Our plan to **improve lives** by transforming substance use policy and practice
With gratitude, we acknowledge that the physical office of the BC Centre on Substance Use is located on the traditional, ancestral and unceded territories of the xʷməθkwəy̓əm (Musqueam), Sḵwx̱wú7mesh (Squamish), and səl̓ílwətaɬ (Tsleil-Waututh) Nations, and that the reach of our work touches the territories of all 198 First Nations in B.C.

We further acknowledge that the ongoing criminalization, institutionalization, and discrimination against people who use substances disproportionately harms Indigenous peoples.
An estimated one in every five Canadians will be impacted by substance use and related harms in their lifetime. That’s more than six million people. For the majority of them, the health system will fail to meet their needs. For those without an addiction who use substances, especially unregulated substances, policies put them in harm’s way every day. Collectively we can — and must — do better.

The BC Centre on Substance Use was established in 2017 to provide a centre of expertise to help meet those needs. We aim to be highly collaborative and coordinated in our approach. We place emphasis on research to generate evidence-informed strategies, while harnessing clinical guidance and training to ensure that evidence is implemented into clinical practice in every part of the province. A great deal of work remains to be done. This plan outlines the next steps to make this a reality.
The BCCSU is a provincially networked organization with a mandate to develop, help implement, and evaluate evidence-based approaches to substance use and addiction through integrated activities of its three core functions: research and evaluation, education and training, and clinical care guidance.
Our Past

The BCCSU emerged from years of provincial planning focused on the need for a centre focused on substance use and addiction.

The Urban Health Research Initiative (UHRI), a former program within the BC Centre for Excellence in HIV/AIDS, would serve as the launching pad for the creation of the BCCSU. First established in 2006, UHRI quickly became an internationally recognized leader in substance use research. Evidence from research scientists at UHRI would help transform BC and Canada’s approach to drug policy, creating the science to support approaches that were controversial at the time but are now widely accepted — from supervised consumption sites to needle distribution programs.

From this foundation, the BCCSU was established in April 2017. Building on the core pillar of research expertise from UHRI, the BCCSU incorporated clinical care guidance and health professional education and training in order to advance our knowledge of the spectrum of
both harms and benefits of substance use and substance use disorders including alcohol, opioids, cannabis and stimulants. In a very short time the BCCSU was able to expand to include multidisciplinary team of exceptionally talented and committed staff with collaborative partnerships with stakeholders, including a strong connection to the community of people with lived and living experience with substance use.

The provincial overdose public health emergency, declared in 2016, would — and continues to — be a priority for the BCCSU. The BCCSU immediately led the development of the first-ever provincial clinical care guidance for opioid use disorder and assumed responsibility and expanded training of health care professionals to improve the delivery of evidence-informed addiction treatment and care. In 2017, just over 700 trained prescribers of opioid agonist treatments were practicing. Over the first four years of the BCCSU’s operations, that number would increase by nearly 150%. The BCCSU would also help train thousands of clinicians, through online learning, outreach seminars, and preceptorships, and by hosting the largest addiction medicine training program in North America. Dozens of provincial and national
treatment guidelines have been published, helping to close the evidence-to-practice gaps that are prevalent in health care. Numerous studies generated through the BCCSU, ranging from program evaluation to clinical research, have led to hundreds of published peer-reviewed articles each year, research awards, conference presentations, other knowledge products and engagement activities that have helped to inform the response to ongoing toxic drug deaths.
Our Future

The dual public health emergencies of COVID-19 and overdoses have made very clear the need for policy changes alongside improvements across the full range of substance use services. The pandemic has amplified the many challenges people who use substances face in accessing care and social supports and, as a result, people are dying of toxic drug poisonings at unprecedented rates while substance use — from regulated substances like alcohol to unregulated substances like illicit opioids — rises.

Harms resulting from certain substance use are driven largely by stigma and a long history of criminalization, preventing the necessary resources and cross-sectoral responses needed to end toxic drug deaths, connect people to treatment, and prevent substance use. It does not have to be this way.

Policies and programs can promote equity and well-being if they are grounded in evidence and lived experience. But this requires change.
Collectively, we must:

- End stigma and discrimination towards people who use substances, those in recovery from addiction, and their families and communities who love and care for them. This includes ending the criminalization of substance use and providing education and health promotion strategies to the community that target the root causes of substance use harms.

- Address the harms perpetuated by ongoing racist and colonial policies and systems, which are inextricably linked to the disproportionate impact of substance use on Indigenous peoples. Work must continue to act on the recommendations from the 2020 In Plain Sight Report and the 2015 Truth and Reconciliation Calls to Action and incorporating principles of anti-oppression, anti-Indigenous racism, and Indigenous reconciliation in research, clinical guidance, and education is paramount.
• **Enhance substance use research, addiction clinical care guidance, and health care professional education** to support the development of a full substance use system of care that moves beyond the “problematic” framework towards a spectrum that includes not only people with a substance use disorder, but also the many others who use substances for a variety of reasons — socially, medicinally — but may never experience harms from their substance use.

• **Implement policies that minimize the harms and promote health and equity** to provide people with the necessary supports — from housing to income — in order to support their wellness. This includes providing immediate, accessible, and effective health care for people who use substances — regardless of who they are or where they live — that is free of stigma and promotes health and well-being.

This change is possible. A better future for people who use substances is possible and, driven by research and evidence from lived experience, is within our grasp.
Working in partnership across the health and social system, the BCCSU can help to drive this change. We build networks of expertise with the shared goal of improving substance use policy and practice. We are recognized leaders in conducting and mobilizing research. We have an established track record of developing clinical care guidance and education that transforms how substance use treatment is delivered. We support health care professionals to build capacity in our system to deliver evidence-informed, patient-centred care.

This strategic plan outlines the steps we’re committed to taking in order to transform how we approach substance use, to help end toxic drug deaths, and to improve the lives of people who use substances.
At the centre of the BCCSU’s work are the many people and organizations who make change possible: people with lived and living experience with substance use and their loved ones; community and health systems partners who deliver programs and clinical services; nurses, nurse practitioners, pharmacists, social workers, psychologists, physicians and other health care providers who offer treatment and care; our host institutions, universities and research institutes; and governments that create and maintain policy; and so many more.

Our strategic plan was developed with input from these groups and individuals to ensure our priorities are aligned with their priorities. We also sought input from those who know our work best: our staff. All this was done to understand these different groups’ perspectives, to foster collaboration, and to promote principles of fairness and justice in all aspects of our work.
We approached this process with these goals in mind:

1. To gather input that would help us to establish clear organizational priorities to guide our future work; and

2. To create a framework for accountability driven by the measurement and reporting of success as defined by these groups.

The result is a refresh of the BCCSU’s vision, mission, and values, as well as a set of strategic areas of focus for our organization for the next three years. We also defined a plan by which to put these elements into action, along with a reporting structure to track our progress.
The BCCSU is an academic centre housed within Providence Health Care (PHC) and Providence Research, and is a University of British Columbia (UBC) Faculty of Medicine-approved centre focused on substance use and addiction medicine. The BCCSU is also a research centre affiliated with the Vancouver Coastal Health Research Institute (VCHRI). We also have several faculty members at Simon Fraser University (SFU). Our strategic plan was developed in alignment with the strategic plans of these host organizations. It’s also aligned with the equity, diversity, and inclusion commitments of these organizations, as well as the Truth and Reconciliation Commission of Canada Calls to Action.

- UBC Strategic Plan
- UBC Faculty of Medicine Strategic Plan
- PHC Strategic Plan
- Providence Research Strategic Plan
- VCHRI Strategic Plan
- UBC Equity Office Inclusion Action Plan
- UBC Indigenous Strategic Plan
- UBC Health Strategic Plan
- SFU Strategic Plan
- SFU Faculty of Health Sciences Strategic Plan
Our vision is what we want the future to be.

Ending substance use harms

We envision a future where the well-being of people who use substances is enabled through evidence-informed policies and practice that promote equity and are free of stigma and other forms of discrimination.
Our mission is the roadmap for how we achieve our vision.

Networking researchers, educators, and care providers

We build networks of expertise with the shared goal of improving substance use policy and practice by conducting and mobilizing research, developing and supporting implementation of clinical care guidance, and training health care professionals.
Our values are the principles that set the foundation for how we do our work. Our values are at the core of our actions and are embedded in our strategic areas of focus.

**Innovation**
- Progressing substance use policy, programming, and practice through curiosity, boldness, and creativity.

**Quality**
- Conducting and using the highest quality science to advance evidence-informed policies and practices.

**Knowledge**
- Mobilizing evidence in all its forms to advance social justice and inform policy and practice.

**Partnership**
- Collaborating with people with a range of expertise and experiences because substance use is complex and responses require cooperation.

**Equity**
- Addressing stigma and discrimination to promote fairness, justice, and well-being.
Our strategic areas of focus

This is the road map for achieving our vision to end substance use harms.

The BCCSU is dedicated to taking action around a set of strategic areas of focus over the next three years. Centred around our core functions of research, clinical care guidance, and health care professional education, these areas of focus will help transform approaches to substance use. We’ve also identified objectives that will strengthen our organization and build our relationships with partners so that together we can address the inequity many people who use substances experience.

These areas of focus build upon our strengths:

- Our compassionate, dedicated, and talented team
- Our track record of nationally recognized research, clinical, and educational expertise
- Our network of experts from across the province and country
They also identify where we still need to grow as an organization in order address the longstanding, unmet needs of people with lived and living experience of substance use and the network of health and social systems that should — but currently do not — prioritize their health and well-being.

We’ve planned for three years given the rapidly changing landscape that is impacting people with lived and living experience with substance use. This timeline will help us to be responsive and implement lessons learned quickly.

We recognize that achieving the objectives across our strategic areas of focus cannot be done alone, that it will take our collective efforts to achieve our vision. That work starts here.
Our Strategic Areas of Focus

- Pursuing Research Excellence
- Delivering Innovative Education & Training
- Developing Transformative Clinical Guidance
- Advancing Equity, Diversity & Inclusion
- Fostering Partnerships
- Growing our Organizational Culture & Sustainability
Goal: to be recognized nationally and internationally as a leader in substance use research that generates and mobilizes knowledge, advances policy, and supports innovative programs and services.
The BCCSU’s foundation has been research excellence that has transformed how we understand substance use and, in turn, how we deliver programs and services and how to best incorporate evolving knowledge in policy and practice. Over the next three years, we’ll continue to advance this knowledge.

How we’ll do this:

- Seek and strengthen academic and research collaborations
- Enhance engagement with affected communities
- Expand the reach and impact of our research provincially and nationally
- Sustain and grow our research team
Goal: to continue to improve the reach and quality of care by increasing BC’s system capacity to deliver substance use care through health care professional education and training.
One of the core functions of the BCCSU when first established was to deliver education and training to health care professionals. This work has meant closing the evidence-to-practice gap that persists across all disciplines, but especially in addiction medicine and primary care where health care professionals traditionally have received little training in substance use. Foundational to this function has been developing and growing training resources and programs including the Provincial Opioid Addiction Treatment Support Program, the Addiction Care and Treatment Online Certificate, the Interdisciplinary Addiction Fellowship Program, and other clinical and research training programming.

**How we’ll do this:**

- Expand the reach of our educational activities among key groups of health care professionals
- Sustain and grow our training programs
- Create a permanent and comprehensive substance use community of practice
Developing Transformative Clinical Guidance

**Goal:** to improve substance use outcomes and care through the development of clinical care guidance that is informed by science-based approaches and grounded in lived experience.
Clinical care guidance is foundational to our work, for a range of substances including opioid use disorder and alcohol use disorder. Before the BCCSU was created, there was a notable absence of evidence-based guidance for screening and treating substance use disorders — a disparity when comparing to other chronic conditions where guidelines are readily available for health care professionals. Most notably, guidance was mostly absent for treating opioid use disorder, contributing to the overdose public health emergency. Now, with both provincial and national guidelines developed by our team, the necessary work of updating, expanding, and disseminating this guidance based on clinical and lived experiences is needed in order to address the evolving public health emergency.

**How we’ll do this:**

- Increase provincial and interdisciplinary representation within our network
- Seek diversity in our clinical care guidance development committees
- Create an implementation science strategy for clinical and educational activities
Goal: to advance fairness and belonging within our organization while advocating for justice and anti-discrimination in substance use policy, practice, and programming.
The ongoing criminalization of many people who use substances has always disproportionately impacted Indigenous peoples and other people of colour. Additionally, anti-Indigenous racism and colonialized structures prevents people from seeking or accessing health services when needed and exacerbates the harms that can result from substance use. Embedding anti-racism and anti-colonial principles and practices in all aspects of our work is necessary to achieve equity and justice.

**How we’ll do this:**

- Build capacity to develop and implement policies that promote equity, diversity, and inclusion within the organization
- Further our work with youth, gender, and sexual minority populations and racialized communities and other groups adversely impacted by substance use policies
- Advocate for community- and Indigenous-led approaches to wellness and ending substance use harms and support cultural safety and humility in the health system
Fostering Partnerships

**Goal:** to improve our collaboration with organizations and people with lived and living experience to transform substance use research, policy, and programming.
“Nothing About Us, Without Us” is a call to action from people who use substances and an ethos that the BCCSU strongly believes in. Ending stigma and advancing social justice can only be achieved through collaboration with people with lived and living experience with substance use. Furthermore, policy and practice change cannot be achieved without the meaningful consultation from, and execution by, a broad range of experts in substance use and intersecting social and community services.

**How we’ll do this:**

- Identify and foster strategic partnerships with academic and health system partners
- Determine priority areas with people with lived and living experience of substance use, families and caregivers, and recovery-oriented service providers
- Collaborate with community leaders, organizations, and government to inform public opinion and support systemic change
Building Our Organizational Culture & Sustainability

**Goal:** to establish and sustain a top-tier, respectful, and inclusive work environment that supports innovation and success for each individual.
One of the greatest assets of the BCCSU are the people who work here. We are fully committed to supporting people to achieve their individual goals, while pulling together to achieve the vision of the organization.

How we’ll do this:

• Develop and implement strategies that will improve staff well-being and foster professional development
• Create an environment that promotes team-building and collaboration across the organization
• Strengthen our connection to our host institutions in order to implement operational resources that build capacity and streamline the work of staff
This strategic plan is only the beginning. It provides the framework that sets our priorities to continue to push the organization into its next phase. While not explicit, the ongoing work of the organization will still persist, individual research programs of investigators, partnerships with the First Nations Health Authority and our shared work plan with government, among other key activities. While circumstances may change over the next three years and require us to revisit these priorities, how we make those decisions will be guided by this strategic plan, by the values we share, and by our vision for a better future.

Alongside our strategic plan is an implementation plan that will ensure accountability and transparency by tracking progress over the next three years. We will set objectives, measure key results, and report back to our network of partners.
We are grateful for the time and input of all who contributed and gave feedback to this process.

Our commitment is to put this strategy into action. We commit to living the values described here. And we commit to demonstrating this through regular reporting on its progress, accountability and transparency.
Networking researchers, educators and care providers

Quality

Pursuing Research Excellence

Developing Transformative Clinical Guidance

Fostering Partnerships

Delivering Innovative Education & Training

Advancing Equity, Diversity & Inclusion

Innovation

Growing our Organizational Culture & Sustainability

Partnership

Ending substance use harms

Values help unite the BCCSU through a set of core beliefs that everyone shares and embraces

Mission explains how we will achieve the vision

All actions at the BCCSU will contribute to the vision

Strategic areas of focus with three year goals that the BCCSU will be focusing on

Define what the BCCSU wants to achieve in one year

Actions over 90 days that will contribute to the objective

BCCSU Implementation Plan

Objectives

Key Results
Glossary

Advocacy
Advocacy is how BCCSU influences and supports policy, informs public opinion, and works in collaboration with community leaders, organizations and government to create systemic change. Our advocacy is informed by lived experience and research.

Discrimination
Discrimination is the unfair or prejudicial treatment of people and groups based on characteristics such as race, gender, age or sexual orientation.

Diversity
Diversity is about the individual. It is about the variety of unique dimensions, qualities and characteristics we all possess and distinguish us from one another.
Equity
Equity recognizes that each person is different with different circumstances, needs, interests, and experiences, and resources and opportunities need to be distributed and made available to make things more equal in order to achieve equal opportunities and outcomes.

Evidence-Based
Evidence-based means practices are grounded in research that is conducted through validated scientific processes.

Evidence-Informed
Evidence-informed is the use of research that is already available and has been tested, tried, and true. Combines the clinical expertise, lived experiences and expertise of the organization to best fit the population served.
Fairness
Fairness means that everybody in the group has an equal chance to benefit from opportunities and resources.

Inclusion
Inclusion means creating an environment that accepts and values difference, and where everyone is valued and treated with fairness and respect.

Justice
Justice is the outcome where the treatment of individuals is guided by fairness, honesty, and integrity. Justice may refer to equitable distribution of resources and opportunities in decision-making, allowing for fair outcomes for everyone.
People with Lived and Living Experience

People with lived and living experience are individuals who currently use substances and may or may not have a substance use disorder, or are in recovery from a substance use disorder.

Systemic change

Systemic change recognizes that systems which dictate behaviour and expectations in society — capitalism, patriarchy, and colonialism, for example — are designed to keep some people oppressed and must be examined and re-designed in order for all people to achieve freedom and personal prosperity.

Well-being

Well-being is a state that is achieved when personal goals of health, happiness, prosperity, and safety are met.