

Edmonton Coalition on Housing and Homelessness
Minutes of the Regular Meeting of January 10th, 2017 @ Communitas

Attended by: Susan Watson, Roberto Petersen, David Berger, Laura Murphy, John Whittaker, John Kolkman, Heather Curtis, Jeannette Wright, Karen Turner, Riley Lendrum, Ed Jones, Jim Gurnett, Gladis Molina, Gail Haynes, Lynn Hannley, Cecilia Blasetti, Chris Sikora, Erica Schoen, Petra Schulz, Ann Goldblatt, Shelley Williams, Jeremiah Bašurić, Ron MacLellan

COMMENCE: 10:05 AM

1. Introduction and Updates

2. Review and approval of minutes: After review of both the November and December minutes, Roberto moved to approve the **November minutes** and John W. seconded, while Lynn moved to approve the **December minutes** with Jeremiah seconding. Both motions passed.

3. Presentation – Access to Medically Supervised Injection Services Edmonton (AMSIS Edmonton)

Presented by Shelley Williams, Ann Goldblatt, Karen Turner, Petra Schulz, Erica Schoen, Dr. Chris Sikora and Cecilia Blasetti.

BACKGROUND

On September 30th, 2011 the Supreme Court of Canada issued a decision directly ordering the federal Minister of Health to restore for Insite (then North America's only legal supervised injection site, in Vancouver) the exemption that protects it from prosecution under the *Controlled Drugs and Substances Act*. In writing the decision, Chief Justice Beverley McLachlin noted that, while the federal government's right to enforce the criminal law across the land should be protected, this enforcement must be carried out in a manner that does not infringe on the individual's rights enshrined in the *Canadian Charter of Rights and Freedoms*. In its unanimous (9-0) decision the Supreme Court ruled that by withdrawing Insite's exemption, the federal government was violating Section 7 of the Charter, to wit: "Everyone has the right to life, liberty and security of the person and the right not to be deprived thereof except in accordance with the principles of fundamental justice." In response the Stephen Harper Conservative government drafted and in March 2015 passed Bill C-2 in which were laid out over two dozen criteria that would need to be met before an exemption would be granted. In its submission to the Senate legal committee the Canadian Nurses Association observed that "[d]espite the evidence and the direction given by the Supreme Court, Bill C-2 seeks to impose unnecessary and excessive barriers to establishing supervised injection facilities. Bill C-2 appears to be founded on ideology rather than evidence, since it views safe injection sites as enabling and normalizing drug use in communities rather than acknowledging them as a vital health service for vulnerable populations."¹ AMSIS staff reported that the Liberal government is looking at trimming those criteria down to the five that were broadly suggested by the Supreme Court. Despite the possibility that a more practical law might replace Bill C-2, AMSIS Edmonton has been working hard since January 2012 to cover all of the currently-mandated legal requirements necessary for the issuance of an exemption permitting the operation of a supervised consumption site. At the end of October 2016 the organization had their grant application approved and they are now in a position to keep working.

¹ © The Canadian Press. Posted: Jun 23, 2015 8:57 AM ET <http://www.cbc.ca/m/touch/politics/story/1.3123962>

AMSIS Edmonton takes a health and safety perspective on the work they do. Their primary client focus is on individuals who are often homeless and who use (especially injection drugs) alone. Harm reduction is currently acknowledged as an effective strategy in limiting the negative consequences of drug use and other related risk factors for both the drug users and their community.

- Medically-supervised injection reduces the instances of public injecting.
 - Public injecting is connected with major increases in all known risks of IV drug use: overdose; HepC/HIV transmission; bacterial infections of skin, bloodstream, heart valves and joints.
- Prevention makes solid economic sense. For example, the lifetime treatment cost for one individual case of HIV is over \$210, 000.
- A 2014 survey of drug users in Edmonton found that 290 of 320 people injected drugs and 80% of those injecting did so in public.
- In the 6 months prior to this survey, 72% of respondents reported some experience of homelessness. (AMSIS Edmonton staff report that “[m]ultiple studies have established a direct link between unstable housing and public injecting.”)
- 29% reported following unsafe syringe disposal practices (N.B. That is a whole lot of syringes: According to Streetworks, 1.2 million needles were distributed 2 years ago; 1.6 million needles last year while the projection for this year is 2 million needles.)
- Harm-reduction practices are good for everybody. There is a lot of evidence to indicate that bad things that were previously believed to result from these practices don’t actually happen while evidence also indicates that these safe-use practices actually reduce the incidence of negative consequences.

- Karen spoke about her lived experience and noted that the chance to safely return used needles anonymously would encourage more users to do so, thus reducing the public hazard of used needle debris.
- Petra lost her son to a fentanyl overdose and she spoke of her experience dealing with this tragedy. Having become familiar with the concept of harm reduction, Petra described it from a mother’s perspective as “keeping people alive until they can make a better decision at a later date.”
 - Petra noted that the Insite clinic in Vancouver has had many, many overdoses none of which resulted in a single death.

AMSIS is developing an integrated model for the supervised consumption clinic, one that will blend three existing organizations to provide wrap-around social support, primary health care and treatment. Onsite patient access will be through the Royal Alexandra Hospital.

Community engagement has been a primary focus of AMSIS Edmonton. The end of February/early March will see a major information sharing event involving business people, residents, Community Leagues and the City’s Office of Public Engagement.

4. **Policy And Communications Committee:** Work continues on contributing to the update of the Municipal Government Act
5. **Membership Engagement Committee:** New committee struck to focus on developing stronger membership relations.

6. Committee Reports:

- Policy and Communications Committee:
 - PAC continues to contribute to the update of the Municipal Government Act.
- Membership Engagement Committee:
New committee struck to focus on developing stronger membership relations.