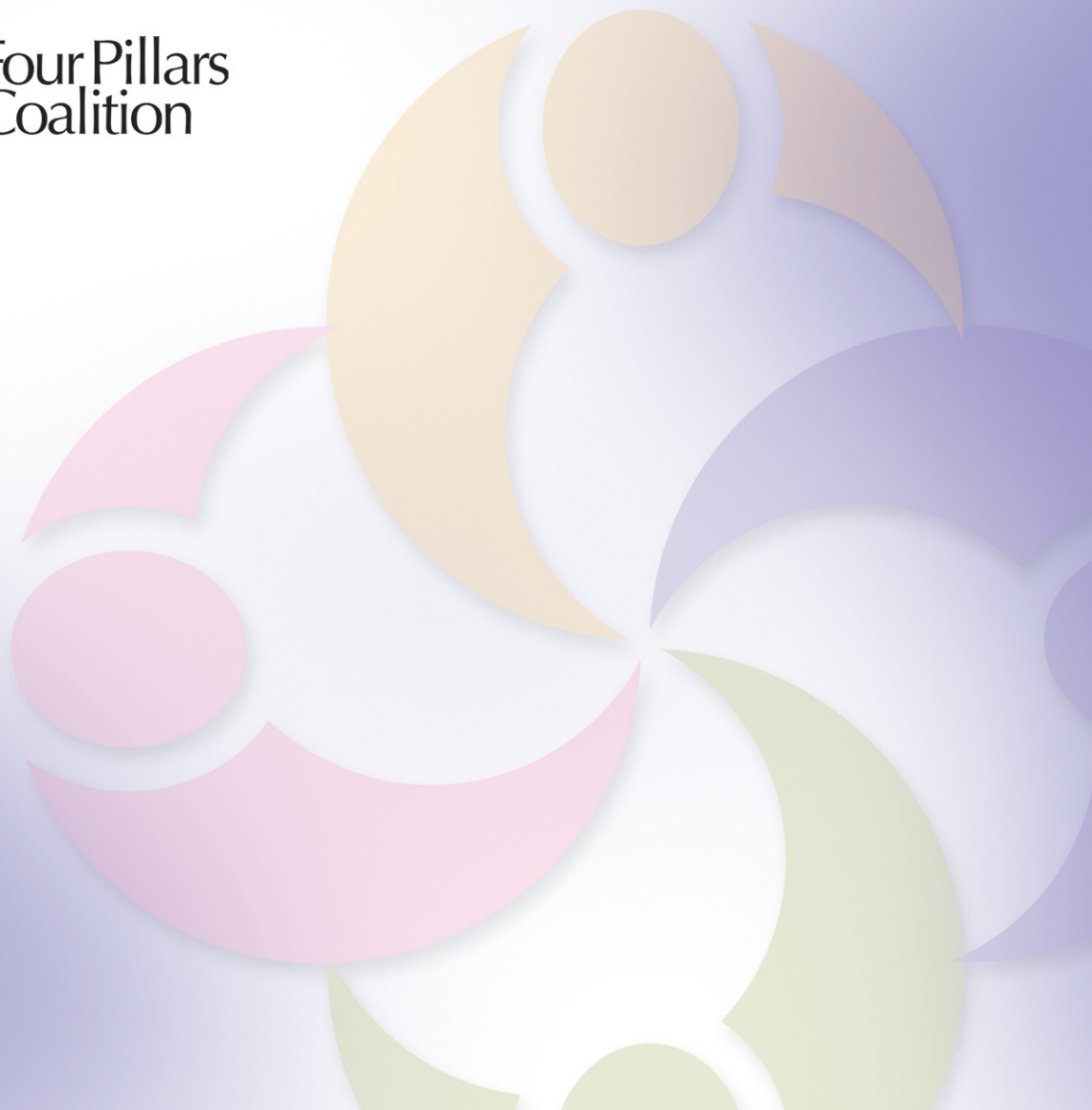


Four Pillars, Four Years. Where to Now?





FOUR PILLARS,
FOUR YEARS.
WHERE TO
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As we approach the four-year anniversary for the Four Pillars drug strategy in May, the City of Vancouver has compiled an informal progress report from partners. This report contains recommendations outlined in 2001's A Framework for Action: A Four-Pillar Approach to Drug Problems in Vancouver, divided into prevention, harm reduction, treatment and enforcement pillars. Also included are sections detailing developments separate from recommendations in A Framework for Action. With contributions from Vancouver Coastal Health (VCH), the Vancouver Agreement (VA), the Vancouver Police Department (VPD) and Vancouver city staff, this report attempts to point to the main successes and challenges related to implementation of drug policy during the past four years. It does not have the breadth to capture all community initiatives and should be viewed only as a snapshot of the current situation.

Prevention

Recommendation: Support and fund a community-led process that increases the ability of neighbourhoods within Vancouver to respond to the negative impacts of substance misuse.

Action: A prevention symposium bringing together community members and experts was held in 2003. In 2004, 50 community dialogues were held throughout Vancouver. The input from these diverse communities helped inform the City's strategy to prevent and reduce harms from substance use. The strategy goes to city council in spring 2005.

Recommendation: Establish a prevention/education task force to develop a pilot, city-wide school curriculum for elementary and secondary schools.

Action: The School-Based Prevention Project was initiated by the Vancouver School Board and VCH, in partnership with the Ministry for Children and Family Development, the VPD and researchers from UBC. Its goal is to develop a coordinated and comprehensive school and community-based alcohol and drug prevention strategy to serve children, youth and families in the city of Vancouver. Based on focus group input at seven Vancouver schools, information about substance use, the school climate regarding alcohol and drugs and the effectiveness of prevention programs has been collected.

Recommendation: Create a public education campaign to be delivered in community centres, neighbourhood houses and through the mass media.

Action: The Centre for Addiction Research of BC spearheaded a province-wide public education campaign for Addictions Awareness Week in November 2004. The "You are the Link" theme sought to connect people to addiction resources such as the website: www.youarethelink.ca.

The City of Vancouver's Drug Policy Program ran a five-day two-page spread during the same week focusing on prevention.

Recommendation: Consider the creation of a Healthy City Office within the City of Vancouver in order to support a coordinated response to community health and safety and crime prevention in the city and to promote and support projects that work towards creating healthier and safer neighbourhoods within Vancouver.

Action: No action has yet been taken on this issue.

Recommendation: Develop a prevention program that targets parents with the goals of increasing parental awareness and understanding of substance misuse issues, including parents with English as a second language, single parents and parents with addiction problems.

PREVENTION
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Prevention

Action:

- The City of Vancouver’s Drug Policy Program held community dialogues in 2004 with parents, among others, including parents with English as a second language, to help prepare the City’s prevention strategy.
- From Grief to Action (FGTA), a non-profit society working to improve the lives of drug users and their families and friends, produced *The Coping Kit: Dealing with Drug Addiction in Your Family*. The kit has tips for identifying signs of drug use, answers to questions about drugs and addiction and other resources. FGTA also raises public awareness through videos, letter writing, appearing on talk shows, organizing public forums, providing speakers and working with schools on drug use education.

Recommendation: Develop and implement pilot prevention projects in inner-city areas for high-risk youth, 8 to 13 years of age, and their families.

Action: This action is under consideration as the City’s prevention strategy is developed.

Developments outside of recommendations in *A Framework for Action*

Youth prevention initiatives

- The Justice for Girls Project is a three-year initiative coordinated through the Vancouver Agreement (VA) to identify key issues and barriers that street-involved young women and girls face in accessing safe, supportive and stable housing.
- The VCH administered Methamphetamine Prevention Harm Reduction Project includes a harm reduction education campaign and peer training program, professional training and resource website for front-line workers, and a youth-led theatre and film project.
- The Youth Engagement Strategy through the City of Vancouver’s Social Planning Department will train youth in facilitation so that they can hold sessions on preventing harmful substance use. A model will be developed for ongoing youth participation through the VA.
- The Stars for Success project, a partnership of Covenant House, Vancouver Community College and the Downtown Vancouver Hotel General Managers’ Association, provides employment opportunities in downtown Vancouver hotels for youth living on the street. The pilot project gave employment to 20 youth.

- Youth prevention services administered by VCH (for youth between 12 and 19, families, parents and educators) include early intervention, counselling, education and referrals at the community level. In Vancouver there are six VCH supported workers doing school-based prevention for youth and six alcohol and drug counsellors.
- The VPD School Liaison unit gives DARE drug awareness programs to Vancouver's inner schools.
- The VPD's Odd Squad shot the film "Behind a Blue Lens", which has been shown at high schools throughout the Lower Mainland.

Economic development, employment and skills training

- The VA has allocated \$4.5 million for economic development and job creation in the DTES. A two-year action plan supports community projects and increases business activity in the DTES.
- As part of the DTES Economic Revitalization Plan, major infrastructure improvements to the Carrall Street Greenway, Keefer Triangle and Oppenheimer Park are designed to improve business development opportunities.

- The Eastside Movement for Business and Economic Renewal Society (EMBERS) will provide entrepreneurship training to low-income and inexperienced entrepreneurs in the DTES.
- Expansion of the Social Purchasing Portal assists in attracting business to the DTES while increasing employment opportunities for local residents.
- Cook Studio Market will conduct a feasibility study and a business plan for its café on Powell Street and provide training and employment programs for at-risk youth in food services.
- The Potluck Café Society provides long-term employment for local residents in the DTES, as well as healthy, affordable (sliding scale) meals for the community.
- A City of Vancouver initiative ensures that Edgewater Casino hires 100 people from the DTES.

PREVENTION
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Prevention

General prevention-related projects

- Based on community consultation, the Street-based Prostitution Initiative run through Kiwassa Neighbourhood House will develop a community process focusing on how to address street-based prostitution and related issues in Vancouver.
- VCH coordinated a conference that brought together stakeholders from across western Canada in a consensus-based process to develop a report addressing crystal methamphetamine use and production.
- Renfrew-Collingwood's four-year-old "I Can Choose, We Can Choose" program uses peer facilitators in developing educational presentations with Grade 6, 7 and 8 students. There are also youth-driven forums and annual prevention fairs.
- In 2004, the Carnegie Community Centre Association in conjunction with Vancouver Moving Theatre, and as part of the Community Arts Initiative, sponsored the first annual "Heart of the City Festival." With over 400 artists involved in 56 events at 20 locations in the DTES, the festival included a mix of performing, visual, media and literary arts. As well, a strategic plan was created for community arts in the DTES.
- Eleven survival sex workers participated in an award winning train the trainers course run by the VPD on ways to prevent and defend themselves using safe, effective and legally acceptable guidelines.

Harm Reduction

Recommendation: Consider the feasibility of a scientific medical project to develop safe injection sites in Vancouver.

Action: A supervised injection site (SIS), the first of its kind in North America, was opened in September 2003 through a partnership between VCH and the Portland Hotel Society. The Centre for Excellence in HIV/AIDS is evaluating the three-year research project. According to the one-year evaluation:

- During a six-month period there were almost 600 injections a day with more than 3000 individuals attending the SIS – the site was operating near capacity.
- Over 100 overdoses occurred at the site with no fatalities.
- During a six-month period, 262 referrals were made for addiction counselling and a further 78 for withdrawal management, including detox.
- Women, aboriginals and those with unstable housing are using the SIS in high numbers. More men (70%) use the site than women (30%).
- Almost 70 per cent of those using the site live in the neighbourhood.

- The site has made “measurable improvements in public order”, researchers report. This means less public drug use, fewer discarded needles and less injection-related litter on the streets.

The Vancouver Agreement Enhanced Enforcement Initiative focuses on ensuring order and safety around the SIS and includes a health education package for staff and VPD. The VPD developed a comprehensive policing plan to assist with policing issues around the SIS.

Recommendation: Provide housing and short-term shelter options for active drug users currently living on the street.

Action:

- Between 2001 and 2004, 602 new non-market housing units were created in seven projects. These included Tamura House on Powell Street, Belkin House on Homer Street and The Stanley New Fountain on West Cordova Street. A further 10 projects with 754 units of non-market housing are in process or under construction. Target populations include: homeless people and people at risk, frail seniors and people with disabilities, low-income seniors living in downtown single-room occupancy hotels (SROs), low-income singles from DTES SROs, those with dual diagnosis and low and moderate income families.

HARM REDUCTION

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Harm Reduction

- Work is underway at the City to improve conditions in SROs and to manage the rate of change of the low-income housing stock through the Single Room Accommodation By-law.
- In 2004, 289 non-market or special needs residential facility units were completed in the City of Vancouver. Housing projects are located in the Central Business District, Mount Pleasant and Kensington-Cedar Cottage.
- As of 2004, a further 354 non-market and low-income housing units were under construction in five projects. Target groups include frail seniors and low-income seniors living with mental health issues and in downtown SROs.
- A developer was chosen in 2004 to redesign the old Woodward's site purchased by the City. This redevelopment will create 200 units of non-market housing (125 for low-income singles living in the area's SROs and 75 for families).
- As of April 2002, there were eight shelters in the DTES. There were 550 year-round shelter beds in the city and 150 mats/beds added during the cold season.

- In 2004, the City of Vancouver referred for public consultation the draft Homeless Action Plan that detailed the problem of homelessness in the city and provided recommendations to house the 1,000 or so homeless people. Among recommendations to increase provincial government supports, the Plan called for 3,200 supportive housing units and 500 transitional units in order to end homelessness. The City's Tenant Assistance Program estimates that at least two-thirds of the street homeless have severe addictions to substances.

Recommendation: Implement an overdose death prevention campaign.

Action:

- VCH, in partnership with the VPD, has implemented an overdose prevention campaign, the first of its kind in Canada. Based on research indicating that without police presence more drug users phone 911 for overdoses, police no longer attend overdoses unless requested by ambulances.
- Overdose prevention education is part of ongoing harm reduction education at the Lifeskills Centre in the DTES.

Recommendation: Develop appropriate housing for those with mental illness and dual diagnosis throughout the region and the province.

Action:

- The Triage housing project at 5616 Fraser St. has been approved by city council, with funding secured for 30 units for those with dual diagnosis.
- VCH, in partnership with BC Housing, operates 30 units of housing outside the DTES that support individuals who are alcohol and drug free.

Recommendation: Establish testing procedures for street drugs and develop a database on changes in their purity to be used by enforcement agencies, health service providers and the community to support the development of overdose prevention strategies.

Action: There has been no action taken on this issue.

Developments outside of recommendations in *A Framework for Action*

- A pilot project with VCH and the B.C. Centre for Disease Control is distributing crack pipe mouthpieces to reduce the spread of disease related to increased crack cocaine use. A separate project through the Vancouver Area Network of Drug Users has a similar mandate.
- Through pressure from the VPD and the DTES community, legislative changes were introduced in 1999 to regulate rice wine which had been connected with up to 100 deaths a year. These legislative changes may be one factor responsible for reducing death rates from alcohol; 'man down' and related service calls to the VPD were also reduced.

HARM REDUCTION

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Treatment

Recommendation: Increase methadone availability by removing current barriers in order to treat an additional 2,000 clients in the Lower Mainland over the next two years, with the Downtown Eastside as a priority area for expansion. Continue the expansion of the Provincial Methadone Maintenance Treatment programs within other areas across Vancouver and the province where there is a highly marginalized group of opiate users and those who use opiates and stimulants in combination.

Action: The number of people in the methadone program has more than doubled province-wide in five years from 3,294 in 1997 to 7868 in 2002.

In the 2004 College of Physicians and Surgeons of B.C.'s annual report there were 301 physicians reported as currently authorised to prescribe methadone for maintenance in BC; this is almost half of the 594 that were reported in 2003. The number of patients receiving methadone maintenance has also declined slightly between 2003 and 2004. Reasons for this decline are attributed to changes in reporting. In the past, all physicians who held an exemption to prescribe methadone, regardless of reason, were counted in the report.

Recommendation: Ensure that a continuum of supportive housing is developed including housing and/or shelter to stabilize those who misuse drugs and alcohol, and drug and alcohol-free housing for individuals in recovery.

Action:

- The VA has earmarked \$5.5 million for housing, part of which will be used to turn problem hotels into safe, clean places to live. A pilot project (at the Silver Avalon Hotel) incorporates an SRO Management Training Program, on-site tenant assistance and physical building improvements.
- Supportive housing for women has experienced cutbacks. For example, Bridge Housing for Women, which provides 36 units for hard to house women and their children in the DTES, laid off four full time support workers, leaving two.
- The Premier's Task Force on Homelessness, Mental Illness and Addictions is working to provide better coordination of resources in communities and to develop strategies to move people from temporary shelters to long-term, stable housing. The province has allocated money to increase emergency shelter capacity across the province by 153 beds (to a total of 864 beds), provide an additional 198 cold/wet weather beds (for a total of 395 beds) and increase by 19 the beds for youth under 19.

Recommendation: Establish the 15-bed unit at BC Women's Hospital to include women with children and pregnant women who need detoxification and primary health care services related to problematic substance use.

Action: While the 15-bed unit was not created, other changes to addictions services affect women:

- Aurora Centre has implemented stabilization and pre treatment programming to help women make the transition to treatment.
- Aurora Centre has opened their treatment programs to women stabilized on methadone.
- Fir Square Combined Care Unit at BC Women's Hospital has focused on the mother-child unit where substance using mothers are involved with multi-disciplinary teams in monitoring babies' withdrawal and allowing for mother-child bonding.
- In the Vancouver Coastal Health region, there are 16 detox beds reserved for women.
- Several organizations are offering treatment groups on healing from trauma for women with substance use issues.

Recommendation: Establish 20 treatment beds for youth outside of the DTES in several small residential treatment programs.

Action: 12 beds are devoted to withdrawal management for youth and 10 beds (Peak House in Grandview Woodlands) for youth are for residential treatment in 2004.

Recommendation: Establish a long-term (8 months to 2 year) treatment centre for youth with severe addiction problems.

Action: There has been no implementation on this recommendation.

Recommendation: Expand support services to families of children who are involved with substance misuse.

Action: Parents Forever, a self-help group of From Grief to Action, offers regular, ongoing support for parents and family members dealing with the day-to-day challenges of having a drug addicted person in the family. They meet every two weeks and there are 150 people signed up.

Recommendation: Establish six medical detox beds at St. Paul's Hospital.

Action: Withdrawal management services (detox) have since been reorganized and expanded in other ways by Vancouver Coastal Health. This recommendation no longer applies to St. Paul's Hospital.

Recommendation: Take steps to initiate clinical trials for medications for heroin and cocaine addiction.





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Treatment

Action: Buprenorphine hydrochloride, an oral medication that diminishes opiate cravings and reduces withdrawal symptoms, was approved by Health Canada in 2005.

Recommendation: Proceed with the multi-city clinical research trials into the feasibility of heroin-assisted treatment.

Action: The North America Opiate Medications Initiative (NAOMI) was approved as a scientific trial, beginning in Vancouver February 2005, with later start dates for Montreal and Toronto. The trial seeks to determine how prescription heroin compares to methadone in affecting the health and quality of life for injection heroin users.

Recommendation: Expand and decentralize needle exchange services across the region by providing needle exchange in all primary health care clinics, hospitals, pharmacies and through non-profit and user groups.

Action: VCH expanded needle exchange services and they are decentralised across Vancouver in all community health centres. There is now 24-hour-a-day access to clean needles – through peer-based, mobile and primary health care services. Recent improvements include increased needle recovery and better access for special populations.

Recommendation: Pilot accessible support programs or day centres for addicts in neighbourhoods outside the Downtown Eastside.

Action: Vancouver Coastal Health has decentralised addiction services and has implemented core addiction services in neighbourhood community health clinics throughout Vancouver. These services include, counselling, home detox support, prevention services, needle exchange and methadone prescribing.

Recommendation: Commit to creating a range of culturally appropriate strategies and services for aboriginals within the four pillars with a priority on services for aboriginal women with addictions and youth at risk.

Action:

- The VA supported a plan to build community capacity through the Aboriginal Front Door Society (AFD). AFD focuses on capacity building and community development among DTES aboriginal residents. In association with the AFD, VCH has also supported the development of an Elder’s Council for aboriginal residents in the DTES in order to increase access to culturally safe peer supports.
- Greater linkages are being developed between aboriginal organizations and government to facilitate on-going strategic policy and program development.
- Through the VA, Lu’ma Native Housing Society has received \$2 million to meet the needs of aboriginal people who are homeless or at risk of becoming homeless in the DTES.

- The Urban Aboriginal Homelessness Program includes provision of housing and support services, education, training and counselling. The Urban Aboriginal Strategy is designed to improve the social and economic conditions of urban aboriginal people living in Vancouver.
- An initial program component of the Urban Aboriginal Healing Centre was implemented.
- VCH's Aboriginal Wellness Program delivers integrated, culturally safe, mental wellness and addictions programs for aboriginal people, with a strong focus on women and victims of violence.
- A partnership between the Ministry of Community, Aboriginal and Women's Services (MCAWS), VCH and Native Courtworkers and Counselling Association of BC increased relapse prevention support to aboriginal people through supplying clients with support workers for up to six months after leaving addiction treatment services.
- A partnership between MCAWS, VCH and Urban Native Youth Association provided addictions counsellors for aboriginal youth.

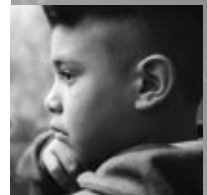
Recommendation: Explore legal and policy options related to the provision of mandatory treatment for a small group of repeat criminal offenders addicted to substances and responsible for a high percentage of crimes committed in the city. Under the previous provincial government a proposal to implement the Secure Care Act was put forward but never became legislation. The current provincial government has not brought forward similar legislation. As with any form of mandatory treatment, there are significant ethical and legal issues to address.

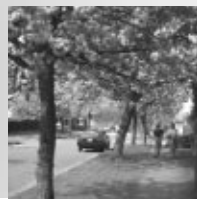
Action: Under the previous provincial government a proposal to implement the Secure Care Act was put forward but never became legislation. The current provincial government has not brought forward similar legislation. As with any form of mandatory treatment, there are significant ethical and legal issues to address.

Recommendation: Explore legal and policy options to allow for mandatory drug treatment for youth involved in the illegal drug trade and youth who are at risk of harming themselves and others as a result of their addiction.

Action: There has been no action on this recommendation.

TREATMENT
FOUR PILLARS
COALITION





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Treatment

Developments outside of recommendations in *A Framework for Action*

- Since 2004, the Addictions Re-design Project at VCH has put in place five core addiction services in all Vancouver community health centres including needle exchange, youth and adult counselling/treatment, prevention services for youth (school and community-based), methadone maintenance and home withdrawal management (detox) support.
- VCH has added a central coordinating service for all detox (drug and alcohol) centres (Access 1) and will be creating a similar service for youth.
- Residential withdrawal management services (at Vancouver Detox, Harbourlight and youth-specific) served 4,521 clients with an allocated 62 beds in fiscal year 2003/04.
- VCH provides two new withdrawal management (detox) options – home detox and daytox (on-site medical monitoring of withdrawal management in non-residential setting). Home detox programs allow detox to be delivered in a person’s home by health care professionals who monitor and refer clients to the right services (19 clients were served during the 2003/2004 fiscal year). Daytox served 1547 clients in 2003/2004.
- VCH addiction services also include outpatient services, a dual diagnosis program (for those dealing with both mental health and addictions problems), residential services, self-help groups and an educational series. VCH is also expanding transitional support-ive housing, improving services for hard to reach clients and expanding day treatment, alternative therapies and structured relapse prevention. There were 572 clients served through day treatment services in 2003/04. Residential treatment (Pacifica Treatment Centre for adults and Peak House for youth) served 472 clients in 2003/04 with 40 reserved beds. Supportive recovery services (a structured living environment over a two to three month stay) devoted 67 beds for 407 new clients in 2003/04. VCH addiction teams and youth and senior specific counselling served 4275 clients in 2003/04 (note: these do not include drop-in numbers).
- Youth-specific improvements: VCH has increased beds for withdrawal management for youth and increased support recovery services. Three Daytox programs with a specific youth focus are being implemented.
- New or expanded health clinics have opened in the DTES, including the Contact Centre, the Pender Community Health Clinic and the Downtown Eastside Health Clinic (DCHC).
- The VA has allocated \$2 million to the Expanded Addiction Treatment Services Project. Key programs include expanded access to methadone treatment, adult outpatient withdrawal management services and youth withdrawal management services that expand and centralize access to all withdrawal management services for youth.
- In 2004 the VA’s Women’s Task Team launched the Mobile Access Project (MAP) in a converted ambulance to provide outreach between 11 p.m. and 6 a.m. to sex trade workers in the DTES.

Enforcement

Recommendation: Increase the Organized Crime Unit, the Vancouver Police Drug Squad and the RCMP Drug Squad unit in order to better target organized crime, drug houses that cause neighbourhood disruption and mid and upper level drug dealers that supply street level drug dealers.

Action:

- The RCMP is currently filling half of its authorized drug squad positions, the Vancouver Drug Squad has not increased in size and the Joint Forces Operation is no longer conducted.
- The provincial government announced plans in 2005 to create a special task force within the Attorney General's ministry with five senior prosecutors devoted to organized crime. A new 'proceeds of crime' bill will be introduced to force people accused of crimes to demonstrate that their properties were not obtained with illegal funds. A plan exists to hire 215 new RCMP officers to allow senior officers to focus on organized crime.

Recommendation: Institute a senior-level Drug Action Team (VPD, COV, VCH, provincial ministries, RCMP and community representatives) to coordinate responses to serious drug-related issues raised by neighbourhoods.

Action: Under the Vancouver Agreement, an enhanced enforcement pilot project focused on the inner city was created to target problem premises in the downtown eastside. This project involved the collaboration of the City of Vancouver, Vancouver Police and several provincial ministries and federal departments.

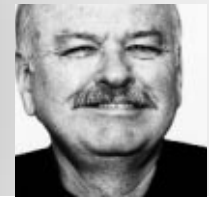
Recommendation: Initiate a pilot Drug Treatment Court in Vancouver and advocate for creating a range of diversion programs within the criminal justice system that give individuals the option of entering treatment programs instead of going to trial and prison.

Action: The Drug Treatment Court of Vancouver began operations in December, 2001. Since then, 279 people with long-term addictions have participated in the program and 36 have graduated. As of December 2004, 55 people were active in the program, 24 were temporarily suspended, 159 had left or were discharged and six died. A person graduates when drug free for three months, living in stable housing and working or attending a job training program. Many of those chronically addicted and responsible for high levels of property crime are not referred to drug courts.

ENFORCEMENT

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Enforcement

Recommendation: Review existing federal and provincial laws and City by-laws to determine what changes are needed to give police and the courts better tools to respond to changes in the illegal drug trade such as 'dial-a-dope' operations, public consumption of drugs, and the sexual exploitation of youth.

Action:

- Public consumptions of drugs - In the fall of 2000, the Carnegie Centre corner was redesigned in order to disperse those selling, buying and using drugs publicly and minimize the open drug scene. There continues to be increased police presence at this location.
- Public consumption of drugs - For two months between 2002 and 2003 the VPD implemented a 24/7 police presence at the corner of Main and Hastings streets. Additional police presence between 2002 and 2004 was organized to deter the open drug market concentrated on open drug markets at Unit West, East Hastings Street and Oppenheimer Park.

Recommendation: Continue the redeployment of police officers in the DTES to increase contact and visibility in the community and improve police coordination with health services and other agencies to link drug and alcohol users to available programs.

Action: The VPD supported the development of the four health sites in 2001/2002. The VPD was a full participant and supporter of the SIS at all levels, developing a comprehensive policing plan and SIS staff orientation to support the implementation of the site. A dedicated eight member team assisted with policing issues in the area around the SIS and worked cooperatively with SIS staff and VCH management. The VPD is also supporting NAOMI.

Recommendation: Develop a pilot project focusing on youth involved in the sex trade that would integrate enforcement efforts against customers and pimps and co-ordinate with health and social support services to direct youth to treatment programs.

Action: A database system was developed to allow police to identify and track those associated with the youth sex trade including pimps, recruiters, johns and workers. Information is shared among some 40 agencies that have joined Deter and Identify Sex-Trade Consumers.

Developments outside of recommendations in *A Framework for Action*

- The VPD has taken significant steps to reduce the DTES's open drug scene through a re-deployment of officers during the ongoing City-wide Enforcement Team (CET) initiative and support for the supervised injection site. A 2004 evaluation found that the CET was successful in disrupting the open drug market, reducing the general levels of social disorder and enhancing the general feelings of safety and security among DTES residents. There is some evidence that the drug market in the DTES adapted to the increased police presence becoming more orderly, dispersed and moving out of the public realm into private locations.
- In the spring of 2004 the VPD initiated Project Lucille, a three-month, multi-partner operation coordinated under the Vancouver Agreement. The project sought to disrupt the cycle of addiction by conducting more coordinated enforcement where drugs and stolen property were exchanged. Six property dealers were closed entirely. Two hotel bars – the Marr and American - two bars, seven pawn shops and two convenience stores were also closed.
- In the fall of 2004 VPD started Project Raven as a follow-up. Thirty premises involved in the movement of stolen property which facilitated the drug cycle were investigated. Twenty-one of these have either accepted suspensions or been referred to City Council for enforcement hearings.
- The Downtown Eastside saw an overall reduction in property crime rates of seven percent between 2003 and 2004.
- The Neighbourhood Integrated Service Teams (NISTs) are tackling drug-related issues at the neighbourhood level. As well, the City of Vancouver funded West End Co-ordinated Neighbourhood Response Program was recently initiated to deal with issues such as drug dealing and use, property crime and illegal street behaviours in the West End.
- Increased criminal activity in East Vancouver – Responding to increased criminal activity on Commercial Drive, the VPD deployed foot beats. A February 2004 project resulted in 60 criminal charges for drug trafficking and possession for the purpose of trafficking in the Commercial Drive area.

ENFORCEMENT

FOUR PILLARS COALITION





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Provincial and Federal Responsibility

Recommendation: The provincial ministries responsible implement policy that ensures municipalities throughout British Columbia support the development of a full range of drug and alcohol services and the Provincial Government implement a policy framework for reducing the harm to the community and individuals associated with alcohol, tobacco and illicit drugs to guide and inform municipal decision makers in determining in determining priorities for action.

Action: *Every Door is the Right Door.* The Provincial Government released the document *Every Door is the Right Door*, a planning framework designed to assist community, municipal and health authority efforts to address problematic substance use.

Recommendation: The Ministry of Human Resources, in consultation with the community, explore options that would allow the distribution of income assistance cheques throughout the month in order to decrease the sale and use of drugs and alcohol at any one time by those receiving income assistance who suffer from addiction and mental health problems.

Action: There has been no action on this recommendation.

Recommendation: The Federal Government

to take strong leadership.

Action: In 2004 the Federal Government announced the renewal of the National Drug Strategy and funding of \$245 million over five years. Highlights of the strategy include:

- community-based initiatives to address a range of prevention, health promotion, treatment and rehabilitation issues;
- public education campaigns on substance abuse with the specific focus on youth;
- new funding for research activities on drug trends to enable more informed decision-making;
- a biennial, national conference with all stakeholders to set research, promotion and prevention agendas;
- proposed legislative reforms regarding marijuana and,
- new resources to help decrease the supply of illicit drugs.

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