

# “Start Small, Take it Easy”

## Results from the ANKORS Harm Reduction Survey at the 2013 Shambhala Music Festival



Warren Michelow  
Cheryl Dowden

For many years ANKORS has provided harm reduction and pill and powder testing services at the Shambhala Music Festival (SMF), a large multi-day electronic music festival attended by over 12,000 people in a rural region of south-eastern British Columbia.

ANKORS commissioned a survey to assess the use of the various components of our harm reduction programming at the 2013 festival. The survey explored who uses our services, what services they use, what are the patterns of their use of alcohol, cannabis and other substances at the festival, and what gaps in services might exist.

### Survey Methods

The survey was conducted in conjunction with an existing program of research into polysubstance use by author WM who had surveyed the festival in 2009.

The short 6-page questionnaire was administered by a team of four interviewers. We used a verbal consent process instead of obtaining signed consent forms, and participants did not receive any remuneration for completing the survey. The research protocol was approved by the Behavioural Research Ethics Boards at The University of British Columbia and Interior Health Authority.

Participants were recruited through convenience sampling around the ANKORS service tent and line-ups. Surveying was conducted daily from Wednesday 7 August to Sunday 11 August 2013 from 3pm when ANKORS opened until midnight. Persons who displayed signs of intoxication were excluded as potentially not competent to provide informed consent.

### Survey Results and Discussion

We obtained **182 completed questionnaires** from ANKORS service users—or “guests”—over the 5 days of surveying. Overall, a low number of refusals were recorded and these were primarily related to it not being convenient for the person to participate at that time.



Figure 1: ANKORS pill and powder testing at the 2014 Shambhala Music Festival

ANKORS website:  
[www.ankors.bc.ca](http://www.ankors.bc.ca)

Festival outreach info:  
[www.ankorsvolunteer.com](http://www.ankorsvolunteer.com)

Contact us:  
[information@ankors.bc.ca](mailto:information@ankors.bc.ca)

**Characteristics of Participants**

Table 1 summarises key demographics.

**Average age of participants was 25 years** (median: 24 years, interquartile range [IQR]: 21-27 years, range: 19-58 years). The sample has more male- than female-identified participants, which is consistent with observations of the crowd in attendance and very similar to the sample obtained from a 2009 survey at the festival.

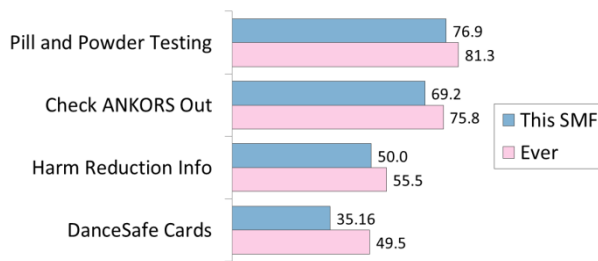
Almost half the sample (n=84, 46.2%) indicated this was their first time at the festival. Festival veterans reported attending an average of 3.6 festivals (standard deviation [SD]: 2.0, median: 3, range: 2-12), including the one at which they were surveyed. Festival veterans had made an average of 3.5 visits to ANKORS (SD: 5.5, median: 2, range: 1-52).

**Table 1: Demographics of survey participants**

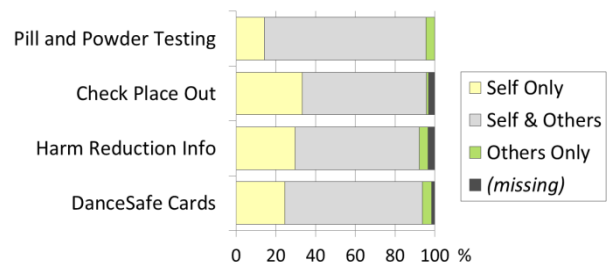
Demographic (N=182)		Count	%	
Gender	Female	75	41.2	
	Male	107	58.8	
Age Group	19 – 21	46	25.3	
	22 – 24	49	26.9	
	25 – 27	42	23.1	
28 and older		45	24.7	
	Education	High school or less	56	30.8
	Doing undergrad.	54	29.7	
Completed undergrad.	61	33.5		
Graduate	9	4.9		
Other	2	1.1		
Home	British Columbia	65	35.7	
	Alberta	67	36.8	
	Rest of Canada	31	17.0	
	Outside Canada	19	10.4	

**Use of ANKORS Services**

**Figure 2: Proportion (%) of participants reporting use of the most popular ANKORS services**



**Figure 3: Proportion (%) of beneficiaries for participants using the most popular ANKORS services**



**Pill and powder testing** is the main harm reduction service ANKORS provides at the festival. Extremely popular among festival attendees, it is becoming more regularly used by First Aid for testing of samples obtained from their patients. The testing is rudimentary in that it provides presence testing for a range of substances, but is not able to quantify dosages or purity of the samples provided.

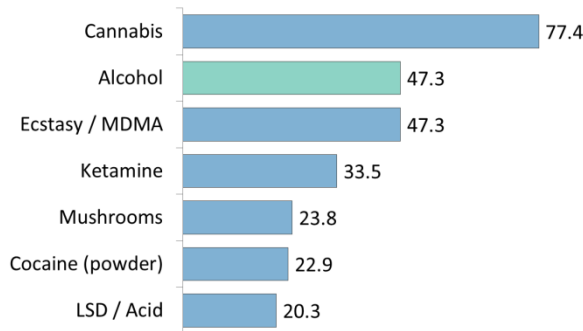
Only 14.3% of people using pill and powder testing used it for ‘self only’, underlining the **link between personal harm reduction practices and being part of a community** where “take care of each other” is a widely promoted value. Figure 3 shows how this value appears in results for use of other ANKORS services and speaks to how **ANKORS’ reach extends beyond just the people coming to the ANKORS tent**. Statistical tests showed there was no difference in use of ANKORS services between festival first-timers and festival veterans.

**Substance Use at the Festival**

Participants were asked about use of alcohol, tobacco, cannabis, and 26 other named substances over time periods of ever, in the 12 months before the festival, anytime at the festival and in the past 24 hours. Space was provided to write in use of substances not listed on the questionnaire.

**Cannabis use was ubiquitous** and both marijuana and hash products were widely used. Interestingly, **alcohol use was highly prevalent** despite SMF’s alcohol-free policy and random searches of vehicles at the festival gate to prevent alcohol being brought onsite. In total, **35 substances were reported used anytime at the festival**: 23 listed on the questionnaire and 12 others written in, including “designer drugs”, pharmaceuticals used without prescription, and psychoactive herbal products.

**Figure 4: Proportion (%) of participants reporting use of specific substances in the past 24 hours (with prevalence >=20%)**



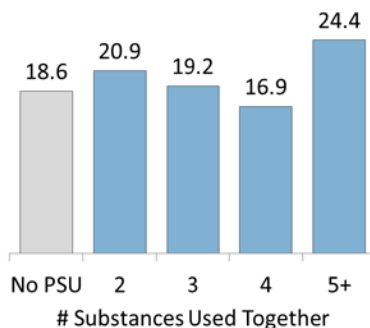
Overall use of substances at SMF was the same as the list of the most widely used substances in the past 24 hours (Figure 4). For cannabis, everyone who reported using hash also reported using marijuana, and only one of the hash users in the past 24 hours did not also report marijuana use in that period.

Only 7 participants out of 182 (3.8%) reported no substance use anytime at SMF, with only 10 (5.5%) reporting no substance use in the past 24 hours. Among participants

who used only one substance in the past 24 hours, 21 (11.5%) used cannabis, 5 (2.7%) used alcohol, 4 (2.2%) used ketamine and one used cocaine powder. This **high level of substance use is typical of music festivals** and consistent with 2009 survey results. Statistical tests also find **no differences in substance use between first-timers and festival veterans**. Similarly, we find no differences in polysubstance use or the number of substances used together.

**Simultaneous Polysubstance Use at the Festival**

**Figure 5: Proportion (%) of substance use in the past 24 hours that was simultaneous polysubstance use**



Simultaneous polysubstance use (SPSU) is substance use over a short enough period that the substances consumed may be metabolically active in the body at the same time and produce effects greater than the sum of their individual effects. Taking all psychoactive substances into consideration except for tobacco, Figure 5 shows how **simultaneous polysubstance use was the norm** among survey participants.

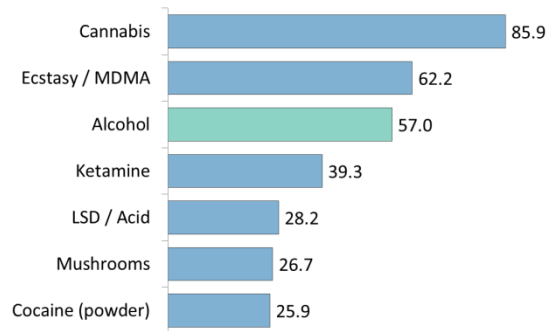
Focussing on the 172 (94.5%) participants who reported any substance use in the past 24 hours, Figure 5 shows that only a small minority (18.6%) of substance use was not SPSU. These participants used an average of 3.3 substances (SD: 1.8,

median: 3, IQR: 2) in the past 24 hours. **Eighty-six unique SPSU combinations** occurred in the data for the 140 (75.7%) participants who reported multiple substances used in the past 24 hours. Figure 6 shows which substances were the most common constituents of the reported combinations.

No particular combination stood out at a much higher prevalence than others, which suggests that **simultaneous polysubstance use may be driven more by happenstance rather than by widely held consumer preferences for specific combinations.**

The large number of substances being used simultaneously does not necessarily mean people are engaging intentionally in high risk behaviour—it may be more a sign of supply diversification, easier access and more sophisticated management of the intoxication experience.

**Figure 6: Prevalence (%) of constituent substances in combinations reported used in the past 24 hours**



### Summary of Results and Implications

- **ANKORS services are well-used with pill and powder testing being the most popular.**  
Our reach is extended beyond the service tent by the number of guests using services for others as well.
- **ANKORS is reaching festival first-timers as well as continuing to be relevant to festival veterans.**
- **ANKORS services complement other services at the festival to provide a continuum of harm reduction supports for the well-being of festival attendees.**
- **Polysubstance use continues to be the normal mode of using psychoactive substances with a wide variety of substances used in combination.**
- **Participants displayed high levels of awareness of some pragmatic harm reduction strategies that are consistent with ANKORS' harm reduction messaging.**
- **ANKORS pill and powder testing services need to evolve to include more accurate purity tests and tests focussed on substances of major concern (e.g., PMA or PMMA).**
- **ANKORS pill and powder testing users dispose of substances that did not obtain the test results expected and do so at the ANKORS tent.**

These data illustrate that our service users trust us and the information and services we provide. They also speak to the effectiveness of the harm reduction efforts, the informed decision-making of festival-goers, and the value of cooperation between service providers, festival security and the RCMP for reducing harms associated with substance use.

*"I think you guys are doing a really great job. You basically saved my Shambhala by the test I just got."*

*- male, 25, BC*