

Nov 4th, 2024

Dear Cambridge City Council Members,

We are writing as academics working in the areas of housing and homelessness. As subject matter experts and individuals with connections to Waterloo Region, we are deeply concerned by the proposed motion, “Chronic Homelessness, Mental Health, Safety and Addiction Crisis” being debated at City Council on Nov. 5th, 2024. Based on our knowledge of research concerning homelessness, mental health and substance use, we are concerned that this motion at best will do nothing to address the current crisis of homelessness, and at worst, undermine evidence-based efforts to meaningfully address the crisis. We want to emphasize the following points:

1. Homelessness and the use of criminalized substances are two distinct, albeit related, issues. Despite a subclause noting the diversity of experiences among people experiencing homelessness, most of the motion gives the impression that all people experiencing homelessness are using criminalized substances. This is a harmful stereotype that is often used to dehumanize people experiencing homelessness.¹
2. Forced treatment is not best practice for substance use disorder (SUD) and is not effective in improving housing outcomes for people using substances and experiencing homelessness.² In fact, forced treatment contradicts Housing First, widely recognized as an evidence-based practice that improves housing outcomes for people experiencing chronic homelessness.³
3. Encounters with the criminal court system are not an effective pathway to treatment. The diversion court model is limited in its capacity and the complexity of needs it can support, and even among eligible participants, the graduation rate is minimal (15.6% in Toronto).⁴ People who are ineligible or unsuccessful in the program face a criminal record, which creates extreme barriers to housing and employment, further entrenching them in homelessness.⁵

¹ Main Street Project. 2023. 10 Myths About Homelessness. <https://www.mainstreetproject.ca/10-myths-about-homelessness-2/>

² Werb, D., Kamarulzaman, A., Meacham, M. C., Rafful, C., Fischer, B., Strathdee, S. A., & Wood, E. (2016). The effectiveness of compulsory drug treatment: A systematic review. *International Journal of Drug Policy*, 28, 1–9. <https://pubmed.ncbi.nlm.nih.gov/articles/PMC4752879/>

³CMHA. 2020. On Housing First: <https://ontario.cmha.ca/wp-content/uploads/2021/07/CMHA-On-Housing-First-2020-FINAL.pdf>

⁴ Public Safety Canada. 2007. Drug Treatment. <https://www.publicsafety.gc.ca/cnt/rsrscs/pblctns/drgtrtmnt-trnt/drgtrtmnt-trnt-eng.pdf>

⁵ John Howard Society. 2022. No Fixed Address. <https://johnhoward.on.ca/wp-content/uploads/2022/05/No-Fixed-Address-Final-Report.pdf>

4. The experience of homelessness is most dangerous to the people experiencing homelessness themselves. There have been numerous instances of housed residents attacking and harming people living in encampments, including driving cars into tents.⁶
5. People experiencing homelessness are human beings who deserve to have their human rights respected, including a right to shelter in public spaces in the absence of sufficient and accessible shelter spaces. There are insufficient emergency shelter, transitional housing, and subsidized housing units to accommodate all the people currently experiencing homelessness in Waterloo Region as a whole, and Cambridge specifically. The research demonstrates that criminalizing people seeking shelter in public spaces will simply push them into more dangerous situations and make it more difficult for them to access necessary support to exit homelessness.⁷
6. People experiencing substance use disorder (SUD) are human beings who deserve to have their human rights respected, including their right to bodily autonomy. There is no evidence to support involuntary treatment as a meaningful intervention that improves health or housing outcomes for people experiencing SUD.⁸

While we share City Council's concern regarding homelessness, and the appetite for action, we are deeply concerned that the proposed motion is counterproductive. We would be happy to provide further resources to support a health-centered and evidenced-based approach consistent with the extant research in these areas.

Sincerely,

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⁶ Office of the Federal Housing Advocate. 2022. Homeless Encampments in Canada.

<https://www.housingchrc.ca/en/homeless-encampments-in-canada-a-human-rights-crisis>

⁷ Office of the Federal Housing Advocate. 2024. Upholding Dignity and Human Rights: Federal Housing Advocate's Review of Encampments. <https://www.housingchrc.ca/en/publications/upholding-dignity-and-human-rights-federal-housing-advocates-review-homeless>

⁸ Beletsky. 2018. Involuntary treatment for substance use disorder: A misguided response to the opioid crisis <https://www.health.harvard.edu/blog/involuntary-treatment-sud-misguided-response-2018012413180>