

^a RESOURCE CENTRE

for
DRUG USERS
in the DOWNTOWN EASTSIDE

**Report and
Recommendations**

**Resource Centre
Steering Committee**



To: Health Canada and the Vancouver/Richmond Health Board
From: Resource Centre Steering Committee
Date: October 21, 1998
Subject: Report and Recommendations for Establishing
The Resource Centre for Drug Users in the Downtown Eastside

Issue:

In January 1998, the Vancouver/Richmond Health Board approved a planning process to establish a Resource Centre. At the same time, Health Canada approved a similar proposal and agreed to jointly support the establishment of a resource centre for drug users in the Downtown Eastside. In June 1998, Health Canada and the Health Board appointed a Steering Committee to develop recommendations for the planning and development of the Resource Centre.

This report presents issues raised through an extensive community and stakeholder consultation process, and provides the recommendations of the Steering Committee for the proposed Resource Centre, based on these community discussions.

Recommendations:

The Resource Centre Steering Committee has developed a set of recommendations that reflect its discussions with diverse communities of the Downtown Eastside, Strathcona, Chinatown and Gastown. The Steering Committee's recommendations are grouped into nine separate categories and are presented for your approval, as follows:

1. Detox and Treatment

The Resource Centre Steering Committee recommends that:

- ❑ *The Ministry for Children and Families' Alcohol and Drug Services open the proposed Detox and Sobering Centre immediately, in partnership with the Vancouver/Richmond Health Board and the City of Vancouver.*
- ❑ *The Provincial Government immediately transfer Alcohol and Drug Services in this health region, from the Ministry for Children and Families to the Vancouver/Richmond Health Board.*

2. Inter-Governmental Partnership

The Resource Centre Steering Committee recommends that:

An agreement for a formal partnership to establish the Resource Centre and support its continued operations be reached between Health Canada, the Vancouver/Richmond Health Board and the City of Vancouver.

3. Guiding Vision and Principles

The Resource Centre Steering Committee recommends that:

The Guiding Vision and Principles (pp. 6-7 and Appendix 3), which emphasize principles of self-help and community development, where drug users take a leading role in the governance, planning and operations of the Resource Centre.

4. Governance Structure

The Resource Centre Steering Committee recommends that

- *An existing organization in the DTES (Organization X) be sought through an RFP process to undertake the Resource Centre's transition into full operation. The relationship between the Resource Centre and Organization X (Appendix 4) will be detailed in a written agreement.*
- *The Steering Committee's mandate be extended to March 31, 1999 to oversee the following activities for approval by Principal Partners:*
 - *Develop an RFP, review proposals and propose Organization X,*
 - *Draft written agreement with Organization X,*
 - *Ensure appointment of the board of directors*
 - *Oversee the initial implementation phase of the Resource Centre.*

5. Location

The Resource Centre Steering Committee recommends that

Principal Partners immediately review and finalize plans to lease or purchase a property to house the Resource Centre, based on the recommendations to be presented by the Steering Committee.

6. Security Concerns

The Resource Centre Steering Committee recommends that:

- ❑ *Clear and simple rules be adopted prohibiting drug use, drug dealing and violence in the Resource Centre, prior to its opening.*
- ❑ *Drug users be involved in developing policies and rules, and refining them as necessary.*
- ❑ *The site design should include an indoor courtyard, for people to gather within the Resource Centre and smoke cigarettes without violating the City's smoking bylaw.*
- ❑ *A neighbourhood liaison committee be established to develop a "good neighbour agreement" and address concerns and issues raised by the Resource Centre's neighbours.*

7. Phased Implementation

The Resource Centre Steering Committee recommends that:

The plan of implementation outline in the report (Appendix 6) be adopted in principle, to guide the process of establishing the Resource Centre and its transition to full operations.

8. Resources for Self-Help

The Resource Centre Steering Committee recommends that:

During various stages of the Resource Centre's development through to its full operation, provide access to employment training opportunities to ensure drug users can be employed at the Resource Centre.

9. Evaluation

The Resource Centre Steering Committee recommends that:

The evaluation of the Resource Centre be based on goals and principles outlined in the report (pp. 14-15), within the primary framework of improving the health status of individuals, the local and the larger communities.

The Research and Evaluation Division of the Vancouver/Richmond Health Board be designated the responsibility for on-going evaluation of direct or indirect outcomes associated with the Resource Centre, based on goals and principles outlined in the report (pp. 14-15).

Resource Centre Steering Committee

Report and Recommendations for Establishing The Proposed Resource Centre in the Downtown Eastside

1. Introduction

The purpose of this report is to convey recommendations of the Resource Centre Steering Committee regarding the proposed Resource Centre for drug users in the Downtown Eastside, to Health Canada and the Vancouver/Richmond Health Board. The report is based on functions assigned to the Steering Committee in its Terms of Reference (Appendix 1). The recommendations are based on the Steering Committee's consideration of issues raised through the community consultation process.

2. Background

By March 1997, epidemiological data indicated an alarming prevalence of HIV infections among injection drug users in the Downtown Eastside (27%). In response, the Vancouver/ Richmond Health Board declared an emergency public health crisis in the Downtown Eastside and approved a plan to improve community health services in the area. Health Canada responded also by contributing \$1 million to address deteriorating conditions in the Downtown Eastside.

The need for a place of refuge for drug users was first identified at a community gathering at the Oppenheimer Park, about a year ago. Since then, this need has been reiterated again and again. Drug users say they are shunned from places of gathering in the community. They say they have no place to go where they are accepted and treated with respect. Dr. Parry emphasized the same point in her report on HIV/AIDS and Injection Drug Use in the Downtown Eastside - *"Something to eat, a place to sleep and someone who gives a damn"*. This report provided the basis for the declared public health emergency in the area.

In January 1998, the Health Board approved a process to establish a resource centre. At the same time, Health Canada approved a similar proposal and agreed to support the joint development of a resource centre for drug users in the Downtown Eastside. The proposed Resource Centre was seen as an important factor in stabilizing the lives of drug users, whose lives are in constant turmoil because of their addiction and a persistent societal attitude that forces them to the margins of society.

A discussion paper prepared for Health Canada recorded the conception of the proposed Resource Centre as a place of refuge for drug users to take care of their basic needs, regain their sense of worth and dignity and get linked to resources in the community through outreach and advocacy. Based on principles of harm-reduction, self-help and community development, the Resource Centre was viewed as one component of a comprehensive and well-integrated network of health care and social support services required to assist people with drug addiction problems.

It may be noted that the proposed Resource Centre has a different purpose than the proposal before the Health Board regarding the establishment of safe injection rooms.

3. The Steering Committee

Health Canada and the Health Board agreed that a community advisory structure was the best vehicle to develop the conceptual plan of the Resource Centre. The direct involvement of DTES residents, particularly drug users, was considered critical to the success of this process.

In June 1998, Health Canada and the Health Board appointed a Steering Committee to develop recommendations for the Resource Centre. The Steering Committee is made up of 20 members, including people who work in the community, people with business interests in Gastown and Chinatown, and residents of the area including drug users.

Robyn Woodward, Vice-Chair of the Health Board was appointed as Chairperson for the Steering Committee. Bud Osborn, Minister of Health's appointee from the Downtown Eastside is another member of the Health Board on the Steering Committee. Individuals with current or past history of drug addiction compose half the membership of the Steering Committee. Libby Davies, Member of Parliament for Vancouver East is a member of the Steering Committee in an ex-officio capacity (Appendix 2).

4. The Terms of Reference

The mandate, duties and responsibilities of the Steering Committee were outlined in its Terms of Reference (Appendix 1) which include:

- Review current needs and community services to define the purpose and functions of the proposed Resource Centre
- Organize a broad community and stakeholder consultation process
- Ensure active participation of drug users on the Steering Committee
- Develop recommendations to guide the implementation plan.

5. Community Consultation

The Steering Committee was mandated to undertake a broad community and stakeholder consultation to ensure community input in the development of its recommendations. The Steering Committee designed a targeted approach to ensure key stakeholders were consulted in the Downtown Eastside, Chinatown, Strathcona and Gastown. This entailed sending letters to twenty-three community organizations that were identified as key stakeholders, requesting to meet and discuss their concerns and perspectives on the proposed Resource Centre.

The Steering Committee met with the following organizations:

AIDS Vancouver	Gastown Business Improvement Society
Carnegie Community Centre	La Boussole
Chinese Merchants Association	Lookout Emergency Shelter
Community Health Committee #2	Persons with AIDS Society
DERA	Portland Hotel Society
DEYAS	Strathcona Coalition
Downtown Vancouver Association	Strathcona Mental Health Team
Dusk to Dawn	Urban Core Workers
First United Church	Vancouver Native Health

Most groups we met with have indicated their support for the Resource Centre as a worthwhile project and offered their willingness to support its development. Constructive suggestions on issues that are of particular concern to the community were offered. The Steering Committee has scheduled meetings with the Strathcona School, Strathcona Residents Association, Strathcona Community Centre, Positive Women's Network and the Grandview Woodland Area Services Team.

Two of the three groups in the business community who met with the Steering Committee generally did not consider the Resource Centre a well-justified initiative. One group argued for resources to be allocated for detox and treatment instead. The other group was opposed to the Resource Centre on the grounds that any services would draw more drug users into the area. The Chinese Merchants Association expressed its support for the proposed Resource Centre in an appropriate location.

The Gastown Homeowners Association and RayCam Co-operative Centre declined to meet with the Steering Committee.

A number of groups raised questions regarding the appropriateness of the Resource Centre for youth. The Steering Committee discussed this issue with Dawn to Dusk and DEYAS. The Steering Committee was urged to keep the doors of the Resource Centre open to youth, while ensuring their immediate access to appropriate services. Further discussions with youth service organizations, Ministry for Children and Families and the

Ministry of Attorney General are necessary to determine the best way the Resource Centre could help support youth, without 'entrenching' them in the Downtown Eastside.

In addition to meeting with key stakeholders, the Steering Committee produced an information pamphlet, defining the proposed Resource Centre and inviting community input. Over 4,000 of these pamphlet were distributed throughout the Downtown Eastside and beyond in the Lower Mainland.

Finally, an Information Exhibit on the Resource Centre was held at Gallery Gachet in the Downtown Eastside/Gastown on October 14, 1998. Over 2000 invitations to groups and individuals, posters, notices in major languages, public service announcements and advertisements in local media invited the public to attend the Exhibit. The purpose of this event was to exhibit the work of the Steering Committee and to provide a forum for community input and discussion. Members of the Steering Committee were at hand to discuss individual and community concerns with over 200 people who attended the Exhibit and were very encouraged by the response.

4. Discussion and Recommendations

The following sections provide details of the Steering Committee's discussions with community stakeholders on various issues. These discussions have provided the basis for the Steering Committee's recommendations.

6.1 Detox and Addiction Treatment

Lack of adequate detox facilities and effective treatment programs for people recovering from drug addiction is a central concern of diverse communities of the Downtown Eastside, Gastown, Strathcona and Chinatown. The Alcohol and Drug Services' failure to help implement the proposed detox and "Sobering Centre" is incomprehensible to almost everyone in the Downtown Eastside.

While this frustration is reflected in the perspectives that were shared with the Steering Committee, we found a surprising level of broad-based support for the Resource Centre. Most groups expressed support for the Resource Centre as a positive and worthwhile initiative in the Downtown Eastside with direct benefits for drug users, and offered constructive suggestions to address some of the more contentious issues.

Some groups questioned the ability of the Resource Centre to function as a bridge for drug users without adequate detox or appropriate addiction treatment services in place. Others were concerned that the Resource Centre might use resources that should be used for detox and treatment.

The Steering Committee shares the concern regarding the lack of detox and addiction treatment services. In our opinion, it is not a choice between the Resource Centre and having adequate detox and treatment. They are both essential components of an expanded and well-integrated network of programs and resources that would include housing, counseling, outreach, community policing, parenting support, detox, treatment, recovery, rehabilitation, education, training and employment. The expansion and improved coordination of existing services into an effective continuum of care is necessary to address Vancouver's first public health emergency.

The Steering Committee has been urged to advocate for the expansion of detox and treatment services. The transfer of Provincial Government's Alcohol and Drug Services to the Regional Health Authorities was also urged by many community organizations. This is viewed as a significant step towards the development of the continuum of care for people with addiction problems in the Downtown Eastside.

The Resource Centre Steering Committee recommends that the Vancouver/Richmond Health Board urge that:

- ***The Ministry for Children and Families' Alcohol and Drug Services open the proposed Detox and Sobering Centre immediately, in partnership with the Vancouver/Richmond Health Board and the City of Vancouver.***
- ***The Provincial Government immediately transfer Alcohol and Drug Services in this health region, from the Ministry for Children and Families to the Vancouver/Richmond Health Board.***

6.2 Inter-Governmental Partnership

Virtually every report on the Downtown Eastside emphasizes the need for coordinated government action. In our consultation with the Downtown Eastside community, it was repeatedly stated that the success of the Resource Centre is contingent on securing adequate and stable financial support from all three levels of government. It was noted that such funding is required to ensure this pilot project can benefit other Canadian cities experiencing serious problems associated with drug addiction.

For example, our experience here may show that other regions in the Lower Mainland could benefit from a similar undertaking, which could be facilitated by our experience here. This extends to major Canadian cities like Toronto, Montreal and Halifax where drug-related problems are escalating.

The Vancouver/Richmond Health Board and Health Canada are clearly committed to the establishment of the Resource Centre and its continued operations. Two recent reports of the City of Vancouver raise the need to "consider the City's role in helping to develop the proposed Resource Centre" when the recommendations are put forward (*Building a Common Future* and *A Program of Strategic Action for the DTES*).

The Resource Centre Steering Committee recommends that:

An agreement for a formal partnership to establish the Resource Centre and support its continued operations be reached between Health Canada, the Vancouver/Richmond Health Board and the City of Vancouver.

6.3 Vision and Guiding Principles

The following statement of Vision and Principles is proposed to guide the development and operations of the Resource Centre:

The Resource Centre is a safe and welcoming place for drug-users, as well as non-users, from all cultural and ethnic backgrounds. It is a place of sanctuary and support, mutual respect and acceptance. It is a place that will promote individual and community health, and in so doing it will contribute to the reduction of personal and social harm that attends drug use.

The Resource Centre is a place of healing. It is a place where every person is considered a full and equal member of our common human family. It is a place to inspire every person to better meet their responsibilities to themselves, their loved ones and to society.

The Resource Centre is a refuge from the streets and the drug scene in the Downtown Eastside. It is the explicit desire of drug users and others in the DTES community to create and maintain an environment tolerant of drug users and their addiction to drugs, but not of ingestion or dealing of drugs in or around the Resource Centre.

- *For the individual user, it is a place of refuge, support, shelter and access to personal care amenities. It is a place to regain a sense of worth and dignity.*
- *For the users in the DTES, it is a place of empowerment and organization to advocate responsibly within the wider community on issues of community health and development.*
- ☐ *For the user community, it is place of social connection, peer support and counseling; a link to health and social resources; a place for education, training and social integration.*

- ❑ *For the health and service agencies, it is one link in the larger chain of public and private resources that must be forged through co-operation and common action.*
- ❑ *For the whole community of the DTES, it is a place for positively impacting the health of the area and diminishing harmful social effects of drug use. It is place to promote understanding of drug-related issues, build bridges between users and non-users through cooperative engagement and activities.*

The Resource Centre will function as a bridge, linking drug users to community services.

Based on principles of self-help and community development, the Resource Centre will be a place where drug users can take a leading role in the governance, planning and operations of the Centre. Since personal empowerment is a key determinant of human health, this is essential to the health-promoting, harm-reducing role of the Resource Centre.

The Resource Centre Steering Committee recommends that:

The above statement be adopted, in principle, as the Guiding Vision and Principles for the Resource Centre (Appendix 3).

6.4 The Governance Structure

The Steering Committee considered a number of different models of governance for the Resource Centre, ranging from functioning directly under the Health Board structure, to forming an independent society. It is clear the Resource Centre must develop a strong 'self-identity'. At the same time, it would greatly benefit from the expertise and support of an existing organization. This organization should have a strong standing in the Downtown Eastside, a stable constitution, and experience working with drug users.

It is therefore proposed that the Resource Centre begins its operations as a semi-autonomous entity, under the oversight of an existing organization in the Downtown Eastside, "Organization X" (Appendix 4). It is proposed that Organization X be sought through a Request for Proposals (RFP) process, defined by the Steering Committee and approved by Principal Partners. The relationship between the Resource Centre and Organization X would be written into an agreement for a specified period of time.

The Steering Committee believes it can play an important role in overseeing the RFP process, selection of the best proposal and the preparation of the written agreement defining the relationship between the Resource Centre and Organization X, with approval from Principal Partners.

The Resource Centre Steering Committee recommends that

- ❑ *An existing organization in the DTES be sought through an RFP process to undertake the Resource Centre's transition into full operation. The Resource Centre's relationship with Organization X (Appendix 4) will be detailed in a written agreement.*
- ❑ *The Steering Committee's mandate be extended to March 31, 1999 to oversee the following activities for approval by Principal Partners:*
 - *Develop an RFP, review proposals and propose Organization X,*
 - *Prepare written agreement with Organization X,*
 - *Ensure appointment of the board of directors*
 - *Oversee the initial implementation phase of the Resource Centre.*

6.5 Location and Component Plan

Community concerns regarding the location of the Resource Centre have been raised through the consultation process. The Steering Committee has carefully considered this issue. A central consideration is that the success of the Resource Centre depends on its ability to become an extension of life for the drug-using population in the Downtown Eastside, close to where they live and where they gather (Main and Hastings).

Community concerns regarding safety, security and development are also important. Therefore, the selection of the location for the Resource Centre must be guided by carefully balancing these sometimes competing concerns.

Influenced by the consultation process, the Steering Committee defined the boundaries for the site search as Campbell Avenue to the east, Hastings Street to the south, Columbia Street to the west and Waterfront to the north.

Focus group discussions with users identified the components of the Resource Centre (Appendix 5). A component plan was drawn which helped determine the space required for the Resource Centre as 5000-7000 square feet. A realtor was contracted to provide the Steering Committee with a list of suitable locations.

The Resource Centre Steering Committee recommends that

Principal Partners immediately review and finalize plans to lease or purchase a property to house the Resource Centre, based on the recommendations to be presented by the Steering Committee.

6.6 Security Concerns

There is broad agreement that security concerns regarding the Resource Centre require both extreme sensitivity and pragmatism. Sound policies and processes should be developed, prior to opening of the Resource Centre and refined as necessary. The involvement of drug users in developing rules and protocols to prevent drug use, drug dealing and violence within the Resource Centre is considered to be critical to their successful enforcement. The Steering Committee received advice from the community on practical measures to help maintain a sense of safety and security in the Resource Centre and in its immediate external surroundings. The need for setting clear and simple rules and consequences, and to communicate those clearly has been urged.

An important issue raised during the community consultation process is the possibility of drug use at the Resource Centre. We have discussed this actively with community stakeholders, particularly service providers, to seek their advice and to learn from their experience working with drug users in the Downtown Eastside. We have also discussed this issue with drug users on a number of occasions. Drug users emphasized the fact that the Resource Centre is a response to their expressed need for a refuge away from the streets and the drug scene, and that they are all too aware that the consequences of this being otherwise would be felt most severely by them.

Another concern raised is people congregating outside the Resource Centre. This occurs presently around other facilities in the Downtown Eastside. It is important to ensure every effort is made to prevent and minimize any unreasonable impact of the Resource Centre in its immediate neighbourhood. An indoor courtyard is now a central element of the design to create a space for people to come in and "hang out" within the Resource Centre, and smoke cigarettes without violating the City's smoking bylaw. A neighbourhood liaison committee has been proposed for the Resource Centre to help develop a "good neighbour agreement" for the Resource Centre and to deal with concerns raised by the Resource Centre's neighbours.

The Resource Centre Steering Committee recommends that:

- ❑ ***Clear and simple rules be adopted prohibiting drug use, drug dealing and violence in the Resource Centre, prior to its opening.***
- ❑ ***Drug users be involved in developing policies and rules, and refining them as necessary.***
- ❑ ***The site design should include an indoor courtyard, for people to gather and smoke cigarettes without violating the City's smoking bylaw.***
- ❑ ***A neighbourhood liaison committee be established to develop a "good neighbour agreement" and address concerns and issues raised by the Resource Centre's neighbours.***

6.7 Phased Implementation

The Steering Committee was strongly urged to consider a "phased-in", "staged" or "step-wise" approach in setting up of the Resource Centre. It is thought that the development of the Resource Centre and its programs requires time, flexibility and solid judgement to refine based on experience and progress. An implementation plan has been developed with specific timelines and actions associated with each phase of the Resource Centre's development into its full operations.

Implementation is urged by many groups to begin as soon as possible. Some even suggested that rather than waiting for a permanent site, an interim space be designated for the Resource Centre to start its operations.

The Resource Centre Steering Committee recommends that:

The implementation (Appendix 6) be adopted in principle, to guide the process of establishing the Resource Centre and its transition to full operations.

6.8 Resources for Self-Help

Another important issue raised by drug users, is their need to have access to employment training opportunities. This is seen to be especially crucial during the initial preparatory stages, to ensure they can work at the Resource Centre when it opens.

Drug users believe the self-help model promoted for the Resource Centre can provide the basis for greater employment opportunities for them within the Downtown Eastside community. Examples of drug users working in addiction services and programs exist in European cities, in Toronto and in the US.

The self-help model advocated for the Resource Centre emphasizes the underlying principle that human and financial resources must be matched to help build capacities among drug users to gain greater control in their lives by becoming socially integrated. The ability to contribute socially and economically would create a sense of purpose, the lack of which is conveyed by Dr. Penny Parry in her report, "Something to eat, a place to sleep and someone who gives a damn".

The Resource Centre Steering Committee recommends that:

During various stages of the Resource Centre's development through to its full operation, provide access to employment training opportunities to ensure drug users can be employed at the Resource Centre.

6.8 Research and Evaluation

The Steering Committee believes that research and evaluation should be part an on-going feature of the Resource Centre and integrated into its development and progress. This is particularly important as the Resource Centre is seen as a pilot initiative with implications for other regions in B.C. and cities across Canada experiencing a growing drug-related problem.

Research and evaluation of the Resource Centre is critical also because of its stated intent to involve users in community development activities. This proposed feature of the Resource Centre is of interest to users, researchers and professionals working with drug users in Europe, Australia and the United States.

The Steering Committee believes the research and evaluation framework for the Resource Centre should be established early on in its development and operations.

It is also that the Research and Evaluation division of the Vancouver/ Richmond Health Board be designated the responsibility for the on-going evaluation and research of the Resource Centre with input from the Resource Centre's Board of Directors.

Goals

The following goals are drawn from the Guiding Vision and Principles, which provide the basis for articulating outcomes that may, either directly or indirectly, be associated with the Resource Centre:

- ❑ Provide basic facilities for drug users in meeting their daily needs.
- ❑ Increase neighbourhood safety and stability.
- ❑ Contribute to lowering the rates of HIV and Hepatitis C infections.
- ❑ Increase opportunities for training and employment, as a vehicle for drug users to give back to the community.
- ❑ Provide an effective model of user-run resource centres for other Canadian cities where there are serious drug-related problems.
- ❑ Given the paucity of resources, operate in an efficient, cost-effective and frugal manner.
- ❑ Promote harm-reduction, as the underlying set of principles that would provide the vision for the development of an expanded and coordinated network of addiction treatment services.

Principles

The following principles are proposed as a framework for evaluation and research of the Resource Centre:

- ❑ The evaluation of the Resource Centre should be participatory in design, process and analysis.
- ❑ Evaluation should be integrated into the operations of the Resource Centre, so that it can continuously feed into improvements of the Centre.
- ❑ The Resource Centre should not be made the passive object of an 'external' or 'independent' evaluation. Rather, it should take ownership of the evaluation process as a means of registering its own evolution.
- ❑ The evaluation process should be designed such that community concerns raised through the consultation process (increase in concentration of drug users, attracting drug users from other areas of the Lower Mainland, public, etc.) may be monitored and evaluated.
- ❑ The evaluation process should be primarily qualitative to capture actual life stories told by drug users to be woven together into an evolving Resource Centre narrative that both traces the past and shapes the future.

The Resource Centre Steering Committee recommends that:

The evaluation of the Resource Centre be based on the above goals and principles, within the framework of improving the health status of individuals, the local and the larger communities.

The Research and Evaluation Division of the Vancouver/Richmond Health Board be designated the responsibility for on-going evaluation of direct or indirect outcomes associated with the Resource Centre, based on above goals and principles.

Appendices

Appendix 1	Terms of Reference for the Steering Committee
Appendix 2	Membership of the Steering Committee
Appendix 3	Guiding Vision and Principles
Appendix 4	Governance Structure
Appendix 5	Component Plan
Appendix 6	Implementation Plan

Appendix 1

Terms of Reference

Resource Centre Steering Committee

(July 22, 1998)

Background

In September 1997, the Vancouver/Richmond Health Board declared an emergency public health crisis in the Downtown Eastside due to the high prevalence of HIV/AIDS among injection drug users and approved a plan of action supported by close to \$5 million from the Ministry of Health and the Vancouver/Richmond Health Board. Health Canada responded also by contributing \$1 million to help address this crisis.

Informal consultations with residents of the DTES, particularly injection drug users, indicated a strong need for a resource centre.

In January 1998, the Vancouver/Richmond Health Board (VRHB) approved a motion to develop a plan for the establishment of a resource centre for drug users in the Downtown Eastside (DTES). Health Canada indicated its interest in supporting the development of this proposed resource centre, based on principles of self-help, harm reduction and community development. The purpose of the resource centre is to provide a safe and supportive environment for drug users living in the DTES to gather, meet their basic needs, feel supported in normalizing and transforming their lives, and be linked to health and social support services in the community.

This resource centre is viewed as a component of a well-integrated network or continuum of health care and social services that needs to be developed in Vancouver to support and treat people with addiction problems. The establishment of the proposed resource centre will be supported by a joint partnership between Health Canada and the Vancouver/Richmond Health Board.

A community advisory structure has been appointed by Health Canada and the Vancouver/Richmond Health Board, as the vehicle that would oversee the development and planning of the resource centre. The direct involvement of DTES residents, particularly injection drug users, in this process is seen to be critical to the successful development of this undertaking.

1. Mandate

The Resource Centre Steering Committee is accountable to and will act in an advisory capacity for the Vancouver/Richmond Health Board and Health Canada. The Committee will recommend the initial components of a comprehensive plan for the establishment of the resource centre with clear goals and objectives. In addition, the Committee will recommend principles that would guide the operations of the resource centre, and an evaluation framework to ensure its continued development. The proposed resource centre is seen as a component of an integrated network of health and social services to support drug users in the Downtown Eastside and reduce their social isolation.

2. Duties and Responsibilities

The Community Steering Committee will:

- 2.1 Synthesise and consolidate current community assessments and priorities by utilizing recent reports, studies and data in developing a plan for the establishment of the resource centre;
- 2.2 Undertake a broad community and stakeholder consultation for the development of its recommendations;
- 2.3 Ensure the development of peer-support structures among injection drug users to ensure their meaningful participation in this process;
- 2.4 Promote a public dialogue on the need for strategies that aim to reduce the community, social and personal harms associated with injection drug use;
- 2.5 Provide regular reports and recommendations to Health Canada and the Vancouver/Richmond Health Board;
- 2.6 Build the capacity within the Committee to carry out relevant duties and responsibilities that may be assigned to the Committee, from time to time, by Health Canada and the VRHB;
- 2.7 Recommend by October 22, 1998, clear goals and objectives for the Centre, the specific components for the Centre, a plan of action to guide the implementation and operations of the resource centre, a possible location for the Centre and an evaluation framework.

3. Composition

The Community Steering Committee for the resource centre is composed of 20 members from diverse backgrounds and perspectives, who live and work in the Downtown Eastside. The members of the Community Steering Committee for the resource centre are expected to agree with the mandate, duties and responsibilities of the Committee, as outlined in this document, and work with good will towards achieving its stated outcomes.

The work of the Steering Committee will be supported by Health Canada and the Vancouver/Richmond Health Board staff. Expert advice will be available to the Committee, by groups and individuals with expertise in epidemiology, health promotion, HIV/AIDS prevention and treatment, addiction treatment.

4. Operational Protocol

4.1 Frequency of Meetings

The Committee shall meet at the call of the Chair in order to develop initial plans, community consultation and final recommendations for the resource centre.

4.2 Minutes

Minutes are recorded by staff and approved by the Steering Committee prior to circulation.

4.3 Agenda and Supporting Documents

Agenda items and relevant attachments may be generated by any members of the Committee. The agenda and relevant documents will be circulated one week in advance of the meetings, when possible.

4.4 Decision-Making

Consensus is the preferred method of decision-making. However, when consensus is not achieved, the Committee may choose to defer the decision, or agree that a simple majority will carry decisions. Decisions will be communicated by the Chair to Health Canada and the Vancouver/ Richmond Health Board.

4.5 Term

Members of the Committee are appointed for a term which will be completed with the delivery of their recommendations (October 1998).

4.6 Spokespersons

The representatives of the Vancouver/Richmond Health Board (Robyn Woodward and Bud Osborn) are appointed by the Steering Committee to respond to all media enquiries.

Appendix 2

Members of the Resource Centre Steering Committee

Robyn Woodward is a fourth generation 'Vancouverite' and deeply committed to the health and well-being of diverse communities in Vancouver. Robyn was nominated to the Health Board in 1994 by MOSAIC, a well-established immigrant settlement services agency. She has served as the vice-chair of the Vancouver/Richmond Health Board for two consecutive terms. Robyn is an underwater archeologist and has worked in Europe and the Caribbean for many years. She serves on the Boards of Directors of the Vancouver Maritime Museum and the Underwater Archeology Society of B.C. Robyn Woodward is appointed by the Health Board to the Community Steering Committee, and will server as its Chair.

Bud Osborn is a poet, an ex-addict and a community activist in the DTES. He was appointed to the Vancouver/Richmond Health Board in 1997 as the Downtown Eastside representative. He serves on the Boards of Directors of the Carnegie Community Centre and the Downtown Eastside Youth Activities Society. He also teaches a writer's workshop at the Gathering Place. Bud has advocated for the integration of harm-reduction principles into health and addiction treatment services. He believes drug users' participation is crucial to the successful design and implementation of such programmes. Bud Osborne is appointed by the Vancouver/Richmond Health Board as one of its two representatives on the Community Steering Committee.

Bryan Alleyne is a resident of the Downtown Eastside and lives in a single-room occupancy (SRO) hotel. For the past eight months, he has become an active member of the Vancouver Area Network of Drug Users (VANDU) and is keen to contribute to the development of the resource centre. Brian came to Vancouver six years ago and has worked here on construction crews specialising in the removal of asbestos. Prior to coming to Vancouver, he worked for six years at a home for people with schizophrenia. Brian has a 19 year old son and hope to develop the support he needs to change his life through his involvement with VANDU and the resource centre.

Ronald Barrios came to Canada 12 years ago from Nicaragua. He is a survivor of torture and lost his family in a bomb explosion during the civil war. Ronald is a member of Amanecer Unido, a Latin American drug and alcohol user support group. He is interested in participating in the development of the Resource Centre because he feels it is important to help users from other cultures. He wants to ensure that the people most affected will have a voice in the process.

Roger Bayley has worked as an engineer in Gastown since 1984. He is a member of the Board of Directors of the Gastown Business Improvement Society and for the past 2½ years, as President of the Society, he has focused on building positive relationships between the three diverse communities of Downtown Eastside, Chinatown and Gastown. He believes in engaging these communities in a problem-solving process that focuses on issues of housing, employment, infrastructure and support system renewal and crime control. Roger Bayley believes "addiction recovery and harm control remain at the heart of resolving the diverse and demanding issues confronting us all" and hopes to contribute to this process in a constructive manner.

Libby Davies is an elected member of Parliament for the Vancouver East, representing residents of the Downtown Eastside, Strathcona, Mount Pleasant, Grandview Woodland and Hastings Sunrise. Libby Davies came to Vancouver in 1969 and was first elected to Vancouver City Council in 1982, where she served for five consecutive terms, until 1993. Libby is the founding member of the Downtown Eastside Residents Association (DERA) in 1973 and has since worked actively for the development of affordable housing. Libby is an outspoken advocate for social equality and progressive social change. She has accepted the invitation to serve on the Steering Committee, as an ex-officio member.

David Diewert is a teacher of religious studies at the Regent College of the University of British Columbia. He lives in the Grandview Woodlands and is appointed to the Steering Committee as a representative of the Community Health Committee of the Health Board in the Eastend. He has advocated for social justice issues for many years, particularly in the Downtown Eastside.

Ken Doern is an Inspector with the Vancouver Police Department in charge of the Specialized Investigation Section. He has been a member of the Department for 26 years and has been involved in a number of Provincial and Municipal consultative committees and community boards. These include, the B.C. Association of Police Affiliated Victim-Witness Services, the Vancouver Crime Prevention Society, the Vancouver Youth Detoxification Program, Police Gay/Lesbian Liaison and the B.C. AIDS Network. He was recently re-appointed Chairperson of the Criminology Advisory Committee at Kwantlen University College, and is a member of the Vancouver Alcohol and Drug Management Advisory Committee.

Marilyn Dumont is a writer and a teacher. Her poetry has been published in many literary journals across Canada. In 1996, she won the Gerald Lampert Award for her book of poetry. Marilyn teaches at the Vancouver Native Education Centre and the Kwantlen University College. Her interest in working towards the development of the resource centre is rooted in her work at the Native Education Centre, teaching men and women of Aboriginal heritage who struggle with alcohol and drug addiction. Marilyn is Métis and lives in a Native Housing development in the Grandview Woodlands area.

Melissa Eror has been a member of the Vancouver Area Network of Drug Users (VANDU), since its inception. She has been involved in advocating for health promotion and public health actions on issues that affect the health status of injection drug users. Melissa has been a member of an advisory group for both Colleges of Physicians and Surgeons and Pharmacists, working on the expansion of the methadone substitution program. She copes with severe health problems while at the same time, she parents her two teenage daughters. Melissa did not complete her undergraduate studies in history and political science, but has developed a keen interest in arts since.

Al Favell is a community member of the Downtown Eastside Action Plan Coordinating Committee, established by the Vancouver/Richmond Health Board to help coordinate service in the area. Al is of Aboriginal heritage and has recently completed a course in addiction counselling. Given his own life experience, Al hopes to contribute to the development of a different approach to treating people with addiction problems.

Wolfgang Forstner came to Vancouver in 1968 and has worked extensively in the hospitality industry, the film industry and in music promotion. As a recreational drug user, he found himself with a substance abuse problem in his mid-thirties. Some years later, the relationship between his addiction problem and mental illness was finally understood. Wolfgang believes the current approach to the treatment of addiction has not worked and it is time to 'do the right thing'. He has two children with whom he spends time with. He is interested in design and does woodwork.

Craig Gabriel has lived in a Downtown Eastside single room occupancy hotel for the past two and a half years. As well as volunteering for the Food Bank, he was a musician and played around the Lower Mainland for eight years. Craig has been involved with VANDU since its inception and wants to do whatever he can to help users and the homeless for as long as he can. He believes the resource centre will be very important for a lot of people who have talents that are going to waste needlessly.

Marg Green is a long time resident of Strathcona and is a member of the Strathcona Residents Association. She works as the Director of the Downtown Eastside Senior's Centre and contributes to the community by training area residents in community problem-solving and development. Margaret has worked on human rights and community development projects through international development agencies. Marg's understanding of issues that affect injection drug users comes from her involvement on the Portland Hotel Society Board. Marg wants to contribute to the development of the resource centre as a measure that would involve injection drug users in improving the conditions of their lives.

Alayne Keough came to Vancouver (from Nova Scotia) in the early 1970s. While raising her children, she became involved with parents' groups and was instrumental in setting up the food programs in the inner-city schools in Vancouver. Alayne has advocated for affordable housing in the area and has contributed to social policies through her involvement with the Pacific Group for Policy Alternatives. Alayne works with Downtown Eastside residents and understands the need for harm-reduction programs, such as those which have been developed in Switzerland.

Charles Lee emigrated to Canada with his parents in 1967 and made Strathcona their home. As a young man, he worked in the single room occupancy hotels and as a farm labourer in the Fraser Valley. In 1976, he graduated with a degree in pharmacy and began working in the Downtown Eastside. Charles is a strong advocate of a radical changes in addiction treatment services that would reduce the individual, community and social harms associated with drug use. Charles is the Executive Director of the Chinese Merchants' Association in Chinatown, and he is looking forward to working on the Steering Committee.

Barb Leskiw is an Aboriginal woman with a profound understand of the issues that affect people in the Downtown Eastside through her own life experience and a long struggle with drug addiction. She came to Vancouver in 1989 and lives in a single-room occupancy hotel in the 100 block of East Hastings. Barb copes with severe health problems and grieves the loss of many whom she has loved. She wants to work towards building the resource centre in the Downtown Eastside, because "people have nowhere to go down there."

Ron McKay comes from Prince Rupert and is of Aboriginal heritage. He has lived in Vancouver since August 1997. Ron has been struggling with alcohol and drug addiction for the past 15 years. In January of this year he joined VANDU when a friend encouraged him to and has been volunteering on a regular basis ever since. Before Ron came to Vancouver, he also volunteered with Native elders and youth groups through the Native Friendship Centre in Prince Rupert.

Muggs Sigurgeirson has lived in Strathcona for the past 22 years and has witnessed the changes in the community. Currently, she is the president of the Carnegie Community Centre Association and is also involved with the Strathcona Community Gardens Society. Muggs worked actively in securing social housing at the old Woodward's store and remains a member of the Woodward's Housing Coop.

Brenda Wells is an Aboriginal woman from Alberta. Six years ago, she was tested positive for HIV and became involved with the Edmonton AIDS Network in providing 'post-test' peer support to people in similar circumstances as her own. Brenda travelled across Canada before she came to Vancouver with her son, ten months ago. Brenda is struggling to regain the custody of her son who is now apprehended. She plans to train as an AIDS counsellor and is interested in contributing to the development of the resource centre.

the Resource Centre: Guiding Vision & Principles

For Individual user:

a place of refuge,
support, shelter; &
access to personal
health care
amenities

For the community:

a place of social
connection; peer
support and counselling;
a link to health & social
resources; a place
for education
and training

Resource Centre

For user population in the DTES:

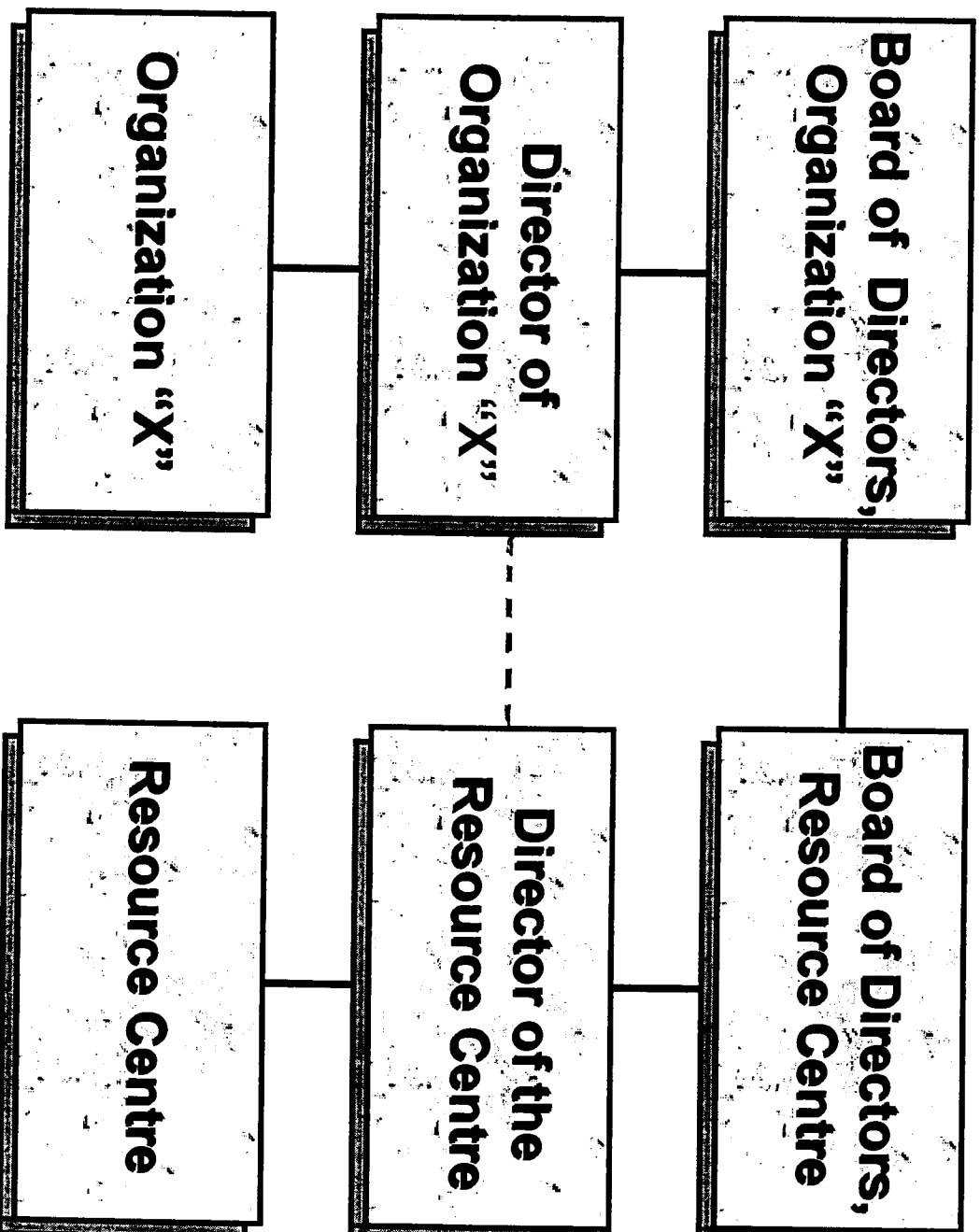
a place of empowerment
& organization to advocate
responsibly within the wider
community on issues of
community development
and health initiatives

For the whole DTES community:

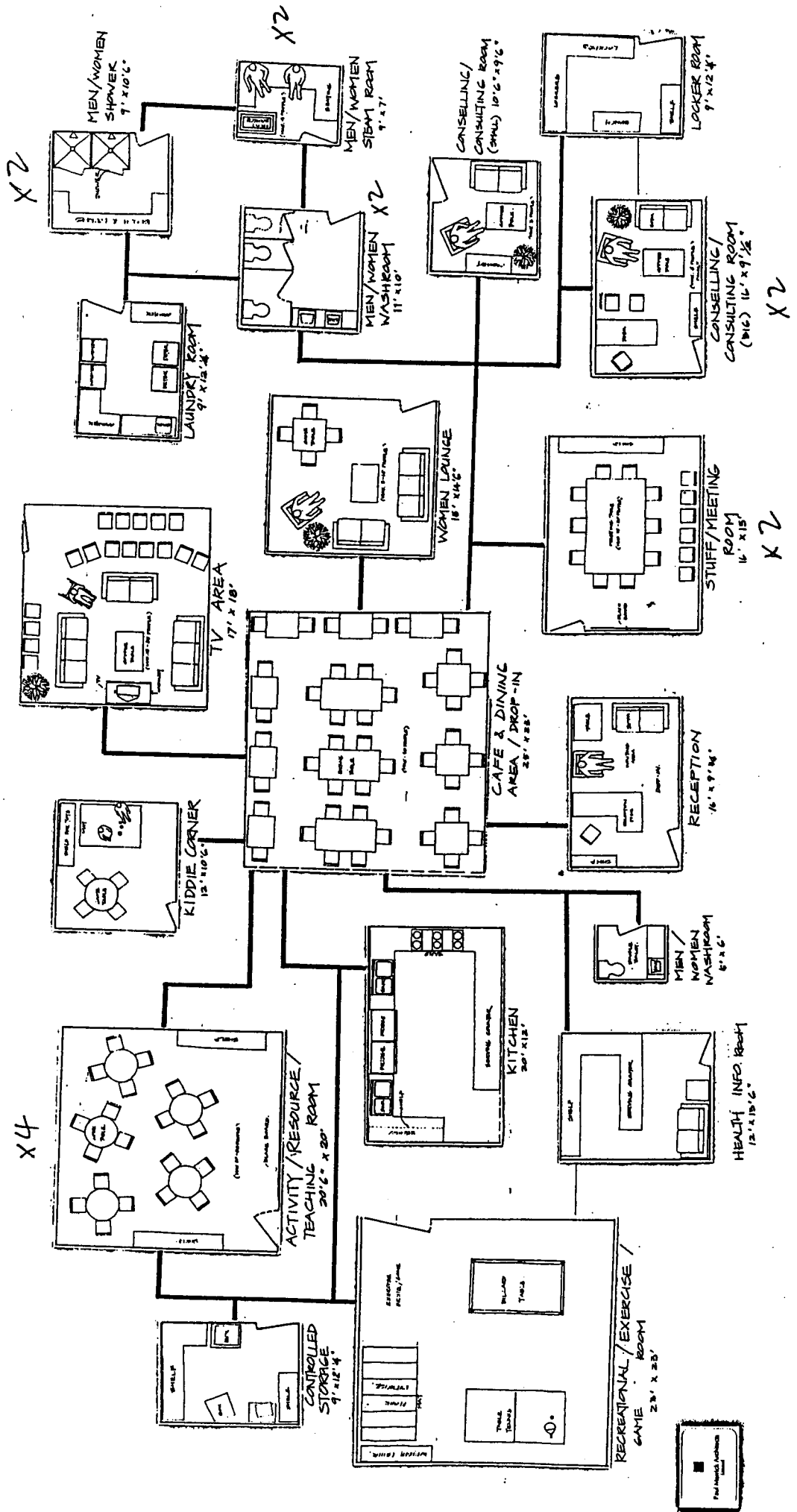
a place for positively
impacting health of the area
and diminishing harmful
social effects of drug use;
understanding of drug issues;
building bridges between
users and non-users
through cooperative
engagement

Since personal empowerment and community involvement are key determinants of human health, it is essential that drug users themselves take a leading role in every aspect of decision-making, operations and planning of the Resource Centre. This is fundamental to the health-promoting and harm-reducing role of the Resource Centre.

Governance Structure of the Resource Centre



It is recommended that a well-established organization with a strong standing in the community be sought to oversee the establishment of the Resource Centre under the terms and conditions supported by it and the Board of Directors of the proposed Resource Centre. This relationship should be based on understanding and support for the aims and objectives of the Resource Centre.



Appendix 6

Implementation Plan

Implement'n. Stage	Major Activity	Est'd. Time	By Whom	Outcome
1. Approval and Commitment Provide funding to establish and provide support for continued operations of the RC by Principal Partners: - Health Board - Health Canada - City of Vancouver	Review, Discussion and Approval of the Steering Committee Recommendations.	22/10/98 - 12/11/98	Principal Partners	Partnership agreement to establish and support the continued operations of the Resource Centre Funding Commitment Extension of Steering Committee's mandate
2. Pre-Operation	Oversee the RFP process & selection of "Organization X" Ensure access to employment training for drug users Hire the director and management team Finalize selection of the building Propose new Board Renovations and furnishings to open Ensure employment for drug users during preparation phase	13/11/98- 31/12/98 31/12/98 - 31/12/99 01/01/99 - 31/03/99 31/03/99 31/03/99 01/06/99 01/06/99	Steering Committee Steering Committee & Organization X Steering Committee & Organization X New Board & Organization X	Approvals by Principal Partners Approval by Principal Partners

	Develop and finalize budget, organize initial programs and protocols			
3. Initial Operation	<p>Open for limited hrs. and Extend hours.</p> <p>Ensure drug users are employed at the Resource Centre</p> <p>Operate kitchen/café, one meal & coffee showers, laundry, etc</p> <p>Develop programs & activities with users</p> <p>Evaluation</p>	01/06/99 - 31/12/99	New Board & Organization X	
4. Extend to full 24-hour Operations	<p>Extend to 24- hour operations, expand kitchen/café</p> <p>Design programs and clinics with users and other agencies on mobile basis at RC</p> <p>Ensure drug users are employed at the Resource Centre</p> <p>Evaluation</p>	01/10/99 - 31/05/00	New Board & Organization X	Improvement in drug users health status