ABSTRACT

Introduction Previous research demonstrated that substance use continues to be one of the most complex and prevalent problems among African, Caribbean and Black (ACB) people. A number of studies were conducted to characterise substance use patterns in this population. To our knowledge, this is the first known review in Canada characterising substance use disorders on ACB people. This scoping review seeks to answer the following research questions: What characterises substance use disorders among ACB people in Canada? What are the different types and prevalence of substance use among ACB people in Canada? Do ACB people in Canada use more than one substance? What factors are associated with substance use among ACB people in Canada? What are the health and social impacts of substance use in ACB people in Canada?

Methods and analyses This study will use the methodological framework for scoping reviews developed by Arksey and O’Malley. We will search electronic bibliographic databases including Ovid MEDLINE, PsycINFO and CINAHL. We will limit our search to English articles published between 2000 and 2019. In addition, we will conduct a grey literature search. Two investigators will independently screen citations and full-text articles. Our findings will be reported according to the Preferred Reporting Items for Systematic Reviews and Meta-Analysis for scoping reviews guidelines. We will provide a descriptive summary of the studies and summarise the findings with respect to the outcomes and report any gaps that might require further investigation.

Ethics and dissemination Our proposed study does not involve human participants; therefore, research ethics approval is not required. This study will provide evidence that will inform the development of strategies for appropriate interventions, as well as policy and further research. The results will be disseminated through publications in open access peer-reviewed journals, presentations at scientific meetings and to the lay public.

BACKGROUND

According to the 2016 Canadian census, 1 198 545 people self-identified as Black, representing 3.5% of Canada’s total population and 16% of the total visible minority population. About 37% of the Black population in Canada lives in Toronto. In Western countries, racialised minorities are more likely to face structural and social stressors that lead to health disparities and exacerbate poor health status. African, Caribbean and Black (ACB) people, especially those who are immigrants and refugees, experience a myriad of challenges and problems such as language barriers, exclusive immigration policies, unemployment, poverty, lack of access to healthcare, discrimination and racism. Research confirms that social inequalities, systemic racial discrimination, sexism, poverty and marginalisation contribute to the compromised mental health among racialised people. Evidence also indicates that some marginalised ACB people turn to substance use as a coping strategy to overcome cumulative hardship and stressful life conditions. Depending on different factors such as the type of drugs used, doses, frequency and pre-existing health conditions, drug use can have various short-term and long-term health and social effects such as heart attack, crime, stroke, healthcare spending, drug dependence, change in blood pressure, violence, etc.
HIV/AIDS, hepatitis C virus, mental health issues, overdose and ultimately death.\textsuperscript{7,8}

Like other Canadians, ACB people have a reported history of substance use. Data derived from multiple cycles (2005–2011) of the Canadian Community Health Survey—Mental Health in Ontario showed that 40% of Caribbean and 18% of African adults reported lifetime cannabis usage; also, 23% of Caribbean and 9% of African adults have reported using cannabis in the past year.\textsuperscript{9} The prevalence of problematic use of cannabis (that can lead to harm, abuse or dependence, moderate/high score of 8 or more) on the Alcohol, Smoking and Substance Involvement Screening Tool-Cannabis Involvement Score was 8% for Caribbean and 4% for African adults.\textsuperscript{9}

In a community-based study of party drug use among ethno-racially diverse gay and bisexual men (Asian, Caribbean, Latino, Aboriginal, mixed and others) in Toronto, participants reported regular use of ecstasy, cannabis, ketamine and cocaine.\textsuperscript{10} In the same study, 43% of participants were polydrug users and almost all participants reported engaging in sex while they were on drugs.\textsuperscript{10} For women, data from the Canadian HIV Women’s Sexual and Reproductive Health Cohort Study reported various types of drug users. Among participants who self-identified as ACB, 5% used tobacco, 41% drank alcohol, 5% were ‘socially acceptable’ poly-substance users, 4% were illicit poly-substance users and 3% were illicit poly-substance users of all types.\textsuperscript{11}

Substance use is associated with increased risk of developing other mental disorders, utilisation of emergency rooms and can have severe impact not only on individuals, but also on those closest to them, and society in general. Population-based data from the Ontario HIV Treatment Network reported recreation drug use (RDU) (16%) and co-occurring RDU and depression (34%) among heterosexual individuals. Among specific ethnic groups (African, Caribbean, Asian or Latino), 14% reported RDU and 12% reported co-occurring RDU and depression.\textsuperscript{12} Moreover, RDU-only or co-occurring depression and RDU were associated with increased incidence of emergency department (ED) visits.\textsuperscript{12} Previous observational study showed that opioid poisonings led to 16 hospitalisations per day in Canada.\textsuperscript{13} In the same study, it was found that substance use also increased ED visits. Over the last 5 years, heroin or synthetic opioid poisonings increased the number of ED visits by 10-fold in Alberta, whereas in Ontario, ED visits increased fourfold and doubled due to heroin and synthetic opioid poisonings, respectively.\textsuperscript{13} A study investigating substance use and intimate partner violence (IPV) showed that cocaine use was associated with IPV among Black men who have sex with men.\textsuperscript{14} Moreover, a significant association between illegal drug use and criminal behaviour exists.\textsuperscript{15} In several studies, it was demonstrated that alcohol can significantly increase the risk of sexual assault.\textsuperscript{16} A cross-sectional study investigating predictors of sexual assault found that the number of sexual assaults committed by African American and Caucasian men were associated with alcohol problems.\textsuperscript{17} Also, the relationship between driver blood alcohol concentration (BAC) and involvement in motor crash is well documented. Previous studies have reported that higher BACs significantly increase the likelihood of drivers to be involved in crashes.\textsuperscript{18} Substance use is associated with increased risky sexual behaviour and the risk of HIV acquisition. Evidence from a Canadian study showed that ACB women reported having sex under alcohol, substance use and drug influence; 2% had shared drug use equipment and 27% had ever mixed sex with drugs or alcohol and 44% of ACB men reported that they had engaged in sex while using drugs or alcohol.\textsuperscript{19}

ACB in Canada experience different challenges that increase their vulnerability to use substances, however, the literature is rather sparse on this population. An initial search of the topic in PubMed, the JBI database of systematic reviews and implementation reports and PROSPERO did not identify previous reviews or any review currently underway. There is a need to characterise substance use disorders among this population. The proposed scoping review aims to explore the available research evidence regarding common substance use disorders by ACB people in Canada as well as their health and social impacts.

METHODS AND ANALYSIS
Patient and public involvement
Patients are not involved in the design of this scoping review study.

Scoping review
We will conduct a search of all research designs and types of publications, as well as grey literature and reports. The review will adhere to the Preferred Reporting Items for Systematic Reviews and Meta-Analysis Protocols (PRISMA-P) guidelines, including search strategy, selection criteria, data extraction and data analysis.\textsuperscript{20} Furthermore, the review will be conducted using the methodological framework for scoping reviews proposed by Arksey and O’Malley.\textsuperscript{21} The framework recommends the following six steps: (1) Identifying the research question, (2) identifying relevant studies, (3) study selection, (4) charting the data, (5) collating, summarising and reporting the results and (6) consultation. The review will be reported according to PRISMA for Scoping Reviews (PRISMA-ScR) guidelines and a checklist will be completed.\textsuperscript{22} Our scoping review was initiated on 1 December 2018 and is to be completed by 30 August 2019.

Step 1: Identifying the research question
The following research questions of the scoping review were identified
1. What characterises substance use disorders among ACB people in Canada?
   - What are the different types and prevalence of substance use among ACB people in Canada?
### Table 1  Database search strategy

**Ovid MEDLINE search**

| Key term                                                                 | #Hits  |
|-------------------------------------------------------------------------|--------|
| 1  exp ALCOHOLS/or Binge drink*.mp. [mp=title, abstract, original title, name of substance word, subject heading word, floating sub-heading word, keyword heading word, protocol supplementary concept word, rare disease supplementary concept word, unique identifier, synonyms] | 621613 |
| 2  (illicit adj2 drug*).tw.                                              | 9827   |
| 3  Marijuana.mp. or exp Cannabis/                                        | 22250  |
| 4  (Inhalant adj2 nitrite).tw.                                           | 40     |
| 5  Street Drugs/                                                         | 10253  |
| 6  poppers.tw.                                                          | 338    |
| 7  exp COCAINE/or exp CRACK COCAINE/                                     | 24487  |
| 8  (Amphetamines or N-Methyl-3,4-methylenedioxyamphetamine or 3,4-Methylenedioxyamphetamine or Ecstasy or MDMA or MDA).tw. | 56092  |
| 9  (Psychedelic* or Psychotropic Drugs).tw.                             | 6855   |
| 10 exp HEROIN/                                                           | 5376   |
| 11 Opiate*.tw.                                                          | 23681  |
| 12 exp OPIUM/                                                           | 1961   |
| 13 exp BENZODIAZEPINES/                                                 | 63290  |
| 14 Demerol.tw. or exp Meperidine/                                       | 5791   |
| 15 (Cigarette* or tabacco).tw.                                          | 63819  |
| 16 (Psychedelic adj2 drug*).mp. [mp=title, abstract, original title, name of substance word, subject heading word, floating sub-heading word, keyword heading word, protocol supplementary concept word, rare disease supplementary concept word, unique identifier, synonyms] | 218    |
| 17 (Hallucinogenic adj2 Drug*).mp. or hallucinogens.tw. [mp=title, abstract, original title, name of substance word, subject heading word, floating sub-heading word, keyword heading word, protocol supplementary concept word, rare disease supplementary concept word, unique identifier, synonyms] | 1630   |
| 18 Vicodin.tw.                                                          | 56     |
| 19 exp CODEINE/                                                          | 6561   |
| 20 exp FENTANYL/                                                        | 15005  |
| 21 Sedative*.tw.                                                        | 17745  |
| 22 Valium.tw. or exp Diazepam/                                          | 17699  |
| 23 Xanax.tw. or Alprazolam/                                             | 1754   |
| 24 Ritalin.tw. or exp Methylphenidate/                                  | 6870   |
| 25 Adderall.tw.                                                         | 158    |
| 26 (Erectile adj2 dysfunction adj2 drug).tw.                            | 57     |
| 27 Viagra.tw. or Sildenafil Citrate/                                    | 5335   |
| 28 Cialis.tw. or Tadalafil/                                             | 1317   |
| 29 (Levitra or Vardenafil Dihydrochloride).tw.                          | 101    |
| 30 Crystal.tw.                                                          | 189761 |
| 31 (GHB or Gamma-hydroxybutyrate).tw.                                   | 2544   |
| 32 canada/                                                              | 85054  |
| 33 (Canada or Canad*).tw.                                               | 112521 |
| 34 (alberta or british columbia or nova scotia or prince edward island or newfoundland or labrador or nunavut or northwest territories or Yukon or Quebec or Saskatchewan or manitoba or Ontario or new brunswick).ti,ab. | 60865  |

Continued
| Key term                                                                 | #Hits  |
|------------------------------------------------------------------------|-------|
| Caribbean.mp. or exp Caribbean Region/                                 | 35105 |
| (Black* or Caribbean or African or Immigrant* or immigra* or migration or migrant*).tw. | 493685 |
| (Black adj2 canadian*).mp. [mp=title, abstract, original title, name of substance word, subject heading word, floating sub-heading word, keyword heading word, protocol supplementary concept word, rare disease supplementary concept word, unique identifier, synonyms] | 32    |
| Ethnic Groups/or foreign-born.mp.                                      | 59963 |
| (new adj2 Canadian).tw.                                                | 197   |
| (asylum or new comer or refugees or minorit*).tw.                      | 66945 |
| racial*.mp.                                                            | 36734 |
| substance-related disorders/or alcohol-related disorders/or amphetamine-related disorders/or cocaine-related disorders/or drug overdose/or heroin dependence/or inhalant abuse/or marijuana abuse/or opioid-related disorders/or phencyclidine abuse/or psychoses, substance-induced/ or substance abuse, intravenous/or substance abuse, oral/or substance withdrawal syndrome/or “tobacco use disorder”/or opioid dependence. mp. | 172286 |
| Alcoholic Intoxication/                                                | 12144 |
| exp OPIUM DEPENDENCE/                                                 | 12    |
| exp HEROIN DEPENDENCE/                                                | 8793  |
| substance addiction.tw.                                               | 250   |
| (drug adj2 addiction).mp. [mp=title, abstract, original title, name of substance word, subject heading word, floating sub-heading word, keyword heading word, protocol supplementary concept word, rare disease supplementary concept word, unique identifier, synonyms] | 7594  |
| (drug adj2 abuse).mp. [mp=title, abstract, original title, name of substance word, subject heading word, floating sub-heading word, keyword heading word, protocol supplementary concept word, rare disease supplementary concept word, unique identifier, synonyms] | 17792 |
| exp Inhalant Abuse/                                                   | 187   |
| exp Cocaine Smoking/                                                  | 6     |
| exp Cocaine-Related Disorders/                                         | 7724  |
| substance addiction.tw.                                               | 250   |
| drug addiction.mp.                                                    | 7334  |
| exp Prescription Drug Misuse/                                         | 11373 |
| “substance use disorders”.mp.                                          | 7809  |
| 1 or 2 or 3 or 4 or 5 or 6 or 7 or 8 or 9 or 10 or 11 or 12 or 13 or 14 or 15 or 16 or 17 or 18 or 19 or 20 or 21 or 22 or 23 or 24 or 25 or 26 or 27 or 28 or 29 or 30 or 31 | 1109799 |
| 32 or 33 or 34                                                        | 185044|
| 35 or 36 or 37 or 38 or 39 or 40 or 41                                 | 622158|
| 42 or 43 or 44 or 45 or 46 or 47 or 48 or 49 or 50 or 51 or 52 or 53 or 54 or 55 | 196134|
| 56                                                                     | 6      |
| 57                                                                     | 182    |
| 58                                                                     | 132    |
| 60                                                                     | 261    |
| 63                                                                     | 258    |
| 64                                                                     | 212    |
Table 1 Continued

| Key terms                                                                 | #Hits  |
|---------------------------------------------------------------------------|--------|
| (Black* OR Caribbean OR Africa* OR “Black Canadian” OR black-foreign OR foreign-born OR caribbean-born OR radicalized groups OR ethnic groups OR “Caribbean region” OR “African ancestry” OR “black Caribbean ethnicity”) AND (canada OR ab(Canada* OR Canadian* OR alberta OR british columbia OR nova scotia OR prince edward island OR newfoundland OR labrador OR nunavut OR northwest territories OR Yukon OR Quebec OR Saskatchewan OR manitoba OR Ontario OR new brunswick)) AND (alcohol OR “illicit drug” OR marijuana OR cannabis OR poppers OR “street drug” OR cocaine OR “stimulant drug” OR amphetamines abuse OR n-methyl-3,4-methylenedioxymethylamphetamine OR 3,4-methylenedioxymethylamphetamine OR ecstasy OR hallucinogens OR methylendioxymethylamphetamine OR methylenedioxymethamphetamine OR MDMA OR MDA OR psychotopic OR heroin OR opiate* OR benzodiazepines OR demerol OR perazine OR cigarette* OR tobacco OR “psychedelic drug” OR “hallucinogenic drug” OR “pain killer” OR vicodin OR codeine OR fentanyl OR sedative* OR valium OR diazepam OR xanax OR alprazolam OR ritalin OR methylphenidate OR party drug OR adderall OR “erectile dysfunction drug” OR viagra OR sildenafil citrate OR cialis OR tadaflo OR levitra OR “poly drug” OR crystal OR gamma-hydroxybutyrate OR gamma-hydroxybutyrate OR vardenafil OR “recreation drug” OR (substance-related disorders) OR (alcohol-related disorders) OR (amphetamine-related disorders) OR (cocaine-related disorders) OR (drug overdose) OR (heroin dependence) OR (inhalant abuse) OR (marijuana abuse) OR (opioid-related disorders) OR (phencyclidine abuse) OR psychoses OR substance-induced OR (substance abuse) OR intravenous OR (drug injection) OR (substance withdrawal syndrome) OR (tobacco use disorder) OR (opioid dependence) OR (Alcoholic Intoxication) OR (opium dependence) OR (heroin dependence) OR (substance addiction) OR (drug abuse) OR (Inhalant Abuse) OR (Cocaine Smoking) OR (Cocaine-Related Disorders) OR (substance addiction) OR (drug addiction) OR “Prescription Drug Misuse” OR “substance use disorders”) Limits: English, 2000-01-01 - 2019-04-05. |

CINHAL search strategy

| Key term                                                                 | # Hits  |
|---------------------------------------------------------------------------|--------|
| S67 S64 OR S65 Limiters—Published Date: 20000101–20190131; Exclude MEDLINE records | 108    |
| S66 S64 OR S65                                                             | 336    |
| S65 S46 AND S47 AND S63                                                    | 300    |
| S64 S35 AND S47 AND S63                                                    | 102    |
| S63 S48 OR S49 OR S50 OR S51 OR S52 OR S53 OR S54 OR S55 OR S56 OR S57 OR S58 OR S59 OR S60 OR S61 OR S62 | 221141 |
| S62 “African”                                                             | 39655  |
| S61 (MH “Africa+”)                                                        | 65728  |
| S60 “racial groups”                                                       | 993    |
| S59 (MH “Minority Groups”)                                                | 9980   |
| S58 “asylum seekers”                                                      | 805    |
| S57 (MH “Refugees”)                                                       | 5726   |
| S56 “foreign-born”                                                        | 1482   |
| S55 (MH “Ethnic Groups+”’)                                                | 120462 |
| S54 “Black canadian”                                                      | 36     |
| S53 (MH “Transients and Migrants”)                                        | 3742   |
| S52 “immigra”                                                             | 21155  |
| S51 (MH “Immigrants”)                                                     | 12198  |
| S50 (MH “Blacks”) OR “African”                                             | 67751  |
| S49 “Caribbean Region”                                                    | 159    |
| S48 “Caribbean” OR (MH “West Indies”)                                     | 3710   |

Continued
Table 1  Continued

CINHAL search strategy

| Key term                                                                                      | # Hits  |
|-----------------------------------------------------------------------------------------------|---------|
| S47 (MH “Canada”) OR (MH “Alberta”) OR (MH “British Columbia”) OR (MH “Manitoba”) OR (MH “New Brunswick”) OR (MH “Newfoundland”) OR (MH “Northwest Territories”) OR (MH “Nova Scotia”) OR (MH “Nunavut”) OR (MH “Ontario”) OR (MH “Quebec”) OR (MH “Saskatchewan”) OR (MH “Yukon Territory”) | 87270   |
| S46 S36 OR S37 OR S38 OR S39 OR S40 OR S41 OR S42 OR S43 OR S44 OR S45                          | 149256  |
| S45 “HEROIN DEPENDENCE”                                                                        | 281     |
| S44 (MH “Inhalant Abuse”)                                                                      | 340     |
| S43 “PRESCRIPTION DRUG MISUSE”                                                                  | 279     |
| S42 (MH “Intravenous Drug Users”)                                                               | 1787    |
| S41 (MH “Substance Abuse+”)                                                                    | 56700   |
| S40 MH “Alcohol-Induced Disorders”                                                              | 670     |
| S39 MH “Alcohol-Induced Disorders”                                                               | 670     |
| S38 (MH “Substance Abuse, Intravenous’) OR “drug abuse”                                         | 9226    |
| S37 “drug addiction”                                                                            | 2243    |
| S36 (MH “Substance Use Disorders+”) OR “substance addiction” OR (MH “Behavior, Addictive+”) OR (MH “Substance Use Rehabilitation Programs+”) OR (MH “Substance Dependence+”) | 145870  |
| S35 S1 OR S2 OR S3 OR S4 OR S5 OR S6 OR S7 OR S8 OR S9 OR S10 OR S11 OR S12 OR S13 OR S14 OR S15 OR S16 OR S17 OR S18 OR S19 OR S20 OR S21 OR S22 OR S23 OR S24 OR S25 OR S26 OR S27 OR S28 OR S29 OR S30 OR S31 OR S32 OR S33 OR S34 | 151279  |
| S34 (MH “Analgesics, Opioid+”)                                                                  | 29420   |
| S33 “recreational drugs”                                                                         | 238     |
| S32 “GHB”                                                                                       | 349     |
| S31 “Gamma-hydroxybutyrate”                                                                      | 150     |
| S30 “Crystal”                                                                                    | 3104    |
| S29 (MH “Vardenafil Hydrochloride”) OR “Levitra”                                                 | 99      |
| S28 “Cialis” OR (MH “Tadalafil”)                                                                 | 123     |
| S27 “Viagra” OR (MH “Sildenafil”)                                                                 | 1314    |
| S26 “Erectile dysfunction drug”                                                                   | 95      |
| S25 “Adderall”                                                                                   | 92      |
| S24 (MH “Methylphenidate”) OR “Ritalin”                                                            | 2132    |
| S23 (MH “Methylphenidate”)                                                                      | 2062    |
| S22 (MH “Alprazolam”) OR “Xanax”                                                                  | 332     |
| S21 (MH “Diazepam”)                                                                              | 972     |
| S20 “Sedative*”                                                                                  | 8160    |
| S19 (MH “Fentanyl+”)                                                                             | 4125    |
| S18 (MH “Codeine+”) OR (MH “Oxycodone’)                                                           | 2217    |
| S17 “Vicodin”                                                                                    | 37      |
| S16 “Hallucinogenic Drug*”                                                                        | 40      |
| S15 (MH “Hallucinogens+”)                                                                        | 1587    |
| S14 (MH “Street Drugs+”) OR (MH “Drugs, Non-Prescription”) OR “Psychedelic drug*”                  | 9003    |
| S13 (MH “Meperidine”) OR “Demerol”                                                                 | 764     |
| S12 (MH “Antianxiety Agents, Benzodiazepine+”)                                                    | 8068    |

Continued
– Do ACB people in Canada use more than one substance?
– What are the factors associated with substance use among ACB people in Canada?

2. What are the health and social impacts of substance use among ACB people in Canada?

The following population, intervention, comparison, outcome was formulated:
1. Population: Canadian ACB people.
2. Intervention: Study examines substance use.
3. Comparison: Other ethnic groups if provided.
4. Outcomes:
   – Types of substance use disorders.
   – Prevalence of substance use disorders and poly drugs use.
   – Health impact of substance use.
   – Social impact of substance use.

Step 2: Identifying relevant studies
In order to address the objectives of the review, an internet-based search of published and grey literature will be conducted using electronic databases and Google. Also, we will search the website of key organisations, such as Health Canada, Statistics Canada and the Canadian Centre on Substance Use and Addiction. For each individual database, our search strategy will combine Medical Subject Headings and ‘free-text’ terms in conjunction with the Boolean operators ‘and’ and ‘or’. We will conduct searches in relevant electronic databases: Ovid MEDLINE, PsycINFO and CINHAL.

Our search will be limited to English language publications. Only studies published between 2000 and 2019 will be included in this review. Our search strategy is described in tables 1–3. Also, we will check reference lists of included studies to identify any additional relevant articles that were not captured by our search strategy.

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**Table 1**  
**CINHAL search strategy**

| Key term                                                                 | # Hits  |
|-------------------------------------------------------------------------|---------|
| S11 (MH “Opium+”)                                                        | 14137   |
| S10 (MH “Narcotics”) OR (MH “Naloxone”) OR “Opiate”                     | 14104   |
| S9 (MH “Heroin”)                                                         | 2525    |
| S8 (MH “Psychotropic Drugs+”)                                            | 48984   |
| S7 (MH “Amphetamines+”) OR (MH “Amphetamine+”) OR (MH “Phenytoinamines+”) OR (MH “Methylenedioxymethamphetamine”) | 9113    |
| S6 (MH “Cocaine+”) OR (MH “Crack Cocaine”)                              | 4149    |
| S5 “poppers”                                                             | 85      |
| S4 (MH “Cannabis”) OR “Marijuana”                                        | 10743   |
| S3 (MH “Drugs, Off-Label”) OR (MH “Drugs, Non-Prescription”) OR (MH “Street Drugs+”) | 10368   |
| S2 “party drugs”                                                         | 25      |
| S1 (MH “Alcohols+”)                                                      | 32901   |

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**Table 2**  
**Web-based search strategy: Google search engine**

| No. | Search term                                                                 | # of Hits |
|-----|-----------------------------------------------------------------------------|-----------|
| 1   | Substance abuse or substance use or name of substance, eg, alcohol, cannabis, poppers | TBD       |
| 2   | Blacks or Caribbean or African                                              | TBD       |
| 3   | Canada                                                                      | TBD       |
| 4   | #1 and #2 and #3 First five-pages of the web-based search will be reviewed Limitation: 1. English. 2. 2000-present. | TBD       |

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**Table 3**  
**Health Canada, Statistic Canada and the Canadian Centre on substance use and addiction search strategy**

| No. | Search term                                                                 | # of hits |
|-----|-----------------------------------------------------------------------------|-----------|
| 1   | Substance abuse or substance use or name of substance, eg, alcohol, cannabis, poppers. And African or Caribbean or Blacks | TBD       |
| 2   | Limitation: 1. English. 2. 2000-present.                                     | TBD       |

TBD, to be decided.
Step 3: Study selection

We will use Endnote 9 (Clarivate Analytics), a citation management software programme, to manage references and remove duplicates. To facilitate study screening and selection, all citations obtained using the search strategy will be imported into Rayyan, a web and mobile application for systematic reviews. Study selection will proceed according to the stages described below.

Stage 1
A customised form reflecting the inclusion criteria in box 1 will be pilot tested by two reviewers. Specifically, a screening form will be developed and will be applied by two reviewers independently to a sample of 5% abstracts to ensure consistency of use and clarity of the instrument. A Cohen’s kappa statistic will be estimated to measure inter-rater reliability, and screening will begin when >60% agreement is achieved.

Stage 2: Assessment of studies for inclusion

Inclusion criteria

To be included in this study a reference should meet the following criteria:
1. Population: Canadian ACB male and female.
2. Intervention: Study examines substance use.
3. Comparison: Other ethnic groups if provided.
4. Outcomes—Study examines at least one of the following:
   - Types of substance use disorders.
   - Prevalence of substance use or poly drugs use.
   - Factors associated with substance use.
   - Health impact of substance use.
   - Social impact of substance use.

Exclusion criteria

Article describes normal prescription drug use.

Step 4: Charting the data

Eligible studies will be extracted using a pre-designed data extraction form. The data extraction form will be pilot tested with a sample of five studies to ensure clarity and consistency. We will extract basic study information like first author, title, purpose, year of publication and province. In addition, we will extract information about the population, method, age, type of substance use, poly drug use, impact of drug use, findings and limitations of the study (box 2).

Step 5: Collating, summarising and reporting the results

Rather than provide a quantitative synthesis of literature, as is typically the use of systematic reviews, this scoping review aims to summarise a wide range of findings regarding substance use disorders among ACB people in Canada. Therefore, we will provide a descriptive summary of the gathered articles including peer-reviewed articles, text, opinion or systematic reviews. The descriptive summary will contain the characteristics of included studies, such as the overall number of studies, types of study design, years of publication, characteristics of the study populations and provinces where studies were conducted. In addition, we will summarise the study findings with respect to the outcomes and report any gaps that might require further investigation. Our synthesis will inform whether ACB people in Canada experience disorders related to alcohol, tobacco, stimulants,
Our proposed study does not involve human participation. Nguemo JD, et al. BMJ Open 2019;9:e028985. doi:10.1136/bmjopen-2019-028985

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**ETHICS AND DISSEMINATION**

Our proposed study does not involve human participation. As a scoping review, this study will use only published literature. Therefore, research ethics approval is not required. Results will be disseminated through publications in open access peer-reviewed scientific journals, presentations at scientific meetings and presentations to the lay public through the media where appropriate. The results from this review will be used to plan future systematic reviews.

**DISCUSSION AND CONCLUSION**

The proposed scoping review will have the potential to inform research, programmes and services that could be used to improve the health and well-being of ACB people in Canada. Specifically, this review will inform policy-makers, healthcare providers, clinicians and researchers on substance use among Canadian ACB people.

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depressants, hallucinogens, opioids or cannabis. Also, our synthesis will inform whether ACB people in Canada use more than one drug at a time and, the health and social impacts of substance use.

**Step 6: Consultation**

Neither patients nor public will be involved.