

October 7, 2021

Attention: Mayor Kathryn McGarry and Cambridge City Council

### **Re: The Vital Importance of Consumption and Treatment Services in Cambridge**

Regional HIV/AIDS Connection (RHAC) is submitting this letter (and evaluation information) to the Mayor and Cambridge City Council to help support evidence informed decision making related to the proposed Consumption and Treatment Service (CTS) for Cambridge. As Ontario continues mired in a pervasive opioid and overdose death crisis, global pandemic, and homelessness crisis the demonstrated effectiveness of CTS is undisputable. **To date in London Ontario the service has prevented close to 440 overdose deaths**, made hundreds and hundreds of referrals to supports for addiction treatment, primary care, mental health, housing, indigenous services etc. The program has become an integrated part of the care continuum and has filled a vital service gap for marginalized individuals who may not trust or access the care system.

#### **CTS History in London ON**

In February 2018 Regional HIV/AIDS Connection (RHAC) and Middlesex London Health Unit (MLHU) commenced operating the Ontario's first government funded Temporary Overdose Prevention Site (TOPS). While the primary partnership was between MLHU and RHAC, London's Opioid Crisis Working Group supported this effort including London Police Services, Emergency Medical Services. Numerous organizations provided wrap around support to ensure marginalized citizens not only had access to safe injection services but also receive additional support and referrals, linkages to primary care, access to mental health supports and many other services. These wrap around organizations include Addiction Services of Thames Valley, Canadian Mental Health Association, London Cares Homeless Response Service, London Intercommunity Health Center, Southwestern Ontario Aboriginal Health Access Centre, London Intercommunity Health Centre and more.

MLHU conducted a 6-month evaluation of the program which demonstrated that TOPS had a profoundly positive impact in our community. The highlight report (Saving Lives Changing Lives) is included with this correspondence. Further, the program was honoured with the 2018 Pillar Award for Community Collaboration as well as being selected as the recipient for the Ontario Public Health Association's 2018 Community Partner Award.

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The establishment of this program was preceded by a research initiative and followed up with extensive community consultation prior to launching the permanent CTS in our community. In February 2016, the Ontario HIV Treatment Network and RHAC began assessing the feasibility of supervised injection services (SIS) in London. The study was funded by Canadian Institute for Health Research Centre for REACH in HIV/ AIDS. Many area community partners joined the feasibility study advisory group including individuals with lived experience, local physicians, a member of City Council, London InterCommunity Health Centre, London Police Service, Middlesex-London Health Unit, and My Sisters' Place. The feasibility study surveyed 199 people who injected drugs in the past six months. Survey participants were asked about their drug use and injecting behaviours, willingness to use supervised injection services, and preferences for the location of a potential supervised injection site. Findings suggested strong support for SIS in London.

The results of the feasibility study were released to the community in 2017 and set the stage for the next phase of planning to bring CTS to London. MLHU took the lead on initiating a comprehensive Supervised Consumption Facilities (SCF) community consultation process conducted by the Centre for Organizational Effectiveness. The consultation reached out to 9 quadrants across the City of London to be inclusive of anyone who wanted their voice heard during this process. This effort reached 2,145 online survey responses, 334 community consultation participants and 56 focus group participants. The report was released in January 2018 and has informed the longer-term planning process.

RHAC is currently operating a Consumption Treatment Service in London under the program name of Carepoint. As of April 1, 2019, the program received annualized funding and is delivered in collaboration with the local Community Health Centre (London Intercommunity Health Centre) with MLHU acknowledged as a founding partner. The program is currently operating at its temporary location 12 hours per day, 365 days a year including statutory holidays.

RHAC secured an intended permanent long-term location at 446 York Street in London. In December 2018 London City Council approved re-zoning to allow for the CTS to operate permanently at 446 York Street. Council approval was met with a zoning appeal to the Local Planning Appeal Tribunal (LPAT) by area neighbours. In December 2020 the LPAT upheld council's decision to re-zone 446 York Street. Initially the Ministry indicated that they would not support the location however they re-considered this decision following a visit to London from the Minister of Health with Ministry representatives and the results of the zoning appeal. The Mayor of London (Ed Holder) was a strong ally and worked with the Ministry to move the positive decision forward. RHAC is currently working with the Ministry through the capital application process to retro fit the site. We anticipate we will be operating out of the new location by mid-2022.

### **CTS Opposition**

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It is our experience that the need for this vital service has been broadly supported in London and at the same time there has been opposition from some citizens. The deepest opposition has been associated with the location of the service. In London the intended permanent site has received letters of support from a diverse range of voices including members of the business community, both the Public and Catholic school boards and an area day care center among others. The neighbours in the immediate area who launched the zoning appeal continue to be concerned with our pending relocation to 446 York Street. We remain committed to working well with the community and currently we continue to respond in writing to questions / concerns from one area business owner who has indicated they are representing a larger group of neighbours.

Addressing reasonable concerns with neighbours is vital to the process and site operators must be committed to executing a responsive process. Concern themes include loitering and drug related littering, trafficking and increased crime in proximity of site. It is important for the site provider to provide security services in the area to address individuals who may linger in proximity of the site. Further the operator should conduct sweeps to ensure discarded drug use equipment is disposed of in a safe manner. Working collaboratively with police is another important element of the service and RHAC continues to benefit from a supportive police chief and many officers in the field. Beyond the context of any issues that may present in the proximity of the Carepoint program, London, like most communities is experiencing pervasive homelessness caused by poverty and a lack of affordable housing. Issues that may present in the proximity of a CTS are often present across the core of the city of London and even outside the core. These issues were occurring in our community long before the establishment of the site and not necessarily because of the implementation of the site. The service has helped to respond to these issues by providing bringing individuals off the street. Through this service we are providing first time supports and service connections for many of our city's most marginalized individuals.

There are several factors that illustrate the vital need for CTS in communities:

- In 2020 there were 2,426 opioid-related deaths reported, which is a 60 percent increase over the same time in 2019 (1,516 deaths). The trajectory for 2021 suggests we will reach another 60% increase - essentially double the increase of deaths in the past 2 years
- Fentanyl, a high-strength opioid, continues to drive this increase as it is reported to be accountable for 87 percent of deaths. People who use unregulated street drugs may not realize they are consuming fentanyl.
- The deadly health impacts of opioid use and increasingly toxic drug supply require increased access to harm reduction services, including safer opioid supply initiatives, to provide services and support for people who use drugs in Ontario.
- The Canadian Centre on Substance Use and Addiction reported that people who use substances report a loss of social connection and supports, as well as an increase in isolation, fear, and anxiety because of the COVID-19 pandemic. Compared to the general population, they are more vulnerable to the health impacts of COVID-19 and the hardships of physical distancing

- CTS are 100% effective in preventing on site overdose death
- CTS provide a vital link / referral mechanism to the care continuum for marginalized individuals
- CTS reduce the incidents of public injection and discarded equipment
- CTS reduce the risk of HIV/HCV transmission and other blood borne illnesses

In closing, I hope you find this information helpful as you move forward to support the implementation of a CTS in Cambridge. This is a lifesaving service, and it is my perspective that the expansion of CTS and other harm reduction measures are a moral imperative given the current social conditions impacting our communities most marginalized individuals.

Please do not hesitate to be in touch should you have any questions.

Respectfully,



Brian Lester  
Executive Director