

September 9, 2024

Re: Regional Municipality of Waterloo Community and Health Services Committee
Agenda Item 8.1 (Consumption and Treatment Services)

Chair Erb, members of Community and Health Services Committee,

The Waterloo Region Drug Action Team (WR DAT) is supportive of Councillor Deuschmann's motion to the province requesting continued funding for the only CTS in Waterloo Region. While the province and area MPPs of the governing party declines to respect municipal council decisions, the wisdom of community, and the bounty of evidence that does not support their *opinion*, the WR DAT encourages the Committee to continue providing *evidence-based* policy advice to the province.

The WR DAT notes that the province's CTS "review" reports did not recommend defunding CTS sites. We note that there is near unanimous consent about the benefits of maintaining if not expanding consumption services, from Ontario's Chief Medical Officer of Health to the Ontario Association of Chiefs of Police to the Registered Nurses Association of Ontario and many, many more entities.

That the number of people left for dead since this provincial government was first elected in 2018 exceeds the entire population of Wilmot inspires no confidence in opinion-based policy making. Defunding Kitchener's CTS is certain, contrary to claims by the Health Minister, to *directly* lead to more deaths of local residents, among other harms. We suspect the additional burden on emergency services and agency staff is universally unwelcome, and unnecessarily expensive, to no one's benefit. The safety of the neighbourhood in which the Kitchener CTS is located is very much at-risk.

Supervised consumption services were never intended to resolve the drug poisoning tragedy, despite outlandish claims by crusading opponents. Literally no one has ever claimed that supervised consumption services are the single, required solution, or are capable of serving a large portion of residents consuming unregulated drugs. It is difficult to fathom defunding an intervention proven to work during what is, by any measure, a public health emergency of historical proportions. The HART hubs to be made available in a small number of successful Ontario municipalities to serve a small fraction of people are, unequivocally, no substitute for the benefits provided by consumption services.

As the WR DAT has noted on several occasions over several years to Council and Committee, municipalities are not powerless, despite a hostile provincial government. The WR DAT again urges the Committee to provide assistance for a functional, *community-led* strategy. The near absence of a strategy and concurrent actions is a curious reversal for a Region once regarded as a nationally-renowned leader.

Finally, we remind Committee again that seizing the opportunity to support consumption service(s) via the federal UPHNS pathway remains an opportunity benefiting community safety and well-being that other municipalities have utilized over the years. Time is now very much of the essence. The WR DAT encourages the Committee and staff to not be intimidated by the machinations of the province, and to support their establishment with haste. We are confident the hundreds of residents attending overdose awareness days each year in Waterloo region would concur.

The WR DAT has significant drug-related expertise and experience grounded in verifiable evidence, is volunteer-driven, and receives no government funding. If the WR DAT can be of any assistance, please do not hesitate to contact us at

wrdrugactionteam@gmail.com

Kind regards,

WR Drug Action Team