

PUBLIC PARTICIPATION MEETING COMMENTS

3.3 PUBLIC PARTICIPATION MEETING – Planning for Supervised Consumption Facilities and Temporary Overdose Prevention Sites (OZ-8852)

- *Councillor van Holst asking a question to the Community Drug and Alcohol Strategy as there are a number of members in attendance and he believes they have some information with respect to the why's and how this works; hoping that as the public participation meeting goes on, he hopes they will take the opportunity to speak to this because he thinks there is quite a bit of valuable information within that body.*
- Kristi Clark, Director of Health and Administrator, Sisters of St. Josephs, 485 Windermere Road – representing the Sisters of St. Josephs in regards to their support for the two supervised consumption sites for London; advising that the Sisters have a strong interest in supporting this initiative given the long history in health care and responding to the unmet needs of marginalized populations within the city; indicating that the Sisters one of the first groups to respond to HIV/AIDS in the city and they now feel that there is another population that needs and deserves better care and services; stating that the evidence is clear that these proposed consumption sites will enhance the well-being of persons with addictions; pointing out that they are also important initiatives to protect human dignity, offer inclusion to a population of individuals that is often excluded and they promote a caring community; indicating that evidence also demonstrates that supervised injection facilities are a cost effective measure that does not result in increased crime or encourage initiation into drug use like some groups believe might be the case; in fact, there is multiple evidence that supports that these sites enhance the communities by reducing public disorder, disease transmission and overdose; advising that the Sisters of St. Joseph's urge you to keep focus on the evidence as this process moves forward in London, there will always be individuals who engage in fear mongering but a positive and evidence based health outcomes is our community should not be endangered by this bias; reiterating that, to this end the Sisters of St. Joseph strongly support and are in favour of the proposal of the supervised consumption sites here in London.
- Martha Gnoy, Employee of 457 York Street – wanting to be respectful of everyone's opinion here; advising that she is not speaking on behalf of Mission Services of London but she does know that their Board of Directors and their Executive Director, Peter Rozeluk is very supportive of these supervised consumption facilities and even mobile units; indicating that they want to do what it takes to help people become well; advising that, what she has heard, through a lot of conversations in their neighbourhood is exactly that, not in my neighbourhood; advising that she has been involved in mental health and addiction services since 1975; she has been around for a while and has earned her grey hair; expressing that, what she has heard is that it encourages users to come to their neighbourhood, that indeed, is not the truth; stating that they are in their neighbourhoods and they know by research that has been done is that those who are using or consuming substance, they do not travel far, they stay close to their home base and that is one of the reasons why it is very important to be putting facilities and services where people are; pointing out that the other thing that she has heard is that it would encourage the use of individuals, whether they are young people or older people, to use substances; advising that she grew up in a city that had a bar on every corner and if that was the case then just about everybody in St. Thomas would be an alcoholic; thinking that many of us have alcohol or other drugs in our homes and those people who imbibe, they are doing so without the intention of becoming addicted but that can often become a bi-product of what is available to us; stating that she truly does not believe that anybody is actually going to go to a safe injection site for the first time and ask what they can get there; in fact, you have to bring it yourself; you have to already have it in order to use it, it is not going to be supplied at this particular time; however, there has been thought that we may look to prescribed heroin for those individuals as opposed to getting unsafe, illegal, illicit medications that they do not know what is in them; the other thing that she heard is that there will be more paraphernalia around, so we have heard of people who

are living and residing near parks, that are wanting to have picnics down along the riverfronts and they are finding paraphernalia; pointing out that, at a safe consumption site, that paraphernalia is contained within that building, it is not going out willy-nilly and the people who are using are going to come in, use and be supervised and educated about what is going on in their bodies, how to use safely and also how to dispose of things properly but they are also going to have health care that looks at things like endocarditis, HIV/AIDS, Hepatitis C, those are the things that are happening for those that use unsafely; pointing out that if people are concerned about the cost, think about the amount of money that the community and our provincial governments would be saving around lower EMS calls, less use of our emergency services at the hospital and also the health care costs for the transmitted diseases and the other related health issues and most specifically people's death; the people who use substances are somebody's children, they are somebody's mother, brother, sister, neighbour, teacher, aerospace engineer; noting that it does not matter the walk of life, addictions can hit anybody and nobody asks for it, nobody gets up in the morning when they are a child and say "I think I am going to become an addict"; for those folks who end up getting hooked on drugs that have been prescribed and now have to look at other things, she thinks we owe it to them as a community to care for them where they are.

- Speaking Anonymously – thank you for all the good intentions in trying to help addiction in London; advising that she does not want to be filmed, please; advising that she is a former addict and her daughter is a very recent former addict; believing it is important for you to hear the views of not only a former addict, but the mother of an addict that most recently quit, she is hoping for good; indicating that her daughter would shoot up whatever she could get her hands on; hoping her recent experience last summer actually, of being stabbed in the neck and on death's doorstep will finally give her that success; advising that she does not want these exchanges, she does not want this support; stating that, in her worst moments, as an addict, the last thing she would have ever done was get off her butt and gone even next door to a safe injection site because the reality is, she just wanted to die; watching her daughter go through it, pulling out all the paraphernalia, tying up her arm and shooting it into her veins, in Downtown London, in the back of a truck, a safe injection site would not have helped her; advising that she spoke to her and asked her if this is something that she would have ever used, or any of your friends who are also drug addicts, the answer is no; knowing for herself when she was in the throes of this, every friend you have is an addict at that point and she can guarantee you that none of them, in a million years, would use a site such as this; pointing out that you have to look at the addicts mentality because the reality is that when you are in that moment of wanting your drugs, you want to pick up the phone, you want to get them delivered and you do not want to move; stating that she went so far, there was a safe exchange place for needles and, with her daughter, she went to this place because she was trying to do the right thing by being somewhat clean and she came out carrying a garbage bag full of syringes, wipes and whatever was needed and still ended up with Hepatitis; believing that people that are this addicted to drugs do not want to live, she is not suggesting that they should be left to die because it is really a sad thing to go through but this starts way before the drugs kick in; stating that this is about, and she knows because she is a Mom, so she did it to her, this is about what your childhood is about, that is just what happens because of what they have gone through in the past; as a Mom she does not want her to have a place to do the drugs, she does not want to have one more place for her to go.
- Elizabeth Cormier, Elizabeth Cormier Professional Corporation – indicating that her letter to the Planning and Environment Committee appears at 3.3 s. with respect to the particular concerns of her clients; appearing as legal counsel on behalf of a group of residents from the West SoHo neighbourhood who are strongly opposed to a supervised consumption facility located at 241 Simcoe Street; advising that they are in support of supervised consumption facilities, of temporary and mobile units; pointing out that they have heard from the Planning representatives that this meeting does not apply to particular sites but her clients concerns apply just as much to the Official Plan Amendment and Zoning By-law

Amendment that are before the Planning and Environment Committee as well as the concerns with this particular site at 241 Simcoe Street; identifying that the Planning and Environment Committee have, as part of their package, a copy of the letter of concern that contains the signatures of 119 individuals who are very concerned that the Middlesex-London Health Unit and the City have not been listening, they have not heard their voices; pointing out that their concerns to date have been avoided rather than addressed; stating that there are certain issues she has enumerated in her letter; pointing out that the first one is administrative fairness, they have heard that the City has an Official Plan Amendment and a Zoning By-law Amendment and there has been no pre-zoning and that each and every application will have to be considered on its merits; in fact, will have to have special provisions for each particular location; advising that her submission is that the Official Plan Amendment and Zoning By-law Amendment before the Planning and Environment Committee refer to certain criteria; indicating that the only criteria which Council has relied on, two weeks ago, with respect to endorsing certain sites, is that we have a willing landlord and the London Middlesex Housing Authority has a mandate of affordable housing and yet the tenants of this building have not had a say in the Official Plan Amendment or the Zoning By-law Amendment process, this is their home, disabled persons live in this building, elderly persons live in this building; indicating that there are 119 people that have not been heard, the majority of Council, notwithstanding the assurances that nothing will be pre-zoned, has endorsed two sites at the urging of the Medical Officer of Health; outlining that there has been inadequate notice and public consultation regarding today's meeting, regarding today's criteria; advising that she was assured that the information, through the planning report, was available to residents last Wednesday but when they attempted to access it online it certainly was not available; advising that her clients attended a meeting held by London Middlesex Health Unit, there was very little notice, they were split into separate groups at separate tables, there was one facilitator at each table and they were asked to boil their concerns down to one question for each table; advising that, despite having provided their e-mail addresses twice, they have never been contacted; indicating that she was advised about a hand written note left at the clients door about a meeting to occur in just two days; pointing out that this Committee deals with land use planning and community impacts; the most basic land use planning and crime prevention through environmental design principles, the CPTED principles, stand for the fact that you should never introduce incompatible uses into a residential area; advising that her clients take no solace in the fact that this meeting is only to consider general provisions to go into the Official Plan and the Zoning By-law; asking the Planning and Environment Committee to recognize that this is not NIMBYism, it is not a lack of recognition that supervised consumption facilities are needed in London but rather it is a clear request for proper consideration of the impacts on this residential neighbourhood and an opportunity for the neighbours voices to be heard and considered; expressing concern about the proper identification of service areas, they have looked at a map of demonstrated need that the Planner referred to; expressing concern with the validity and reliability of that information; relating to the locations endorsed by Council are not locations that can be walked to by the people that need the most help; indicating that it is not consistent with the guidelines that the Planning and Environment Committee has before it this evening; relating to the criteria that is before the Planning and Environment Committee this evening, they have heard from the Medical Officer of Health that Council must consider community groups and community information and in the report to Council on April 30, 2018, has indicated that while recognizing the location is within a residential facility, the support of the SoHo Community Association is an indicator that people in this neighbourhood already recognize the crisis affecting the area; advising that she has contacted the President of the SoHo Community Association, Angela Lukach, she has clearly confirmed that the support for temporary sites which has now been extended to support for permanent sites, is based upon an Association of approximately twenty members, this is not overwhelming support from the SoHo Association, to the contrary, there is overwhelming opposition for the identification of 241 Simcoe Street as an appropriate site; *(Councillor Hopkins*

advising that she has gone over her time but to please continue.); Ms. Cormier expressing her appreciation to the Acting Chair; respectfully suggesting that because she has so many clients and 119 individuals that perhaps she could go over time; advising that there is not overwhelming support from the persons of SoHo; indicating that the signatures from 119 people were collected in a rush to meet the Friday deadline, all the addresses, all the names, are there; pointing out that they have looked at the mapping with respect to who signed the letter of concern that is in the package, it is all of the immediately abutting residents right around 241 Simcoe Street; advising that they know that this is not about that particular location, but it is dealing with a particular criteria for choosing locations and so far those criteria have not been supervised or enforced in any way; indicating that they have also heard that they have policy, legislative and regulatory frameworks that they have to comply with; supervised consumption facilities must comply with aspects of their approval from all levels of government; the London Middlesex Health Unit applied for 241 Simcoe Street as an approved permanent site prior to any sufficient public process whatsoever; the Ministry of Health and Long-Term Care also has a process, the federal government has a process through Health Canada, all of these levels of government are involved in the approval of sites; the site at 241 Simcoe Street was applied for on April 20 by the London Middlesex Health Unit, well before hearing from the community, well before hearing from Council on May 8, well before hearing from other stakeholders, from the Police; pointing out that her clients are interested in what the City will do with the law enforcement agencies; the *Controlled Drugs and Substances Act* will effectively exempt certain charges under the Criminal Code of Canada within a supervised consumption facility; this is not part of the criteria that the Committee is considering tonight; believing that it should be; (*Councillor Hopkins interrupting that Ms. Cormier has run over her time and the Chair has given her quite a bit of leeway.*); Ms. Cormier advising that she can wrap up in thirty seconds; indicating that it is not part of the consideration in the packages; stating that there are certain exemptions for enforcement of the drug laws in an area all around a supervised consumption facility; wondering what will that exemption be for certain sites in London; advising that what they have seen is a very strong push; expressing concern that that push is strongly related not just to the goal but also the looming municipal election and provincial election; we have upcoming elections that are pushing appropriate process that she would rather see motivated by providing the best care to those at the most risk.

- Deana Ruston, Downtown resident – advising that she lives a stone’s throw away from 446 York Street; recognizing that zoning for temporary overdose prevention sites and supervised consumption facilities is uncharted waters, she asks that we look at the best interest of individuals who will use the temporary overdose prevention site and supervised consumption facilities; recognizing that this is a public health crisis affecting our community; indicating that she recognizes, through the speaker with lived experience this evening, that not everyone will use this site; however, the temporary overdose prevention site has been opened since February 12, 2018 and has seen over 3,000 visits with only three overdose or medical events since opening; noting that the London Police Service has not seen an increase in calls to the area of 186 King Street; indicating that a petition in support of London’s two supervised consumption facilities and mobile van has over 320 signatures since launching only a few days ago; believing it is also worth noting that applicants such as the Middlesex-London Health Unit, who applied to both Health Canada and the Ministry of Health and Long-Term Care, must demonstrate a great need for this service; thinking that together we can walk the path looking after our community’s most vulnerable members after all, London is positioning itself as a pioneer in harm reduction and harm reduction is recognizing that persons will use drugs and we need to make it safer for them to do so; London is a pioneer in the Province of Ontario in harm reduction; as she said, London opened the first temporary overdose prevention site that was sanctioned by the Ministry of Health and Long Term Care; the world is watching and people are dying; the time to do something is now, these people need our care, our love, our support and an opportunity to experience connection with the London community. It is just that simple.

- Dan Lizotte, 1000 Waterloo Street – indicating that he will not reiterate what everyone has already said about the evidence for the benefits to people who use drugs at these sites; thinking that that is pretty clear and is not controversial; expressing his opinion that the ethical choice is to support the installation of these sites; pointing out two things really briefly that he thinks would be useful to keep in mind as we think about this going forward; one is that people who use drugs are not all the same, there is a wide swath, there is a big variety of different kinds of people who are in that position; advising that he is a Researcher at Western and one of the things he works on is personalized medicine which gives him no authority to speak on this; however, the idea there is that if you really want to help people, you treat them as individuals and you help them with their individual needs; indicating that a site like this provides that opportunity for these people who can get there to use drugs, and it is not everybody, to be treated like individuals, to be treated like people and to get individualized care for what they need to help them; reducing this to some amorphous group of “drug users” who are going to descend on these areas is not just false, it is dehumanizing; believing the evidence has been really clear; the second thing that he wants to mention is how impressed he has been with the planning process so far in terms of including organizations throughout the city so that it is not just putting a bunch of desks in a room and dropping in a nurse and hoping for the best, it is all the services that go with this site, it is working with London Police Services, it is improving security, there are all kinds of fringe benefits that are going to come to these areas because this is not just dropping in a room with desks; there is a well thought out, carefully conceived way to plan for these sites and we do have the opportunity to be leaders in this area, we could do this right, it could be done badly and he acknowledges that but based on efforts he has seen coming out of the Health Unit, he thinks that they have done an outstanding job and he would be proud if London was a city that showed the world how to do this right.
- Kristina Fowler, 235 Grey Street – indicating that she lives right across street from the proposed Simcoe site; advising that her brother, for forty years, fought a heroin addiction; stating that he did not survive the addiction but her biggest concern is, she leaves her apartment to walk her dogs, she steps over needles; believing she is not safe in the community with people that have drugs in their system, crystal meth, heroine, you name it, it is in her neighbourhood; advising that she sees both sides of the coin; believing a facility is needed but why have they not been notified of the suggestions; advising that nobody in their building got a letter in the mail; however, people in Wortley did; wondering why they are not consulted; wondering how the Committee would like it if they wake up one morning and say hey, in two days, we are going to put a supervised consumption facility in City Hall then you know that every time you leave your work place or your home you have to deal with people who have consumed; expressing frustration but they should be allowed to participate in the planning process of the sites.
- John Carrier, 241 Simcoe Street – wondering why the Planning and Environment Committee is considering residential and commercial properties for this instead of going through the hospitals; that seems more responsible to him. (*Councillor Hopkins advises that his question will be responded to at the end of the public participation meeting.*)
- David Lindquist, Homeowner – living in the West SoHo area and understands the tragedy that is methamphetamine use which has exploded in our city and now it is being cut with fentanyl and other substances to give it a greater kick; believing a lot of it is driven by the fact that there is a clamp down on opiates from prescription sources within the province that have driven addicts towards these noxious narcotics; discussing with the Committee because he was one of the people who joined a committee action to survey the residents and say have we been given enough opportunity to talk about these supervised consumption facilities and do we want to participate and the overwhelming answer in their community was we want to participate at every stage of these supervised consumption facilities; recognizing that while West SoHo is south of the epicentre of the greatest number of needles found according to the London Cares data there really has not been enough analysis of the geography and the patterns of movement to determine the best course of action for supervised consumption

facilities; finding that the Middlesex-London Health Unit has not really engaged in a meaningful way with a broad swath of the community for the particular site that they are looking at, which, while he realizes this is a discussion about by-laws in general, this particular project has already been quoted in The London Free Press as the Health Unit pursuing permits to start construction as early as immediately with the intention of the zoning application will eventually come through in their favour and there is no need to waste time and not focusing on construction so there are a few things he would like to focus on; first one, as a community they went and talked to their neighbours at 241 Simcoe Street and said what is going on and how do you feel about this and the overwhelming response that they got from those people was that this is not an okay place to put a supervised consumption facility for the following reason: a lot of people are recovering, struggling addicts and one of the things about drug addiction is it is a social phenomenon; when you see your friends from the past and you see them see them coming in to get their injections, eventually you are going to get the craving, eventually you are going to be back down to where you were instead of fighting to where you are today which is a home that does not have that on the road to recovery on the road to success and a lot of other tenants in 241 Simcoe Street are simply people who are rent geared to income hard working people of the community and their experience with supervised consumption facilities has already had a dry test run with the utilization of London Cares; having access to certain suites within 241 Simcoe Street within the past year as he is told and as he understands; asking because the City is the largest shareholder in the London Middlesex Housing Corporation, the City has an incompatible conflict with determining whether or not it can use its investments as locations for supervised consumption facilities; the Board of the London Middlesex Housing Corporation already identified that they have a serious deficiency between their control of tenancy and their own properties and the City's application and placement of tenants within those properties and they have conducted an audit by Price Waterhouse Cooper to look at the problem and the auditors found that this was a serious risk so before they start talking about supervised consumption facilities being located in properties owned by the London Middlesex Housing Corporation they need to have a serious discussion about the governance structures that run the London Middlesex Housing Corporation and what can be done; stating that if you actually go and visit the people at 241 Simcoe Street and you start talking to them you begin to understand right away why putting such facilities directly in the path of former addicts is an explosive road to for these individuals, it is their worst nightmare come true; tenants have told them of situations where fellow tenants have been chased through the hallways by people who have not been authorized to be in the building, in other words they are people who have come in as guests of someone else within the building, sometimes, and this is only a tenant anecdote so he wants to make this clear, they believe that a lot of times the projects, the units that are being delivered by London Cares see people who are literally left to their own devices unsupervised and because they are lonely they start feeling bad and inviting their friends from the past and those people are occupying the housing complex; asking the City today to set aside any consideration for the London Middlesex Housing Corporation being used as a facility for either temporary sites or supervised consumption facilities, it is absolutely inappropriate to put people in direct harm with the overall nature of unrecovered addicts who are still active users, it is just irresponsible.

- Eric Mitchell, 155 Kent Street – indicating that he is not hear speaking as someone who lives in a location that will be affected by these proposed locations and he understands that today's meeting is not about the proposed locations but is about the zoning by-laws; speaking in the capacity of a student who is training in the health care field and he first and foremost wants to say that he is firmly in support of the supervised consumption facilities here in London; over the past couple of years he has had the experience and the opportunity to witness many of the issues and this health care crisis first hand and he has been following the work of the Middlesex-London Health Unit and other organizations quite closely in setting up these sites and the work to put on the temporary consumption facility as well; believing that these locations will have an enormous benefit on an ongoing basis and the evidence has been shown today and in previous is quite

clear for the benefit of these locations; relating to the consultation for today he only has a little bit to say, for this specific zoning amendment he believes first and foremost that the Planning and Environment Committee should reduce barriers for the supervised consumption facilities; noting that he believes this very strongly; believing that the supervised consumption services are desperately needed and the proposed locations meet the needs of those they are designed to serve and he has complete faith of the groups that are in charge of setting up these sites that they will work with the City to set these sites up in areas that minimize land use conflicts; reiterating that he thinks that the Council should work to reduce any barriers to the by-laws in this situation.

- Andrew Leistra, 241 Simcoe Street – expressing concern with the London Middlesex Housing Corporation not taking care of their properties; sharing experiences since he lives at 241 Simcoe Street is the elevators are broken, the one sign is out, the lights do not light up half the time, the sign is glitchy; noting that is just once concern of the building; black mold is possible, a lot of things that are never addressed by London Housing yet we want to put a possible drug site into a building with a landlord who does not do anything; indicating that the place is a disaster, there is graffiti everywhere, needles, garbage and none of this is addressed, they have been without two resident contacts for roughly six months and London Housing has done nothing; they wait for the building to fall apart. (*Mayor Brown indicates that people from all walks of life and all ages watch these public meetings from home and he is requesting the Acting Chair to enforce their expectations on language and decorum from delegations.*)
- Paul Pritiko, 485 York Street – understanding that this meeting is in regards to the Zoning By-By-law changes and one thing that he thinks Council really has to take into consideration is that whatever zoning or location you have considered to propose as far as a safe consumption site you have to take into relation where our City schools are as well; pointing out that the young people that are growing up in our area, specifically in our Downtown core, are our future, we have already witnessed what has occurred at one of our secondary schools in the Downtown area with the methadone clinic that has now been located directly across from that location; advising that the school has had to change different policies, has security involved, the doors are always locked in the front, you are not allowed to access the school through the front entrance because of what has gone on with the methadone clinic; realizing this is new territory for the City of London and he respects that but in the same token to go ahead and put in an injection in a surrounding area specifically near our schools, he is very much opposed to; indicating that they have a great deal of traffic that flows either through buses, city transportation or even just by walking; stating that you are now legalizing marijuana, we cannot smoke on government property so all students, whether it is tobacco or as they may choose marijuana now, they have to leave the property of that secondary school or maybe even a public school; believing that to have certain influences surrounding that school to lead to them to experience something else other than marijuana or tobacco as another addiction, he is very much again opposed to that; thinking the Council has their due diligence that you have to do to take into consideration of our young generation coming through and with the relation to the schools and applying any type of by-law in those areas that you have to look at the locations of where our education systems are presently.
- Sandra Lynn Coulter, Director of Programming, London Women's Abused Centre – indicating that many of the women that she has worked with over the last twenty years have, because of abuse and trauma in their lives, coped by using alcohol and drugs and when the woman spoke about her own addiction and her sister she thinks it is important to remember that as Martha said, these are our sisters and daughters, women that she knows, men and youth; advising that many of us went to a memorial for 400 people who died, it was on April 27 and it was by the Thames and these were men and women and youth who had died because of the opioid crisis that we have in London right now; thinking it is important to recognize that people are dying and people's well-being and lives are at risk and the by-laws need to be able to reach out to people where they are, so the by-laws need to be flexible enough so that these so needed sites are located in areas that some of the most vulnerable and most at risk people in our

population can access easily and she respects that that is difficult to identify those sites but she knows how important it is for the sake of the women that she has seen, for the 400 people that have died in London because of the opioid crisis, for the two survivors of opioid addictions who spoke powerfully at that memorial; supporting the need for by-laws that will allow these sites to be where this vulnerable population and these people that she has seen and knows their faces that it can be somewhere that they are going to be able to access it; advising that that is what she asked from the Committee to have those by-laws to be flexible and to allow that and to reach out to people who really need it because their lives are at risk.

- Shaya, Manager, Sexual Health, Middlesex-London Health Unit, seconded to focus on the London drug crisis since September – advising that, in 2013, our overdose deaths were higher than the Ontario rate so this has been a long slowly increasing problem in our city; indicating that, in 2016 the Middlesex-London Health Unit declared a HIV crisis so particularly it is people who inject drugs; stating that this is a lot different than the rest of the provinces whose rates are decreasing; stating that one of the things is, in the last two years, they had 99 diagnosis of HIV and each case cost them \$1.3 million so you kind of add up those 99 cases it comes to over \$128 million; pointing out that that is a hard number that is costing our health care system and it is also for people who are getting diagnosed with HIV its very upsetting; outlining that she does not think anyone wants to have HIV; unfortunately with the sharing of drug use equipment that is what is happening in our city; pointing out that an operational cost of a supervised consumption facility is about \$1.1 million operationally; advising that, in 2017, so this past November, they started the consultation process which is quite extensive; noting that there was over 2,500 Londoners who contacted us through surveys, focus groups and large community consultations throughout the City of London; advising that 99% of those who we had contact with saw the benefits of a supervised consumption facility, but also shared really great feedback, Information, things we would like to know in order to plan for supervised consumption facility; pointing out that one of the key things that was identified is accessibility, ensuring that a supervisee consumption facility is in the neighbourhood where is accessible to those who are most at need; advising that another key thing that she was going to identify is wrap around services because, you are right, addiction is not something that somebody wakes up and decides to do it is not, it could be related to mental health, it could be related to some childhood trauma and I think it is important that these services provide wrap around support so it is not just come and inject; advising that there are several great benefits to a site, you get access to clean needles you are not sharing those needles and you are not disposing of them in that location and your also receiving support from those when you access services if you want that mental heal support so you can move on if that is where you want to be, but if you are not ready yet at least you are in a safe clean environment and not in a back of an ally or being chased as they have been indicated by our temporary site, it is the feel safe at least in the moment of time.
- Colleen Van Loon, 8 Forbes Street – advising that she wears various hats in the community; indicating that she is a front line direct support worker at Unity Project; advising that she is a am board member on the London Poverty Research Centre; indicating that she is a former student at University of Toronto and she completed her Masters in Social Work; reiterating that she wears a bunch of various hats in the community, but she would like to speak of a personal project that she worked on with city housing in Hamilton; providing a different approach to the conversation that we have heard; advising that she has proposed a business plan in 2017 as part of her Masters in Social Work, practiced and based out of Toronto, the business plan was with city housing Hamilton and that was to be part of the Canadian supportive housing movement and she focused on data collected on the highest acuity public housing building situated in the core of Hamilton; identifying that highest acuity meaning high rates of drugs trafficking, crime, sex work, mental health and substance use; demographics within the two buildings of study indicated that there are innovative opportunities for new movement in Canada's housing industry primarily due to the evolving welfare state, increasing housing people from shelters and

homeless and new comers to the Canada so its housing first was implemented in Canada; we have seen an influx of Individuals who were chronically and episodically homeless being put into social housing and now with in these buildings there is a lack of support so that continuum of care is simply lacking in mid-size cities; this is also consistent with the proposed site at 241 Simcoe Street, there is room for innovative opportunities; indicating that her analysis recommended that city housing Hamilton should advocate for entering into the supportive housing industry and should do so in partnership with established service providers already existing within the community as this would provide a supportive framework and enhance community collaboration among vulnerable groups; this plan has the ability to enhance economic development, creating vibrant communities and stabilizing tendency to prevent re-entering into homelessness; stating that she would like to support the implementation of a supervised consumption site at 241 Simcoe Street as an innovative approach; the best practices in Ottawa such as housing plus, which she has had numerous conversations with Toronto as well as Hamilton are clear examples of how partnerships with community agencies such as directly place expertise, support and care within high rise buildings is a step in the right direction; she found throughout her research that there is one only one community relation work per 900 tenants for multiple building on a single case load; the City of Hamilton identified this gap a real issue with this number and considered the opportunity for community partnerships with the essential expertise necessary to support tenancy longevity; her research findings were clear, partnering and implementing a supportive framework right inside city housing buildings whether that be a hub of support or simply a supervised consumption site will not only reduce crime and crisis intervention and save lives, the cost benefit analysis that she provided to them provided clear evidence the City will save thousands of dollars per year as a direct result not to mention the increase the of tenants stability and community inclusion; it is time for the City of London to take the next step and successfully enter and operate within the supportive housing industry; believing the proposed site for 241 Simcoe Street is a step in the right direction.

- Ulka Leunissen, 221 Grey Street – asking to have their condolences passed along to Councillor Zaifman; advising that this is so nice, all the doctors and nurses, all healthcare; she respects all of you, but she wants to ask you, especially last lady, have you ever been in this building; have you ever visited, have you ever talked to any of these people; wondering where Councillor Tanya Park is as she is our Councillor and she I did not see her knocking on her door asking her what do you think about this project; she is just across the street and she wants to be Mayor; (*Councillor Hopkins interrupts and asks the speaker to make her comments to the Committee.*); these are her comments because they did the rest, you guys brought so many people to talk about for this project, now it is my turn, please respect that; advising that she has lived in this building for 18 years; the first time she was in this building, with her husband, three of us; (*Councillor A. Hopkins – apologizing for interrupting again but she cannot hear the speaker.*); when we went to collect signatures from this building we went together each door because we were kind of afraid because all these years all she has been hearing this is the problem building drug problem, drug users we always afraid for this building, but what she experienced was life changing; this is shame to all of us, she shames herself because as a neighbour she never raised her voice until this project came; these people need help and these people are not drug users, not alcoholics, they are elderly people, disabled people, young recovering addicts, they were all nice; when they exited the elevator, a group of people were waiting for them, they were all angrily looking at us and she was kind of afraid, what is going to happen and they ask who are you; she said home owners, are you for or against; we said against; yes, we want to sign, a couple of them come and hugged me, the experience was unbelievable; you have a responsibility, all of you, all of you; we are not against this site; we are not taking here because we are worried about our house value because you guys promised it is going to be better than before, but I want you to think about put yourself in our shoes; would you like in your neighbourhood; Miss Cassidy, the last meeting she was here and you mentioned this meeting you said you live Masonville area, would you like it to be there or Miss Tanya Park, would you like it next to you, but

you are ok to bring it across the street from us without asking us or without visiting the building; looking for which kind of people are living here, what could be the result if we do this step; this is a game; she urges you to be, we will fight for this, she urges you to come to the street, go to the building 241 Simcoe is a wrong wrong wrong choice; there is a bigger problem, you heard Andrew; she knocked on his door, she talked him and she met first time when I was collecting signatures, not just Andrew there was other people, one lady was crying; she not remember the exact problem, but she was talking about this housing unit should all resign; this is the Shame to Canada, shame to London, shame to Ontario, she cannot believe you, all of you, or all of us, let down these people; now are saying lets kick more because you are already down; shame on us.

- Donna McIntyre, 241 Simcoe Street – indicating that she has been living there for 12 years and she is 100% in favour of this; these sites do work and they should be put exactly where they are needed and they are needed in Downtown London; 241 Simcoe Street is one of the best places for them; we are dealing with these people on a daily basis anyway and anybody in the building can tell you that; the thing is this is a chance to make things better to help these people to clear up the garbage and all that sort of stuff and she would like to clarify a few things; she heard someone say that this has been tried in the building before; she has been there for 12 years; not since she has been in there has it been tried and somebody mentioned that there was actually two rooms set aside; not since she has been in the building and somebody mentioned that the meeting that they had that we were all assigned groups and put on tables were we could ask one question; she was at that meeting and it never happened but like she says she just wants to say she is totally in support; it is a desperately needing and Simcoe is one of the perfect spots for it.
- Shawna Lewkowitz - wanting to reiterate the earlier woman's comments about the flexibility of the by-law and the need for it to address the needs that are present; having attended the consultations, having read the research, she is in favour of supervised consumption facilities and has been the whole way along; as a resident of this city, she thinks it impacts us all; as somebody who goes Downtown, who visits where the proposed sites are going, she felt like it impacted her with the proposal of the site on York Street and its proximity to Beal; it all the sudden became really real as the parent of a student who goes to that school; she had to think about what this means for her; engaging in conversations with her daughter, she recognizes that drug use is already happening around that school; as a student who takes the bus she sees it Downtown, she sees discarded needles and whatnot and having read the research and the reports and hearing what will happen and what will be wrapped around any proposed site, what guidelines will be put in place, she feels very confident that, in fact, that neighbourhood will be safer because of it; she has no concerns, as a parent, about her being in proximity to a supervised consumption facility right now; because of the changes on Dundas Street, her bus stop has changed and she goes by the temporary overdoes prevention site; she has not noticed a difference; she has said her and her friends have talked about it and you know, in fact, it pretty much looks the same as it always has; understanding that there is a lot of different reactions to this and she has all the respect for the people who feel that they will be impacted by this; knowing that is a very different place to speak of and she cannot speak to that, about living in a building where there may be one but as the parent of a child who would be at a school that is close to one she would hate for some 50 meters or so of a zoning by-law to prevent what is otherwise an ideal site for a supervised consumption facility.
- No name provided – advising that she has one question for Council; why are you putting it right near where children are, right near the Boys and Girls Club and you got it near two high schools; advising that she is a grandmother and her kids are entering high school; they also go to the Children's Boys and Girls Club and she is really concerned that they are going to start running into needles, dirty needles, once this safe consumption site is started; why are there not any representatives here from London Housing to say their side of it; why are they left as tenants to take it on; (*Councillor Hopkins interrupting to advise that there are representatives from London Housing but they have not spoken yet.*); indicating

that they were given one hour notice; (*Councillor Hopkins interrupting as staff has requested to make a comment.*); Mr. J.M. Fleming, Managing Director, Planning and City Planner, reminding everyone in a friendly and respectful way that this is about Official Plan policies that we have in front of Council with things like separation distances from schools and whatnot; those are in the policies; this is what is being proposed; zoning amendments and all that will allow for a some planning for these uses; this is not about specific sites and he just wanted to clarify that, as he did at the beginning of the meeting, that this is the focus of today's discussion and what the Committee will need to deliberate on; (*Councillor Hopkins asking if comments could be within the policy and the amendments that we are proposing to the Official Plan and the Zoning By-law*).

- Crystal Pirie, 200 Clarence Street – advising that her backyard is the backyard to 241 Simcoe Street; indicating that the questions that she has are questions that need to be answered to her; advising that she received no notification about any of this going on; making it clear that she understands the need but she would have appreciated the consideration of being asked and explained what this was about; advising that she has a son and moved from Scarborough, Ontario, twenty years ago when she found out she was pregnant because she said no way, she wanted to leave and raise her son up in a good area and she talked around and said where should she go and people said London, Ontario; stating that she came here, had her son and moved onto Clarence Street; there have been ups and downs, there has been zonings for this and zonings for that and approximately eight years ago she had to realize the Canadian dream of purchasing the house that she was living in and now she has a duplex and to help her pay her bills, she has a full three bedroom unit downstairs; advising that she has tenants right now that have told her that if this goes forward, they are leaving; pay her taxes faithfully, it is not like she said that she is against this or it being zoned in the area or rezoned but she thinks and wish Council would have taken the consideration prior to going around and saying is this acceptable to you; what could we do to make this secure for them or good for you; noting that nobody asked her but yet the City is willing to take her taxes for that house; believing that her taxes are going to go up and her value is going to go down and she is sorry but anybody that believes that if she advertises for a family home and people know what is going on in the backyard, literally, she is not in a good situation; advising that she has many questions about what is going on; understanding that tonight, unfortunately, is not the night for anybody to answer them for her but she really would appreciate it, as a taxpayer in London, having her say be heard.
- Sonia Burk, Operational Manager, Overdose Prevention Site – giving some factual information that has occurred over the last three months; advising that they have served over 3,000 people; indicating that, from the neighbours, they have had a decrease in discarded needles in the area; advising that they have had three overdoses reduced and they have had conversations with people accessing the services and they are clearly stating that they are committed to ensuring that there is not an increase in loitering, littering, the purchase or selling of substances in and around the area and part of that comes from the fact that not only are they working with the individuals who are accessing this site but they also have security and police that they are working with to ensure the safety, not only of the people accessing the service, but the community at large.
- Bonnie, West SoHo area – advising that she lives approximately 260 metres from the site being considered; indicating that it reaches beyond that, she is not in favour of it; believing that it is a band aid for fixing the problem only for the fact of, as so many have said, it is somebody's brother, sister, mother, father, daughter, son, they need to go into rehab; stating that by feeding them, by giving them a safe location for them to shoot up they are going to tell you whatever you want to hear, if you ask them do you want help, yes, you will never see them again; understanding the safe needle part but everybody has a story but she is sure that their biggest success story would be to be in rehab, to be clean, to be sober, have a job, have a home, right now they live under bridges, they live in the trees, on the walkway in Wortley Village; noting that she sees it every day when she does the walk; wondering if it is fair to them, if it is fair to their community;

believing that we, as members of London, need to help them get rehabilitated, not to give them a safe facility to shoot up; stating that that is her opinion.

- Shireen Mamika, 98, 104, 123, 140, 142, 146 and 197 Clarence Street and building 227 Hill Street – advising that she has purchased these properties over the course of the last three years and she has done so entirely with her own funding, with an initial investment of \$30,000 and a lot of hard work; advising that she has committed herself, her life, to improving this area, this little slice of Horton Street, Wellington Street and the Thames River; indicating that she found out about this from Randy Gibbs, one of her neighbours; recognizing a lot of her community members here; advising that she purchased a house that was built by a princess, King George IV's daughter built 104 Clarence Street; noting that this street has a great deal of history; stating that she has spoken to Kyle Gonyou, Heritage Planner, about, even though it would cost her more money, she has talked to him about what it would mean to Heritage London to possibly have this area dubbed as a heritage community because there are so many properties; indicating that they were selling recently for \$150,000 and a lot of them were run down but they needed a little bit of care and attention and they needed to be considered one house at a time so that they can preserve a piece of their city's history; advising that she recently received a notice for rezoning for an eighteen storey building that is going to be on Wellington Street and Hill Street; noting that it is a beautiful luxury building and it is also going to be matching quite nicely to the five phases of luxury buildings and property that is going to be on the Thames River where the old Victoria Hospital was; stating that they all have great hopes for this area that does not have to be torn down and turned into row housing along the side of the Thames River or turned into some other kind of large scale development that would cost us these beautiful heritage properties; in order for other investors to be able to join her, because she can only do so much with her own resources, and she thanks this Committee of Adjustment for having been so supportive of her in trying to build 227 Hill Street and make this community better; believing there seems to be something amiss when she finds out from her neighbour, from a phone call last night, that we were going to be discussing this when she understood from The London Free Press that this was a done deal, that this was already set in place, she does not fully understand these injection sites; stating that she has tenants who have addictions and she has thankfully been able to hand select the tenants who have been respectful to the community and evict the tenants who are causing problems with their neighbours, who are disrupting intentionally and she has very carefully tried to keep the people who are there, who, frankly, only crime in life is being poor, a lot of them; trying to protect them from the people in our midst who need hospitals and need help; she does not know if this is an option, she really does not think that anyone here is against the injection sites that you are proposing; this whole gallery seems to be in agreement that they must do something, we are all stepping over needles anyway without an injection site or with an injection site but to have had so little notice, to have so much confusion and to have these people, this is a testament to our community; the number of people that are here on a day that they are not even supposed to be discussing this, we care about this and they know that on the long-term scale the City cares about this, too; the City wants this area to be better; stating that in 2009 she had nowhere to live and in 2016 she was considered an asset millionaire and she spent that entire time in that area, in that community, from the bottom to here and she remembers seeing when the City of London tore down Wellington Street and Horton Street and put box partitions and beautiful garden partitions in the middle of the street and she thought that the City wants to help this area, they see us, they see that we are close to the Thames River and close to Downtown and we can have Richmond Row extend down to Wortley, down to their area, they can have all of that be a part of a community that recovering people want to be at, why are they considering, in many ways, these things for residential communities at all; many recovered addicts who would rather have recovered in a place that is not an industrial park, somewhere near the Airport so that when they do come Downtown, they do not have to be reminded that behind this shed I almost overdosed and that I used to shoot up along this River; those people want to walk along that River, too and feel like the City is not just symbolizing their

addiction and the pain that they are all suffering; thanking everyone for discussing this; advising that she feels poorly prepared for this talk because she did not know this was happening and she felt like this was already in the mix; she felt like the federal government had already decided this somehow; advising that more information would be appreciated; we need to slow down this process so that everyone has a chance to come, this is only a fraction of the people in our community who want to talk about this, not say yes or no but talk about it.

- Pat Leaman, 241 Simcoe Street – indicating that a lot of people are mentioning the used needles but half the reason there are so many used needles is because last year you guys gave out over two million needles and there was never once anything about how many needles get back, what is your return rate, even if it is ninety percent, that is two hundred thousand needles across the city; that is a lot of needles that you guys should be thinking first of all and also you gave out the two million needles and Hepatitis rates went up; he does not care if it was five percent; believing it was five percent; stating that he does not know what kind of Hepatitis it was, if it was Hepatitis C, he cannot remember, but it went up, so if the very first thing that the Council tries is not working, it obviously is not working, how is this going to work; speaking to Councillor Park and Dr. Chris Mackie, he is not in favour, he lives at 241 Simcoe Street and he is not in favour and no matter what Dr. Chris Mackie said, it is not sixty percent, he said on Saturday, it is not sixty percent that are for this, it is more like seventy-five percent against it; wanting to know why, if the Council really feels that you need an injection site, he does not know why you would not consider Bathurst Street as it is the least populated; you know your Ward, you should know it and wondering why they want to pick fights with everybody, he does not get it; why would you not go for the least populated place first; asking Dr. Chris Mackie if he has considered Bathurst Street; *(Councillor Hopkins interrupts and indicates that the Committee is not speaking site specific at the moment even though it is to the site, they are talking about the policies, the Official Plan and the Zoning By-law.)*; he knows but he lives in the building, he told Dr. Chris Mackie to his face this is not NIMBYism, it is NIM, not in my building; we are talking about a residential area now, not just a residential area but a residential building, one that has got a lot of ex-addicts and the person that said from 241 Simcoe Street that this is going to help them, it is not going to help the ex-addicts, they are trying to get off, they do not need this in their face; your own site criteria says it should be away from residential, you are not just putting it in residential, you are putting it in a residential building; advising that he was at the last meeting when the Planning and Environment Committee sanctioned the use; *(Councillor Hopkins asking if he could not be so site specific because they are talking about general policies.)*; indicating that that is what he is saying because at the last meeting the Planning and Environment Committee sanctioned opioid use; that was the basic meeting last time, was it not; finding it funny that it is the exact same Councillors, where is the rest of the Councillors; it is the same Councillors and you have to wonder if something is up; *(Councillor Hopkins advising that for his information, this is the Planning and Environment Committee and it is composed of the same Councillors that sit on this Committee.)*; indicating that he was not aware of that; *(Councillor Hopkins indicating that this is not Council and asking him to please wrap up.)*; reiterating that he is definitely not in favour and he wishes that the Committee would rethink about Bathurst Street, it is still Downtown, it cannot be any further away than his building, it is closer if you are Downtown; consider Bathurst Street; he does not even want to give the Committee that idea because he does not believe it is the right way, other ex-addicts have said rehab is the key, it is the only thing that actually works.
- Denise Krogman, 448 York Strteet – speaking to the criteria for a safe injection site; the site at 186 King Street, the temporary site that went up in February; according to their postal worker who also delivers there, as time went on they had to black in the front entrance and make a back entrance for the clients to exit instead of onto King Street; 446 King Street does not have a back entrance, they do not have a back yard, they have an “L” shaped property; their side emergency exit goes directly onto someone else’s property which is commercial and residential in one building; the only choice the clients would have would be to go out front, which would be a very busy street, York Street, with a tendency to go

across to the Mission so this could be dangerous to a lot of people involved including drivers, the clients using the facility and the neighbours because it does not contain the clients the way that they should be; asking Council to consider Mr. S. Farhi's offer of the medical hub at Dundas Street and Richmond Street.

- Sue Hawking – knowing that this is a health care service, as someone who has worked in health care for many, many years, knowing that health care has lots and lots of unpredictability, has nurses, social workers, harm reduction workers, physicians, all kinds of folks offering health care and support, she is curious as to why typical health care, zoning by-laws would just not apply in this sense; it is just a question that she wants to put out there to City Council for consideration.
- Gary Brown, 35A – 59 Ridout Street South – advising that he has been through this before and he may be one of the few people in the room, he knows Mr. Fleming was here, Councillor Usher was here and he is pretty sure Mayor M. Brown was here when they went through these arguments with the methadone clinic and the creation of zoning by-laws as to where they should locate methadone clinics; indicating that this sounds hauntingly familiar; relating what actually happened and he wants to relate another story, he knows Wortley Village has been referred to a couple of times tonight and he is from Wortley Village; advising that, contrary to common knowledge, what he has been told from the people that actually pick up the needles, which would be the Thames River Alley and the new folks from the Middlesex-London Health Unit is that one of the worst areas for needles in the city is one block from his house in Carfrae Park; noting that that is in Old South, it is not the Old East Village, it is not Downtown, it is his community and he is not afraid to say that; indicating that one thing they have known, and this is a fact, this is not anyone's opinion, is those needle boxes are heavily used and they actually clean up in that park on a regular basis and that is where he speaks from, he has bent over and picked up the needles; advising that, one thing they knew from years of doing this, the needles were always grouped in invisible places, they always were, it was very odd but the needles were always sitting on top of a rock together; stating that, his Community Association, they always thought that it makes sense because someone is taking this on purpose so when they realized the boxes would be used; reiterating that he has been told that they are very heavily used; thanking the new needle folks from the Middlesex-London Health Unit; noting that he ran into someone the other day, it was the first time he has talked to Steve and he was telling him about it on his way Downtown; seeing the people and recognized the backpacks right away, picking up the needles, he assumed they probably had just come from Carfrae Park; pointing out that they do know that if they build it, it is going to get used; suspecting that it is no different with an overdose prevention site; speaking to the methadone clinic, they had a lot of arguments about not in my backyard and they had a lot of arguments with people saying that it will increase needles however methadone comes in a Dixie cup and there is no needles involved; stating that the needles are there no matter what, they see them every day and it is a question of whether they are on their floor, in our parks, in our kids schools or they are in a needle box or they are at a safe consumption site; believing that addiction is irrelevant of substance; outlining his experience and what he has seen from friends of his, if you are an addict it has something to do with the way you are wired; noting that the substance is irrelevant, whether it be heroin, whether it be cigarettes, whether it be alcohol, it is an addictive personality, it happens; seeing the film that the Middlesex-London Health Unit put on the other week, he remembers the health care worker in the film saying that he has never seen a case of addiction that did not involve a case of abuse; noting that it was a very haunting movie; addressing what we are here to address today which is not whether we are for or against safe injection sites, because that has been decided already; expressing total faith in our Planning Office and the Middlesex-London Health Unit and our Council because of the experience that they have had with the zoning and the deciding of allowable sites for our methadone clinics; believing that it was arrived at in a very scientific and intelligent way with a lot of community input and a lot of taking into account the human side of this Council as well; thinking that he might come from a slightly different tack on this but having gone through this experience once before, very similar, and living a block from Carfrae Park; stating that he is one block from one

of the epicenters of needle consumption or needle use in this city; noting that he walks by it nearly every day; expressing a lot of faith that our Council and our Middlesex-London Health Unit will arrive at a good decision that takes into account most people, nothing is ever going to take into account everybody, that is just not reality, unfortunately, but it will take into account most points of view (*Councillor Hopkins advises Mr. Brown that he is at his time limit.*) the safety of our children and the safety of our communities; having faith in that because it has been done before; reiterating that he has been through these conversations, the words are almost identical and he thought we came to a good conclusion last time and a good result; reiterating that he has absolute faith in this Planning Office, Council and Middlesex-London Health Unit that we will arrive at a good result again.

- Kelly Zigner, CEO, United Way Elgin & Middlesex, 409 King Street – wearing a number of different hats to show her support for supervised consumption facilities; recognizing what we have heard this evening is a group of Londoners who care deeply about their community, about business owners that want our community to thrive, about people who are concerned about the well-being of their neighbours whether they have an addiction or they are dealing with housing issues, substandard housing issues or are homeless and she finds that incredibly encouraging that people have so much care and compassion; stating that in her role at United Way Elgin & Middlesex, supporting supervised consumption facilities is in line with their belief that all lives in our community have value and deserve to be treated with dignity and compassion; understanding that some individuals need additional supports like those that would be provided at a supervised consumption facility just to make it through another day; hearing from other voices with lived experience just tonight who indicated that it would not have worked for them and she thinks we know this and acknowledge it but it is one part of a multi-pronged strategy to help people who are dealing with a health issue which is an addiction issue; addiction, including opioid use, is a public health issue and therefore a client centered public health care response is needed and she encourages Council to keep that in mind when considering zoning issues; this response must be rooted in harm reduction principles and be part of our community's network of social services; believing that the Middlesex-London Health Unit and its partners are well suited to lead this initiative; giving their support as a neighbour; knowing that a likely spot for a supervised consumption facility, whether it is the one on the table right now or in future, will likely be on our doorstep; in recent years they have noticed an increase in evidence of drug use on their property from abandoned needles to people in distress; people are sitting at the picnic tables where her staff have lunch either using or in distress; saying, as an employer responsible for the health and safety of her workers, this is deeply concerning; noting that she is personally liable for their health and safety and there is a health and safety issue that is occurring on a regular basis right in our community; to date they have dealt with those issues with the support of London Police Services and London Cares and they see a supervised consumption facility in their neighbourhood as just another tool in the toolbox in creating a safer community for all as research and early results of the temporary site show supervised consumption facilities result in fewer discarded needles, less drug use in public areas and no increase in drug related crime; should a supervised consumption facility be located in their neighbourhood, they would welcome the opportunity to be a part of the community liaison group and help to convene neighbours to work at addressing ongoing concerns as they come up; giving her support personally as she is the parent of a H.B. Beal student, her child goes to school every day in the core and she loves that her daughter is getting an opportunity to learn about diversity, tolerance, street smarts, by being exposed to all kinds of different individuals in our community; all kinds of different issues from drug trafficking to human trafficking to a vibrant arts and culture scene, all of the reasons why she is happy that her daughter goes to school at Beal and she goes to school in the core; indicating that a year from now she will be going off to University in a larger urban center where these facilities will exist and she will need to coexist as a young independent woman in one of those communities; feeling, in addition to the great education she gets at Beal, she gets a lot of extra education being out in the community and being at a core

school; advising that she takes the bus daily to and from school, will catch the bus when she goes to work on York Street right across from one of the proposed sites and they have had a lot of conversation, parent to child, about what that means for her and how she would like to feel safe and when the temporary site opened, they discussed if she wanted to walk on the other side of the street, do you want to change your bus route, and at first she was nervous, that is a reality, she did not know what to expect but really, there has been no change, she has not noticed anything different, she is more frightened by other groups loitering in different parts of the core; noting that it is not around that area; advising that her daughter had indicated that she does not understand why people do not support this because right now, she sees drug use all the time, it is a regular occurrence; with a supervised site, wherever it is located, there will at least be some containment of it and students and community members will have the opportunity to avoid those areas if they are concerned; these are the perspectives that she adds, it is a hard reality to know that people in our community, the most vulnerable people, are dying and it is a health issue; urging Council to take that into consideration when zoning.

- E. Beverly, 241 Simcoe Street – noting that the meeting has gone back and forth on some issues and the Committee has gone back and forth on the way it has dealt with this issue; indicating that it seems that there is a site approved but no zoning approved and to him that seems a bit backwards in the process; noting that with an Election coming and the possibility of Mr. Ford getting in, who is opposed to these sites, is this being rushed for that reason; indicating that there has to be more notification for this kind of thing and inclusion; enquiring that if a site is put in a residential building, is Council going to pay for the people who do not want to live in that building to move somewhere else or are they just stuck with the facility; indicating that one thing he has heard is how certain issues will be addressed in the building by having it; (*Councillor Hopkins indicating that the Committee is not dealing with specific site locations at this meeting, rather the Official Plan and policies for these sites.*); indicating that it seems that there are policies going into these sites that are violating other policies so he does not know how to get the issue out; stating that the rights of poor people matter and that some people are poor because their rights have already been violated before and the process is continuing; noting that maybe in a site-specific case, maybe you need to have all of your facilities, Missions, Sally's, all connected and in one place so that it is easier to contain which may cost the city more money; stating that he believes we will go through this wherever it is decided to put a site; noting that he does not think that peoples voices have been fully heard anywhere along the way and yet the city is into this process here; stating that he believes that people who are opposed are still in support of people getting help and do not want to see the extremes that have been seen in the Philippines, they want people getting help but they also want people to go beyond getting help and having support in an injection site is not what they need because they have never gotten better if they are continuing to be a liability to system and there does not seem to be any way to deal with that; stating that maybe they need another level of care and that needs to be built into these sites.
- Larry, 241 Simcoe Street – indicating that he is in attendance to voice his opinion on the injection site coming into 241 Simcoe Street; noting that he is an ex-alcoholic and drug addict himself; stating that seeing people coming out of the building strung-out is going to be a trigger for him; noting that he has lived at 21 Simcoe Street for two years on the eleventh floor and has had no problems, but putting a site in the building at 241 Simcoe Street is ridiculous; stating that he was told that he could put in a transfer to another building but why should he have to move because of an injection site; (*Councillor Hopkins indicating that the Committee is here to speak about the policies that will be put in place in the Official Plan and Zoning By-law Amendment regarding these sites and is City-Wide and he is speaking to a specific location and asking if he can speak to the policies and the need for these injection sites or not.*); indicating that he is against the injection site being in 241 Simcoe Street.

- Mike Cory, 857 Princess Avenue – indicating that he lives in the Old East Village and that he is generally interested in urban renewal and social inclusion; stating that one observation he has about the selection criteria for a location is that it needs to be close to transportation and other services and that there has to be a need shown in that area; indicating that by looking at the heat maps that have been supplied he would like to see a location in the middle of those maps where most activity is already happening, where the street culture is already tilted in that direction and where residents and local business are quite comfortable with that type of street activity; also noting that with regards to the heat maps, the areas that were identified have been long-term areas where social services and some of London's more marginalized populations have congregated for a long time, such as Old East Village and Downtown; stating that these areas have a built in community and culture and ways of addressing some of these issues and that could be a strength when thinking of locations for these facilities; indicating that he also has a point regarding the governance of these locations; stating that extra resources will have to be put into the areas around these injection sites; noting that the residents and local business owners will require extra supports and materials to organize; stating that he knows that may go both ways, good and bad, in terms of support of resistance to the site but if the purpose of investing in the community is to increase trust and transparency in these locations; stating that, in his understand, these locations in other cities become embraced by the community surrounding them; indicating that there needs to be more effort made to educate the community around the site about it so they can support it; noting that in Regent Park in Toronto, there is a large redevelopment in a traditionally low-income neighbourhood and through the Toronto Social Development Committee, they have started investing more and more into that housing in terms of how that place is governed by ensuring that each minority group are well represented when it comes to community consultation and planning and so that could be an example of how we can move forward with this to cultivate that voices that aren't being cultivated because as we can see there are many reasons why people would feel hostile towards this kind of planning; stating that mostly this comes down to safety or property values; reiterating that there is a need for voices from all over to be cultivated regarding this issue.
- Frank Felice, 831 Elias Street – indicating that with regards to the recommendation being put forward this evening, he supports it wholeheartedly; stating that he think that the city has attempted to the best job that it can to balance the needs of people that need this particular service and the needs of any community in which this service might be located; stating that he does have to disagree with the point that was made in the introduction about concentration of services; noting that he thinks there does come a point where there is an overconcentration of any services in a particular area and that becomes detrimental to the community and the people that access those services; stating that he thinks that there is good research to support that; indicating that he thinks it is a difficult situation for the City of London and he think that people are genuinely confused about how the whole process works because the federal government makes the exemption, the provincial government that provides the funding and then the city has to deal with how to actually make things work so it is a difficult situation; stating that he thinks there have been a lot of good points made today but one thing that is really clear is that the community still wants to be fully engaged in the process and he hopes that this can be accommodated moving forward; stating that he does not think that the discussion should finish at the point where safe injection sites are put in place, that is probably just the beginning of the discussion; noting that he thinks that some sort of mechanism that is put in place to operate this service whereby any issues that arise can be brought forward and addressed and quickly resolved and if people knew that was in place it would go a long way to helping to solve some of the issues that people anticipate; stating that he does not think it is enough to say to people, when they raise a concern that the evidence shows something different; indicating that it matters more what people believe and those beliefs have to be addressed and allow people the opportunity to vent them and the opportunity to deal with issues as they arise in an efficacious way; noting that any mobile sites should also

adhere to the proposed land use, just in keeping with the spirit of the recommendation.

- Joe Leunissen, 221 Grey Street – stating that he is looking at the land use conflicts and considering that elementary and high schools have been considered, churches and Buddhist temples should also be considered in the area; indicating that also with regards to land use conflicts, the SFC site should not be along the footpath of parents dropping off and picking up children from school bus routes and that could easily be added to the planning by-law; stating that he was in attendance at the last meeting and he noticed that Dr. Mackie's chart indicates the very high-use volume in the downtown core area and are respecting the request of the Business Improvement Association, members of the downtown and the OEV Neighbourhood to not put anything on Dundas Street yet; stating that he does not think that the leasing agreement should justify the site location; noting that there have been a couple of setbacks but they have an approved lease agreement and now they are trying to justify it; stating that a lot of people in attendance at the meeting, based on their demeanor, feel like they are being picked on because they are poor and he also feels that tourism and business is superseding the needs of the people that are being helped.
- J. Pastorius, Manager, Old East Village Business Improvement Area (BIA) and a resident of Old East Village – stating that in August of 2017, in partnership with the Downtown BIA, the Old East Village BIA submitted a letter requesting that staff investigate the use of a specific definition of supervised consumption sites in the zoning by-law; indication that the Old East Village BIA initiated this request because they have seen tremendous revitalization and investment over the past two decades despite a high concentration of social services, specifically referring to five concentrated social services within two hundred metres directly on Dundas Street, all of which front onto Dundas Street and which has created significant challenges to existing organizations, businesses and all who visit the neighbourhood at times; stating that if we are going to become a more inclusive and supportive city for all Londoners, including those who inject drugs, she believes that the presented planning recommendations are key; noting that it is a tool to locate these services in areas that are accessible to those who need them, while at the same time ensuring that services do not conflict with sensitive and existing and revitalizing areas; stating that the community consultation is key; indicating that in the experience of the BIA regarding zoning amendments there have been significant opportunities to speak to potential zoning amendments; noting that they hear from city staff, from the proponents and they can learn and speak from their context and share their experiences and that has been very useful; indicating that this being part of the process is helpful; stating that this planning recommendation provides formalized due diligence, which, when implemented will aid in identifying optimal sites that ideally create the least amount of backlash against the service and those who use it; noting that she thinks this is what everyone in the room wants; stating that if we are able to create and provide a service, as a community, by informing the service that is located and built and funded appropriately she believes that can be achieved; stating that through authentic community consultation, if approved and built with both service users and the broader community in mind, these services can be successful; indication that location and built-form are things we can inform collectively, as a community, in preparation for providing supervised consumption; noting that what we cannot control is the funding that is received once the services are open; indicating that it has been their experience, in the Old East Village that service funding is regularly reduced and staff is expected to do more with less and over time this dramatically changes the non-service related support, such as security or building maintenance which then affects the public space around the facility and users and folks nearby are stigmatized because of it; noting that funding is not something they can control, however, if the building is located and designed properly a funding challenge may not readily result in client and area stigmatization; thanking the planning department for the report; stating that she hopes the Committee and Council are supportive and she hopes a similar process is considered when determining the best possible locations for mobile sites.

- S. McNeil, South Street – stating that he just moved into his neighbourhood and it has been a learning curve; noting that he has learned not to leave his DeWalt drill or his bike out near the bike path because somebody will take it; stating that in February the river rose and his basement flooded and he wants to thank city staff for the work they did prior to this so that the whole park did not flood; indicating that he has a neighbour on the other side of the park that has been there for twelve years and he patrols the park every morning looking for needles at the nice little playground in the park so that when he, or anyone brings kids there they can feel safe; stating that he has a beautiful house, right on the bike path, the river is right there, the birds sing every morning and for nine months of the year it is pretty quiet but then summer comes and everyone wants to sleep outside his porch on the riverbank; noting that he woke up on Sunday morning and looked out his front door and there was a beautiful purple blanket on the bushes and someone had put a piece of plastic and a coat and this purple blanket down and slept there all night and the blanket was drying right outside his front porch; indicating that he feels for these people; noting that last week, in the morning, he was looking out his side window and two men are getting their crack pot ready on the bike path; stating that he took pictures but he doesn't know what to do so he waits and takes pictures and the next time a police car comes by he asks what he should do because he does not feel safe, especially with crack around; indicating that he volunteers at EMDC and the people there tell him that crack is pretty unpredictable; stating that he has asked the police officers what he can do about this and they say that there is nothing he can do, that the pictures he has taken do not count and all of the paraphernalia left behind and the stolen property does not mean anything, that the police would have to be there at the time to catch them, only if they are available; stating that the police officers that he was talking to at that time were looking for a patient with Alzheimer's that had gotten out of a home, which speaks to prioritization; enquiring with respect to the zoning that there is supposed to be some sort of a drug free zone, question one is that you cannot smoke crack in a safe injection site, he assumes, which does not help him with those individuals; stating that another thing he keeps hearing about is wraparounds; noting that he worked at South Secondary School for almost twenty years and was head of guidance there and they brought in the great idea of wraparound, have a police officer, a social worker, a nurse in the school; stating that he did not find wraparounds to be effective because of privacy issues, the police could not talk to the social worker, the social worker could not talk to the nurse, the nurse could not talk to him as a guidance councillor; stating that he does not see any coordination of facilities; noting that he hears about it here, but when he calls a police officer, they cannot help him; enquiring does the zoning mean that the people smoking crack outside his back door now legally do that because the zoning has been changed; stating that he is looking at the expected drug possession no enforcement zone and it is about a block from South Secondary School where he taught; noting that when the kids wanted to smoke marijuana, or whatever else they wanted to do, they went to Carfrae, by the river, and it is a quiet area, not the same as the area at 241 Simcoe Street, he does not think they can be compared.
- Dr. Chris Mackie, Medical Officer of Health and Chief Executive Officer, Middlesex-London Health Unit – indicating that in support of all the voices today who have come forward and said that there is more dialogue needed with these communities particularly around 241 Simcoe Street; thinking it is entirely appropriate, it is something that they are absolutely committed to as the organizations that are planning to offer these services, there are a whole range of things, from hours of operation to what supports should be involved, how are we going to use the security guard, that they would want the community's input in designing the services but also after they have begun implementing, they need to hear from people in the community what is happening around this service, what is happening in the community, do they need to adapt how this sort of service is done; advising that he could not support this more and also recognize that it has not been as comprehensive as it could have been given the timelines; wondering if the Committee would like to formally include that in the by-law; advising that they are prepared to act on that if the Committee are but the Committee can be assured that even if it is not included, it is something that they will be doing.