



May 3, 2020

To whom it may concern,

We recognize that newly available motel and other indoor space for unsheltered individuals is welcome news for many and has the potential to increase personal wellness, access to support, and COVID 19 protection for people we serve. Indeed, several people we serve are already benefitting from the provision of motel sites after being homeless and without access to basic facilities for some time. However, I would also like to report on critical factors which have not been addressed this week and continue to undermine the potential for this investment to have its intended effects with regards to housing for unsheltered individuals.

- 1.) Although it is in development, a robust harm reduction and overdose prevention plan has not been implemented to date in the region in the newly acquired motel sites. Individuals who have experienced overdose or are at risk of overdose are being referred to motel rooms without harm reduction and overdose prevention services being in place at the sites they are moving to. This will result in increased likelihood of fatal overdose behind closed doors.
- 2.) Some individuals who wish to access pandemic prescribing have not yet been able to successfully do so. Blockages and delay in access to pandemic prescribing must be addressed immediately alongside referrals to motel room to reduce harms of drug and alcohol withdrawal and overdose. Of considerable concern is that residents of motel rooms who might benefit from pandemic prescribing continue to be forced to access the illicit supply in the community placing them at higher risk of overdose and thoroughly undermining any potential benefit associated with having a private space in which to physically distance.
- 3.) We are supporting residents of motel sites who do not yet have access to predictable on-site nursing care at these sites.
- 4.) The proposed motel sites have yet to secure 24/7 staffing. Staffing in some sites has not reached ratios which allow the staff to effectively respond to emergencies. Staffing challenges existed prior to the April 25<sup>th</sup> public safety order due to the pandemic, and have been heightened by the timeline associated with this order. It is not possible for us as an organization to fulfill our new proposed support contracts by May 9<sup>th</sup> because funders have not confirmed service contracts,

and even if they do in the coming days, they will not be signed in time for us to give reasonable notice to staff. This puts us as an organization in the awkward position of trying to staff new positions even before we know the funding is confirmed.

- 5.) Some new motel sites are not yet able to fully meet nutritional needs of residents, which also undermines the stated intent of supporting physical distancing.
- 6.) There has been a lack of communication and involvement of direct support staff and potential residents of the new sites in the plans that have been unveiled this week. This has contributed to misinformation, confusion and inadequate support planning for individuals who are being asked to move. In some cases, existing support relationships are disrupted because health and social service providers arrive at camps to see that individuals they are in support relationships with are no longer there, but they do not know where they have gone, and there is no way to easily access this information while maintaining service confidentiality.
- 7.) Self determination is fundamental well-being and individuals must be presented with options including the option to continue living outside. It is inevitable that some people will remain outside both because there are not enough units available and because the range of choices will not meet the diversity of needs. With the emphasis on preparing for new motel sites in response to the public safety order, there has been little time to discuss what services and supports will remain for those outside the new motel sites including access to food and supervised injection services previously available in the downtown area and outreach services to other sites in the region.
- 8.) Forced displacement is neither evidence based nor humane, and police presence at sites combined with fencing to restrict movements increases harm by disrupting service relationships, forcing premature exit from sites, while reinforcing the harmful notion that socially and economically marginalized individuals need to be contained and controlled. Fencing also arguably introduces new risks at these sites because it complicates emergency egress.
- 9.) Even with sustained effort, it is very unlikely that the needed service, support and referral infrastructure can be realized in time for may 9<sup>th</sup> and this imposition places undue stress on those making the transition as well as the support and planning staff at a time when we are collectively facing interacting stressors related to the pandemic. It is reasonable to flex the deadline as the situation develops and lead this process with care and compassion rather than the specter of force.

Sincerely,



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