

As we brace for the predicted impact of the delta variant, Street Health staff have been reflecting on what we have seen and learnt during COVID. We hope these lessons may continue to guide our work to end this pandemic and the homelessness crisis.



## #1 – Encampments – People have nowhere to go

“People who are forced from encampments may have access to a city housing worker, however, where are housing options for someone who relies on income supports, like OW or ODSP, and has a housing budget of \$390 per month?” comments Kelly White, Overdose Prevention Site Coordinator. “Even during the pandemic, when some rental prices dropped, this didn’t create opportunities for people who are marginalized and also often face further obstacles including stigma and discrimination.”

Now, more than ever, we need all levels of government to commit to creating affordable, supported and safe housing options.

## #2 – Information Sharing is the Key

Street Health staff regularly need to advocate on behalf of clients. This role also extends to making deputations for city planning/budgeting and, since the arrival of COVID, sharing information about our services to enable other communities to expand the supports they provide. Our ID (identification) Safe program has been sharing the service structure and activities with groups as far away as Dryden, Kenora, Keewatin and most recently groups in New Brunswick. “These communities also struggle with homelessness and issues related to systemic barriers to health,” said Narinder Ohri, ID Safe Coordinator. Narinder is pleased to share the learnings from Street Health’s 35 years of experience, enabling other agencies to build programs and offer similar services. “Our Zoom calls have brought together agencies and communities that are much more isolated,” highlights Ohri. “At Street Health, we know how much clients rely on having a safe location for their mail delivery. It helps people cope with the numerous challenges they are experiencing and their regular contact with a staff member who is always looking at ways to meet each client’s needs is a vital part of building their wellbeing.”

## #3 – In-Person Supports are Critical

During COVID many people relied on technology to reduce isolation, work from home and maintain some healthcare services. It is vital, however, that we not forget that real-time, in-person interactions are often the key for peoples’ wellbeing and an essential part of providing service for those who are marginalized.

The role of Outreach Workers has never been more important. “For those who are marginalized and lack access to technology, face-to-face contact is essential,” notes Alan de Pass, a Harm Reduction Worker. “We are now training and supporting Embedded Peer Workers (people who bring lived experience to their work) at the socially distanced shelter hotels. We have recruited from those staying at these facilities and provided the training they needed to become advocates for harm reduction and health focused approaches. These peers work with us to provide knowledgeable one-on-one support. This path provides valuable work experience and excellent community support for those who are placed at these locations, many of who have lost their previous support networks and continue to deal with housing uncertainty and multiple pressing priorities.”

## #4 – Community is our Super Power

“We can help clients deal with issues like vaccine hesitancy and grief because our drop-in workers are peers who offer their own experiences and encourage those who are facing similar circumstances,” states Chaudhry Ahmed, Harm Reduction Drop-in Projects Coordinator. That connection, along with having the health bus, staffed with outreach workers and nurses, supports barrier-free access for both mental and physical concerns. The Harm Reduction Team has also been providing one-on-one accompaniment to vaccine locations. “Sometimes, just having an advocate by your side will make the difference in people’s ability to cope in this changing environment.”

## #5 – Maintaining Momentum will require Everyone’s Effort

“Out of all of the losses and tragedy of COVID, we have seen some momentum to address issues like homelessness,” states Jon Graham, Harm Reduction Worker. “We are continuing to use these techniques, tools and expertise to build these efforts.”

Enhanced and new services available at Street Health include:

- Renewed federal government support for the Safer Opioid Supply program,
- Focused harm reduction drop-ins for non-binary people, trans women and cis women,
- Dedicated identification outreach to those in encampments across the city,
- Added housing support workers in partnership with the St. Clare’s project,
- Grief and loss supports for drop-in members and volunteers.

The weeks and months ahead may bring additional and different challenges, but drawing on our lessons learned and on how we have adapted our services we are confident that we can continue to prioritize the wellbeing of our clients.

## CHRRT leads to The Doorway



The Community Harm Reduction Response Team (CHRRT) was a three-year initiative (April 2018 to March 2021) to promote harm reduction services across Toronto. It provided training and employment for individuals with lived experience to become Harm Reduction Workers in their communities.

Street Health led the program development, training and participant mentorship bringing together ten agencies, ranging from large Community Health Centres and multi-service providers to population specific organizations, with the benefit of strengthened networks and collaborations among the agencies.

CHRRT highlights include:

- 1010 shifts completed by the Harm Reduction Workers,
- 20,426 people accessing services,
- over 40% of the services offered were outreach based,
- close to 2,000 referrals for food, and 1,500 for health care.

### Community Health Centres:

1. Parkdale Queen West Community Health Centre
2. Regent Park Community Health Centre

### Multi-service community agencies:

3. Agincourt Community Services Association
4. Dixon Hall
5. Fred Victor
6. Sistering

### Population specific organizations:

7. Maggie's
8. PASAN
9. Ve'ahavta
10. Street Health (lead agency)

The project also documented the complexity that people with lived experience face when assuming staff roles within community-based agencies.

*They're navigating complicated things — how do you talk to your manager about these things in a safe way? They're concerned with professionalism: there's a fear of raising personal and substance use issues. It takes confidence to say: "I'm having a difficult time right now and these are the supports I might need".* (Project Partner)

The project identified many benefits of hiring people with lived experience:

### For service users:

Deepened personal connections and supports,  
Seeing themselves in different roles and their expertise being valued.

### For Harm Reduction Workers:

Opportunities for personal growth and employment,  
Enhanced skills, expertise, and work experience.

### For Agencies:

Improved knowledge about community issues, and drug trends,  
Enhanced reach of services,  
Promotion of a just and collaborative workplace culture.

All of this information is captured in a planning manual and is available to any group working to create employment for people with lived experience.

Street Health has now begun a two year project that builds on these CHRRT outcomes. **The Doorway** is a small partnership project that focuses on building the harm reduction capacity among community members. We are excited by the continuity and potential this new project will create!

Sadly, the project also reflected the tragic circumstances that have been unfolding across the country for people who use drugs, and for those who love them. Four CHRRT workers died over the course of the project; **Mona, Nieam, Kyle** and **Harold**. Each death had a profound affect on many communities, as they were each harm reduction leaders who brought many insights and talents to the work.

## Idea, Initiative and Inspiration — Kudos to Our Supporters

After witnessing the poison drug crisis while in Vancouver, Art Therapist Phuong Nguyen knew she wanted to do more to raise awareness about the location of and need for lifesaving overdose prevention services in Toronto. She connected with Street Health with the idea to design and sell t-shirts to support Street Health's Overdose Prevention Site (OPS). Since this site was defunded by the Ontario Government in 2019, private donations and community fundraising efforts have been essential to maintaining the site. Phuong connected with OPS worker Verity Eaton, an artist who has created many designs used in OPS signage and banners. Thanks to Phuong's idea, initiative and inspiration a collaboration was formed with two t-shirt designs marketed in August. Demand for these designs resulted in the sell-out of the initial run in hours and 300 t-shirts sold — raising more than \$5,000 for the OPS!

