

Webinar Series: Supporting Equity-Oriented Health Care Responses to Gender-Based Violence and Substance Use

Join EQUIP Health Care for a series of webinars!

Through this webinar series, we will:

-  **Share evidence-informed tools and resources** on the intersections of gender-based violence, trauma, mental health, and substance use.
-  **Support shared understanding** of how these intersecting experiences shape health, safety, and access to care.
-  **Provide practical, trauma- and violence-informed approaches** to supporting substance use health and reducing stigma.
-  **Offer strategies to support organizational changes** that promote the wellbeing of people experiencing gender-based violence and substance use, as well as the wellbeing of service providers.

Substance Use Safety Planning: A Tool for the Gender-Based Violence Service Sector

This tool can assist in discussions with clients about safe substance use in contexts where gender-based violence (GBV) support services are provided, including residential services such as hubs, shelters and second-stage or transitional housing, outreach services, and individual and group counseling within an organization or in the community.

About Substance Use Health

Substance Use Health (SUH), developed by CAPSA, encompasses the health goals and needs of the entire population, ranging from no use, lower and higher risks, and declining health. SUH recognizes that people can experience both risks and benefits across the entire spectrum and that health promotion can happen at any point. SUH is a strengths-based approach that focuses on supporting people's substance use goals, including but not limited to abstinence.

About Substance Use Stigma

Substance use stigma, which can occur regardless of the type of use/non-use, happens in a broad context of social, political, and economic factors and is embedded in health and social service policies, practices, and environments. Although most Canadians use substances in some form:

- Some substances and some methods of use are stigmatized more than others.
- Not everyone using the same substance is treated the same. For example, people are treated differently based on income, racialization, cultural background, gender and parenting roles, and other factors.
- Some people, for example, people who are racialized or appear to be Indigenous, are often inaccurately assumed to use substances and are negatively judged and stigmatized even when they do not use substances.
- Stigma associated with both substance use, and GBV, can compound the harms of these experiences, and even add new harms, for example, a nurse or social worker thinking that slurring is from alcohol use when it's really from traumatic brain injury due to a blow to the head or strangulation.

*CAPSA, <https://capsa.ca/substance-use-health/> (used with permission).



Presenters:

Dr. Colleen Varcoe,
Professor Emeritus,
UBC School of
Nursing &
Nancy Lipsky,
Project Manager



March 4th: Emergency Services
March 10th: Educators
March 18th: Direct Care Providers

At 11:00 -
12:30 PT via
Zoom



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