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SUMMARY KEYWORDS

alcohol, drinking, harms, recovery, campus, students, drink, policy, next slide, university, culture, addiction, sober, paradox, community, question, slide, experience, collegiate recovery, campuses

SPEAKERS

Helen

Helen 00:00

Let's get started here. Bev would you mind sharing those slides? Yeah.

Helen 00:18

All right. Good morning everyone.

Helen 00:20

My name is Helen Pethrick and I am the Student Research & Knowledge Exchange Assistant for Healthy Campus Alberta.

Helen 00:29

Next slide. Welcome and thank you for joining us this morning for our webinar, The Sober Paradox, Exploring The Role Of Alcohol In Our Culture, Our Campuses And Our Lives. Next I want to take the opportunity to acknowledge the traditional territories of the people of Treaty 4, 6, 7, 8 and 10 in Alberta, which is a gathering place for First Nations people, Metis, and Inuit. We are gathered today in a virtual space and come from many different places. I love that I'm seeing lots of introductions in the chat and I welcome you from wherever you're joining us today. I am joining you from Treaty 7 region which is home to the Blackfoot Confederacy comprising the Siksika, Piikani, and Kainai First Nations as well as the Tsuu T'ina First Nation, the Stoney Nakoda, including the Chiniki, Bearspaw, and Wesley First Nations. The City of Calgary is also home to Metis Nation of Alberta Region Three. The place we know as the City of Calgary is located on when it's adjacent to where the Bow River meets the Elbow River, and the traditional Blackfoot name of this place is Moh-kins-tsis. I'm grateful for the privilege of working and learning on this land as a settler.

01:47

Next slide.

Helen 01:49

Now, let's review a few housekeeping items. Audio will be enabled for presenters only. If you do have technical difficulties feel free to send us a message in the chat or start a private message with one of the hosts. The link to live captioning is located in the chat, click on the link to be sent to a separate browser window. Comments and questions are welcome throughout the presentation, feel free to use the chat box to communicate these. We will have a Q&A question and answer session at the end of today's webinar and in that time, we will ensure any questions posed throughout the presentation are addressed. Today's webinar will be recorded and the chat box will not be included in the recording. The recording will be sent to you by email as well as posted on healthycampusalberta.ca on the webinar page so you can listen again or share with others. Next slide. This webinar series is hosted in partnership with PEP-AH which stands for Post-Secondary Education Partnership Alcohol Harms. HCA has national support from the Canadian Center on Substance Use and Addiction. Next slide.

PEP-AH is a partnership of post-secondary institutions from across Canada committed to understanding the student drinking culture, working together to develop best practices to reduce harms from alcohol and sharing these practices to help promote student health and safety across the country. Next slide. If you are interested in learning more about the mission objectives, how to get involved with PEP-AH, you can visit their website and I'll make sure to paste this link into the chat. PEP-AH membership is open to all. Next slide. This webinar is a part of our three part webinar series representing the PEP-AH Western Region. Thank you to our partners at Healthy Minds | Healthy Campuses and Healthy Campus Saskatchewan for hosting this series with us. And especially thank you to Healthy Campus Saskatchewan for hosting today's Zoom session. You can watch recordings from the other two webinars and I'll make sure to paste that link in the chat as well. Next slide. Now I would like to introduce our presenters for today's webinar. Dr. Victoria F. Burns PhD is a registered social worker, writer and Assistant Professor with the University of Calgary's Faculty of Social Work. She has a BA in Psychology from the University of New Brunswick, a Bachelor's, Master's and PhD in Social Work from McGill University as well as postdoctoral training from the National Institute of Scientific Research, drawing on over a decade of social work experience and lived experience in long-term recovery. Her research focuses on the areas of homelessness stigma, alcohol policy and addiction recovery. Dr. Burns combines her research interests with her passion for storytelling and the arts, including documentary film to raise awareness and combat stigma for marginalized populations.

Next is Z'Anne Harvey Jensen has her Bachelor of Science in Psychology, and her Masters of Science in Family Life Education from the University of Alberta. She has worked in the area of substance use for 30 years, 15 years in substance use research and program evaluation, and now 15 years and counting focused in substance use prevention and mental wellness promotion. Currently with AHS Provincial Addiction Prevention, Z'Anne supports the community alcohol and drug prevention coalitions on campus and in North East Alberta towns and cities, as well as leads the alcohol and health, and post-secondary portfolios.

Lexi Knight is a registered social worker who has recently completed her Bachelor of Social Work degree through the University of Calgary. Her main area of interest within the Social Work field include trauma, addiction, and mental illness. Through her own experience in each of these topics, Lexi hopes to use her Social Work education to educate, advocate, and empower those who are also struggling in these areas. And with that, I will pass it over to you presenters now.

06:02

Hi everyone,

06:03

this is Victoria.

06:04

Hey, can you see me okay? On the screen?

06:09

Yes.

06:10

I can't see my oh there. I can see myself. Okay. Welcome to our presentation. I just wanted to thank you PEP-AH for providing this platform for us today and also to my panelists. I think that we each bring a unique personal perspective to try and discuss a very common and complicated topic around the Sober Paradox and the role of alcohol in our culture policies, campuses and our lives. Next. So When we talk about paradoxes, what are we talking about? Well, a paradox in essence, is a contradiction. So um, we see advertisers for alcohol all over the place. It's interesting if you just go about your day and look at the number of times whether it's on the internet through memes, or you know, offers for two for one drinks. Drinking is part of part of Canadian culture. It's a Western culture, especially secular Western culture. Yeah, it is the most costly and dangerous drug and it is a drug. So Z'Anne and her part is going to talk kind of more about the specifics of the harms that are not generally known. I know for myself, for until I really got into this research, it wasn't something that I was aware of. I thought alcohol because the way it had been marketed was basically as benign, you know, it was actually good for me especially the red wine. So, it is a class one carcinogen, a neurotoxin that contributes to 3 million deaths each year. You see most Canadians do drink so a recent survey indicates that 78% of Canadians drink and 25% reported heavy duty drinking at least once a month. So, that paradox is that it is the most dangerous yet the most popular and the most use and a reason for this is because it is masked by clever marketing. Next slide please.

So what is alcohol culture? Now I touched on this a little bit but big alcohol is a \$1.5 trillion industry okay? So you have to think about that. And the messages that big alcohol has promoted over the years and many people for instance, and Ann Dowsett Johnston, who wrote a book called *Drink* refer to alcohol as the new tobacco. Next. So in the 50s and 60s there was a lot of marketing to women around smoking now we see similar trends with drinking, so skinny girl vodka, for, for instance, the pink-washing of alcohol with the pink ribbon campaigns for cancer, even though we know there is a causal relationship between alcohol and breast cancer, that paradox as well. We're going to actually not only not have warnings like they have on cigarettes but we're actually promoting, you know, using alcohol to market the pink ribbon campaign. So this is in essence alcohol culture and assignment. It is You bet. what it is and we take it for granted because it's just such a regular part of our lives. Next slide.

09:48

Please

09:53

So what about on university campuses? We're talking about university students today. So There's especially when it comes to alcohol, there's a binge drinking culture at university. Universities are notoriously alcogenic environments and what do we mean by alcogenic environment? It means that drinking is not only acceptable, but we normalize it and is encouraged.

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So

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university campuses are our sobriety threatening environments because drinking and drug use is normalized, being a non-drinker or moderate drinker on campus can lead to social exclusion. So there are several studies for those of you, if you're interested, that look at this phenomenon. As you know, silver as DVM, so students who conceal being a non-drinker and this is not only for addiction recovery reasons, being sober is seen as deviant for folks who don't drink for different reasons. So including religion, including health reasons etc. And one of the primary issues facing recovering students and employees is a difficulty of non-belonging and they will engage purposely, this is what the literature showing and strategies to fit in. So for instance, at a party holding a drink, pretending to drink alcohol, making up an excuse that they have to drive back kind of thing, just so that they don't feel excluded. Next slide please. Okay, so my personal experience with the sober paradox so I started drinking in earnest, I would say in university

11:38

I was an overachiever.

11:40

It's I'm in high school I dabbled a little bit but when I was 18, I moved to France and did an exchange for a year and it was really I really can got into that university drinking culture and binge drinking. So it was party nights, that kind of thing. And when I moved back to Canada when I was 19 in New Brunswick I was legal drinking age and I drank you know, I went out students nights, that kind of thing with friends and there wasn't anything necessarily, I think out of the ordinary. I was a binge drinker like everyone else. I blacked out like most of my friends but that wasn't seen as problematic. It was just seen as quite comical. I had no we didn't talk about the harm of alcohol. So I continue on drinking through four degrees. But maintaining high marks, which also masks the problem that I knew I had. And it wasn't until my PhD where things really got out of control. And I had tried over the years to quote unquote control my drinking and with harm reduction strategies. Jeez you know things like only switching from beer or from hard liquor to wine, trying to stick to low risk. guidelines and failing miserably. And the thing that prevented me from getting healthy I would say, one of the leading things

13:23

was alcohol culture.

13:24

And what I mean by that is I feared, I thought that I needed alcohol. To fit in I thought it was going to it was the social lubricant is needed. And I had no other frame of reference, so I had no friends who were sober. I was kind of brainwashed in a way to thinking that people who were sober were boring. And all of those stereotypes and squares and whatnot and a lot thing I wanted was to be part of that community. So I continued drinking until things got to the point where, you know, as they say that I was sick and tired of being sick and tired, hit yet another bottom and something clicked. And actually, the thing that clicked for me was during my PhD there was a student from New York City named Ben, who came to McGill. He was a PhD. And he was, you know, in his 50s. He was a mature student and he loved to party. I mean, he threw a Halloween party our first semester, and he was the life of the party, but I noticed he wasn't drinking and I couldn't believe I've never met someone who was having so much fun and wasn't drinking. And I asked him why? And he said, Well, I've been in recovery for 25 years, said it nonchalantly and I thought, wow, here's someone who hasn't had a drink in 25 years. He's having fun. So that stayed in my mind as I continue drinking but it is always in the back of my mind. And it was at because of that conversation had planted the seed that I saw that there was potentially another side to intoxication culture that there was a recovery community but I hadn't been, I was not aware of it. It was a tough bout throughout my four degrees, I studied social work. I had never heard about it and that set the scene and honestly I believe saved my life. Because I started hiring repass shortly after that Next slide, please. So soon I got sober in 2013. So I was doing my PhD. And I didn't tell anyone in academia I was too ashamed And I was advised not to tell anyone because it could prove me from getting jobs and I didn't want to be because of the stigma essentially I'm being labeled as whatever that is with addiction So, basically I stayed silent for five years and I kept a journal of kind of times I would try to disclose and just to see kind of the feedback I would get. And

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it was

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actually very stressful. We hear about people who live with addiction, living a double life. The paradox was that it was more stigmatizing for me in academic contexts, to have an addiction recovery identity openly, then to regularly get out of control and be drinking to excess which is extremely unhealthy. We know it's cancer causing. So I had a hard time navigating this paradox and as a social work educator where we have it, we're guided by a social justice set of values and representing comments stigma for marginalized folks. I was I felt a hypocrite because there were many times, there are many teachable moments as an educator where I'd have students in the class say I don't want to work with people who are alcoholics because I had a you know, liars Have these comments all the time and thinking Okay, how can I use of self how could I share and try to change someone's perception just like we have intentional hires. For people teaching courses about LGBTQ racialized issues, what about addiction? Why are folks so afraid to disclose that they've had an experience with the addiction and it's because of stigma. And I knew I wasn't alone because I would encounter other academics with similar experiences who were so afraid to, quote unquote come out in an academic context. I thought well what example are we setting for students? We're talking about Bell Let's Talk we need to have the conversation but people are terrified and there is a double stigma in addiction. So in 2018, I applied for funding to the Campbell Campus Mental Health Strategy, and my team conducted a study. We interviewed 10 Deans

and six mental health professionals from the University of Calgary about their experience with faculty member action and disclosure and what we found was that disclosure was extremely rare. People were finding out after the fact, so through DUIs, erratic behavior in the classrooms, that kind of thing, and it most often involve alcohol and that addiction stigma was reinforced by alcohol culture. So here One quote from one of our participants, "I think there are a high stakes of disclosing a substance use disorder amongst faculty. That said, we live also in a culture Where we make jokes about wine to help us at the end of the day, and you know, there's certain parts of the culture, I think that allow for it. Oh, let's go get a drink. There's A certain clan and the culture we're drinking socially is good. Then we don't kind of talk about the other stuff." Next slide please. Can you give me a time check please?

Helen 19:20

It is 11.

19:23

Okay, do you know how I've been talking?

Helen 19:26

For just about 15 minutes now okay.

19:32

Okay, we'll play this and it's so good. Please play this video. This gets us the issues about disclosing a non-drinking identity and it's quite comical. Just a content warning there are two swear words towards the end. Brace yourself.

19:58 – 22:44 (VIDEO – no transcript)

22:55

Alright, so I think that that it's I think it's hilarious but also it really gets at some of the really serious themes around the quote unquote sober, is deep. And the stereotypes of what it means to be sober or even a moderate drinker in some cases. So, just that we're gonna hit, we're gonna have time at the end for discussion. So just put a pin in any comments or questions you have about that. video or anything else, we'd love to hear kind of your feedback if you related to it if you've experienced something like that around in your workplace or in your organization or things have shifted anything like that. So we'll have time to discuss that at the end.

I'm going to go to the recommendations over faculty addiction stigma study. So because a faculty because addiction, the consequences were being revealed and there were gaps in services identified, specifically for faculty members and also staff. So Peer Support targets specifically for faculty members was one of the recommendations, one of the ideas, this one was what several pages That's called Vulnerable Leadership and now the idea of bringing your whole self to work and not needing to compartmentalize and also sharing, addiction stigma stories that from people in leadership positions like we've seen on the Bell, Let's Talk day and also safeguard policies for faculty members who do choose to disclose because we know that there is discrimination that happens. People not getting promotions even people being let go. But addiction is a protected disability and that needs to be, you

know, there needs to be teeth to that policy when in practice. And also it was interesting that over, you know, there were hundreds of years of experience with deans and there were only two direct disclosures. So when you think about that how silent but yet there were people disclosing about depression and anxiety and of course physical illnesses,

25:02

But shame to addiction

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disclosures in hundreds of years of service that is very problematic in my opinion. Okay, next slide please. Go quickly through these. So what are we? What are we doing? Proposing to do? This we want to go into action. So we're drawing on three frameworks. So the study findings, the Collegiate Recovery Program and Recovery-Friendly, Workplace frameworks that I'll go over quickly. Next slide, please. So basically a Collegiate Recovery Program is a college or university provide a supportive environment within campus culture that reinforces the decision to engage in a lifestyle on recovery from substance use. It is designed to provide an educational opportunity alongside recovery support to ensure that students do not have to sacrifice one for the other. So there's over 138 recovery Collegiate Recovery Programs across the states, right now there's two in Canada, one in University of British Columbia and one at U Windsor. And they have very convincing results in terms of reducing student attrition, building community, breaking isolation, and overall well-being of students, please. So Recovery Friendly Workplace. It started in New Hampshire 2017. Governor Sununu had a personal experience with recovery, saying that workplaces are not for folks who are disclosing or seeking help, and he wanted to change that. So he started the Recovery-Friendly Workplace. This is the logo once the organization becomes certified Recovery Friendly, people work there know that if they seek help for addiction, their job will not be at risk. They will be met with empathy and compassion rather than punishment. this movement has spread to over 200 workplaces with 70,000 employees and connections to 12 other states and we I've been in contact with these folks because we are looking at integrating these two models to develop our own recovery community at the University of Calgary. Next slide please.

27:11

So, so far

27:13

We have a steering committee. Really excited about that. We have leaders who are really keen on being part of the steering committee. We have an Instagram page for recovering academics. We submitted a grant application to the City of Calgary Change Can't Wait funding stream for a six month pilot. We're planning on having some sober quotes so we're not boring, orientation activities and send recruitment flyers out. So we've already started recruiting students and we're supporting a masters of social work practicum student to work on this in the fall. Next slide, please. So this would be the third Collegiate Recovery Day programming in Canada, first that integrates Faculty and Staff programming and the first Recovery Friendly Workplace in Canada. It is just emerging and we're still in an emerging place, but we would love to have more people involved. So if you can Next slide, please. This is our record. This is our little flyer. We're recruiting folks with lived experience in particular for the steering committee or to join so we can have some members for some peer support groups starting up this fall

so please contact me if you are interested. Next slide please. This is my final slide. I think this is a really powerful quote. This is the Association of Recovery In Higher Education. So they are basically the umbrella body for all the Collegiate Recovery Programs, and it says recovery is on I was supported by society and is even less supported in the realm of higher education. Other groups of classically marginalized populations have begun to find a foothold in support within the university settings. For example LGBTQ gender equality, ethnic identities, those in recovery have largely been left out in the cold due to the fact that their needs run counter to the dominant narrative of the college world and through the CoP Collegiate Recovery Program movement. Thank you for your attention.

29:07

Next slide.

29:11

All right. Thank you Victoria. So as you know was previously stated my name is Lexi. I just recently graduated from U of C with my Bachelor's in Social Work and I'm applying to my Masters this fall. I just want to say thank you to Victoria. And then for asking me to be a part of the presentation and PEP-AH for putting this on and giving me the space to share a little bit about my experience. So, for my section of the presentation, it's a little bit different. I just have a few slides and it's just pictures mostly so I'm just going to be sharing a bit of my personal story with addiction and how the alcohol culture that surrounds campus and the university experience has impacted me.

So I'm going to start with the photo in the middle and that photo is about 12 years old, and you probably wouldn't know by looking at a seemingly innocent young girl but I was already well into my addiction. I started drinking at the age of 11. But because I was only a child, I had no idea the impact in harms that alcohol would have on my future. However, looking back now I know that from that first drink, I was an alcoholic. Due to the immediate sense of relief and escape that I felt after that first drink and the unexplainable need and want Unfortunately for me, so young, I didn't really understand what being drunk meant. So for me that meant blacking out and I did so almost every time I drank. Next. 14 years, just one year after that middle photo was taken I drank myself nearly to death for the first time and ended up in the hospital. That was the first time that I've questioned whether or not I may in fact be an alcoholic. But because I was still a kid, I just kind of figured it was impossible. So, you know the term alcoholic comes with such a stigma and kind of this stereotype of a person who's maybe you know, experiencing homelessness, drinking from a brown bag on the side of the street. Because I didn't come close to fitting that stereotype I continued to drink without question.

At first, it was mostly on weekends. And whenever I could get alcohol as I was still pretty young, but as I got into my teens and especially once I hit 18, it really got out of hand. I was drinking every weekend and during the week, sometimes first thing in the morning before I did anything else, which kind of leads to the picture on the left. So in that picture, I was in my really early twenties and I was in a very, very dark spot in my addiction. My younger brother is in that photo with me as well who also is an addict and alcoholic. This picture was a snapchat that I posted before we were heading to a wedding. It was noon and we were both borderline blackout intoxicated and under the influence of drugs as well. And I think the fact that I posted this thinking it was funny kind of just goes to show how sick I really was. And how alcohol culture plays into our society that even though it was noon, we were hammered and going to a

wedding and that was seen as acceptable, as a lot of other people were also pre-gaming for the wedding. So at this point I had just started my academic career but due to the fact that excessive drinking is so normalized among students not a lot of people questioned how much I was drinking and how much I was partying. Some of the people close to me closest to me could see that I wasn't well, but they didn't really understand what was going on. I don't know if anyone else in the room is an addict but as you know, you know, we can be pretty sneaky and good at concealing our use so no one really knew how how much I was actually drinking. And the fact that I was a student and living that university life meant it was normal for me to be getting blackout on the regular. So no one ever really questioned what I was doing. And if anything, my behaviors were encouraged. And then the third picture on the right is a photo I took a little over a month ago, I had just gotten my 90 day chip and it was just kind of feeling myself. I'm now about four and a half months sober and just really glad I finally got to where I am today. Next slide please. So for my next slide, it's really important I want to talk about the normalization Alcohol consumption on campus. I chose two pictures the first one is at the Den at a massive lineup for Thursday and where the Den becomes kind of like a little club for the night. And then of course, Bermuda Shorts Day.

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I'm

33:20

sorry, I just got off track for moment. So yeah, Bermuda Shorts Day, drinking copious amounts of alcohol and blacking out first thing in the morning is totally accepted. Definitely encouraged. You know, university is often the time where young adults are kind of expected to try new things, figure out what they want to do with their lives, career, right career wise, and figure out who they are as emerging adults. And you know, it's a really exciting time, but can also be a scary time. And when you're struggling with a denial of your own alcoholism, it adds another layer to the experience. So in my experience, University has a really toxic culture around drinking. It's promoted and expected and not just casual drinking, but excessive binge drinking to the point of blacking out. It is funny and part of the university experience. Drinking in excess is basically normal. And if you speak to other students about you know how drunk you got last weekend, or potentially dangerous situations you might have gotten into it's kind of just another funny story that most people can relate to. However, for students, such as myself, who are addicts and alcoholics, it's not the same. Drinking for me is toxic. I can't drink normally as other students do. Once I start, there's no stopping until I pass out or pretty much drink every thing I can get my hands on. And unfortunately, these types of behaviors are basically encouraged. And I think especially you know, being a new student on campus, most people make friends through, you know, catching drinks after class, hitting the bar together on the weekends and even use alcohol as self-care, you know, after a long, stressful week of papers and exams, specifically in my situation, alcohol was a tool that made it easy for me to meet new people connect to my peers and essentially fit in. But the difference was that I was an alcoholic and a deep dark addiction and they were not. And even though that wasn't, you know, obviously my intention or goal, it was the reality and I imagine it is for a lot of other new students as well. Next slide please. So, this slide I'm going to talk a little bit about denial, shame and guilt, and how alcohol culture on campus highly impacted these areas for me. So as I previously mentioned, drinking to excess is often seen as normal and It's normal for university students because of this when I continue to question my own alcohol use and wonder if I was an alcoholic was

kind of brushed off by my peers. There wasn't often that I brought up how much I was truly drinking because I was already really ashamed and embarrassed that I wasn't able to control my drinking and drink normally like my peers. I had attempted a lot of times, normally only drinking against drinking beer instead of after a while. have other ways to prove how much alcohol I was consuming, but it continued to be out of control and drinking was unmanageable. My life had become unmanageable. But when I did bring it up, I kind of heard things like no like you're a university student, of course you get drunk all the time or everybody drinks like that, don't worry about it.

And I felt really guilty and ashamed when I heard things like that, because deep down I knew that how I was drinking wasn't normal, and it wasn't the same as everyone else. And from an outside perspective, they only saw what I wanted them to see and never really knew how much I was drinking or how bad it had gotten. I felt for me as well that there was also kind of a shame around being a university student and an emerging professional because I felt like you know, professionals and academics aren't supposed to be alcoholics, because being an alcoholic is seen as a bad thing. So these ideas kind of kept me in a place of denial because I would tell myself that you know, of course, I drank a lot. I was a student and everybody drinks like this. So it's normal. Even though I knew it really wasn't, and once I did make my way into recovery, there continued to be a stigma surrounding recovery because you're supposed to drink and party when you're in university, and all of a sudden being sober is stigmatized. You're kind of seen as other when you aren't drinking and partying with everybody else. Specifically in the field of social work. I found that students and professors were open and first of all things about their lives, for example, you know, maybe struggles. But throughout my entire four years of post-secondary, I didn't hear a single professor or student sharing personal struggles about addiction. It wasn't until my very last semester my practicum seminar was with Victoria that I finally heard a professor openly shared to the class that they were in recovery. I was literally like so taken back in surprise. I immediately texted my boyfriend to tell him and was geeking out over the fact that I had a professor who was in recovery as well. Because Victoria was so open and unashamed of being an academic in recovery. It gave me the courage to share with the class that I was too. It was really scary, but it felt really nice to be able to kind of merge these two areas of my life. Because previously, you know, being an academic in recovery was kind of unheard of to me until Victoria had openly shared that. Next slide, please.

38:14

So, for this slide, I just want to share a little about my recovery. So while I had lived in a place of denial for a really long time, I was able to finally come to the realization that I am an alcoholic and I made my way into an Alcoholics Anonymous meeting. So I have a picture here of my big book with a few stickers I've gotten from completing some of the 12 steps, my home group gives out stickers instead of chips to celebrate the completion of steps instead of sober time and then of course I also go to other meetings where I get some chips and I just put them on his little table I have full of like crystals and stuff like that just as a reminder. Being an alcoholic is something that wasn't easy for me to say or come to terms with. But it's something that I'm becoming really proud of. I'm proud that I'm in recovery. I'm proud to share my story with others in the hopes that it might resonate with someone else and give them the space to share their experience kind of like how Victoria did for me. And despite alcohol culture on campus that kind of helped keep me in that place of denial, I was able to get sober while I attended school and still managed to graduate with distinction was such prevalent alcohol culture through

society, and especially like kind of surrounding that university experience. I think it's important for more students to speak up and share their experience. And that leads me to my final slide.

So I put a picture of some members of UBC's Collegiate Recovery Day group. I personally believe that all post-secondary institutions would really benefit from having some sort of recovery group on campus. As I mentioned for me, like so that was Alcoholics Anonymous and abstinence is what works for me. But I think just even just having the space where students who are also in recovery or maybe just wanting to understand more about their drug and alcohol use could get together to have opening conversations in a safe space would be so beneficial. Different forms of recovery can be brought together. There doesn't have to be a and just you know just to give students the place to go if they have questions where there are other students who are in recovery, so they don't have to feel so isolated and feel that their recovery identity is separate from their academic identity. I know for me personally, I would have loved to have a resource like this while I was still on campus at U of C, it could have potentially led me to getting sober sooner than I did. I imagine there's a lot of other students, we're kind of in a similar spot and maybe struggled or questioned with their drinking or drug use but weren't really sure where to turn, who to talk to. So having a recovery group on campus would be highly, highly beneficial, not only for students who are in recovery, but just for those who might be curious and want to know what recovery could potentially look like for them. So I'm definitely going to getting on board with U of C's Collegiate Recovery Program. But that is all I have for my section and again, just thank you everybody for listening.

41:06

Hello, everyone, thank you Lexi. I'm Z'Anne and as you heard I work in AHS Provincial Addiction Prevention. And I've certainly noticed a whole lot of alcohol paradoxes while working together to prevent alcohol harms and costs on campuses and in communities too. So please note my use of the word together in my title, it means we are not going to focus on individual strategies we take in our lives. But what we can do collectively with shared expectations, guidelines and policies. Next slide please. We have a post-secondary guide and a municipal guide for students, faculty and staff to use. I also host a six one out six one hour sessions on the best opportunity to create change and prevent future alcohol related harms through healthy public policy. You might say Oh, that sounds boring and Dry and that's what I thought before. I realized how much broad policy affects our health every day. Most of the policies that make your world a healthier or more harmful place take place outside of your healthcare providers, hospital, public health center.

Stop for a moment and think how transportation policy affects your life every single day. For example, today maybe their policies asking for visual tests for aging drivers, maybe keep cataract clouded eyes off your particular traffic path, maybe tomorrow, the angle of the off ramp gives you time to slow down safely. Even the absence of transportation policy affects you. Maybe you live out of town rurally and the nearby city's taxi service refuses to take you the full distance when your car breaks down, or you've had a night out drinking. I bet that night you wish the policy was different. So like Victoria and Lexi, I would like to share my story. I'd like to share a glimpse into my alcohol story, as we each have our own unique life journey. I use the penguin icons we have at AHS to represent myself and my family. So my dad says years before he did carry a Natasha case funny enough, he never drank alcohol. He envisioned raising a family without alcohol. His parents my paternal grandparents did not drink

throughout their 87 and 105 year lifetimes either. However, alcohol concerns still touch their lives through extended family members with serious alcohol problems. My mom never drank alcohol once in relationship with my dad. Her parents, my maternal grandparents socialized at times with alcohol in her childhood. And then after she was widowed, she dated others who drank but never added it to her lifestyle. For me as the oldest of three siblings, I didn't don't get involved in any underage drinking. I didn't have any alcohol availability at home. It was really no big deal as life was fun and full even when my dad died passed away suddenly in grade 10 from cancer after three weeks from diagnosis, alcohol was not a part of my or to my knowledge, my mom's grief journey, friendships, family support and counseling work. So when I arrived at university, especially in second year when I lived in residence, alcohol seemed like a big deal to some people. In fact, I lived on a floor and residents that the previous year had been a floor with a lot of engineering students. I was told they were kicked out and banned from living in residence for throwing couches out the seventh floor window as part of their drunkenness. I would say the year in residence was really the biggest year I had to maneuver being a non-drinker amongst a lot of binge drinking. I hang out with friends I went to the bar sometimes, but I always ensured there were others present who either did not drink or had only one or two drinks. And as I had not drank any alcohol, I always drove myself home. Now fast forward to when one of my cousins from Manitoba, came to go to school and live at the same residence. My same university was now orienting the students and their parents of the risks of binge drinking and the new healthy public policies they had in place for residents. Wow how things had improved in those 15 years. But by the time I was 18, I knew to

46:03

keep my non-drinking status to myself in Alberta. Currently I drink a little which in a year leads to less than one standard drink per month. I've never drank more than a couple standard drinks in a day even before I had heard of the low, restrict guidelines. Truthfully alcohol just never really interested me. I also missed the genuineness in people when they drank. You never knew if it was them or the alcohol talking.

So little did I know 30 years later I would spend most days exploring through... next slide. Little did I know 30 years later, I would spend most days exploring with others how to work upstream to prevent alcohol related harms through healthy public policy on campuses and towns, villages, cities and rural counties. We work to find this sweet spot of public health between the extremes. of prohibition and the streams of high consumption harms and costs when we legalize this substance with few restrictions. Next slide please.

So let's talk about some of the sober pet paradoxes in my experience at work. So just because alcohol is common and that alcohol is illegal does not make it healthy and without risk. That's the first paradox I'm always experiencing. You might think since so many people drink alcohol in Canadian life and on Canadian campuses that it must not be harmful, not so. So let's look at the level of reduce the level of harms and the level of costs briefly. Next slide, please. As you know alcohol is the most commonly used psychoactive drug outside of caffeine in Alberta (and Canada). 89 percent of students drank in the last year in the Canadian Post-Secondary Education CPADS pilot in 2020. 76% of students drank alcohol in the last month, and more than six in 10 of those reported heavy drinking. 50% of all students who drank in the last month experienced at least one harm from their drinking and 28% of students

experienced harms from other people's drinking in the past month. Next slide please. Let's see Now how do post-secondary students compare to the overall population of Canadians? Not only do most post-secondary students drink, but so do most Canadians, and although post-secondary students may have more heavy drinking than some cohorts of Canadians. Heavy drinking is unfortunately the norm for a lot a lot of people not only do a lot have us drink alcohol in Alberta where I live in work but we have a drink more than the Canadian average with 33.9% heavy drinking either daily, weekly or at least once a month. Also, please know that the World Health Organization is working on prevention policies around the world as alcohol is the third leading risk factor for death and disability globally. Alcohol is a legal drug with widespread availability but it comes with many costs in harms. Next slide. So as you can see here the Canadian Substance Use Costs And Harms data shows substance use cost Canadians \$46 billion in 2017. The largest proportion 36% of this came from alcohol costs and harms in the amount of \$16.6 billion. Remember also that these alcohol harms are happening to people, to students, to their families, their friends, their campuses, their rural communities, towns, and cities and broader to our countries and our world. Many life areas are impacted, this is not a dollar value on a slide, this is your life, my life, the students next to us life, the absentee faculty today that you plan to talk to and so on. Next slide please.

50:34

The overconsumption of alcohol can cause chronic health conditions, diseases and injuries. And deaths, as these stats show from CIHI, the Canadian Institute for Health Information. As you know, the opioid crisis is something our organizations and communities are all working hard to address. And that is so important. And paradoxically, we need yet don't always see, focused efforts on addressing alcohol related harms too. In 2018 we saw four times as many hospitalizations each day entirely caused by alcohol compared to opioid harm hospitalizations, and there were more hospitalizations per 100,000 people for alcohol than for heart attacks. So I think you get the point, the paradox, just because alcohol is common in society, perhaps even on your campus, just because your province does not have strong policies safeguarding you against harm does not mean it's one to ignore or one to laugh off. Next slide please. So let's talk about what happened in the Yukon when they wanted to add cancer warning labels. We've included this experience in our municipal alcohol guide. The Yukon Liquor Corporation had been applying after-market warning labels on alcohol products in stores since 1991. And alcohol containers have included a label regarding a label warning against the risk of drinking alcohol while pregnant in both French and English. In 2017 new evidence based labels with a cancer health warning, standard drink information, and a low-risk drinking guideline set of information were to be trialed in the Yukon. As part of a federally funded pilot (see image in slide). They mentioned the study was to evaluate whether the labels contributed to consumers ability to make more informed and safe drinking choices. Unfortunately shortly after the new labels were launched in the late 2017 Yukon's government paused its participation in the study, due to significant pressure from alcohol industry representatives and threats of litigation related to the inclusion of cancer warning labels. In February 2018 the project was invited by the Yukon government to continue, but with the cancer labels for removed. So counter to what you would expect, who is running though health warning system we rely on? Next slide, please.

Here's another paradox, a situation that runs counter to what you might expect. You might think that health experts advice on the degrees of harm would be built into the regulatory and liquor industry distribution systems that provincial governments have. Actually, it's not always the case. The paradox is

we are seeing less health and safety policy built into alcohol regulatory systems in provinces at a time when there is more clear evidence of serious health harms from drinking alcohol. So we need to remember that not everything we consume in life when it's more available results in more use, but in the case of alcohol, this is true. Increased alcohol availability does result in increased alcohol use. Also, not everything when we use it more results in more harm, but in the case of alcohol, it does. Increased alcohol use is causally related to more harms and costs. Next slide please. Here's a list of distribution and regulatory policy that increased alcohol availability in one province in 2020. Alcohol reduces a person's immunity. So it is surprising we would see a large increase in policy changes that increased availability rather than decrease alcohol related harms. It is paradox to see no additional safe drinking environment stipulations, no policies that encourage low percent alcohol beverages. No new policies to ensure children and youth have exposure to underage drinking during brain development and to delay first use, a factor in alcohol concerns later in life. All examples of best practice policies not yet implemented in our jurisdiction. Next slide, please.

55:36

Our province got a D on our 2017 Canadian Alcohol Policy Evaluation report card and our grade might likely be even lower now with the policy change as I just showed you in the previous slide. But on the flip side, if your campus decided to act we already have enacted 87% of the best practice policies, at least somewhere in Canada. So we are ready with clear suggestions of what works. You need to know too that Europe is also working with the World Health Organization to recreate itself as they have the highest prevalence of alcohol use disorders among persons 15 and up. Some European campuses, for example, now rotate between alcohol free and alcohol service nights at their campus bars. I wonder how your students, faculty and staff will get involved in healthy alcohol policy opportunities? There is certainly lots of room to make a difference. And here's my final sober paradox. How community sorry Next slide. Here's my final sober paradox how community leaders can at times miss the interconnection between their substance use decision-making and the impacts on health and relationships at a campus.

But we're at a community committee table. I sat through a public committee meeting that included all three of the topics here on the slide. Shisha lounges, homeless encampments, and unsupervised public alcohol consumption in municipal parks. I was there to speak about health for the final one. During the Shisha lounge discussion, I heard comments like "zero harm". That's got to be the metric and why wouldn't we want the same protection for everyone? Also, both speakers for and against had many five minute presentations and the counselor spent an hour and a half asking questions balanced between both sides. Then as we waited for our turn, we listened in to the agenda item on homeless encampments. And I thought about the fact that some of those who do have a home pardon me, do not have a home, have experienced alcohol concerns over time, or have been the victim of alcohol related harm as well not drinking themselves. Then came the agenda and we were speaking to a supervised public alcohol consumption, parks, we signed up to speak to maintain parks as an alcohol free space to encourage the health of all. We arrived virtually to the meeting to find we were the only ones who signed up to speak. We were asked very few questions. With the municipal meeting rules, we had to wait to be invited to speak and with the alcohol norm and the men leading the meeting, we were very rarely invited into the brief conversation. All the best practices for alcohol availability and safe drinking environments were left unconsidered and the zero harms that got to they got that has to be the metric did not come into play for alcohol decisions. The vote came quickly for increasing alcohol availability

through unsupervised alcohol consumption at picnic sites versus zero against, and the counselor announcing making the announcement of how the vote went ended with the following comment, “and there was much rejoicing”. I couldn't help but think in that moment of Dr. Tanguay presentation that he had entitled “Alcohol The Acceptable Killer”. Does anybody care about the cumulative effect of all the drinking locations? Does anybody care to provide safe spaces where alcohol related harms are less likely, and people can maintain or help their newfound sobriety flourish? Next slide.

59:55

So in closing, I encourage you to address the sober paradoxes on your own campuses. Preventing alcohol related harms on campus involves addressing perceptions about drinking, the environments where alcohol is available and not available and the policies and support your campus makes a priority. campuses and municipalities can advocate for and implement healthy public alcohol policy including regulating alcohol availability through density and distance and hours of operation, controlling alcohol pricing, ensuring safe drinking environments and safe communities, limiting alcohol marketing, advertising and sponsorship, preventing and reducing drinking and driving and advocating, of course, for preventative alcohol policy at other jurisdiction levels beyond your campuses. Next slide. So please join us in creating healthy campuses, healthy communities, families, and individuals living in resilient First Nations, Provinces, Territories free from harms related to alcohol and other drugs. Thank You.

Helen 1:01:12

Well thank you so much to Z'Anne, Lexi, and Victoria for your presentations today. I'm just noticing that we have many comments and variances and your expertise coming in in the chat and just want to share all the appreciation that is coming in. So we're going to have a bit of time now for questions. You just go to the next slide, we do have time for some question and answer for the rest of our time here today. We do have until one o'clock and we'll just kind of go until we run out of questions here. So, the way that this will work is I'll invite your questions into the chat and I will read them out for the presenters. So to start off this is a question from me for all three of the presenters just to get us started. So I know in our Healthy Campus Alberta Community of Practice and many other folks joining us from other provinces across western Canada, are involved in this work on health promotion and helping students on post-secondary campuses work through and reduce alcohol harms. So I was wondering for each one of you, if you could say one thing that you would like to recommend to promote a supportive community, to support sobriety and recovery on post-secondary campuses.

1:02:55

Lexi: I can start. One thing's going to be tough, honestly, I think is more awareness about addiction recovery on campus, because it is so it's invisible. And I think a way to do that is to talk about it, like has been done with other mental illnesses. So, yeah, I think that and that's how these communities start. So like peer support, too. It's you have to, it's by talking about it and knowing that you're not alone, that ends up leading to normalizing the experience. So we'd like to normalize recovery and then meeting regularly because it's, it's, it's being able to have discussions with peers around a common experience that we know I mean, there's so much peer reviewed evidence about that of how powerful that peer support is. But the first step in that is for people to share it not be afraid to talk about it and to share their stories

1:04:14

I would say there needs to be more conversation about it. Just so that you know for faculty but also for students like there's so many students who are like struggling with substance use on campus and there's not really anywhere known for them to go like, you know as wellness services and campuses and stuff, but I think having some sort of like peer LED, essentially like a support group just so students can come and you know meet other students who are in recovery or talk to other students who are maybe questioning recovery or just one and to know more about it or just having a safe space to go to kind of have an open conversation about drug and alcohol use on campus I think would be like so, so beneficial.

1:05:09

Victoria: I think what I might add is you know, make this coming school year start different. Currently we're thinking about orientation. How Alcohol you know it fits into campus and how it how we'll start the year with the real focus on ensuring that alcohol related harms are minimized on your campus? So How we welcome it or whatever your campus calls that? You know what will you model as new students arrive because it's certainly a great time to create a healthier relationship with a substance that is both a toxin and something that people are drawn to all at the same time.

Helen 1:06:05

Absolutely. And your comment brings something really interesting then about, you know, our campus communities do look very different during COVID and right now and there's uncertainty about what the campus culture and community might look like in the upcoming year. So I was wondering for our panel if you might be able to comment on if there's any new paradoxes that might have emerged during COVID times? And if there's things that have changed about the role of alcohol in our cultures and our campuses during this time

1:06:39

Victoria: Maybe I'll go first on this when I did encounter a situation, a dialogue between older staff, faculty or faculty at what campus and younger faculty in terms of whether it was appropriate to have online sort of end of day drinking event. It's faculty as sort of have like a way a stress reducer, the younger generation thought it was absolutely not appropriate. And the older faculty had many reasons why it seemed reasonable under the COVID situation

1:07:21

Lexi: I can speak to that a little bit as well I think. I mean, you know, like statistics show that alcohol use especially has gone up during COVID. I think like either I've noticed you know, sitting in classes on Zoom like sometimes there's other students are sitting there with a glass of wine or a beer while sitting in class and they're just casually like having a drink and that's almost seen as normal now. People are you know having get togethers over Zoom whether they're drinking but then you know, they're drinking alone with can be quite dangerous. That's kind of one thing that I've noticed.

1:08:04

Victoria: That's interesting. I had a similar experience recently, a colleague who didn't know I was in recovery who asked if we could work on our course outlines to get together over, you know a few

glasses of wine you know, and I just find it so much testing because if it was any other drug you know, we wouldn't be saying yes so casually you know even though there's less damage with heroin and things like that. We wouldn't have to say that at a work meeting. But with Zoom and that kind of thing. Yeah, you're in the comfort of your own home and we knew we do know that drinking rates have gone up. I think by the benefits of moving to online spaces, especially for Recovery Communities. There's so many more meetings available to folks who may be in more isolated communities. You know And it's not just AA meetings, there's all sorts of recovery meetings, harm reduction oriented, secular, you know, there's smart recovery, there's the Buddhist perspective. There's so many and I think that's something that we are really trying to make clear with our recovery community. The emerging recovery community is that it's not an abstinence based program. It fits within a harm reduction framework and meeting folks where they're at. For some people, that is abstinence, some people it isn't and relapse is also a part of recovery. So, we do. SAMHSA uses a very broad definition of recovery being a process of change. So it's really that process and not a final destination. And I think that's important. Just in terms of inclusion, for folks who are questioning their relationship with substances or other behaviors like gaming is a big one on university campuses. Gambling is another big one. Eating Disorders also, you know, all of that diet culture, the parallel is a huge issue. For university students, and faculty and staff and it's not talked about so yeah, I think that there is definitely some benefits that we can hopefully implement this fall and during orientation programming as well, online so that there is that option that doesn't involve alcohol or other drugs.

Helen 1:10:48

Absolutely, and I definitely agree about the normalization of drinking and once on home and during meetings as well. I was once in a meeting and I had like a little glass from water and had a faculty member ask me if I had a gin and tonic which was so jarring because I was completely not expecting that that was a thing and that it was something that I was going to be asked about while I was just drinking my water. So now I always feel like I have to clarify what I'm drinking when I want when I'm on video. So we do have another question here from the comments about the recovery communities. We're speaking about Victoria and just wondering if what is the appetite in other post-secondary institutions for developing these recovery communities besides the three that you mentioned?

1:11:39

Victoria: So yeah, I see that. Am I unmute or I can't see, or can you hear me? Are you you

1:11:48

Okay, yeah, I just was sorry I have too many windows

1:11:51

open. Z'Anne had posted in the chat there that yeah there is a PhD student at U of A who we've been talking with who was starting a dialogue around recovery friendly campus. I haven't heard of any other universities in the region working to get this going. That's the other thing like we really need to get some more funding for it. Yeah, I see U of R saying their university is. Yeah, very slow going and yeah, there's just a lot that goes into it and you know it started with I'd like to start a peer support meeting for faculty and staff. Well, you know, if we want to have the logo on it, there's the UCalgary you know, you

need to get the approval. So that's what when we're working within a huge organization, it's, it takes time, right? You have to have a lot of patience. To get this going,

1:12:53

Z'Anne: Maybe I'll mention to like an other opportunities that exist too. So for example, these aren't recovery communities particularly but for example in Alberta, we have community Prevention Coalition. Dozens all around the province and we have about, you know between 70 and 80 right now and they are focused sometimes on campus. This is so they're not particularly based in their approach, but they are focused on you universal and indicated prevention in terms of substance use. So a number of them have, for example, the University of Alberta is has quite a focus on alcohol and others have different focuses and, but also teaching sort of preventative skills that can be taken and linked with substance use decision-making and maybe creates situations where we're upstream. So hopefully, you know less people have to go through what Lexie and Victoria did and can feel that when they, you know, say, "Hey, I'm wondering about my alcohol use?" There's sort of more people around them that say hey, you know, actually maybe there is an area where this can be considered because it isn't just in the intoxication part, the costs and harms and risk for individuals that use and post, you know, there's an additive effect of, you know, if I go to yoga now yoga studios allow alcohol, you know if I have one drink there and then three hours later I go for lunch and I have a drink and then my hair salon is allowing it So I have a or there's this time level that is also you know, changing things and some cases for cancer It doesn't matter what we think about it, it will still be shifting ourselves. And so we really want to as you know, think about all the different impacts that alcohol has on all of us together. And maybe we're experiencing or maybe we're affected by somebody's domestic violence experiences and that were alcohol fueled in some cases and, you know, so it's very intertwined and so the prevention things in the recovery community can all be connected. And those coalitions are another resource, I think for campuses.

1:15:16

And then the Dalhousie example it's not a Collegiate Recovery Program, but they've done a lot of policy stuff.

1:15:23

Yes, they have. That's a great example. So PEP-AH has been involved with Dalhousie and Halifax for quite some time and I definitely go there for examples of various particular policy approaches that they've taken on campus and it's very available on their website as well, but you can connect with any of us at any time for connections to those. Lorelee, I think you were on the call I don't know if there's anything you wanted to share about your work with Lakeland College. Just examples of things that are going on. Maybe at some of the smaller places like Vermillion is a smaller community.

1:16:05

Lorelee: Thanks, Z'Anne, for sure I can talk quickly about. So Lakeland College has quite a culture of alcohol use particularly on the Vermillion campus. And so a couple years ago, they looked at the bars into just coffee houses like a not a Starbucks but their own version of a coffee house. And they were quite successful at that as a white campus but Vermillion was more of a challenges. So COVID certainly has impacted our opportunity to engage with students and with faculty around create alcohol related

harms but we're still in contact with them and we're working on a project called an Influential Generation, a conversation about alcohol and so that will be in high school students to deliver to younger students, and we're using college students to develop that initiative alongside our high school students. So we're hoping that even that interaction will spark the conversation again and see what we can do there. Embedding from our approach are tips around being safe or hosting tips, we have hosting tips and then have a game plan. They're embedding them in all of the work, they're still doing with their students and in some of this partnerships that they run but we just haven't had the opportunity to take that to the level where we'd want it to be. So we're hoping in this next school year that we're able to move some work forward.

1:17:35

Thank you.

Helen 1:17:38

Thanks so much for sharing Victoria

1:17:40

then and Lorelee.

Helen 1:17:42

We do have one other question from the chat which is more **of an academic question**. So in relation to the studies in the campus-based literature, what methodologies are being used and specifically this is wondering about phenomenon phenomena, logical methodologies hermeneutic phenomenology so really, are we doing a good job of centering the lived experiences of students and members of our campus communities in research in this area?

1:18:08

Victoria: Yeah, that's a good question. Um, It depends on what literature you're looking at. So there's a body of Collegiate Recovery Day specific literature that has used quantitative and qualitative methods, there hasn't been I'd say very rigorous quantitative research on the effectiveness of these programs. So actually a colleague of mine a friend I know, he's, it's in our it's going to be published should be available now. But he did a scoping review of the everything available on Collegiate Recovery Program. And he's doing a postdoc right now to actually do some rigorous evaluations on collegiate recovery programs. So he's working on that now, because there is a gap in the literature on that there are best practices that they've put forward around having a dedicated space, dedicated staff peer support, but there isn't anything that's been NIH funded specifically in the States, which is their large health funding, and they could do some more rigorous studies. Now in the studies that I cited for disclosure so Herman Kinney and Kenny Hill Romo, their qualitative methods, there's actually one phenomenological study where they did five such interviews with students who were nondrinkers and what that experience was like. So there is some but there's definitely a very thin body of research in this area. So lots of room to develop more.

Helen 1:19:49

And we have perhaps our last question here. This is one then just a question about alcohol availability on campus. Talking about alcohol delivery to residents and perhaps setting up policy to prevent that. One, the concern is that students they find out way around that, maybe having the delivery off campus which could increase potential harms. So just wondering, Z'Anne and other panelists as well if you have some thoughts on this, just what is the best thing might be to do in this situation?

1:20:24

Z'Anne: Yeah, I think around liquor delivery we are charting new courses. We are definitely hearing for example, not even just on campuses but examples where people were telling us that it was dropped on their driveways with no idea being and I know that's not according to a AGLC's expectations for example, in our province that shouldn't be acceptable, but I do think that being in dialogue with you know us have different partners. I think we could consider what might be the first ways to work on policy in that area. But I think that you're right that to just sort of go at one without thinking about how it sometimes creates a ripple effect in another part of that university. That's where a conversation between, say the municipality that the post-secondary you know is situated in or the rural county it's situated in and having that sort of consistency between them or Ttinking about those rebuttal things I think are going to be important to in our in our conversations about it. I know I think another important thing I'm noticing in some of the campus health staff who are interested in looking at some of the alcohol availability. We'll be looking at you know, we also have other areas like density and distance and hours of service. But I think that if we bring many voices to the table, so sometimes we bring just one set of alcohol voices to the table and I think we need to ensure that different cultures are present when different pieces of the decision making team are together. So the more that's well rounded, probably the better chance that our policy is going to you know, have a the appropriate impact we hope to have with them with the least it harms that we hope it will I've been in changing policy.

1:22:18

Yeah, and I'll just Add that some of the flexion programs in the states like Texas Tech. They have dedicated sober recovery residences, because residents life can be extremely sobriety threatening for folks. By having those designated residences is extremely really helpful and students will actually seek out universities that have these kinds of residences. It says in programs in place of high school students. That's one of the things that literature has revealed because of the fears around the, you know, the risk to their recovery and the pressures to drink especially in the in the residence.

1:23:11

One thing I think working on policy too as you have to become informed on the tip of things that are used as excuses for not doing policy. And they're sort of classic and they're very much used in the norming with alcohol. And so you have to get past that and actually look at you know in depth at what it is so you know you get the fun argument, and the free argument and these really apply to any area where you're trying to do healthy public policy. So what you need to do is look at what is the kind of freedoms that you want to have in place? Freedom to not have domestic violence not have alcohol field and sexual assault? You know, what do you want fun to look like on your campus? Where are the boundaries? What are what are they expect? Is it fun to be kicked out of the university because you've done so poorly on so many courses based on the amount you've been drinking? So you know, there are you know we're not we're looking for that sweet spot in the middle on public health not to be at

either end. But there certainly is a spot to allow the personal choice for consumption of alcohol. But to have a lot of these things like we have a transportation guard rail, speed bumps, all these things that keep us safe as we choose to use the roads. Some may choose to use alcohol or not.

1:24:35

Victoria: Yeah, I'll just echo that as well that that idea of the downstream and upstream programming and Z'Anne and I think she did a really good job in your presentation highlighting that when it comes to addiction recovery, often it's up to the individual, and it's seen as the individual's problem. That's how I felt myself that I just wasn't quite getting it right. There was something wrong. Little did I know, there was this whole machine of, you know, fueled by alcohol culture, that was sending messages and, you know, allowing availability of alcohol and promoting. So, you know, we have to work at both ends of the river, the downstream and this leads back to your, the first question, you know, pure support and all that is really important. But, you know, we're pulling people out of the river without looking at the preventative and looking at what's actually pushing people into the river. And alcohol culture is a big part of that. But we don't often look at it that way. And it's actually to the advantage of big alcohol to blame the individual and focus on rehabs and things about looking at the bigger picture and on campus we have to work with both providing services but also looking at how we're marketing alcohol and what types of activities are available and what policies are in place.

Helen 1:26:01

With that, I think I might wrap up our q&a session. It has been a lively one and I wanted to thank all three of you for sharing your stories, for addressing our community and giving your presentations today. I really like this comment that's coming in from the chat about how a community engaged in reducing alcohol related harms and changing the culture will be the most effective way to enact policies and practice. So, thank you for Saying that Lorelee because I think that's what we're really talking about what today is a shift and by becoming aware of these paradoxes, the sober paradoxes, we can start to change things for the better. So I just wanted to sincerely thank you all for your time today. And we just have a few little things to wrap up. So ask them to move to the next slide.

Helen 1:27:00

Thank you for your participation today and we do you have a survey. We do value your feedback on how we can do better or if there's any other topics you'd like to see us explore in our upcoming webinars. We have two webinars coming up, one on May 19 called Alberta-Based Mental Health Groups That Work, if you're looking at implementing some training on your campus. And we do have the Follow Up Workshop: Getting Started With The National Standard On Your Campus. That one is going to be on May 27th so I'm just going to put those links in the chat if you would like to sign up for our up upcoming webinars. So the other thing that is coming up I wanted to share with you all is the Healthy Campus Alberta Wellness Summit. It will be happening over three and a half days on June 15, 16 and 17. So I've just pasted the link in the chat there if you would like to register. Our theme this year is going to be Telling Our Stories: Processes Of Our Action And Growth, and I hope that you can and consider joining us at some or all of our Wellness Summit With that, I'm going to we'll wrap up for today. Thank you all of our panelists for joining us and Healthy Campus Saskatchewan for helping out with Zoom, and PEP-AH for initiating this webinar series and for all of you for being here today. You all have

a wonderful rest of your day and we hope to see you soon at one of our webinars to continue the conversation.