

Building Knowledge for Societal Change

Strategic Plan for 2017 to 2021

Studying substance use and improving health: A framework for research and knowledge exchange

November 2017

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LIST OF ABBREVIATIONS

BC British Columbia

BCAF BC Addiction Foundation

CISUR Canadian Institute for Substance Use Research
CCSA Canadian Centre for Substance use and Addiction

MH&A Mental Health and Addictions

MSFHR Michael Smith Foundation for Health Research

PHSA Provincial Health Services Authority

SFU Simon Fraser University UVic University of Victoria

UBC University of British Columbia

UNBC University of Northern British Columbia

ACKNOWLEDGEMENTS

Studying substance use and improving health: A framework for research and knowledge exchange

INTRODUCTION

This document presents a renewed five-year Strategic Plan (2017 to 2021) for the Canadian Institute for Substance Use Research, formerly the Centre for Addictions Research of BC (CARBC). CARBC was first established as an approved research centre of the University of Victoria (UVic) in 2005. The renewed Plan in many respects follows closely the structures of the two previous five-year plans that were successfully implemented by successive independent reviews in October 2010 and July 2016. The Plan starts with some context regarding the host institution, discussion of key underlying concepts regarding substance use and related harms and a brief history of the organisation. The rest of the Plan presents a revised mission and set of objectives and performance indicators across five Key Result Areas reflecting the organisation's more national focus: building capacity for research and knowledge exchange, education and training, conducting high-quality research in designated priority areas, disseminating results to multiple audiences, and contributing to improved policy and practice outcomes. Tc 0 Tw 12..5 9 resulth in sty (pr)7((ac6(t)2(6(on)] (p5 0 nJ -0.(ul)6TJ -0n o)10(f)-d6(s)

- 4. Improving Research Competitiveness through Differentiation and Specialization; and
- 5. Enhancing and Optimizing the Provision of Research Services

UVic's SRP has also identified eight dynamic research capabilities; the research conducted by CISUR research scientists falls under the health and life science capability. In recent years there has been a significant shift in conceptions of the factors that determine human health and well-being. Greater attention is being paid to a range of structural, social, economic, environmental and health service factors that interact in complex ways to influence the health of individuals, communities and populations. Working with community groups and leaders, governments, health authorities and other health care agencies, CISUR researchers provide the evidence-based knowledge that decision-makers need to improve the health and well-being of people living in Canada.

The CISUR's Strategic Plan aligns with UVic's SRP and its commitment to the vital impact of research: excellence in research; discovery, creation and invention; community-engaged research; research-inspired educational programs; and international research.

UVic's International Plan builds on the university's tradition of excellence in internationalization and harnesses its commitment to dynamic learning, vital impact and its extraordinary academic environment. UVic's plan for internationalization is organized into five major categories:

- Category 1: Creating a culture of exchange through student mobility
- Category 2: Enhancing the international student experience
- Category 3: Providing intercultural curricula for a global-ready institution
- Category 4: Making a vital impact through

CISUR's mandate involves the study of psychoactive substance use and related issues, with particular attention to the exploration of ways to minimize negative impacts on individuals and society. Substance use, like other human behaviours, is influenced by multiple factors: personal, social and environmental. Effectively addressing the negative impacts requires understanding the various factors that influence substance use and that contribute to the differential impact of that use (positive or negative). These "determinants of health" extend far beyond individual lifestyle choices or health actions to encompass social, economic and political contexts that shape health capacities and health opportunities. This necessarily involves the study of social and health inequities and their root causes as they relate to substance use, and the development of authentic community partnerships to help reduce harm and promote health.

The negative impact of substance use on health and well-being is best established in relation to tobacco and alcohol. The misuse of prescription drugs likely also has a sizeable negative contribution but this is less well established. Measures of substance use such as smoking prevalence and levels of alcohol consumption correlate with measures of substance-related harms such as hospitalization rates. Together, these indicators provide a way to measure and track the relative impact of substance use on the total burden of disease over time.

In 2015, over 1.1 billion people across the globe smoked tobacco. Although smoking is declining worldwide and in Canada, it is increasing in some parts of the world. Comprehensive public policy interventions for tobacco in BC and other Canadian jurisdictions seem to be having a positive effect on smoking prevalence and the reduction of related harms. The advent of vapour devices that can provide lower risk forms of nicotine delivery may have a huge impact on the reduction of future harm from smoking tobacco. This potential for tobacco harm reduction needs to be carefully investigated, though evidence to date suggests that vapour devices are replacing tobacco smoking among youth and pose minimal health risks (2). Latest data from the

However, this estimate is clearly overdue for being updated, an activity planned by CISUR with partners in the next 5 year cycle.

The vast majority of Canadians use alcohol. Many use it in ways that present a low risk of harm to the health and well-being of themselves and those around them. Nonetheless, after adjustment for under-reporting in surveys, our published estimates are that 81% of all the alcohol consumed in Canada is drunk at or above risk levels for acute harm as specified by the Canadian low risk drinking guidelines (5). Further, as many as 40% of Canadian men and 37% of women regularly exceed the daily low risk drinking guidelines (5).

There also remains a substantial problem with illicit drug use across Canada. Health Canada identified this as a national health crisis in late 2016 (http://news.gc.ca/web/article-

<u>en.do?mthd=advSrch&crtr.page=2&crtr.dpt1D=6676&nid=1157099</u>). Earlier in 2016, BC's Provincial Health Officer declared a public health emergency to deal with the

AN INDEPENDENT INSTITUTE FOR RESEARCH AND KNOWLEDGE EXCHANGE Solutions and strategies for dealing with the problems of substance use are often controversial and can be the topic of heated public debate.

Substance Use. CISUR will continue to develop its role, where possible	

SOME KEY CONSIDERATIONS

Concepts and terminology

There are many terms used to describe the problematic use of psychoactive substances and problem behaviours such as gambling. The term "addiction" has wide currency. The common understanding of the term is of excessive and problematic use of a drug that is

Population health research

CISUR recognizes that research, practice and policy have often been constructed to affect the entire population without specific attention to differential effects on women or, for example, on Indigenous populations. As such, evidence is usually lacking on the impact of population level policies on many subpopulations, as well as for targeted approaches that address vulnerabilities specific to diverse groups of women and men. To this end, CISUR supports an approach to research that looks at the impacts of substance use across and within multiple populations. Population health intervention research takes such an approach. Population health intervention research aims to produce knowledge that has the potential to impact population health through the study of policies and programs in health and other sectors (27).

MISSION

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

GUIDING PRINCIPLES

The work of CISUR will continue to be guided by the following principles:

Collaborative relationships

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

Independent research

Protection from vested interests is essential to ensure that rigorous research is conducted and communicated clearly

Harm reduction Recognition that some people will continue to use psychoactive substances and	

Key Result Area 1: To Build Capacity



CISUR has received a total of over \$20 million in funding from internal and external sources over the past five years, the latter comprising both peer-reviewed grants and other types of grants and contracts. Core funding for faculty and administrative salaries comes from the endowment which currently pays out approximately \$480,000 per annum. Annual income from all sources has grown slightly over this period though it is noticeable that large new competitive grants were mostly obtained in the first three years. This reflects both the more competitive funding environment created by the reforms of CIHR plus mostly adequate levels of funding from successes in earlier years. There has been a slight increase in funds from non-competitive grants and contracts. Notably the BC government provided a one-off grant of \$1 million to support a broad range of CISUR research programmes and knowledge exchange initiatives in 2013. This has been invested over a period of five years resulting in annual payouts of \$184,000 after which any accumulated interest will be paid out in the sixth year.

Strategic initiatives planned for 2017-2021

Looking forward to the next five years from 2017 through 2021, it will be important to maintain success in peer-reviewed grant competitions and through attracting new government contracts. There are several well developed and emerging streams of research and knowledge exchange that have proven to be attractive to funders and that will need continued active leadership. These include:

- (i) an innovative set of evaluations of alcohol harm reduction strategies currently spanning 10 Canadian cities across three provinces (Ontario, Alberta and BC);
- (ii) a cutting edge alcohol and other drug epidemiological monitoring system which is currently being expanded to be national in scope and includes web-based interactive tools for researchers and policymakers to access comprehensive and usable data:
- (iii) a substantial range of knowledge mobilization initiatives and resources including foci on substance use literacy programs in schools, university campuses and communities;
- (iv) an emerging strength in the evaluation of treatment systems for addictions related problems;
- (v) deep expertise in community-engaged research with vulnerable and at risk populations;
- (vi) a reputation for applied research concerned with finding solutions and building evidence to inform effective policy and practice.
- (vii) We will pursue (initiate/continue?) collaborations with colleagues and Institutes in other countries in pursuit of the above objectives. We will also pursue an invitation to apply for WHO Collaborating Centre status.

Key Area 1, Building Capacity, aligns with the following priorities in UVic's SRP:

- Priority #1: Defining and Achieving Research Excellence
- Priority #3: Expanding Partnerships, Innovation and Entrepreneurship
- Priority #4: Improving Research Competitiveness through Differentiation and Specialization

In addition, Key Result Area 1 also aligns with several categories in UVic's International Plan.

Key Result Area 2: To Engage Academic Expertise

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On May 13, 2003 UVic

- The creation of a new CISUR Scientist position at Assistant Professor level to be advertised within UVic with a one course buy-out and start up research funds offered.
- The creation of a CISUR postdoctoral fellow position to be funded from grant and contract money and advertised internationally.
- Continuation of the CISUR student stipend scheme to encourage high quality graduate students to study topics relevant to substance use and/or addiction.

These initiatives would span multiple departments and faculty.

Key area 2, Engage Academic Expertise, aligns with the following priorities in UVic's SRP:

- Priority #1: Defining and Achieving Research Excellence
- Priority #2: Enhancing the Integration of Research and Education
- Priority #4: Improving Research Competitiveness through Differentiation and Specialization
 - In addition, Key Result Area 2 also aligns with several categories in UVic's International Plan.

Key Result Area 3: Implementation of Quality Research

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of different models. Both provincially and nationally the policy environment has shifted from criminalization of substances to public health approaches.

2.3 Informing the development of strong public health systems: Addressing and preventing the harms of substance use and incorporating a health equity lens in the development of programs and policies.

3. **Builty** Macdonald, Urbanoski)

- 3.1 Alcohol, drugs and safety on the roads and in the workplace. Macdonald has devoted 35 years of research into the issue of substance use and injury and plans to write a book to synthesize existing research on successful interventions and best practices.
- 3.2 Police discretion with substance-using youth. With Social Sciences and Humanities Research Council (SSHRC) funding and collaboration with professors at other Canadian universities, this study examines the experiences of substance-using youth with the police in three communities of BC.
- 3.3 Strengthening the substance use treatment system in BC. A program of research, conducted in collaboration with the provincial government, local health authority, and community stakeholders, to describe available services and supports for substance use in BC, outline the key principles for effective system organization and operation, and develop a provincial framework for a renewed service system.
- 3.4 Evaluating the effectiveness of treatment that is mandated by legal, child welfare, and employers through systematic reviews and prospective studies of people who enter treatment programs under differing levels of pressure and coercion. One area of focused research is with pregnant and parenting women who are involved with the child welfare system when they enter substance use treatment.

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5.1 Studies of tobacco, e-	5. Nicotine and tobacco studies (MacDonald and Stockwell)				
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Key area 3, Implementation of Quality Research, aligns with the following priorities in UVic's SRP:

- Priority #1: Defining and Achieving Research Excellence
- Priority #3: Expanding Partnerships, Innovation and Entrepreneurship
- Priority #4: Improving Research Competitiveness through Differentiation and Specialization

Table 3: Performance Indicators for Key Result Area 3

	CISUR Objectives	Performance Indicators
3.1	To conduct research on the patterns, distribution, determinants and consequences of substance use in Canada and internationally	Number of epidemiological projects initiated, ongoing and/or successfully completed each year in this area. Benchmark: 15
3.2	To conduct research that is valued by stakeholders as being of high quality, responsive to emerging issues and relevant to public policy and practice in Canada and internationally	Number of CISUR special reports and commissioned reports focused on policy and practice.as Benchmark: 5
3.4	 To conduct research in the following other key priority areas: The impact of educational, legislative and regulatory strategies to minimize alcohol 	

Key Result Area 4: Dissemination

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CISUR will continue to use a diverse range of media and outlets for disseminating results of research programs. For research to be useful to decision makers, practitioners and the broader community, it is essential that relevant information is communicated effectively and in ways targeted appropriately for specific audiences. On the one hand, it is vital for the credibility of a university-based research Institute that its work is published in peer reviewed journals. There is also value in promoting new publications through the use of media releases as well as for documenting more detailed methodological aspects of studies in technical reports. CISUR has produced a series of more locally relevant statistical bulletins designed to be widely accessible to many audiences. Similarly, a series of policy reports have been prepared by CISUR, often initially commissioned by provincial or federal government departments. The CISUR websites (www.CISUR.ca [forthcoming]; www.aodmonitoring.ca ; www.understanding sexwork.com; www.helpingschools.ca) have been carefully developed to maximize electronic access to information about CISUR publications, to provide up-to-date information about trends in the patterns of substance use and related harm in BC, and to provide access to data sets for other researchers. Many CISUR researchers also strive to reach, with our dissemination strategies, user groups and individuals personally affected in different ways by substance use and related problems. We see this as one way to reduce the stigma experienced by many individuals who have problematic substance use.

Plans for the next five years include increasing the number of peer reviewed publications in high impact journals, continuing the series of focused CISUR research bulletins and reports on policy and practice issues, enhancing existing and developing more interactive web-based components to help users engage with available data and develop related skills.

Key area 4, Dissemination, aligns with the following priorities in UVic's SRP:

- Priority #1: Defining and Achieving Research Excellence
- Priority #3: Expanding Partnerships, Innovation and Entrepreneurship
- Priority #4: Improving Research Competitiveness through Differentiation and Specialization

Table 4: Performance Indicators for Key Result Area 4

	CISUR Objectives	Performance Indicators

4.1 To publish research findings • Number of arttolleer of F-240 >> BDC Q 1>6 311.756"

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Key Result Area 5: Knowledge Mobilization

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The CISUR knowledge mobilization team works to promote available knowledge in ways that maximize the positive impact on policy, practice and public discourse. The team operates from a health promotion perspective seeking to empower individuals and equip communities to increase control of their own well-being.

Plans for the next five years involve continuing to organize our efforts within the three priority areas that have emerged through the past 12 years.

1. **H B D** 1

- 1.1 Promoting collaboration between the health and education sectors and systems
- 1.2 Providing communities with tools to engage in dialogue that promotes a broader understanding of the legitimate diversity of views around complex issues
- 1.3 Supporting system transformations that encourage citizen engagement and empowerment and help individuals make decisions about substance use in the context of their own lives

2. Helping Schools

- 2.1 Developing more drug and gambling education tools aligned with the re-developed BC curriculum
- 2.2 Building capacity within the education system for implementing effective drug and gambling education
- 2.3 Developing appropriate ways to evaluate drug and gambling education

3. Helping Campuses

- 3.1 Supporting a cultural approach to addressing alcohol and other drugs on postsecondary campuses
- 3.2

Key area 5, Knowledge Mobilization, aligns with the following priorities in UVic's SRP:

- Priority #1: Defining and Achieving Research Excellence
- Priority #3: Expanding Partnerships, Innovation and Entrepreneurship

Table 5: Performance Indicators for Key Result Area 5

	CISUR Objectives	Performance Indicators
5.1	To ensure access to relevant knowledge while working in partnership with policy makers and practitioners in planning and implementing projects to address substance use in Canada and internationally	 Number of projects in which CISUR members collaborate with policy makers or practitioners Number of policy proposals contributed to by CISUR members each year Number of provincial or national committees, advisory boards, communities of practice or other such bodies on which CISUR members are active Benchmark: 20 / 5 / 25
5.2	To develop and promote resources with the potential to make direct contributions to policies, programs or service delivery systems in Canada and internationally	Number of resources completed in any one year Benchmark: 30
5.3	To provide broad access to balanced factual information on substance use and related harms and health promotion approaches through a variety of knowledge exchange strategies	 Number of visits to CISUR websites each year Number of presentations/workshops/displays each year Number of media interviews or citations resulting from CISUR activities each year Number of articles (blogs, magazine, newsletter, OpEd, policy briefs, etc.) published each year Number of consultations provided each year Benchmarks: 30,000 / 15 / 150 / 15 / 15

STRUCTURES AND RESOURCES TO IMPLEMENT THE STRATEGIC PLAN

Advisory Board

The CISUR Advisory Board meets annually and is chaired by Dr Michael Prince of the University of Victoria, a distinguished Canadian scholar in the field of disability and public policy. Membership of the Board includes people with a wide range of relevant expertise from the fields of healthcare, academia, addiction research, community organizations, advocacy for drug users, and administration. The Board contributes to the development of overall strategic direction, receives financial reports and performance data, and will advise on the implementation of this Plan. See Appendix B for full terms of reference and membership. Board members must have no financial interests in the alcohol, tobacco, cannabis or pharmaceutical industries.

Faculty Committee

Membership on the CISUR Faculty Committee includes directors, scientists and the CISUR administrator. Meetings occur every six to eight weeks.

The responsibilities of the CISUR Faculty Committee include:

- Planning the implementation of strategic research directions
- Developing priorities for Institute activities and establishing working groups to implement these
- Promoting research initiatives, projects and applications for funding
- Reviewing applications for membership
- · Reviewing policies and procedures
- Planning public seminar series

CISUR Operational Units

CISUR Scientists

CISUR Scientist status is granted to researchers who are actively engaged in relevant research that will contribute to CISUR's core activities. Scientist status will be considered upon receipt of a completed application in writing to the Institute, and would be granted for a limited term with approval from the Director and a majority vote of the CISUR Faculty. The application form will carry a statement regarding conflicts of interest, commercial and other, and exclude people who work for or are in receipt of research funds from tobacco, alcohol or gambling commercial enterprises.

Opportunities for residency in the Institute may accompany status as a Scientist.

Research and networking activities of Scientists would be regarded as part of CISUR's outputs and they would be requested to note this affiliation in their published work.

CISUR Collaborating Scientists

This category of membership of the Institute is designed to recognize strong collaborative relationships with researchers who may be located at UVic or on other Canadian campuses who are not in residence at the CISUR office. The process of acquiring CISUR Collaborating Scientist status involves nomination by CISUR Scientists, completion of an application form, and a statement indicating support for the process of the Institute Applications are discussed and voted on attreetings of the CISUR faculty.

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CISUR will compete for commissioned research that is consistent with the present Strategic Plan and which has the potential to directly contribute towards improved prevention and treatment responses.

Private donations

	The Institute will work in	partnership	with the Advisor	v Board and the	e Development
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1.

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Appendices

Table A1: Alignment of CISUR and University Objectives for Key Result Area 1

UVic Int'l Plan	UVic SRP Objective	CISUR Objectives
Category		

Table A2: Alignment of CISUR and University Objectives for Key Result Area 2

UVic Int'l Plan Category	UVic SRP Objectives	CISUR Objectives

2.1

Table A3: Alignment of CISUR and University Objectives for Key Result Area 3

	UVic Int'l Plan Category	UVic SRP Objectives	CISUR Objectives
3.1	Category 4: Making a vital impact through international engagement	Enable existing and emerging research capabilities (priority #4)	To conduct research on the patterns, distribution, determinants and consequences of substance use in Canada and internationally
3.2	Category 4: Making a vital impact through international engagement	Promote research that engages with partners and communities to maximize impact (priority #1) Enhance community-engaged research (priority #3)	To conduct research that is valued by stakeholders as being of high quality, responsive to emerging issues and relevant to public policy and practice in Canada and internationally
3.4	Category 5: Establish an extraordinary environment for internationalization	Enable existing and emerging research capabilities (priority #4) Enable and support research centres to respond to emerging research opportunities, promote collaborative and interdisciplinary research (priority #4)	Conduct research in key priority areas: • The impact of educational, legislative and regulatory strategtr <0

Table A4: Alignment of CISUR and University Objectives for Key Result Area 4

	UVic Int'l Plan Category	UVic SRP Objectives	CISUR Objectives
4.1		Focus knowledge mobilization initiatives to derive greater impact and social benefit from research (priority #1)	To publish research findings in international peer reviewed journal articles
4.2		Focus knowledge mobilization initiatives to derive greater impact and social benefit from research (priority #1)	To publish research findings in book chapters, books and research monographs
4.3		Focus knowledge mobilization initiatives to derive greater impact and social benefit from research (priority #1)	To disseminate research findings through reports, systematic reviews and other resources, nationally and internationally
4.4	Category 5: Establish an extraordinary environment for internationalization	Support research communications to increase access to publicly funded research (priority #1) Increase UVic's research profile regionally, nationally and internationally (priority #3)	To achieve a high academic impact for CISUR addictions-related research so that it is well known, frequently requested and often cited internationally

4.5 Category 4:
Making a vital
impact through

Table A5: Alignment of CISUR and University Objectives for Key Result Area 5

	UVic Int'l Plan Category	UVic SRP Objectives	CISUR Objectives
5.1	Category 4: Making a vital impact through international engagement	Enhance community- engaged research (priority #3)	To ensure access to relevant knowledge while working in partnership with policy makers and practitioners in planning and implementing projects to address substance use – nationally and internationally
5.2	Category 4: Making a vital impact through international engagement	Promote research that engages with partners and communities to maximize opportunities for impact (priority #1) Provide and sustain a high-quality research environment that enables and nurtures the expertise and aspirations of researchers (priority #4)	To develop and promote resources with the potential to make direct contributions to policies, programs or service delivery systems in Canada and internationally
5.3		Focus knowledge mobilization initiatives to derive greater impact and social benefit from research (priority #1)	To provide broad access to balanced factual information on substance use and related harms and health promotion approaches through a variety of knowledge exchange strategies