

COUNCIL MEMBERS' MOTION

8. Enabling a Recovery Community Centre in the City of Vancouver

Submitted by: Councillor Bligh

WHEREAS

1. On April 14, 2016, then Provincial Health Officer, Dr. Perry Kendall, declared a public health emergency under the *Public Health Act* due to the significant rise in opioid-related overdose deaths reported in B.C.;
2. The City of Vancouver has likewise signalled a state of emergency with respect to the unregulated, contaminated drug supply and the associated opioid-related overdose deaths. In July 2019, Vancouver City Council approved the Safe Supply Statement, created in collaboration with the Vancouver Community Action Team, whereby the City will share with other government partners, including the Government of Canada, and advocate for access to a safe, regulated drug supply;
3. Under the *Public Health Act*, real-time information can be collected, reported, and analyzed across the health system in a public health emergency, to immediately identify where risks are arising and to take proactive action to warn and protect people who use drugs;
4. Almost 7,000 British Columbians have died from the Province's poisoned, unregulated drug supply since the overdose public health emergency was declared on April 14, 2016. Moreover, subsequent to the declaration of the COVID-19 public health emergency on March 17, 2020, the rate of overdose events and illicit drug toxicity deaths have increased and surpassed historic highs;
5. In May 2017, the Federation of Canadian Municipalities' (FCM) Big-City Mayors' Caucus launched a Task Force on the Opioid Crisis to share best practices and save lives. The Task Force put forward a series of comprehensive recommendations to the federal government for a coordinated, nation-wide action by all orders of government, including action on all four pillars of Canada's drug strategy: i.e., harm reduction, treatment, prevention, and enforcement;
6. Among the recommendations of the FCM Mayors' Task Force on the Opioid Crisis, the recommendations related to treatment include a recommendation for zero delays for getting into comprehensive treatment programs;
7. 2021 was the deadliest year for illicit-drug overdoses in B.C., with the highest ever number of deaths in a single month recorded in the month of October (201 deaths) and 1,782 deaths in the first ten months of 2021, surpassing the 1,765 deaths recorded in all of 2020;
8. It is abundantly clear that urgent action continues to be required on multiple levels to prevent further deaths from overdoses and the poisoned drug supply.

This urgent action includes advocating for a safe supply: But it also calls for stronger and more effective supports for people seeking treatment or recovery options specific to their chosen path to wellness, including supports for those persons who choose harm reduction or who are not ready to make the recovery step;

9. There are many known gaps in the system when it comes to treatment options, and people who are ready for recovery typically face barriers to accessing the right treatment option at the right moment in time. Treatment options are not always available in-the-moment when a person is ready to pursue recovery, and this often leads to relapses, additional overdoses and deaths, and a missed opportunity;
10. Among the most persistent treatment gap is the gap between the moment in time that a person is ready to enter into recovery and the corresponding availability of an appropriate treatment path for them to access. Experts point to this gap as perhaps the most crucial gap in the system that needs to be addressed in order for more people to find their path to recovery in ways that reflect autonomy, choice, and real time response;
11. The Recovery Coach model has demonstrated enormous potential to successfully fill the gap between the time that a person is ready to enter into recovery and the time that the most effective treatment path and option is available for them to pursue. This gap period is frequently cited as the stumbling block to successful recovery. This includes those whose path the recovery includes access to a safe supply;
12. The Recovery Coach model is based on trained paraprofessionals who use theoretically sound, evidence-based knowledge and skills to empower people with substance use or addiction issues to enable them to overcome barriers and build “recovery capital” to enter recovery and progress along their chosen journeys. Recovery Coaches bridge gaps in the system, connecting people to the types of treatment and support they need, and linking them with resources and recovery support networks in their communities;
13. The Recovery Coach model has great potential for our city in the face of the overdose crisis and poisoned drug supply, and Vancouver Coastal Health has identified the need for a non-medicalized Recovery Community Center that can offer people in-the-moment access to recovery coaches and help-centered approaches; and
14. The City of Vancouver has infrastructure resources and jurisdictional powers such as zoning, as well as access to City-owned sites and buildings, and the ability to expedite and otherwise enable facility improvements and permitting that could serve to support the prompt establishment of a Recovery Community Center in the city. It is therefore incumbent upon the City and City Council to make these resources available and to use these jurisdictional powers to prevent overdose and opioid-related deaths and better support individual paths to recovery.

THEREFORE BE IT RESOLVED

- A. THAT Council endorse the need to establish a Recovery Community Centre space in the city and thereby direct staff to work with Vancouver Coastal Health and other relevant partners to enable the rapid establishment of a Recovery Community Centre in the city in as timely a manner as possible given the dire, life-critical nature of the public health emergency faced by our city and its people;

FURTHER THAT Council specifically direct and empower the City's Development, Buildings, and Licensing staff, Real Estate and Facilities Management Services staff, and the City's Arts, Culture, and Community Services staff to work in close coordination to identify and facilitate any zoning and/or related permitting requirements and/or adjustments that may be required, as well as any necessary site improvements requiring consideration, on an expedited basis to achieve the rapid establishment of a Recovery Community Center in the city, including explorations of the potential use and/or access to appropriate City-owned sites.

- B. THAT, pursuant to the direction to staff in clause "A" above – staff shall advise Council of any actions required on the part of Council that may be necessary to accomplish the Recovery Community Center objectives noted in clause "A" above.
- C. THAT Council direct staff to report back with recommendations for policies, protocols, and procedures by the start of Q4 that would assign the highest priority to, and otherwise expedite, permit applications and approval processes that specifically relate to life-critical facilities and/or amenities that respond to the overdose crisis and related actions, with the aim being to ensure that the establishment of facilities and/or amenities of this nature are not delayed or otherwise bottlenecked behind by applications and/or approval processes that do not, by their inherent nature, respond directly to the life-critical needs of the overdose crisis.

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