

**Draft Minutes**  
**CBR in BC Quarterly**  
**November 4, 2015**  
**1:00 pm – 3:30 pm**

**Location:** McLaren Housing Society (1249 Howe Street) and via teleconference

**Toll Free Dial-in Number:** (+1) 888 884 4539 (Guest Code: 1061180 #)

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**Attendees:** Janice Duddy, Mona Lee, Andrea Langlois, Jaydee Cossar, Heather Picotte, Megan Deyman, Terry Howard, Chrissy Taylor, Grace Dalgarno, Christina Temenos, Sean Grieve, Megan Woodward, Christiana Miewald, Saira Mohammed, Sarah Kesselring, Saranee Fernando, Michael Varma, Dan Wilson, Reinaldo Hamamoto, Sally Lin, Lauren Bailey, Joanna Mendell, Darren Lauscher, Ross Harvey, Jonathan Postnikoff, Gina McGowan

**Agenda:**

1. Welcome
2. Approval of Previous Minutes
3. Approval of Agenda – add in items under #4 Emerging Issues and #5 Updates
4. Emerging issues discussion: What are common/cross-cutting Issues that would benefit from a discussion at the CBR Quarterly table?
  - **Impact BC Update:**
    - Impact BC, a non-profit organization, lost funding to Deloitte, a for-profit consultancy company, and has closed their door. Impact BC had Patient Voices Network (a community-based network) that provided as a channel to bring patient voices and input to health care decision making tables. Since closure, the Ministry wanted all processes, including databases with contact information from Patient Voices, to be transferred from Impact BC to Deloitte, but patients are not in agreement with this decision for reasons like concerns of breaching privacy. Internal review of this process is underway.
    - Take away for community members and organizations: be aware that RFPs can now include for-profit organizations, the competition pool for the provision of health services has grown.
  - **Conflict Resolution:**
    - What are some of the procedures or tools used to resolve larger conflicts within teams?
      - Terry will share the curriculum of PRA+ (peer mentor program) once developed, which involves communication skills, how to deal with micro-aggressions, etc.
      - [Justice Institute of BC](#) has conflict resolution courses (be aware of costs)

- Risk assessment tools
  - Working across larger geographical areas also brings challenges to communications (e.g. working with partners across the province)
  - Remember: No one size fits all. Helpful and useful to sit down with everyone and talk about the ground rules for that specific team.
  - May want to consider developing a Team Code of Conduct that everyone agrees upon and can be used as a tool to refer back to when a conflict arises.
- **Professional development opportunities and interests for future CBR Quarterly Meetings:**
  - Participatory analysis
  - Innovative recruitment (e.g. using social media as a tool)
  - Agency capacity to take on research, organizational research policies
  - CBR 101 (involving research methodology, quantitative vs. qualitative research, evaluation, data collection techniques, etc.)
  - Ethical boundaries

## 5. Program and Project Updates:

Please provide a short summary of each project and consider these three points: one success, one problem encountered, and one lesson learned (if we have more time at the end of the meeting we can provide people additional time)

- a. **CIHR REACH CBR Collaborative Centre and REACH 2.0** – Andrea Langlois and Janice Duddy
  - **Summary:** The CBR Collaborative Centre is a national collaborative funded through CIHR, connected to CIHR REACH. It supports CBR and research agenda setting across the country. REACH 2.0 also has folks working across the country with community-based organizations. The focus is on program and implementation science, as well as how to scale up and transfer successful programs to different places.
  - **Success:** Able to connect with various organizations and projects across the country (e.g. Atlantic region, Saskatchewan, etc.), support the evaluation needs and processes of organizations across BC. Also an online evaluation toolkit is on its way and will be accessible off the [REACH Website](#).
  - **Challenges:** CIHR funding will come to an end at some point. Difficulty finding evaluation resources in French – if anybody has any, send them to Janice Duddy at PAN.
  - **Lessons learned:** Capacity building is needed to be able to do this work.
  - **Janice:** Share literature on “Impact of Community-Based Organizations for People Living with HIV” (on [PAN website](#)) – may be a helpful resource when thinking about how community-based organizations contribute to the HIV sector.
- b. **CHIWOS** – Sally Lin
  - **Summary:** Canadian HIV Women’s Sexual and Reproductive Health Cohort Study is a longitudinal study focusing on sexual and reproductive health and mental health of women living with HIV.
  - **Success:** Baseline surveys have been completed and wave 2 surveys have begun (18-month follow-up). PRAs are working hard to follow up with women.
  - **Challenges:** Follow-up can be difficult with changes in phone numbers, etc.

- **Lessons learned:** Data quality reports have been really helpful and interesting. They ensure that issues are caught and improvements are made in a timely manner.
- c. **ENGAGE** – Sarah Kesselring
- **Summary:** Study being done with people who started HIV treatment in the past 1 year, exploring their decisions and attitudes toward starting treatment. Only 2 months left in the study – recruitment ends in December 2015. Hard to recruit people who are recently diagnosed as many are not accessing services yet.
  - **Success:** Great wealth of data (good qualitative data)
  - **Challenges:** 6 month follow-up – people moving and changing phone numbers
  - **Lessons learned:** Make sure to have as many tools as possible to allow easy follow-ups
- d. **SHAPE** – STOP HIV/AIDS Program Evaluation - Sarah Kesselring
- **Summary:** Study to evaluate how people’s HIV health care experiences changed over time since 2010. Goal to recruit 800 people across province at any stage of HIV care and implement web-based survey.
  - **Success:** Ethics approval
  - **Challenges:** How to make web surveys as easy as possible for participants
- e. **Dr. Peter Centre Evaluation** – Saranee Fernando
- **Summary:** Mixed method evaluation of Dr. Peter Centre services. Currently in second phase and aiming to finish by March 2016. Closed the baseline survey with longitudinal cohort of 121 Dr. Peter members.
  - **Success:** Qualitative part went smoothly
  - **Challenges:** Recruitment – diverted interests from participants in a place with various research going on.
  - **Lessons learned:** Power of collaborating and problem solving (bringing everyone to the table) allowed for improvements in recruitment as well as relationships between team members.
- f. **Food as harm reduction strategy** – Sean Grieve and Megan Woodward
- **Summary:** Mixed-method study exploring the health effects of food provision for people who use drugs. The study aims to map people’s daily pathways to explore spaces of care vs. spaces of exclusion.
  - **Success:** The PRAs have completed over 30 surveys and have begun the preliminary mapping process. The team started administering surveys outside of the Dr. Peter Centre.
  - **Challenges:** The team is currently training on the qualitative mapping tool and are working to memorize the mapping codes. They are orienting themselves to the map size and its content.
  - **Lessons learned:** It has been helpful having members of the Community Advisory Committee pilot the mapping tool. Additionally the team received helpful feedback on the map from the last Community Advisory Committee meeting.

- g. **Positive Living, Positive Homes** – Heather Picotte and Mona Lee
- **Summary:** Qualitative CBR study led by PAN and University of Victoria, exploring the relationship between health and housing for people living with HIV in 3 sites (Greater Vancouver, Kamloops, and Prince George).
  - **Success:** Interviews begun in late June/early July for Greater Vancouver and Prince George. Participatory analysis process has been initiated.
  - **Challenges:** Processes in Kamloops have been slower. Recruitment and getting community support (e.g. bringing people onto the local community advisory group) have been challenging as Kamloops is a smaller community not intensive in research.
  - **Lessons learned:** Face-to-face communications pay off. Building relationships in communities not familiar with research is critical to get buy-in.
  - **Mona:** Share PLPH recruitment poster for anyone who's able to pass this onto potential participants and other contacts in their network.
- h. **"At Home at Howe" McLaren housing study** – Saranee Fernando
- **Summary:** Exploring how supportive housing affects the health of people living with HIV/AIDS.
  - **Success:** 94 people recruited in baseline. Two PRAs (Heidi and Otto) successfully completed year one. Two new PRAS will be hired next month and will administer follow up surveys. Completed follow-up interview guide sent to ethics.
- i. **BC Stigma Index Project** – Jaydee Cossar
- **Summary:** Stigma index is a global project being implemented in 50 countries in 54 languages. Proud to have this project brought to British Columbia; BC is the 5<sup>th</sup> North American site.
  - **Success:** The steering committee has guided the whole process so far. This team has a diverse composition (people living with HIV, community members, and researchers) and brings out everyone's strengths.
  - **Challenges:** Recruitment for the steering committee has been challenging, especially when considering representation from rural areas where access to internet and phone require special considerations.
  - **Lessons learned:** Take a step back and look at all the accomplishments achieved within a short period of time (6 months) – e.g. sampling strategy, process of evaluating the implementation tools, working collaboratively to develop BC-specific logo, seeking out different venues to talk about the project. Development of website is down the pipe (global website exists but not one specific to BC yet).
  - **Jaydee:** Share [link to video](#) on "The People Living with HIV Stigma Index Project in BC"
- j. **Food Security – Nourishing Communities Dissemination** – Joanna Mendell
- **Summary:** National CBR (BC, Ontario and Quebec) on outcomes of food (in)security for people living with HIV.
  - **Success:** Research results and recipes have been shared through postcards, fact sheets, and presentations (CAHR and community venues). Briefing notes are almost finished to share the results with policy makers.
  - **Challenges:** Learning how long these things take (took 7 months longer than original timeline)

- **Lessons learned:** Patience and keeping people engaged throughout the long process (constant communication even if nothing is happening – keeping people in the loops about steps ahead, etc.)
- **Joanna:** Share link to [Food Security blogpost](#)

k. **Updates on multiple studies and projects** – Terry Howard

**PRA+ Project:** Currently developing a 3-day training for PRAs (currently employed or in the past) to become mentors to support other PRAs. Pilot phase will recruit 10 PRAs. Don't need a lot of experience to become a mentor. If you know of anyone interested (including yourself), contact Terry Howard for self-assessment tool.

**Momentum Health Study:** Gay men's health study exploring harm-reduction and drug use in organized group sex events. No problems recruiting participants (exceeded the goal). Next phase is to compare some of these data with data from Ontario and Quebec (ENGAGE study – PI: Trevor Hart) and to form a national community engagement committee, mentored by existing community advisory people.

**Positive Living BC Project Relevancy:** Province-wide study on membership and relevancy of services/programs at PLBC. Goal to reach 1500 with an additional cohort of people who don't necessarily use the service. Want to investigate how to push the services to the outer edges of Greater Vancouver. Plan is to recruit participants to become part of research panel, to create a pool of people who want to get involved in future research (act as middlemen).

**Sero-discordant Couple Study:** Capturing the experiences of sero-discordant couples around access to health care, stigma, housing, food security, and how these things are impacted by sero-discordant relationships. Pilot surveys are on the way.

**Bisexual Men and Social Determinants:** Study of social determinants (e.g. intimate partner violence, safe sex, harm reduction, and drug and alcohol use) in bisexual men, using the cohort from the Momentum Health Study.

**Peer Worker Support Project:** A living document of support tools for peer workers and those who employ/work with peer workers, based on focus group discussions with peer workers and researchers/service providers. Broad themes of support identified are: physical, psychosocial/emotional, cognitive/educational, service/project delivery, role models/mentors, and financial. Please share as you see fit and give credit to the original document.

l. **Gay Poz Sex Study** – Jonathan Postnikoff

- **Summary:** Mixed-method, small group, randomized controlled trial for gay and bisexual men, using motivational interview technique. Participants self-identify sexual health and they love it.
- **Success:** Done cohort 3, onto cohort 4. Got some free promotional channels through hook-up sites.
- **Challenges:** Recruitment – exhausted avenues. Getting participants to trust that this is a unique and special sexual health study.
- **Lessons learned:** It's a process and takes time. Power of personal experience – using direct quotes from exit surveys as promotional and recruitment materials

m. **Moving Mountains** – Andrea Langlois

- **Summary:** PAN partnered with UNBC and various community-based organizations in Prince George and Northern BC, to develop a project on impacts of resource boom around sexual health, substance use, etc. Small grant to narrow the question down. Long development process, but slowly getting there.
  - **Success:** Great community partners and community-driven
  - **Challenges:** Narrowing focus for a large region
  - **Lessons learned:** Patience (especially for projects defined by the community). How do we do intervention science or program science that's suitable for these communities? Learning how to leverage help – engaging and asking for support on how to move processes forward. No formula – research is different in different regions.
- n. **SHAWNA Project** – Chrissy Taylor
- **Summary:** Sexual Health and HIV/AIDS: Women's Longitudinal Needs Assessment – 5-year study focused on specific barriers and concerns around women's sexual health and HIV care across Metro Vancouver. There are 6-month follow-ups and study contains clinical components and questionnaire.
  - **Success:** Transferred to direct entry (i.e. electronic – reducing paper impact on environment). Good progress with qualitative (44 out of 60) and quantitative (180 out of 500) components. Gender & Sexual Health Initiative in collaboration with Canadian HIV/AIDS Legal Network held *Women, HIV and the Law Project* recently to talk about impact of law and criminalization of HIV on women.
  - **Challenges:** Recruitment for newcomers and new immigrants, as well as youth. Currently looking for a Mandarin-speaking outreach worker.
  - **Lessons learned:** Practical resources for participants created (e.g. resource guide for services and phone numbers, broken down into topics and communities; calendar containing counseling and support services – indicates which ones are available on what days and what times).
  - **Chrissy:** Share this calendar
  - **PAN:** Will find a place to share all resource guides created by studies so that teams do not have to start from scratch – **all teams** with resource guides please forward to Mona
- o. **Incentive Project** – Saira Mohammed
- **Summary:** Randomized control trial assessing the usefulness of small cash incentives on recruiting and retaining people living with HIV who use injection drugs and are on HAART. 110 participants enrolled across the province.
  - **Success:** Interior Health region added as new site. New study coordinator for Surrey hired.
  - **Challenges:** Difficulty hiring new study coordinator in Surrey
  - **Lessons learned:** Outlining site-specific tasks for coordinators helpful
- p. **CANOC** – Saranee Fernando
- **Summary:** Canadian HIV Observational Cohort – a collaborative research centre focusing on HIV health services and epidemiologic cohort research. In spring 2015, OHTN Cohort Study Governance Committee advised to have greater community involvement in research structure.
  - **Success:** Two community investigators joined the team, who are preparing to submit abstracts to CAHR 2016 Conference, and CANOC looking hire more community

investigators (total of 3 or 4) next year. Current discussions around how to better advertise these opportunities and how to support the community investigators.

**q. Western Canada HIV Supported Housing Study**

- **Summary:** Study to describe HIV supported housing service networks and identify service needs and gaps in BC (Vancouver) and Alberta (Edmonton and Calgary) through key informant interviews and by identifying shared measurement indicators/tools that can be used by teams – ¾ ways through at all sites. Potential expansion: New HIV residential housing opened this week in Saskatoon (Sanctum); Fife House in Toronto as well.
- **Success:** Amazing people
- **Challenges:** Organizational capacity (capacity to take on research projects, client overload, interview space issues, etc.) and recruitment
- **Lessons learned:** Can do it on a low budget

**r. Others**

**6. Other Agenda Items – Everyone**

- Add resources as an agenda item for each CBR Quarterly meeting
- CAHR conference is happening in Winnipeg in May 2016 – submit your abstracts
  - o Putting an abstract in for CBR Quarterly as a successful model of sharing CBR projects and practices (Jonathan Postnikoff, Andrea Langlois, and maybe Patrick [original idea came from him])
- Compile resources (Dr. Peter, CHIWOS, SHAWNA, PLPH, Food Security, etc.) online on PAN website – publicly accessible resources will allow minimization of duplication of efforts and various projects can use them as references
- **Everyone:** Send your resources to Mona Lee [admin@pacificaidnetwork.org](mailto:admin@pacificaidnetwork.org)

**7. Next Meeting**