

To the City Clerk:

Please add my comments to the agenda for the December 6, 2021 at 9:30 a.m. on [Item HL32.4](#) – Urgent Support for Opioid/Fentanyl Crisis in Eglinton Avenue West Area,

I understand that my comments and the personal information in this email will form part of the public record and that my name will be listed as a correspondent on agendas and minutes of City Council or its committees. Also, I understand that agendas and minutes are posted online and my name may be indexed by search engines like Google.

**Comments:**

Board of Health

Agenda Item HL 32.4

December 6, 2021

To the Members of the Board of Health,

Drug poisoning fatalities must end now.

My name is Melody and I am a nurse from Street Health working in the Downtown East Collaborative Safer Opioid Supply Program in Toronto. Street Health has been offering health and social services to homeless and street-involved people at the corner of Dundas and Sherbourne for over 35 years. Our staff are frontline witnesses and responders to the complex and sometimes unimaginable levels of suffering and hopelessness of the thousands of people who are homeless in Toronto.

In June 2021 I teamed up with a local artist and highly respected community member Adrian Hayles. We began an outreach project to the Eglinton/Oakwood neighborhood, focusing our efforts on Reggae Lane. Adrian has spent many hours in Reggae Lane painting the murals and he saw the needs of the people who exist there. Adrian understands the importance of feeling pride in your community and the area you live in. We decided to combine art and nursing in the spirit of community support and developing self-worth for all community members. We began a project to build a safer space for community members that experience marginalization, discrimination, racism and violence on a daily basis. It was clear from the very first outreach trip with our wagon and backpack that this area was in great need of many street outreach supports including nursing, harm reduction supplies, mental health counselling, housing, and overdose prevention. We were warmly welcomed by the community and have assisted with all the above-mentioned services including multiple overdose reversals which occurred during our outreach visits.

We are here today to support the idea for the immediate opening of a permanent storefront location to provide services to community members in the Reggae Lane area, and we believe strongly that this location needs to be on the south side of Eglinton Ave West between Oakwood and Marlee Ave. Having a permanent location with a full staff complement and flexible hours will greatly benefit all community members as it could provide access to the following:

- Harm reduction supplies
- Hygiene supplies

- Connection to nurses for primary health care
- Point of care testing and other health care screening
- Connection to a Safer Supply Program
- Mental health support in times of crisis
- Housing/shelter support
- An accessible all gender bathroom
- Community phone
- Overdose prevention site
- Peer work opportunities
- Community engagement and education

The list goes on and on. Ultimately, this space is needed and could provide a critical part missing for this community. They are at risk of being pushed out by gentrification and punished through othering and discrimination.

The missing piece is connection.

The community members we have developed rapport with care about each other and they deserve connection to community and to resources to keep their community healthy. They are reversing overdoses EVERY DAY in the laneway and they are asking for support.

Which brings me to the topic of the drug poisoning crisis and I feel some clarity is needed here. This is not a FENTANYL crisis, it is a POISONING crisis.

I started my career in nursing in 2016. I wanted to specialize in harm reduction. I wanted to support people to use drugs in a safe environment free from judgement and discrimination. But the drug poisoning crisis has been my focus and now, after 5 years, I can say my nursing specialty is in overdose prevention and homelessness. The OPS/CTS/SCS sites were never meant to be the overdose mills! This was never meant to become a nursing specialty! THIS IS A CRISIS.

We needed drugs to be decriminalized for personal use many MANY years ago. Now we not only need decriminalization to happen, we also need a way to regulate and distribute a supply of drugs that is free from contamination. It's a toxic, tainted drug supply that is and always has been causing harm. We need to get to a place where people who want to use drugs can get safe, reliable access to their drug of choice. We should now be at a place that realizes people use drugs for all sorts of reasons. We should also be at a place where people can trust the drugs they obtain are in fact the drugs they wanted. For example, if someone obtains cocaine, it should be cocaine; not cocaine with fentanyl. Or if they obtain fentanyl, it should be fentanyl; not fentanyl with benzodiazapines and lavamisole.

There are ways to achieve this, and decriminalization is good start. This is a constantly evolving crisis with no end in sight. We continue to lose people as a direct result of policy inaction and the racist, colonial and oppressive laws which have directly led to this toxic drug supply.

We are calling on the City to not wait for other levels of government to step in and provide solutions when, in fact, there are many lifesaving interventions that can be enacted without them.

We call on the City of Toronto to immediately:

1. Establish a permanent, storefront health clinic in the Eglinton Avenue West area to provide urgently needed harm reduction, homelessness, health care, and outreach support.
2. Ensure that people who use drugs are the primary stakeholder and expert group on all matters related to developing programming for the permanent storefront health clinic in the Eglinton West area.
3. Immediately implement full-scale harm reduction supports and open overdose prevention sites in the Eglinton West area.
4. Enact drug decriminalization by urgently requesting a Section 56 exemption from the federal government for the City of Toronto. Toronto's Medical Officer of Health, Dr. Eileen de Villa, recommended decriminalization 3 years ago, with no action from the City since then. There is no time for another working group while people continue to die.
5. Immediately develop regulations for decriminalized drugs so they can be distributed safely and free from contaminants like benzodiazepines, lisdexamfetamine and the constantly evolving supply of experimental research chemicals. Decriminalization is not enough given the current toxic drug supply. Drug poisoning fatalities must end now.
6. Ensure that people who use drugs are the primary stakeholder and expert group on all matters related to decriminalization in the City of Toronto;
7. Immediately reinstate funding for the Overdose Prevention Sites operated by Street Health and St. Stephen's Community House, given the urgent and ongoing need for these lifesaving health services
8. provide consistent and ongoing funding to Safer Supply Programs currently operating in Toronto and allocate funding to expand these programs. Currently the Federal Government funding for the extended pilot projects will expire in March 2023 with no plan for ongoing care for clients currently enrolled in the DEC-SOS Collaborative Program
9. Immediately fund the implementation of a spectrum of safer supply options, including listing injectable opioid agonist treatment (iOAT) medication, high dose injectable hydromorphone, oxycodone, fentanyl tablets (Fenora) and fentanyl patches on the Ontario Drug Benefit Formulary so SOS programs in Ontario can provide a similar range of options as those already in affect in British Columbia.
10. Ensure mandatory and comprehensive overdose response training is provided to all staff (including security, employment agency and relief staff)
11. Implement regular and rigorous accountability measures across all City-funded shelters, respites, and physical distancing sites to ensure overdose preparedness.

We demand that these measures be urgently adopted by this government as continued inaction will inevitably lead to more preventable deaths. We cannot allow this level of death and grief to be normalized.

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