000000000000507	

CRISM BC Publications
January 1, 2019 - March 31, 2020

15	Title	Supported by CRISM funding
	Case Study: Naltrexone for the Treatment of Nitrous Oxide Use	<input type="checkbox"/> Fully <input checked="" type="checkbox"/> Partially
		Number
	Journal	
	Journal of addiction medicine	Page No
	Primary Author Name	
	Ickowicz, Sarah	
	Authors	Year
	Ickowicz, Sarah	2020
	Grant, Cameron	
	Nosova, Ekaterina	
	Boyd, Jade	
	Brar, Rupinder	
	Milloy, M-J	
	Hayashi, Kanna	
	Nolan, Seonaid	
	URL	
	https://oce-ovid-com.ezproxy.library.ubc.ca/article/01271255-900000000-99251/HTML	
	DOI	
	10.1097/ADM.0000000000000642	

CRISM BC Publications
January 1, 2019 - March 31, 2020

16	Title	Supported by CRISM funding
	Factors Associated with the Use of Supervised Consumption Facilities among Women Who Inject Drugs in a Canadian Setting	<input type="checkbox"/> Fully <input checked="" type="checkbox"/> Partially
	Journal	Number
	Journal of addiction medicine	
	Primary Author Name	Page No
	Ickowicz, Sarah	
	Authors	Year
	Ickowicz, Sarah	2020
	Grant, Cameron	
	Nosova, Ekaterina	
	Boyd, Jade	
	Brar, Rupinder	
	Milloy, M-J	
	Hayashi, Kanna	
	Nolan, Seonaid	
	URL	
	https://oce-ovid-com.ezproxy.library.ubc.ca/article/01271255-900000000-99257/HTML	
	DOI	
	10.1097/ADM.0000000000000646	

CRISM BC Publications
January 1, 2019 - March 31, 2020

17

Title	Supported by CRISM funding
Strategies to Identify Patient Risks of Prescription Opioid Addiction When Initiating Opioids for Pain: A Systematic Review	<input type="checkbox"/> Fully
Journal	X Partially
	Number
	2(5)
Primary Author Name	Page No
Klimas, Jan	e193365
Authors	Year
Klimas, Jan	2019
Gorfinkel, Lauren	
Fairbairn, Nadia	
Amato, Laura	
Ahamad, Keith	
Nolan, Seonaid	
Simel, David L	
Wood, Evan	
URL	
https://jamanetwork.com/journals/jamanetworkopen/articlepdf/2732338/klimas_2019_oi_190148.pdf	
DOI	
10.1001/jamanetworkopen.2019.3365	

CRISM BC Publications
January 1, 2019 - March 31, 2020

18

Title	Supported by CRISM funding
Slow release oral morphine versus methadone for the treatment of opioid use disorder	<input type="checkbox"/> Fully <input checked="" type="checkbox"/> Partially
Journal	Number
BMJ Open	9(4)
Primary Author Name	Page No
Klimas, Jan	e025799
Authors	Year
Klimas, J. Gorfinkel, L. Giacomuzzi, S. M. Ruckes, C. Socias, M. E. Fairbairn, N. Wood, E.	2019
URL	
https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6500187/pdf/bmjopen-2018-025799.pdf	
DOI	
10.1136/bmjopen-2018-025799	

CRISM BC Publications
January 1, 2019 - March 31, 2020

19	Title	Supported by CRISM funding
	Assessing the limit of detection of Fourier-transform infrared spectroscopy and immunoassay strips for fentanyl in a real-world setting	<input type="checkbox"/> Fully <input checked="" type="checkbox"/> Partially
	Journal	Number
	Drug and alcohol review	39(1)
	Primary Author Name	Page No
	McCrae, Karen	98-102
	Authors	Year
	McCrae, Karen	2020
	Tobias, Samuel	
	Grant, Cameron	
	Lysyshyn, Mark	
	Laing, Richard	
	Wood, Evan	
	Ti, Lianping	
	URL	
	http://www.ncbi.nlm.nih.gov/pubmed/31746056	
	DOI	
	10.1111/dar.13004	

CRISM BC Publications
January 1, 2019 - March 31, 2020

20

Title	Supported by CRISM funding
Drug checking services at music festivals and events in a Canadian setting	<input type="checkbox"/> Fully <input checked="" type="checkbox"/> Partially
Journal	Number
Drug and Alcohol Dependence	205(1)
Primary Author Name	Page No
McCrae, Karen	
Authors	Year
McCrae, Karen	2019
Tobias, Samuel	
Tupper, Kenneth	
Arredondo, Jaime	
Henry, Bonnie	
Mema, Silvina	
Wood, Evan	
Ti, Lianping	
URL	
https://pubmed.ncbi.nlm.nih.gov/31605958/	
DOI	
10.1016/j.drugalcdep.2019.107589	

CRISM BC Publications
January 1, 2019 - March 31, 2020

21

Title Successful treatment with slow-release oral morphine following a fentanyl-related overdose: A case report	Supported by CRISM funding <input type="checkbox"/> Fully <input checked="" type="checkbox"/> Partially
Journal Substance Abuse	Number 40(4)
Primary Author Name Prinsloo, G.	Page No 473-475
Authors Prinsloo, G. Ahamad, K. Socias, M. E.	Year 2019
URL https://www.tandfonline.com/doi/abs/10.1080/08897077.2019.1576086	
DOI 0.1080/08897077.2019.1576086	

CRISM BC Publications
January 1, 2019 - March 31, 2020

22

Title	Supported by CRISM funding
Buprenorphine-naloxone "microdosing": an alternative induction approach for the treatment of opioid use disorder in the wake of North America's increasingly potent illicit drug market	<input type="checkbox"/> Fully <input checked="" type="checkbox"/> Partially
Journal	Number
Canadian Medical Association Journal	92(3)
Primary Author Name	Page No
Randhawa, Privia A	E73
Authors	Year
Randhawa, Privia A Brar, Rupinder Nolan, Seonaid	2020
URL	
https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6970598/pdf/1920e73.pdf	
DOI	
10.1503/cmaj.74018	

CRISM BC Publications
January 1, 2019 - March 31, 2020

23

Title	Supported by CRISM funding
Detecting fentanyl using point-of-care drug checking technologies: A validation study	<input type="checkbox"/> Fully <input checked="" type="checkbox"/> Partially
Journal	Number
Drug Alcohol Dependence	212
Primary Author Name	Page No
Ti, Lianping	108006
Authors	Year
Ti, Lianping	2020
Tobias, Samuel	
Lysyshyn, Mark	
Laing, Richard	
Nosova, Ekaterina	
Choi, JinCheol	
Arredondo, Jaime	
McCrae, Karen	
Tupper, Kenneth	
Wood, Evan	
URL	
https://www-sciencedirect-com.ezproxy.library.ubc.ca/science/article/pii/S037687162030171X	
DOI	
10.1016/j.drugalcdep.2020.108006	

CRISM BC Publications
January 1, 2019 - March 31, 2020

24

Title	Supported by CRISM funding
Use of a primary care and pharmacy-based model for the delivery of injectable opioid agonist treatment for severe opioid use disorder: a case report	<input type="checkbox"/> Fully <input checked="" type="checkbox"/> Partially
Journal	Number
Canadian Medical Association Journal	192(5)
Primary Author Name	Page No
Wilson, Tyler	E115-E117
Authors	Year
Wilson, Tyler Brar, Rup Sutherland, Christy Nolan, Seonaid	2020
URL	
https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7004215/pdf/192e115.pdf	
DOI	
10.1503/cmaj.190732	

CRISM Prairie Node Publications
Jan 1, 2019 - Mar 31, 2020

Fully funded by CIHR CRISM funds

2019

1. Brooks HL, O'Brien D, Salvalaggio G, Dong K, Hyshka E. (2019). Uptake into a bedside needle and syringe program for acute care inpatients who inject drugs. *Drug & Alcohol Review*.
doi.org/10.1111/dar.12930.
<https://onlinelibrary.wiley.com/doi/abs/10.1111/dar.12930>
2. Bucerius, Sandra, Kevin D. Haggerty. (2019) Fentanyl Behind Bars: The Implications of Synthetic Opiates on Prisoners and Correctional Officers. *International Journal of Drug Policy*. 71, 133-138.
doi.org/10.1016/j.drugpo.2019.05.018.
<https://www.sciencedirect.com/science/article/abs/pii/S0955395919301409?via%3Dihub>
3. Fatani, S., Dobson, R., El-Aneed, A. (2019). Qualitative exploration of the education and skill needs of community pharmacists in Saskatoon concerning substance use disorder. *Canadian Pharmacists Journal: CPJ*. 152(2), 117-129.
doi: 10.1177/1715163518816726.
https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6410432/pdf/10.1177_1715163518816726.pdf
4. Husband, A., Ahmed, A., Dell, C (2019). An exploratory case study of the impact of psychiatric service dogs on problematic substance use among PTSD-diagnosed veterans. *Journal of Substance Use*. 25(2); 113-117.
doi.org/10.1080/14659891.2019.1664663.
<https://www.tandfonline.com/doi/full/10.1080/14659891.2019.1664663?scroll=top&needAccess=true>
5. Hyshka, E., Morris, H., Anderson-Baron, J., Nixon, L., Dong, K., Salvalaggio, G. (2019). Patient perspectives on a harm reduction-oriented addiction medicine consultation team implemented in a large acute care hospital. *Drug and Alcohol Dependence*. 204.
doi.org/10.1016/j.drugalcdep.2019.06.025.
<https://www.sciencedirect.com/science/article/abs/pii/S0376871619302820?via%3Dihub>
6. Jones, D., Bucerius, S., Haggerty, K. (2019). Voices of remanded women in Western Canada: A qualitative analysis. *Journal of Community Safety & Well-Being*. 4(3).
doi.org/10.35502/jcswb.103.
<https://journalcswb.ca/index.php/cswb/article/view/103/206>

7. O'Brien, D. C., Dabbs, D., Dong, K., Veugelers, P. J., Hyshka, E. (2019). Patient characteristics associated with being offered take home naloxone in a busy, urban emergency department: A retrospective chart review. *BMC Health Services Research*. 19(1), 1-12.
doi.org/10.1186/s12913-019-4469-3.
<https://bmchealthservres.biomedcentral.com/track/pdf/10.1186/s12913-019-4469-3>

Partly funded by CIHR CRISM funds

In Press - as of Mar 31, 2020 (full citation provided for currently published articles)

1. Kosteniuk, B. and Dell, C. (in press). How Companion Animals Support Recovery from Opioid Addiction: An Exploratory Study of Patients in a Methadone Maintenance Treatment Program. *APORIA Journal*. (to be published Sept 2020).
2. Lalonde, R., Claypool, T., Dell, C. (in press). PAWS Your Stress: The Student Experience of Therapy Dog Programming. *Canadian Journal for New Scholars in Education*. (to be published Sept 2020).

2020

3. Chalmers, D, Dell, C., Rohr, B., Dixon, J., Dowling, T., Hanrahan, C. (2020). Recognizing Animals as an Important Part of Helping: A Survey Exploring Knowledge and Practice Among Canadian Social Workers. *Critical Social Work*. 21(1).
doi.org/10.22329/csw.v21i1.6224.
<https://ojs.uwindsor.ca/index.php/csw/article/view/6224/5102>
4. Kim, H.S., Hodgins, D.C., Kim, B.T. & Wild, T.C. (2020). Transdiagnostic or disorder specific? Indicators of substance and behavioral addictions nominated by people with lived experience. *Journal of Clinical Medicine*. 9(2), 334-349.
doi:10.3390/jcm9020334.
<https://www.mdpi.com/2077-0383/9/2/334>
5. Liese, B. S., Kim, H.S, Hodgins, D.C. (2020). Insecure attachment and addiction: Testing the mediating role of emotional dysregulation in four potentially addictive behaviors. *Addictive Behaviors*. 107.
doi.org/10.1016/j.addbeh.2020.106432.
<https://www.sciencedirect.com/science/article/abs/pii/S0306460319313115>
6. Virani, H. N., Haines-Saah, R. J. (2020). Drug Decriminalization: A Matter of Justice and Equity, Not Just Health. *American Journal of Preventive Medicine*. 58(1), 161-164.
doi.org/10.1016/j.amepre.2019.08.012.
<https://www.sciencedirect.com/science/article/pii/S0749379719303514>

2019

7. Dell, C., Chalmers, D., Cole, D., Dixon, J. (2019). Accessing Relational Connections in Prison: An Evaluation of the *John Ambulance Therapy Dog Program* at Stony Mountain Institution. *The Annual Review of Interdisciplinary Justice Research*. 8, 13-68.
No doi.
https://www.academia.edu/38502312/The_Annual_Review_of_Interdisciplinary_Justice_Research_Volume_8_2019_Accessing_Justice
8. Dell, C., Chalmers, D., Stobbe, M., Rohr, B., Husband, A. (2019). Animal Assisted Therapy in a Canadian Psychiatric Prison. *International Journal of Prisoner Health*. 15(3), 209-231.
doi.org/10.1108/IJPH-04-2018-0020.
<https://www.emerald.com/insight/content/doi/10.1108/IJPH-04-2018-0020/full/html>
9. Hyshka, E., Anderson-Baron, J., Pugh, A., Belle-Isle, L., Hathaway, A., Pauly, B., Strike, C., Ashbridge, M., Dell, C., McBride, K., Tupper, K., Wild, T. (2019). Principles, practice, and policy vacuums: Policy actor views on provincial/territorial harm reduction policy in Canada. *International Journal of Drug Policy*. 71, 142-149.
doi.org/10.1016/j.drugpo.2018.12.014.
<https://www.sciencedirect.com/science/article/abs/pii/S0955395918303232?via%3Dihub>
10. Jutras-Aswad, D., Le Foll, B., Bruneau, J., Wild, T., Wood, E., Fischer, B. (2019). Thinking Beyond Legalization: The Case for Expanding Evidence-Based Options for Cannabis Use Disorder Treatment in Canada. *Canadian Journal of Psychiatry. Revue Canadienne De Psychiatrie*. 64(2), 82-87.
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11. Watson TM, Hyshka E, Bonato S, Rueda S. (2019). Early-stage cannabis regulatory policy planning across Canada's four largest provinces: A descriptive overview. *Substance Use & Misuse*. 54(10), 1691-1704.
doi.org/10.1080/10826084.2019.1608249.
<https://www.tandfonline.com/doi/abs/10.1080/10826084.2019.1608249?journalCode=ium20>
12. Watson TM, Valleriani J, Hyshka E, Rueda S. (2019). Cannabis legalization in the provinces and territories: Missing opportunities to effectively educate youth? *Canadian Journal of Public Health*. 110(4), 472-475.
doi.org/10.17269/s41997-019-00209-0.
<https://link.springer.com/article/10.17269/s41997-019-00209-0>
13. Wild, C., Koze, J., Anderson-Barron, J., Hathaway, J., McCurdy, A., Xu, X., Ashbridge, M., Belle-Isle, L., Hathaway, A., MacPherson, D., Hyshka, E. (2019). Media coverage of harm reduction, 2000-2016: A content analysis of tone, topics, and interventions in Canadian

print news. *Drug and Alcohol Dependence*. 205.

doi.org/10.1016/j.drugalcdep.2019.107599.

<https://www.sciencedirect.com/science/article/abs/pii/S037687161930376X?dgcid=author>

14. Yakovenko I, Hyshka E, Tyrell L, Wild TC. (2019). Willingness to participate in Hepatitis C vaccine trials among socially marginalized people who use drugs. *Journal of Substance Abuse Treatment*. 101, 67-71.
doi.org/10.1016/j.jsat.2019.03.010.
<https://www.sciencedirect.com/science/article/abs/pii/S0740547218303192?via%3Dihub>
15. Yücel, M., Oldenhof, E., Ahmed, S.H., Belin, D., Billieux, J., Bowden-Jones, H., Carter, A., Chamberlain, S.R., Clark, L., Connor, J., Daglish, M., Dom, G., Dannon, P., Duka, T., Fernandez-Serrano, M.J., Field, M., Franken, I., Goldstein, R.Z., Gonzalez, R., Goudriaan, A., Grant, J.E., Gullo, M.J., Hester, R., Hodgins, D.C., Le Foll, B., Lee, R.C., Lingford-Hughes, A., Lorenzette, V., Moeller, S., Munafo, M.R., Odlaug, B., Potenza, M.N., Segrave, R., Sjoerds, Z., Solowij, N., van den Brink, W., van Holst, R.J., Voon, V., Wiers, R., Fontenelle, L.F., Verdejo-Garcia A. (2019). A transdiagnostic dimensional approach towards a neuropsychological assessment for addiction: an international Delphi consensus study. *Addiction*. 114(6), 1095-1109.
doi: 10.1111/add.14424.
<https://onlinelibrary.wiley.com/doi/epdf/10.1111/add.14424>

CRISM Ontario Node Publications
January 1, 2019- March 31, 2020

SECTION 6B: Please indicate all publications in the area of problematic substance use which were supported with CRISM funding during the specified reporting period. Captured publications should include work conducted by the Nodes (including demonstration projects) as well as through OPTIMA and the Implementation Science Program. If a separate attachment is appended, please ensure that all requested fields are included.

1	Title Adult perceptions of the relative harm of tobacco products and subsequent tobacco product use: Longitudinal findings from Waves 1 and 2 of the Population Assessment of Tobacco and Health (PATH) study	Supported by CRISM funding Partially
	Journal Addictive Behaviors	Number 106
	Primary Author Name Elton-Marshall, T	Page No 106337
	Authors Driezen, P., Fong, G.T., Cummings, K.M., Persoskie, A., Wackowski, O., Choi, K., Kaufman, A., Strong, D., Gravely, S., Taylor, K., D'Angelo, H., Kwan, J., Bansal-Travers, M., Travers, M., Hyland, A.	Year 2020
	URL	
	DOI 10.1016/j.addbeh.2020.106337	
2	Title A supportive school environment may reduce the risk of non-medical prescription opioid use due to impaired mental health among students	Supported by CRISM funding Partially
	Journal European Child and Adolescent Psychiatry	Number Advanced online publication
	Primary Author Name Probst, C.	Page No
	Authors Elton-Marshall, T., Imtiaz, S., Patte, K.A., Rehm, J., Sornpaisarn, B., Leatherdale, S.T	Year 2020
	URL	
	DOI 10.1007/s00787-020-01518-3.	
3	Title Routes of cannabis administration among Ontario adolescents during criminal prohibition of cannabis in Canada	Supported by CRISM funding Partially

CRISM Ontario Node Publications
January 1, 2019- March 31, 2020

	Journal Drugs: Education, Prevention & Policy	Number Advanced online publication
	Primary Author Name Kolar, K.	Page No
	Authors Elton-Marshall, T., Mann, R., Hamilton, H.	Year 2020
	URL	
	DOI 10.1080/09687637.2020.1715920	
4	Title Medical marijuana. What can we learn from the experiences in Canada, Germany and Thailand?	Supported by CRISM funding Fully
	Journal International Journal of Drug Policy	Number 74
	Primary Author Name Rehm, J.	Page No 47-51
	Authors Elton-Marshall, T., Sornpaisarn, B., Manthey, J	Year 2019
	URL	
	DOI 10.1016/j.drugpo.2019.09.001	
5	Title Assessing service and treatment needs and barriers of youth who use illicit and non-medical prescription drugs in Northern Ontario, Canada	Supported by CRISM funding Partially
	Journal PLOS ONE	Number 14(12)
	Primary Author Name Russell, C.	Page No e0225548.
	Authors Neufeld, M., Sabioni, P., Varatharajan, T., Ali, F., Miles, S., Henderson, J., Fischer, B., Rehm, J	Year 2019
	URL	
	DOI 10.1371/journal.pone.0225548	
6	Title Opioid-Related Treatment, Interventions and Outcomes among Correctional Populations: A Systematic Review	Supported by CRISM funding Partially
	Journal PLOS Medicine	Number 16(12)

CRISM Ontario Node Publications
January 1, 2019- March 31, 2020

	Primary Author Name Malta, M.	Page No e1003002
	Authors Varatharajan, T., Russell, C., Pang, M., Bonato, S., Fischer, B	Year 2019
	URL	
	DOI 10.1371/journal.pmed.1003002.	
7	Title Safer smoking kits for methamphetamine consumption	Supported by CRISM funding Fully
	Journal Addiction	Number 115 (6)
	Primary Author Name Imtiaz, S	Page No 1189-1190
	Authors Strike, C., Elton-Marshall, T., Rehm, J	Year 2019
	URL	
	DOI 10.1111/add.14914	
8	Title Unrecorded alcohol consumption in seven EU countries	Supported by CRISM funding Partially
	Journal European Addiction Research	Number
	Primary Author Name Manthey, J.	Page No
	Authors Probst, C., Kilian, C., Moskalewicz, J., Sieroslawski, J., Karlsson, T., & Rehm, J	Year 2020
	URL	
	DOI 10.1159/000506333	
9	Title Alcohol use and cancers of the gastrointestinal tract. Epidemiology and preventive implications	Supported by CRISM funding Fully
	Journal Frontiers in Oncology	Number 10 (403)
	Primary Author Name Rehm, J.	Page No
	Authors Shield, K.D.	Year 2020

CRISM Ontario Node Publications
January 1, 2019- March 31, 2020

	URL	
	DOI 10.3389/fonc.2020.00403	
10	Title ICD-11 for alcohol use disorders: not a convincing answer to the challenges	Supported by CRISM funding Partially
	Journal Alcoholism: Clinical and Experimental Research	Number 43(11)
	Primary Author Name Rehm, J.	Page No 2296–2300
	Authors Heilig, M., & Gual, A	Year 2019
	URL	
	DOI 10.1111/acer.14182	
11	Title Alcohol use disorders	Supported by CRISM funding Partially
	Journal Lancet	Number 394(10200)
	Primary Author Name Carvalho, A.F.	Page No 781-792
	Authors Heilig, M., Perez, A., Probst, C., & Rehm, J.	Year 2019
	URL	
	DOI 10.1016/S0140-6736(19)31775-1	
12	Title Facilitating screening and brief interventions in primary care: a systematic review and meta-analysis of the AUDIT as an indicator of alcohol use disorders	Supported by CRISM funding Partially
	Journal Alcoholism: Clinical and Experimental Research	Number 43(10)
	Primary Author Name Lange, S.	Page No 2028–2037
	Authors Shield, K.D., Monteiro, M., & Rehm, J	Year 2019
	URL	
	DOI 10.1111/acer.14171	
13	Title	Supported by CRISM funding Partially

CRISM Ontario Node Publications
January 1, 2019- March 31, 2020

	Regulatory policies for alcohol, other psychoactive substances and addictive behaviours: the role of level of use and potency. A systematic review	
	Journal International Journal of Environmental Research and Public Health	Number 16
	Primary Author Name Rehm, J.	Page No 3749
	Authors Crépault, J.-F., Hasan, O.S.M., Lachenmeier, D.W., Room, R., & Sornpaisarn, B	Year 2019
	URL	
	DOI 10.3390/ijerph16193749	
14	Title Assessing service and treatment needs of young people who use illicit and non-medical prescription drugs living in Northern Ontario, Canada [version 2; peer review: 2 approved]	Supported by CRISM funding Fully
	Journal F1000Research	Number 7, 1644
	Primary Author Name Varatharajan, T.	Page No
	Authors Sabioni, P., Russell, C., Henderson, J., Fischer, B., Miles, S., & Rehm, J	Year 2019
	URL	
	DOI 10.12688/f1000research.16464.2	
15	Title Assessing the public health impact of cannabis legalization in Canada: Core outcome indicators towards an 'index' for monitoring and evaluation	Supported by CRISM funding Partially
	Journal Journal of Public Health	Number 41 (2)
	Primary Author Name Fischer, B.	Page No 412-421
	Authors Russell, C., Rehm, J., & Leece, P	Year 2018 (online) 2019 (in journal)
	URL	

CRISM Ontario Node Publications
January 1, 2019- March 31, 2020

	DOI 10.1093/pubmed/fdy090	
16	Title Alcohol use and injury risk in Thailand: A case-crossover emergency department study.	Supported by CRISM funding Partially
	Journal Drug and Alcohol Review	Number
	Primary Author Name Sornpaisarn, B	Page No
	Authors Sornpaisarn, S., Shield, K.D., & Rehm, J.	Year 2020
	URL	
	DOI 10.1111/dar.13094.	
17	Title The longitudinal relationship between cannabis use and hypertension	Supported by CRISM funding Partially
	Journal Journal of Hypertension	Number
	Primary Author Name Haleem, A.	Page No
	Authors Hwang, Y. J., Elton-Marshall, T., Rehm, J., & Imtiaz, S.	Year 2020
	URL	
	DOI	
18	Title Major challenges in substance use research in Canada in 2019	Supported by CRISM funding Fully
	Journal Submitted to International Journal of Alcohol and Drug Research.	Number
	Primary Author Name Sornpaisarn, B	Page No
	Authors Ali, F., Elton-Marshall, T., Imtiaz, S., Probst, C., Sornpaisarn, S., Rehm, J	Year 2020
	URL	
	DOI	
19	Title	Supported by CRISM funding Partially

CRISM Ontario Node Publications
January 1, 2019- March 31, 2020

	Multiple COVID-19 risk factors increase the likelihood of experiencing anxiety symptoms in Canada.	
	Journal Canadian Journal of Psychiatry	Number
	Primary Author Name Elton-Marshall T.	Page No
	Authors Wells, S., Jankowicz, D., Nigatu, Y., Wickens, C.M., Rehm, J., Hamilton, H.A.	Year 2020
	URL	
	DOI	
20	Title Prevalence and correlates of medicinal cannabis use among adolescents.	Supported by CRISM funding Partially
	Journal Journal of Adolescent Health	Number
	Primary Author Name Wardell, J.	Page No
	Authors Rueda, S., Elton-Marshall, T., Mann, R.E., Hamilton, H.A.	Year 2020
	URL	
	DOI	
21	Title Recent changes in trends of opioid overdose deaths in North America: Implications for prevention and policy	Supported by CRISM funding Fully
	Journal Substance Abuse Treatment, Prevention and Policy	Number
	Primary Author Name Imtiaz, S	Page No
	Authors Shield, K. D., Fischer, B., Elton-Marshall, T., Sornpaisarn, B., Probst, C., Rehm, J.	Year 2020
	URL	
	DOI	
22	Title	Supported by CRISM funding Fully

CRISM Ontario Node Publications
January 1, 2019- March 31, 2020

	'Small Communities, Large Oversight': The Impact of Recent Legislative Changes Concerning Supervised Consumption Services on Small Communities in Ontario	
	Journal International Journal of Drug Policy.	Number
	Primary Author Name Russell, C	Page No
	Authors Imtiaz, S., Ali, F., Elton-Marshall, T., Rehm, J.	Year 2020
	URL	
	DOI	
23	Title Alcohol consumption and attributable harm in middle-income South-East Asian countries: Epidemiology and policy options.	Supported by CRISM funding Partially
	Journal International Journal of Drug Policy	Number 83
	Primary Author Name Sornpaisarn B	Page No 102856
	Authors Shield, K., Manthey, J., Limmade, Y., Low, W.Y., Thang, V.V., & Rehm, J	Year 2019
	URL	
	DOI 10.1016/j.drugpo.2020.102856	
24	Title Think clearly about the medical cannabis policy in Thailand	Supported by CRISM funding Partially
	Journal Journal of Health Science	Number 28(4)
	Primary Author Name Sornpaisarn B	Page No 755-766
	Authors Manthey J, Rehm J.	Year 2019
	URL	
	DOI	
25	Title	Supported by CRISM funding Partially

CRISM Ontario Node Publications
January 1, 2019- March 31, 2020

	Strategies used to initiate the first alcohol control law in Thailand: lessons learned for other low- and middle-income countries	
	Journal	Number
	Primary Author Name Sornpaisarn B	Page No
	Authors Rehm J.	Year 2020
	URL	
	DOI	
26	Title Global burden of alcohol use disorders and alcohol liver disease	Supported by CRISM funding Partially
	Journal Biomedicines	Number 7(4)
	Primary Author Name Rehm J.	Page No 99
	Authors Shield, K.D.	Year 2019
	URL	
	DOI 10.3390/biomedicines7040099	
27	Title Responding to global stimulant use: challenges and opportunities.	Supported by CRISM funding Partially
	Journal Lancet	Number 394(10209)
	Primary Author Name Farrell, M	Page No 1652-1667.
	Authors Martin, N.K., Stockings, E., Bórquez, A., Cepeda, J.A., Degenhardt, L., Ali, R., Tran, L.T., Rehm, J., Torrens, M., Shoptaw, S., McKetin, R.	Year 2019
	URL	
	DOI 10.1016/ S0140-6736(19)32230-5	
28	Title Evaluation of alcohol policy control measures is key	Supported by CRISM funding Fully

CRISM Ontario Node Publications
January 1, 2019- March 31, 2020

	Journal Addiction	Number 115 (8)
	Primary Author Name Štelemėkas, M	Page No 1590-1591
	Authors Manthey, J., Lange, S., Badaras, R., Zurlyte, I., Passmore, J., Breda, J., Ferreira-Borges, C., & Rehm, J.	Year 2020
	URL	
	DOI 10.1111/add.14983	
29	Title Is burden of disease differentially linked to spirits? A systematic scoping review and implications for alcohol policy	Supported by CRISM funding Fully
	Journal Alcohol	Number 82
	Primary Author Name Rehm, J.	Page No 1-10
	Authors Hasan, O.S.M.	Year 2020
	URL	
	DOI 10.1016/j.alcohol.2019.06.005	

CRISM QA Publications

January 1, 2019-March 31, 2020

Partially funded: Peer-reviewed publications

Mohammed Al-Hamdani, Kayla Joyce, Sherry Stewart

1. **Mohammed Al-Hamdani, Kayla M Joyce**, Megan Cowie, Steven Smith & **Sherry H Stewart** (2019) Too little, too much or just right: Injury/illness sensitivity and intentions to drink as a basis for alcohol consumer segmentation, *Substance Use & Misuse*, 54:6, 894-898, DOI: 10.1080/10826084.2018.1549081

Adelina Artenie, Julie Bruneau

2. **Artenie, A.A.**, Cunningham, E.B., Dore, G.J., Conway, B., Dalgard, O., Powis, J., ... **Bruneau, J.** & Grebely, J. (2019). Patterns of drug, alcohol use and injection equipment sharing among people with recent injecting drug use or receiving opioid agonist treatment during and following hepatitis C virus treatment with direct-acting antiviral therapies: An international study. *Clinical Infectious Diseases*, 70(3). DOI: 10.1093/cid/ciz633

Adelina Artenie, Stine Hoj, Brendan Jacka, Nanor Minoyan, Julie Bruneau

3. **Høj, S., Jacka, B.P., Minoyan, N., Artenie, A.A. & Bruneau, J.** (2019). Conceptualising access in the direct-acting antiviral era : An integrated framework to inform research and practice in HCV care for people who inject drugs. *International Journal of Drug Policy*, 72. DOI: 10.1016/j.drugpo.2019.04.001.

Adelina Artenie, Julie Bruneau, Nanor Minoyan, Didier Jutras-Aswad, Élise Roy, Brendan Jacka, Stine Hoj, Geng Zang

4. **Artenie, A.A., Minoyan, N., Jacka, B., Høj, S., Jutras-Aswad, D., Roy, É., Gauvin, L., Zang, G., & Bruneau, J.** (2019). Opioid agonist treatment dosage and patient-perceived dosage adequacy, and risk of hepatitis C infection among people who inject drugs. *CMAJ*, 19 (17), E462-E468. doi: 10.1503/cmaj.181506
5. **Jacka, B., Roy, E., Høj, S., Minoyan, N., Artenie, A., Zang, G., Jutras-Aswad, D., Bruneau, J.** (2019). Sexual behaviour as a risk factor for hepatitis C virus infection among people who inject drugs in Montreal, Canada. *Journal of Viral Hepatitis*, 26(12), 1413-1422. DOI: 10.1111/jvh.13194

Adelina Artenie, Didier Jutras-Aswad, Élise Roy, Emmanuel Fortier, Julie Bruneau

6. **Fortier, E., Artenie, A., Zang, G., Jutras-Aswad, D., Roy, E., &, Grebely, J., & Bruneau, J.** (2019). Short and sporadic injecting cessation episodes as predictors of incident hepatitis C virus infection: Findings from a cohort study of people who inject drugs in Montréal, Canada. *Addiction*, 114(8), 1495-1503.

Suzanne Brissette

7. Oviedo-Joekes E, Palis H, Guh D, Marsh DC, MacDonald S, Harrison S, **Brissette S**, Anis AH, Schechter MT. Adverse Events During Treatment Induction With Injectable Diacetylmorphine and Hydromorphone for Opioid Use Disorder. *J Addict Med.* 2019 Feb 7. doi: 10.1097/ADM.0000000000000505.

Julie Bruneau

8. Day, E., Hellard, M., Treloar, C., **Bruneau, J.**, Martin, N.K., Ovrehus, A., ... International Network on Hepatitis in Substance Users (INHSU) (2019). Hepatitis C elimination among people who inject drugs: Challenges and recommendations for action within a health systems framework. *Liver International* 39(1), 20-30. doi: 10.1111/liv.13949.
9. Rodrigo, C., Leung, P., Lloyd, A.R., Bull, R.A., Luciani, F., Grebely, J., Dore, G.J., Applegate, T., Page, K., **Bruneau, J.**, ... InC3 Collaborative. (2019). Genomic variability of within-host hepatitis C variants in acute infection. *Journal of Viral Hepatitis* 26(4), 476-484. doi: 10.1111/jvh.13051.
10. Lisovsky, I., Kant, S., Tremblay-McLean, A., Isitman, G., Kiani, Z., Dupuy, F.P., Gilbert, L., **Bruneau, J.**, ... Bernard, N.F. (2019). Differential contribution of education through KIR2DL1, KIR2DL3, and KIR3DL1 to antibody-dependent (AD) NK cell activation and ADCC. *Journal of Leukocyte Biology* 105(3), 551-563. doi: 10.1002/JLB.4A0617-242RRR.
11. Day, E., Broder, T., **Bruneau, J.**, Cruse, S., Dickie, M., Fish, S., ... Grebely, J. (2019). Priorities and recommended actions for how researchers, practitioners, policy makers, and the affected community can work together to improve access to hepatitis C care for people who use drugs. *International Journal of Drug Policy* 66, 87-93. doi: 10.1016/j.drugpo.2019.01.012.
12. Geddes, L., Iversen, J., Wand, H., Esmaeili, A., Tsui, J., Hellard, M., Dore, G., Grebely, J., Dietze, P., **Bruneau, J.**, ... InC3 Collaborative. (2019). Sex discrepancies in the protective effect of opioid agonist therapy on incident hepatitis C infection. *Clinical Infectious Diseases*, ciz162. doi: 10.1093/cid/ciz162.
13. Abayasingam, A., Leung, P., Eltahla, A., Bull, R.A., Luciani, F., Grebely, J., Dore, G.J., Applegate, T., Page, K., **Bruneau, J.**, ... InC3 Study Group. (2019). Genomic characterization of hepatitis C virus transmitted founder variants with deep sequencing. *Infection, Genetics and Evolution* 71, 36-41. doi: 10.1016/j.meegid.2019.02.032.

Julie Bruneau, Didier Jutras-Aswad, Élise Roy

14. **Bruneau, J., Arruda, N., Zang, G., Jutras-Aswad, D., Roy, É.** (2019). The evolving drug epidemic of prescription opioid injection and its association with HCV transmission among people who inject drugs in Montréal, Canada. *Addiction* 114(2), 366-373. doi: 10.1111/add.14487.

Julie Bruneau, Sarah Larney

15. Degenhardt, L., Grebely, J., Stone, J., Hickman, M., Vickerman, P., Marshall, B.D.L., **Bruneau, J., ... & Larney, S.** (2019). Global patterns of opioid use and dependence: harms to populations, interventions, and future action. *The Lancet Series: Drug Use*, 394(10208), 1560-1579. [https://doi.org/10.1016/S0140-6736\(19\)32229-9](https://doi.org/10.1016/S0140-6736(19)32229-9)

Julie Bruneau, Nelson Arruda, Geng Zang, Didier Jutras Aswad, Élise Roy

16. **Bruneau, J., Arruda, N., Zang, G., Jutras-Aswad, D., & Roy, E &.** (2019). The evolving drug epidemic of prescription opioid injection and its association with HCV transmission among people who inject drugs in Montréal, Canada. *Addiction*, 114(2), 366-373. DOI: 10.1016/j.addbeh.2019.05.010

Julie Bruneau, Maykel Ghabrash, Julie Bruneau, Élise Roy, Simon Dubreucq, Emmanuel Fortier, Didier Jutras-Aswad

17. Côté, P., **Ghabrash, M., Bruneau, J., Roy, É, Dubreucq, S., Fortier, E., & Jutras-Aswad, D.** (2019). Association between mental health service utilisation and sharing of injection material among people who inject drugs in Montreal, Canada. *Addictive Behaviors*, 96, 175-182. DOI: 10.1016/j.addbeh.2019.05.010

Julie Bruneau, Brendan Jacka, Stine Hoj, Elise Roy

18. Picard, J., **Jacka, B., Høj, S., Laverdière, &., Cox, J., Roy, E., & Bruneau, J.** (2020). Real-World Eligibility for HIV Pre-exposure Prophylaxis Among People Who Inject Drugs. *AIDS and Behavior*, January 29, 2020. DOI: 10.1007/s10461-020-02800-w

Julie Bruneau, Brendan Jacka, Sarah Larney, Stine Hoj

19. **Jacka, B., Larney, S., Degenhardt, L., Janjua, N., Hoj, S., Krajden, M., Grebely, J., & Bruneau, J.** (2020). Prevalence of injecting drug use and coverage of interventions to prevent HIV and hepatitis C virus infection among people who inject drugs in Canada. *American Journal of Public Health*, 110(1), 45-50. <https://doi.org/10.2105/AJPH.2019.305379>

Mark Asbridge

20. Hyshka, E., Anderson_Baron, J., Pugh, A., Belle-Isle, L., Hathaway, A., Pauly, B., Strike, C., **Asbridge, M., Dell, C., McBride, K., Tupper, K., & Wild, T.C.** (2019). Principles, practice, and

policy vacuums: Policy actor views on provincial/territorial harm reduction policy in Canada. *International Journal of Drug Policy*, 71, 142-149.
<https://doi.org/10.1016/j.drugpo.2018.12.014>

Josiane Bourque, Patricia Conrod

21. Rachel J. Sharkey, **Josiane Bourque**, Kevin Larcher, Bratislav Mišić, Yu Zhang, Ayça Altinkaya, Abbas Sadikot, **Patricia Conrod**, Alan C. Evans, Hugh Garavan, Marco Leyton, Jean R. Séguin, Robert Pihl, Alain Dagher, Mesolimbic connectivity signatures of impulsivity and BMI in early adolescence, *Appetite*, Volume 132, 2019, Pages 25-36, ISSN 0195-6663, <https://doi.org/10.1016/j.appet.2018.09.019>.

Thomas Brothers

22. **Brothers, T.D.**, & Bonn, M. (2019). Patient-centred care in opioid agonist treatment could improve outcomes. *CMAJ*, 191 (17): E460-E461. doi: 10.1503/cmaj.190430

Manon Choinière

23. McGillion, M. H., Henry, S., Busse, J. W., Ouellette, C., Katz, J., **Choinière, M.**, ... Devereaux, P. J. (2019). Examination of psychological risk factors for chronic pain following cardiac surgery: protocol for a prospective observational study. *BMJ open*, 9(2), e022995.
doi:10.1136/bmjopen-2018-022995

Patricia Conrod

24. Edalati, H., & **Conrod, P. J.** (2019). A Review of Personality-Targeted Interventions for Prevention of Substance Misuse and Related Harm in Community Samples of Adolescents. *Frontiers in psychiatry*, 9, 770. doi:10.3389/fpsy.2018.00770
25. Newton, N.C., Stapinski, L., Teesson, M., Slade, T., Champion, K.E., Barrett, E.L., ... & **Conrod, P.J.** (2019). Evaluating the differential effectiveness of social influence and personality-targeted alcohol prevention on mental health outcomes among high-risk youth: A novel cluster randomised controlled factorial design trial. *Australian & New Zealand Journal of Psychiatry*, 54(3), 259-271. <https://doi.org/10.1177%2F0004867419877948>

Patricia Conrod, Sherry Stewart

26. Jean-François G. Morin, Mohammad H. Afzali, Josiane Bourque, **Sherry H. Stewart**, Jean R. Séguin, Maeve O'Leary-Barrett, and **Patricia J. Conrod**, A Population-Based Analysis of the Relationship Between Substance Use and Adolescent Cognitive Development *American Journal of Psychiatry* 2019 176:2, 98-106

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APPENDIX 2: CRISM Implementation Science Program Overview of Progress to Sept 2020

Descriptions of the projects and deliverables completed to date are posted here: <https://crism.ca/projects/implementation/>

LEAD NODE	PROJECT	Sept 2018- Sept 2019 Activities	Sept 2019- Sept 2020 Activities	Sept 2020-Sept 2021 Activities	Sept 2021-Sept 2022 Activities
ONTARIO	Naloxone	Environmental Scan of Naloxone Parameters across Canada			
		Conduct environmental scan			
		Disseminate report nationally			
		Development of Naloxone ‘Best Practice Guideline’			
		Determine outcome indicators	Conduct review of available data on naloxone regulation, availability and practices nationally and internationally	Disseminate and publish review	
		Repository of Canadian Data/Outcomes of Naloxone Distribution			
			Identify and compile relevant process and outcome data on naloxone distribution, outcomes etc. into a repository eg. CRISM website	Disseminate and publish results	
	Detox / Withdrawal Management Co- led by Qu-A Node (DWM)	Environmental Scan of detoxification/withdrawal management practice and needs across Canada			
		Compile list of services and organize provincially	Data analysis	Disseminate and publish results	
		Develop and launch survey	Write internal report		
		Development of Opioid Detoxification/withdrawal management review and “Best Practice” document			
		Determine outcomes indicators	Data collection and analysis	Disseminate and publish results	
		Compile core group (8-10) expert stakeholders for analysis and KT purposes	Write internal report		

	Corrections	Scoping Review of Feasibility and Outcomes of Interventions for Opioids Misuse among Correctional Populations			
		Develop and conduct scoping review	Publish manuscript		
		Submit report for publication in PLOS 1			
		Evaluating the Impact of Strategies to prevent opioid-related harms in people who experience imprisonment in provincial prisons in Ontario			
		Identify outcomes and indicators	Develop and populate correctional database	Disseminate and publish results	
		Gain access to available health administrative data (CIHI, MCSCS)	Complete paper on OAT from data from the Minister of the Solicitor General		
		Follow-up study of Quebec Federal Offenders on Opioid Substitution Treatment (OST): offender pre and post-release interviews			
		Recruitment and conduct of interviews of federal offenders from correctional settings	Conduct interviews (post-release) ON HOLD DUE TO COVID	Complete interviews (post-release)	
		Extract data from CSC databases		Disseminate and publish results	
		Examining the Opioid Landscape within Federal Prisons in Alberta: survey and staff interviews			
		Develop survey for correctional staff and recruit participants	Continue to conduct interviews one last site is ON HOLD DUE TO COVID	Complete interviews	
		Conduct interviews and surveys		Disseminate and publish results	
		An Evaluation of the use of Community Transition Teams to improve health outcomes for individuals recently released from British Columbia Corrections			
		Identify data systems and outcomes for CTTs	Conduct interviews- currently revising interview plans to conduct online/over the phone ON HOLD DUE TO COVID	Complete interviews	
	Develop questionnaire for interviews	Disseminate and publish results			
	PRAIRIES	Supervised Consumption Services (SCS)	Develop a National Evidence-Based Supervised Consumption Sites (SCS) Operational Guidance Document		
Conduct literature review and environmental scan of SCS sites in Canada			Disseminate operational guidance document	Publish operational guidance document	Update document as new material becomes available
Developing Plain Language Materials on SCS					
			Complete evidence brief on public health impacts of SCS	Disseminate and update KT materials as needed	Update documents as needed

			Complete evidence brief on supervised inhalation	Produce accessible descriptions on innovative SCS and OPS service models		
			Complete frequently asked questions on SCS and OPS	Produce infographics on the number and key features of SCS and OPS in Canada		
			Complete infographics based on evidence briefs	Produce podcast episodes on SCS		
		Building the National Knowledge Base on SCS models in Canada: survey and case studies of SCS				
			Develop survey of Canadian SCS sites	Conduct survey of Canadian SCS sites	Write internal report on case studies	
			Conduct survey of Canadian SCS sites ON HOLD DUE TO COVID	Write internal report on survey	Disseminate and publish case study results	
				Disseminate and publish survey results		
				Conduct and case study of selected SCS sites		
		Psychosocial and Recovery (TOPP)	Treatment Program Survey			
	Development of the sampling framework for Canadian OUD treatment programs		Complete technical report	Disseminate and publish survey results		
	Conduct survey (n=202)					
	Treatment Program Case Studies					
	Identification of suitable programs		Conduct case studies	Complete case studies		
				Analyze case study results		
				Write internal report		
				Disseminate and publish case study results		
	Scoping Review of Psychosocial Interventions for OUD					
	Conduct scoping review		Prepare technical report	Draft and publish additional manuscripts		
			Publish results – first manuscript submitted to DAD; accepted pending revisions	Prepare KT materials including database of results		
		Release database of scoping review results				

		National Best Practice Guidelines: Developing of an implementation plan to increase uptake of best practice and evaluate its impact.				
				Development of guidelines	Broader implementation of guidelines	
				Pilot implementation of guidelines		
				Evaluate implementation		
	Indigenous Peoples Project (TPF)	Engagement with Indigenous stakeholders throughout project				
		Develop a national First Nations perspective to inform the project	Ongoing engagement and empowerment of communities	Ongoing engagement and empowerment of communities	Ongoing engagement and empowerment of communities	
		Empower communities and treatment centres				
		National gatherings of working group and leadership group				
		Hold first meeting February 2019	Hold second in-person meeting May/June 2020 POSTPONED DUE TO COVID	Hold virtual meeting		
		Produce a monthly newsletter that briefs the leadership and working group on the progress, initial findings, and highlights of the project				
		Literature Review: Effective methods for a First Nations culture-based response to increased opioid and methamphetamine use				
		Draft report and KT materials	Disseminate literature review to project team	Publish literature review	Update documents as new information becomes available	
		Environmental Scan of Indigenous community treatment centres				
		Visit 10 Indigenous communities across Canada	Draft and disseminate individualized reports and KT materials to each community			
			Incorporate results into National Guideline			
		National Guidelines (Clinical and Operations)				
				Develop guidelines based on literature review and environmental scan	Present guidelines to AFM	Broader implementation of guidelines
					Pilot test and evaluate guidelines	
						Develop implementation strategy

			Develop tool to evaluate guidelines		Update guidelines as new information becomes available
			Present guidelines to AFM POSTPONED DUE TO COVID		
BRITISH COLUMBIA	iOAT	National iOAT Guidelines (Clinical and Operations)			
		Public release of guidelines and journal article in CMAJ	Online and targeted dissemination of national iOAT guidelines	Guideline impact evaluation	Update guidelines
			Develop KT materials and resources		
			CMAJ podcast		
		Environmental Scan of iOAT Services			
		First scan: 2018	1 st and 2 nd Scan results: manuscript submitted	Fourth/Fifth scans	
		Second scan: March 2019	Third scan: March 2020 (collect data and analyze)	Third/Fourth/Fifth scans: disseminate reports	
		CPPD Conference presentation		Consolidate all scan results, develop KT materials, disseminate and publish manuscripts	
		National Community of Practice			
		Create listserv	Create webpage to host information, events, resources	Maintain and moderate regular e-mail and webinar communication	
	Expanding access to OAT (1): Nursing	National Scoping Review			
		Conduct scoping review	Develop report and recommendations	Complete report and recommendations	
				Disseminate report and recommendations	
				National webinar with Canadian Nurses Association	
				Develop education and training modules	
				Develop resources and practice support tools to support nurse led OAT models	
		National Recommendations			
	Draft national recommendations				

People With Lived Expertise Engagement (PWLE)				
	Host workshop around CSAM			
	Build a national group of PWLLE representatives			
	Develop community partners and PWLLE group	Continue building group membership	Hold in-person meetings to support research priorities and teambuilding	Hold in-person meetings to support research priorities and teambuilding
	Hold in-person meeting around research priorities and focus on teambuilding		Hire PWLLE project coordinator	
	Participate and consult in other EHT projects			
	Provide feedback to other EHT project teams through presentations on monthly teleconferences	Continue engagement with other EHT projects	Continue feedback sessions with other EHT projects	Continue feedback sessions with other EHT projects
		Participate in COVID guidance development		
	Photovoice Project			
	Conduct photovoice project	Publish photovoice journal v1	Disseminate products	
		Update and publish photovoice journal v2		
	Harm Reduction Workers Survey			
	Implement survey at the Stimulus Harm Reduction Conference in Edmonton, Oct 2018	Analyze data	Disseminate journal article	
		Publish report		
		Publish infographic		
		Submit manuscript		
	Crackdown: Podcast			
	Connect with Crackdown development team	Participate in the development of 1-2 podcasts	Consultations, planning, content, editing, production	
			Release podcasts	
			Dissemination	
	COVID Research – NEW PROJECT			
		Design questions and submit ethics amendment	Continue qualitative surveys	

			Conduct focus group	Analyze results	
			Conduct qualitative surveys	Draft manuscript	
				Planning, consultation for interactive website	
				Contract web designer	
				Launch website	
QUÉBEC-ATLANTIC	Drug Checking	Drug Checking Services in Canada: A Review of Existing and Developing Services			
		Questionnaire development	Survey launched Nov 2019	Complete data analysis	Repeat survey (previous and new sites)
			Discuss preliminary data collected at IoS in November 2019	Write report	Update report
			Organized 1-day meeting with CCSA working group at IoS on November 27, 2019	Disseminate and publish report	
			Post CCSA meeting to address issues raised, such as standardization/ indicator for DCS (January 21, 2020)		
			Data analysis began early 2020 ON HOLD DUE TO COVID		
		Implementation of Drug Checking Services for People Who Use Drugs: A Systematic Review			
		Conduct first search	Update search	Disseminate and publish manuscript of systematic review	
			Presented update at DCWG/ CRISM in-person meeting in Ottawa (IoS November 2019)		
			Abstract accepted to 14th Annual Conference of the International Society for the Study of Drug Policy Conference ON HOLD DUE TO COVID		
			Data analysis, drafting tables		
		Data extraction	Draft manuscript		

At-risk Youth/ Newer Users	Scoping Review of OUD Treatment for Youth/Newer Users (Montreal site)			
	Conduct scoping review	Disseminate preliminary results of the scoping review at youth summits (November 12, 2019 in BC and January 25, 2020 in other nodes)	Disseminate and publish results	
		Draft manuscript of the scoping review		
	Critical Gap Analysis (Montreal Site)			
	Develop and pilot survey	Survey launched November 2019; survey re-sent July 2020	Complete survey	Disseminate and publish results
			Disseminate and publish results	
			Repeat survey as needed with new providers and update results	
	Youth Focus Groups (All Sites)			
	Conduct focus groups in each node	Develop ‘rapid’ summaries of the Youth Focus Groups to inform summit	Write reports	
	Different youth populations in each node: BC- street-involved youth; AB- youth with personal experience, or family member and/or someone close to them who have experienced opioid-related harm; ON- Indigenous youth, youth seeking mental health and addiction services; QC- Pediatric youth, oncology youth; NS- young adults/ university students		Disseminate and distribute results as described in the “knowledge mobilization” activity section below	
	Transcribe focus groups	Code focus group data		
		Finalize summaries of Youth Focus Groups		
	Youth Summits (All Sites)			
	Advisory committee to identify and invite youth	Hold one Youth Summit (November 12, 2019 in BC and January 25, 2020 in the other nodes)	Submit report to Health Canada	
		Finalize summary of the Youth Summits	Disseminate and distribute results as described in the “knowledge mobilization” activity section below	

		Knowledge Mobilization and Translation (All Sites)			
			Montreal youth summit was covered on primetime Montreal CBC news, and was attended by policy analysts from Health Canada	Presentation at CSAM symposium conference online (November 2020) to disseminate results of focus group, youth summits	
				Disseminate the KT synthesis information (effective models, standards, and evidence-based approaches) and youth perspectives	
			Panel presentation at UN commission on Narcotic Drugs meeting in Vienna, 2-6 March 2020 Maya Nujaim (20 years old) was selected by Health Canada during the youth summit to present at this meeting	Hands-on sessions at the provincial level for capacity building to facilitate and potentially increase implementation of evidence-based interventions in the delivery of services to youth	
			Circulation of live drawing graphics from youth summit at UN commission on Narcotic Drugs meeting in Vienna, 2-6 March 2020	Evaluate the extent to which service providers have incorporated the guiding principles into their practice and implemented the new initiatives	
	Expanding access to OAT (2): Buprenorphine/naloxone rapid access in ED	Emergency Department Initiation of Opioid Agonist Treatment for Patients with Opioid Dependence: A Rapid Systematic Review			
		Conduct systematic review	Submitted manuscript to “Annals of Emergency Medicine” on April 2, 2020 but was rejected		
			Revise manuscript to be submitted to Academic Emergency Medicine – Accepted and Published in Early View July 28, 2020		
		Survey of Emergency Physician Attitudes toward Initiating Opioid Agonist Treatment			
		Develop and conduct survey	Preliminary results presented at CSAM 2019 (October 24-27)	Disseminate and publish results	
			Present preliminary data at 11th Annual Emergency Medicine Research Day at UBC		
			Draft report of the quantitative survey		
			Manuscript “Buprenorphine practice and attitudes among physicians in 27 Canadian emergency departments” submitted to Academic Emergency Medicine (August, 2020)		
		Expanding access to OAT initiation in emergency departments: Physician qualitative interviews			
		Develop and conduct interviews of physicians	Data analysis of qualitative interviews	Draft report on Bup/Nal	
				Draft report on harm reduction	

			Preliminary results presented at CSAM 2019 (October24-27)			
			Disseminate and publish results			
		Buprenorphine/ naloxone to-go and intensive outreach team follow-up for emergency department patients with opioid use disorder (ED patient survey and qualitative interview)				
		Develop and pilot test questionnaire and begin to recruit participants	Recruitment of participants ON HOLD DUE TO COVID	Complete data collection		
			Conduct follow-up ON HOLD DUE TO COVID	Complete analysis		
				Disseminate and publish results		
		Implementation and Evaluation Activities				
			Poster presentation of the quantitative survey and qualitative interviews at CSAM-SMCA 2019 Conference (October 24-26, 2019)	Compile KT, implementation and evaluation resources and tools		
				Implement and evaluate		
				Disseminate and publish results		