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April 28th, 2021

Special Committee on Reforming the Police Act
c/o Parliamentary Committees Office
Room 224, Parliament Buildings
Victoria, BC V8V 1X4
Canada

Dear Members of the Special Committee,

The Vancouver Police Department (VPD) appreciates the opportunity to engage with the Special Committee on Reforming the Police Act, to collaborate on the *Police Act* reform process, and to provide input on existing policing practices in British Columbia's most populous municipality. The VPD welcomes ongoing consultation and engagement as the Special Committee continues their review.

As one of the longest serving municipal policing agencies in Canada, the VPD has been tasked with keeping Vancouver residents and visitors safe for over 135 years. Through dedication, while continuously seeking innovative crime prevention strategies to stay abreast of current crime trends, the VPD is committed to maintaining public safety. This commitment includes embodying exceptional standards of performance that include integrity, compassion, accountability, respect, and excellence. The VPD challenges itself to be exemplary leaders in policing through our commitment to fostering relationships and trust with Vancouver's diverse communities; while enhancing public safety and addressing community concerns.

In order to provide understanding on existing practices, the VPD offers several submissions to the Special Committee to consider. Focusing primarily on current policing practices, policies and programs in place, the VPD submissions should be considered in tandem with submissions offered by the BC Association of Chiefs of Police, BC Association of Municipal Chiefs of Police, and other policing agencies in order to address all aspects of the Special Committee mandate.

The VPD submission includes the following appendices:

- [*Community Matters*](#) – explores the VPD's community outreach initiatives and provides an overview of community-informed strategies implemented by the VPD in the areas of mental health, homelessness, substance use issues, and sex work.
- [*Our Community in Need*](#) – examines the VPD's community-focused safety strategies and includes a broad overview of all community outreach programs with relation to newcomers, youth, LGBTQ2S+ community, Indigenous communities, gender-based violence prevention, as well as other community-building and safety initiatives.

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- [*A Journey to Hope*](#) – updated report on the VPD's response to the ongoing opioid crisis, including information regarding existing initiatives centered on the Four Pillars Approach, as well as recommendations for ongoing and improved collaboration with community partners.
- [*The Opioid Crisis: The Need for Treatment on Demand*](#) – a review of existing practices and current landscape surrounding the opioid crisis, as well as further recommendations for increasing efficacy and timeliness of service response.
- [*Learning from Lost Lives*](#) – examines the *Calls For Justice* for police from the National Inquiry into Missing and Murdered Indigenous Women and Girls, and provides information on existing VPD services and initiatives in relation to this inquiry.
- [*Understanding Street Checks*](#) – a comprehensive review detailing the contextual background information on the utility of street checks, as well as the decision-making processes and training involved in the use of street checks as a proactive policing strategy.
- [*2020 Street Check Audit Report*](#) – a comprehensive review of street checks conducted in 2020 and presented to the Vancouver Police board in February 2021.
- [*Vancouver Mental Health Strategy*](#) – details the comprehensive approach undertaken to ensure proportional and supportive police response for persons living with mental health concerns and/or mental illness.
- [*Vancouver's Mental Health Crisis: An Update Report*](#) – examines the existing mental health initiatives implemented as of 2013, with recommendations for future programming and additional mental health supports.
- [*Project Lockstep*](#) – discussion document outlining the united effort to save lives in the Downtown Eastside community of Vancouver and details existing social issues specific to the neighbourhood, while providing a framework for change and collaboration from key stakeholders.

We feel the attached reports may provide valuable insight for the committee on the significant amount of work that is invested in improving public safety in our communities. This includes an expansive look at committing to community engagement and fostering relationships.

The VPD would like to thank the Special Committee for their dedication in improving on existing public safety practices and their understanding of the need for ongoing revision and improvements in relation to the previously discussed topics.

We thank you for your consideration of the VPD submissions.

Sincerely,



Adam Palmer
Chief Constable

COMMUNITY *Matters*

COMMUNITY OUTREACH REPORT

MAY 2020



VANCOUVER POLICE DEPARTMENT

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The Vancouver Police Department proudly serves its community and acknowledges the city of Vancouver is located on the traditional, ancestral, and unceded territories of the xʷməθkʷəy̓əm (Musqueam), Skwxwú7mesh (Squamish), and Səlilwətał (Tsleil-Waututh) First Nations.

Our Community Matters

Relationships built on mutual trust between police and communities are critical to public safety and effective policing. Police agencies rely on community members to provide information and to work towards solutions; equally, citizens' degree of trust in police depends on whether police actions are reflective of community values, among principles of police legitimacy.

Towards a collaborative approach to policing, the [Vancouver Police Department](#) (VPD) ensures active outreach with the diverse communities it serves. Among other outcomes, the VPD's community engagement promotes cultural awareness, safety, and helps build trust in police — these elements are essential to addressing and reducing crime.

True Engagement: Hearing from Community Members

The VPD considers engagement not only as positive and personal interactions between police and community members, but grounded in Peelian Principles, citizens should have a voice in policing matters. Each year, the VPD conducts a [citizen survey](#) to assess community satisfaction on an array of policing issues including perceptions of safety, how well the VPD informs the public, and satisfaction and awareness of community programs. This survey gathers the voices from our community and serves to capture key organizational performance indicators. Among other items, survey respondents rate various VPD programs and services.

The [2019 results](#) of the community survey show that VPD outreach programming is rated as important to Vancouver citizens. More specifically, Block Watch and School Liaison Officers (SLOs) were rated as the most important outreach programs. Other programs rated as important (i.e., by more than 8 in 10 residents) include Downtown Eastside (DTES) foot patrols, Victim Services, and Community Policing Centres (CPCs).

The VPD also engaged community members in strategic planning of departmental goals in the establishment of its current Strategic Plan. Consultation consisted of 24 focus group discussions with various community groups and stakeholders. The VPD also distributed 5,000 flyers advertising the public portion of the consultation process. Comment cards, completed by citizens were placed in public locations (e.g., community centres, libraries), in addition to an online survey to solicit public input.

As a result of this consultation, a strategic goal of the [2017-2021 VPD Strategic Plan](#) is to *foster relationships, understanding, and trust with our diverse community*. Accordingly, the VPD routinely participates in a number of ongoing initiatives engaging communities, including Indigenous Peoples. This report outlines and describes those activities, and aims to serve as an index of VPD outreach. This outreach includes:

- a dedicated diversity relations section;
- full-time community liaison positions;
- an Indigenous Advisory Committee;
- 11 CPCs;
- targeted programming for the safety of women and girls;
- participation in annual community cultural events;

- Lesbian, Gay, Bisexual, Transgender, Queer, Two Spirit, Plus (LGBTQ2S+) specific community outreach;
 - annual community satisfaction surveys;
 - youth directed programming;
 - mechanisms to engage new immigrants;
 - business community engagement initiatives; and
 - community outreach in diverse communities for VPD recruiting.
-

VPD Mission Statement:

Partnering with *our community* for excellence and innovation in public safety.

Diversity, Inclusion, and Indigenous Relations Section

The VPD's [Diversity, Inclusion, and Indigenous Relations Section](#) (DIIRS), established over 20 years ago, has an over-arching goal of building trust and confidence with Indigenous and other vulnerable communities in Vancouver. The primary goal of DIIRS is to improve outcomes applicable to populations with key issues such as overrepresentation in the criminal justice system, under-reporting of crimes, perceptions of fear and safety, and lack of confidence in the police.

VPD's DIIRS provides outreach, develops partnerships, and maintains relationships with various communities and interest groups. Members in this Section act as resources for frontline members who have questions surrounding specific individuals, community resources, or culturally sensitive situations. Currently, seven sworn officers, and two civilian members are assigned to DIIRS. The Inspector in charge of the DIIRS is responsible for the management and coordination of all section activities and also provides leadership, support, and strategic advice to other VPD sections regarding diverse communities in Vancouver.

Strategies used by DIIRS to address safety issues and cultural factors include supporting the VPD Recruiting Unit to ensure the VPD is reflective of the community it serves. The Section also works with the VPD's Education and Training Unit and other VPD units to provide training on cultural competency and awareness to frontline members and recruits. Relationships are developed with communities at all levels. Outreach is also accomplished through local media and participation in community forums, workshops, and events. To address safety issues, members regularly meet with representatives from diverse communities to listen to their concerns and to provide advice, suggestions, and recommendations.

OUR COMMUNITY: A STRATEGIC PRIORITY

The VPD will continue to build relationships with Vancouver's diverse communities, including First Nations, LGBTQ2S+, recent immigrants, various neighbourhood groups, and specific vulnerable populations, such as the elderly and youth.

VPD Strategic Plan (2017-2021)

Citizens' Police Academy

Biannually, Vancouver residents along with Vancouver community leaders and representatives, take part in the VPD [Citizens' Police Academy](#) (CPA), a program that provides them a behind-the-scenes view of policing in Vancouver. Participants represent a cross-section of our community, with diversity in age, gender, sexual orientation, ethnicity, and religious backgrounds. The aim of this program is to provide people with a deeper understanding and a broader perspective of the problems and complex tasks that police officers face each day, in order to build understanding between the community and the police. The four-day course is presented at no cost, with classroom lectures on topics such as crime investigation and use-of-force as well as hands-on activities and demonstrations. Participants learn force options and receive firearms training at the VPD Tactical Training Centre. Participants also tour the Forensic Services Section and the Stanley Park stables, receive police driver training, and are presented demonstrations of police dogs in action.

The CPA has been a core program of the VPD for over 20 years and has engaged over 400 community members through spring and fall sessions. Twenty community members are recruited for each cohort. The overall goal of the program is to provide necessary policing information to these community members in a fun and engaging way while ensuring the dissemination of information by CPA participants back to their community groups and/or clients of their organizations. The CPA can fundamentally change the impressions and perceptions of law enforcement and subsequently improve the overall relationship between police and the larger community.

Originally CPA participants were leaders of organizations or political leaders with established relations with DIIRS. However, upon analysis, these individuals were already engaged in with the VPD and had positive perceptions of the VPD. The focus of the CPA changed in 2019, with DIIRS reaching out to organizations and community members who had limited contact with the police and the VPD. DIIRS strategically sought engagement with community members such as an employee at the Downtown Eastside Women's Centre (DEWC), the Liberian Association President, and representatives from the Aboriginal Front Door Society (AFDS) a culturally safe, peer-designed meeting place. These relationships allow the VPD to have a stronger and more positive presence in communities, potentially increasing reporting and decreasing crime and victimization. The CPA was held in the fall of 2019 with 15 participants from diverse community backgrounds participating.

Diversity Outreach with Law Enforcement: BC Law Enforcement Diversity Network

The VPD participates in the BC Law Enforcement Diversity Network (BCLEDN), an initiative of law enforcement agencies that promotes enrichment through diversity, supports members working in the diversity area, and works to address diversity issues. In addition to police agencies, other partners include Canada Border Service Agency, Department of Fisheries and Oceans Canada, B.C. Sheriffs, and B.C. Corrections.

The main initiative undertaken by the BCLEDN in order to achieve these goals is to hold a forum for all law enforcement organization members in British Columbia (B.C.). The goal of the forum is to inform and educate members on a variety of important and progressive subjects. Recent topics have included Islamic extremism, social media, active shooters, and protocols for hate crime investigations.

Welcoming with Warmth: Newcomers to Canada

Starting a life in a new country is extremely challenging under ideal circumstances. Often there are cultural and language barriers, and some new people arriving in Canada have come from war zones or have had traumatic experiences in countries where the police are not trusted. To ease the transition, the VPD works to welcome new residents to Canada. VPD police officers help new immigrants understand the role of police in our country and to build trust and understanding.

NewKids Police Academy

Funded by the [Vancouver Police Foundation](#) (VPF), the [NewKids Police Academy](#) provides newly immigrated students within the Vancouver School Board (VSB) a unique opportunity to participate in applied educational workshops, simulated police training scenarios, and activities directly related to police work. The NewKids Police Academy aims to create positive role-modelling of law enforcement for these youth and their communities, who historically have not had positive relationships with law enforcement in their home countries. This program also supports newcomer youth in developing a sense of identity and belonging within their communities. The program focuses on promoting education and awareness around policing through peer and police mentorship.

- Mentorship and presentations are provided by police members, giving newcomer youth a chance to form positive relationships with police. The program runs for 10 weeks, one day a week, twice a year, and has approximately 15 youth (aged 15 to 18) participants. The VPD's main program partner is the Engaged Immigrant Youth Program, through the VSB Settlement Workers in schools referring these youth. A total of 150 new and refugee youth has since graduated from the program, since its creation in 2015.

Multicultural Outreach: VPD Diversity Liaison Officer

The VPD's Diversity Liaison Officer engages a variety of Vancouver communities through event attendance, programming, and outreach. This liaison oversees the NewKids Police Academy and the CPA, both designed to engage diverse communities to learn about policing and share community experiences.

The Diversity Liaison Officer purposely conducts outreach to communities that fear or distrust the police. In particular, the Diversity Liaison Officer works with the Immigrant Services Society of BC (ISSofBC) to provide policing information to newcomers arriving through the Vancouver welcome centre located at ISSofBC. Many of these newcomers are arriving from places where relationships with police were distrustful and this provides the VPD with the opportunity to positively engage with these communities.

The Diversity Liaison Officer attends cultural events such as the Chinese Lunar New Year, Open Mosque Day, Diverse Francophone, Coquitlam Fire Festival, Haitian Flag Day Festival, African Descent Festival, and the Nigerian Independence Day, in addition to multiple other festivals throughout the year.

Advocacy and Outreach for the LGBTQ2S+ Community

LGBTQ2S+ Liaison Officer

Formalized in 2017, the LGBTQ2S+ Liaison Officer is responsible for working with various interest groups in the LGBTQ2S+ community. This officer also works with VPD members to increase organizational awareness and facilitate resolution of issues affecting all members of the LGBTQ2S+ community.

The LGBTQ2S+ Liaison Officer is actively involved in committee work that furthers departmental and community interests. The core functions of this position include ongoing cultural training of VPD personnel regarding LGBTQ2S+ communities. This liaison also supports other police departments regarding LGBTQ2S+ issues, and is working on the implementation of the City of Vancouver (CoV) Trans*, Gender Variant, and Two-Spirited Inclusion recommendations. The LGBTQ2S+ Liaison Officer works with LGBTQ2S+ community groups and organizations and has oversight of the Safe Place Program (described below). Other work includes ongoing training of community groups and organizations that serve the LGBTQ2S+ communities, committee work through the CoV LGTBQ2S+ Advisory Committee, and the development of LGBTQ2S+ programming such as the [Love Who You Want](#) campaign.

"I REALLY BELIEVE THE VPD IS LEADING BY EXAMPLE. THEY ARE GETTING OUT THERE IN A COMMUNITY AND WE DO SEE EFFORTS TO CHANGE; IT'S SLOW BUT IT'S THERE... I SEE THE POLICE AS A CHILD AND THE COMMUNITY AS A PARENT. AND A PARENT NEVER GIVES UP ON THE CHILD."

Velvet Steele (2018)
Community Activist

In 2019, the LGBTQ2S+ Liaison Officer held 21 workshops and presentations. These included presentations to Safe Place locations, law enforcement partners, (e.g., Royal Canadian Mounted Police, and other municipal agencies) community groups, and schools.

Safe Place Program

The first of its kind in Canada, the [Safe Place](#) program was launched in July 2016 with the goal to increase community safety for LGBTQ2S+ people. Safe Place is a partnership program with the business community where partnering businesses welcome people in need of police assistance, and provide safe shelter until officers arrive. Participating businesses display the Safe Place decal and are vetted by the VPD and sign a pledge indicating their support for the community and acknowledge their willingness to assist potential victims. Originally developed by the Seattle Police Department, the VPD is the first Canadian police department to launch this program. The CoV and the VSB also partner with the VPD on this initiative and display the Safe Place decals in schools. To date, there are almost 500 participating businesses in the CoV.

THE MISSION OF THE VPD SAFE PLACE INITIATIVE IS TO INCREASE SAFETY FOR THE MEMBERS OF THE LGBTQ2S+ COMMUNITY BY PROVIDING A SAFE PLACE IF THEY ARE A VICTIM OF CRIME OR HAVE ANY CONCERN FOR THEIR PERSONAL SAFETY



Transgender Perspectives: Walk with Me

In 2016, the VPD released [Walk with Me](#), an educational video created as a collaborative effort between DIIRS, VPD's Education and Training Unit, and members of Vancouver's transgender communities. This video addresses issues that many transgender people face including discrimination and employment challenges. It also provides tips on how people can interact in a respectful manner with transgender people, such as asking what pronouns they prefer to use. The 17-minute video has been viewed by all VPD staff, to provide awareness and training; it is also available to citizens who wish to learn about the issues transgender people may face.

City of Vancouver 2S+LGTBQ Advisory Committee

The CoV 2S+LGTBQ Advisory Committee started in 2012 to better address issues facing this population and to improve their relationships between the LGTBQ2S+ community and the VPD. This committee includes representatives from the VPD, CoV, faculty at the University of British Columbia (UBC), the Trans Alliance Society, and LGTBQ2S+ community members.

Meeting six times a year, the committee provides input to city council and staff about issues of concern and works with other agencies whose activities affect constituent communities, including initiating and developing relevant projects.

Love Who You Want, Play What You Want

In May 2019 the LGBTQ2S+ Liaison Officer unveiled the [Love Who You Want, Play What You Want](#) sports campaign to bring awareness and support for those in the LGBTQ2S+ community to play or attend any sport they want without fear. In partnership with the *You Can Play* team and Viasport BC, *Love Who You Want, Play What you Want* will be highlighted at sporting events to promote acceptance and inclusion in all sports.

Upcoming planned events include participation at the Vancouver Canucks You Can Play night in 2020, followed by Vancouver Whitecaps FC and BC Lions events in 2020. Four videos are set to be released in 2020, inspiring all individuals to feel accepted while playing sports.

A Year in Review: 2019

Safe Place

- 479 businesses participate in Safe Place (441 in 2018)
- 4,998 views of Safe Place video in 2019 (4,180 views in 2018)

Walk with Me

- 82,525 views on YouTube in 2019 (68,640 views in 2018)

**as of December 2019.*

Arrows to the Future: Youth Directed Outreach

The VPD commits extensive resources to youth engagement, namely through innovative programming that provides positive interactions to nurture relationships, understanding, and trust among youth. Concurrently, these efforts serve to develop self-esteem and positive life skills among youth while deterring them from engaging in criminal activities such as gang involvement and drug use. Ultimately, this investment by the VPD provides youth with the skills and experience to become future leaders in their communities.

School Liaison Unit

The VPD [School Liaison Unit](#) (SLU) has maintained an ongoing partnership with the VSB dating back to 1972. SLOs are assigned specific schools within the jurisdiction and, in the Vancouver public school system alone, provide services to approximately 54,000 students from kindergarten to grade 12. At present, the VPD deploys 15 SLOs and 2 designated sergeants across Vancouver; in addition to the public schools within the VSB, the SLU also serves all of the private educational institutions in the city.

In support of targeted outreach and interventions for at-risk and/or vulnerable youth, SLOs connect with all individuals in the student body of their assigned schools in order to provide day-to-day support and participate in various school-based activities and events. A number of unique programs are offered to youth based on the identified needs of each particular population/community.

Indigenous Cadet Program

Implemented in 2007 and funded by the Aboriginal Community Career Employment Services Society, the [Indigenous Cadet Program](#) (ICP) program is intended to mentor and coach Indigenous youth, aged 19 to 29 years, who demonstrate a desire to become police officers with the VPD. This unique summer program is open to youth of Indigenous ancestry. During their VPD internship, the Cadets work with Fleet Services, experience ride-alongs with various sections, engage in cultural activities, and participate in the annual Pulling Together Canoe Journey.

In 2019, three new Indigenous Youth completed the ICP. A total of 42 Indigenous youth have completed the program since its inception in 2007. Currently, over half of the program graduates work in the field of criminal justice, with 15 working for the VPD in either a sworn or civilian capacity.

Access, Recreation, and Culture Program

In October 2018, VPD's DIIRS launched the first session of the Access, Recreation, and Culture (ARC) Program, which engages high-risk, urban Indigenous youth in cultural and recreational activities, and encourages pro-social behaviours and healthy life choices. The ARC program is intended for youth between the ages of 16 to 24 who may have any combination of the following risk factors:

- substance use issues;
- physical and/or mental health concerns;
- homelessness or lack of stable housing;
- low socio-economic status and lack of access to resources for survival;
- poor educational attainment and/or limited employment history;
- involvement with the criminal justice system; and
- social isolation and attachment to negative associates.

The first cohort comprised of eight males (aged 15 to 18) engaged in a series of seminars designed to introduce them to Indigenous cultural practices as well as key aspects of policing. These meaningful seminars include teachings on the Medicine Wheel with Indigenous Elders, Cedar Weaving, Drumming, a guided hike with members of the Tsleil-Waututh Nation, and field trips to the VPD's Marine and Mounted Squads.

In April 2019, a second cohort, with two females and six males (aged 14 to 20), started the ARC program. Under the guidance of an Indigenous Elder, they participated in a field trip with the VPD Marine Unit, and in a coaching session with a member of the VPD Recruiting Unit. Work towards obtaining drivers licenses for these participants has already started, along with coaching them towards participation in the VPD's ICP.

An independent review of the program was conducted in January 2019, and the results revealed that the program is being well-received and continues to be impactful in terms of inspiring youth to work towards a career in the criminal justice system. Further, the review identified a recommendation by the youth to visit the [Vancouver Police Museum](#), now implemented as part of the ARC program.

VPD Cadets

Funded by the VPF, the VPD's renowned [Cadet Program](#) is a prime example of an initiative designed to instill leadership skills and it may increase the pool of potential VPD recruits among inner-city youth. The 28-week program is led by VPD police officers and includes educational workshops along with physical training, team building exercises, and life skills training such as public speaking and resume-building skills. Graduates of the program become mentors and peer-to-peer role models for subsequent cohorts.

A total of 366 youth have participated in the program since its inception in 2014. Over 270 cadets have successfully graduated from the program, and in the present cohort, there are 85 cadet participants and 135 cadet volunteers that were graduates of the Cadet Program

Student Challenge

Occurring over nine days, the VPD [Student Challenge](#) is a mini-police academy for 48 Vancouver students over spring break. The students spend time in the classroom learning about legal studies and human relations, and receive presentations from VPD specialty sections, such as the VPD Canine, Homicide, and Forensic Identification Units. They wrap up with a stay at an area ranch, with physical and team-building challenges. This program is funded by the VPF.

Since its inception 21 years ago, the Student Challenge has graduated upwards of 1,000 young people from diverse and multicultural backgrounds. Many youth who participated in these programs enter the police officer application process and several have been successful. For instance, upwards of 20 alumni of the Student Challenge have gone on to work in some form of law enforcement, with 18 of those being hired as members of the VPD. Approximately 800 students have graduated from the program; 23 graduates are currently serving as police officers and 3 are [Special Municipal Constables](#) (SMCs). It is the VPD's position that the number of individuals who are ultimately successful is not the real success, rather, it is the immeasurable benefits through positive engagement.

Get R.E.A.L.

Previously known as the Windermere Boys and Girls Group, Get R.E.A.L. (Resilient, Engaged, Active, Leaders) continues to operate as a youth resiliency program that builds leadership and supports crime prevention through engagement. The program has shifted to a non-gender binary structure in order to reduce barriers to participation and promote inclusivity.

Currently, 60 to 80 youth enroll with the Get R.E.A.L program and each week, participants focus on different workshop topics which address important social issues such as: mental health, self-defense, crime prevention, healthy relationships, employment readiness, substance abuse prevention, sex education, recreation, leadership development, and community service projects. The VPD's Windermere SLO has been heavily involved in the planning, administration, and facilitation of the Get R.E.A.L. remains a community resource and program support for participants and facilitators alike.

Police Athletic League

A registered charity, the [Police Athletic League](#) (PAL) is a youth crime prevention initiative that uses athletic, recreational, and educational programs to foster positive rapport and mutual trust between police officers and youths. Current VPD PAL activities throughout Vancouver include basketball games, soccer camps, running clubs, and rugby camps. In 2019, 24 lunch hour games were played, with over 3,000 youth playing or attending as spectators.

Youth Connect

Young people continue to face difficult decisions about personal relationships, safety, and online behavior - often feeling isolated and lacking support. These difficulties place youth at potential risk; including physical and sexual assaults in schools, distribution of personal and intimate images, and unsafe social media use. Youth Connect was created in 2017 to combat these emerging trends. This annual, day-long symposium is hosted by the [Special Investigation Section](#) (SIS) and supported by YSS, including SLU and [Youth Services Unit](#) members. VPD members help plan, organize and run this event each year, with roles ranging from workshop facilitation to greeting youth at the door. Each year, approximately 150 students, staff, and counselors from Vancouver schools attend to discuss and learn about consent, diversity, healthy relationships, personal safety and safe dating.

Rise Basketball

Rise Basketball is an after-school basketball program that is led by SLOs at Sir Charles Tupper and John Oliver Secondary. Piloted in the spring of 2018, Rise Basketball has been successful in providing youth participants with an added avenue to seek out healthy, recreational activities and establish positive relationships with role models.

Funded by the B.C. Civil Forfeiture Office (CFO) and supported by Hillcrest Community Centre, John Oliver's Community Schools Team, and the Insurance Corporation of British Columbia (ICBC), Rise Basketball participants also attend educational presentations conducted by ICBC and other community supporters. Program sessions take place twice a month at Hillcrest Community Centre, and in 2019, 36 regular youth participants (and additional drop-ins) attended the program.

Total Respect for Ourselves and Others

The VPD [Youth Services Section](#) (YSS) partnered with the Children of the Street Society, a provincial society and federal charity dedicated to preventing the sexual exploitation and human trafficking of children and youth in B.C. through education strategies, public awareness initiatives, and family support.

In collaboration with the Children of the Street Society, the VPD created the Total Respect for Ourselves and Others (TROO) program, which address the issue of sexting among youth. In addition to hosting intensive workshops with older youth who have a demonstrated need to increase their knowledge and awareness in this regard, TROO also conducts preventative and informational presentations to students in younger grades. In 2019, TROO presentations were attended by over 950 youth and were also attended by 125 industry professionals including VSB teachers, support workers, and administrative staff.

Here4Peers

Here4Peers is an initiative funded by the VPF in partnership between the VPD, VSB, the Canadian Mental Health Association, and Vancouver Coastal Health (VCH). Here4Peers brings an 80-minute mental health awareness workshop facilitated by trained and supported grade 10-12 high school students to grade 6-7 elementary school students. To meet the needs to the community this program incorporated feedback from students, young adults, school staff, and representatives from Urban Native Youth Association (UNYA) and Qmunity, a nonprofit community centre in Vancouver that serves as a catalyst for LGBTQ2S+ community initiatives and collective strength. This peer-based initiative is currently based in six Vancouver high schools. An evaluation of Here4Peers, funded by the CoV, has shown that this initiative has been able to accomplish the goal to:

- reduce stigma;
- increase awareness of mental health issues and coping tools; and
- improve access to resources.

The six participating schools are David Thompson, Vancouver Technical, John Oliver, Prince of Wales, Eric Hamber, and King George Secondary Schools. Over 4,000 students in grades six and seven have participated in the workshops since the start of the program, with over 150 workshops completed to date.

VPD Musqueam Basketball Camp

Since 2010, the VPD Musqueam Basketball camp has been held on the Musqueam Reserve, enhancing the positive work by the VPD and fostering the relationship, understanding, and trust the VPD has with the Musqueam community. The objectives of this basketball camp are to develop community relations between the VPD and the individuals who live on the Musqueam Reserve as well as to develop basketball skills and healthy lifestyles of the children and teenagers participating in the camp.

On August 21 and 22, 2019, VPD's PAL and the Musqueam Indian Band (MIB) were proud to sponsor the 9th annual VPD Musqueam Basketball camp. Free of charge, this camp included children as young as 5 up to 18 years of age. The camp had over 50 participants including camp leaders, a VPD civilian member, 5 VPD Community Safety Personnel (CSP), and 5 VPD police officers.

Making Everyone Safe and Healthy

In June of each year, VPD police officers host the Making Everyone Safe and Healthy (MESH) sports day. This annual event includes about 200 children from four elementary schools taking part in a sports day event. They learn about healthy lifestyle choices, while having fun and interacting with police officers.

In 2019, the VPD participated in the Project Mesh Toy Drive where 50 families from Henderson, Trudeau, Fleming, and Moberly Elementary Schools were assisted. Gifts were donated through the Vancouver Police Community Fund (VPCF) and VPF. VPD cadets volunteered at this event, and together with officers were able to personally deliver these gifts to families.

Bright at Night

During the winter months, harsh weather and low light conditions lead to poor visibility and increase the hazards of driving. Youth are at an increased risk of pedestrian-involved motor vehicle accidents due to their smaller size and lack of experience with traffic. The VPD SLU hopes to increase youth safety through Bright at Night, by the creation of branded, reflective slap bands distributed to elementary school students. In doing so, children wearing the bands will be able to increase their visibility in poor conditions by up to 500%. Wherever possible, the bands are given to youth in conjunction with Halloween and/or pedestrian safety presentations, to reinforce road safety messaging. With support from VPF, Bright at Night is being planned for 2020.

Youth Outreach Presentations

In addition to miscellaneous youth outreach activities conducted by SLOs on a regular basis throughout the school year, the SLU also provides informational presentations to youth on a variety of different topics. In 2019, 51 presentations were given by the VPD Elementary SLO to over 1,250 school aged children on topics such as Halloween safety, strangers, internet safety, and bullying.

ReMAKE

The Restoration through the Mobile Arts for Kids Exchange (ReMAKE) is an upcoming program funded by the CFO through a Crime Reduction and Community Safety Grant. The goal of the program is to transform a cargo trailer into a mobile music/art studio, which will be utilized for ongoing youth engagement and outreach purposes at elementary schools across Vancouver.

Phase I of the program will entail the custom modification of the trailer, with ongoing input from youth to engage future program participants and create an inviting, youth-friendly space. Phase II will consist of curriculum development of Youth Resiliency Sessions and will link to a component of Phase III by enhancing the learning objectives of each ReMAKE program session. These sessions will be designed to increase participant knowledge regarding topical social and criminal justice issues and will be specifically targeted towards the participant population of the program. Finally, Phase III of ReMAKE will see the newly modified trailer travel to various elementary schools in order to provide on-site music and arts programming for suitable youth participants.

The ReMAKE program will be led by police facilitators who have prior knowledge and experience in music production and can parlay their artistic experience into an innovative and imaginative crime reduction and community safety initiative. By building positive relationships with youth participants through activities centered on music and content creation, this two-hour session will serve as an informal intervention by providing an interactive and fun outlet for creative endeavours, while teaching participants the basics regarding digital media and music production. Select youth with identified need for further intervention through outreach and engagement will be invited to attend monthly eight-hour workshops.

Churchill Strong

As an after-school workout club initiated by the SLO at Churchill Secondary three years ago, Churchill Strong was started to engage youth who have run into minor disciplinary incidents and/or don't normally participate in competitive sports. This program encourages youth to make healthier choices and to build stronger relationships with police, VSB staff, and peers. With over 50 students actively participating, Churchill Strong is supported by the VPF and has recently secured funds to purchase water bottles and hoodies as incentives and rewards for achieving milestones.

Share a Meal

Members of the VPD Police [Community Response Unit](#) and Ministry of Children and Family Development (MCFD) partners, including social workers and youth probation officers, participate in the Share a Meal program to help at-risk youth. The teams offer food vouchers, provided by the VPF, to share both a meal and a conversation. Police officers from several units in the YSS have access to food vouchers and participate in this program daily within the scope of their duties.

The Strathcona Backpack Program

Many underprivileged kids receive subsidized lunches throughout the school week, however during the weekend, the program is not in service and kids would not have access to nutritious meals until Monday.

The Strathcona Backpack Program provides food for meals to fill the gap during the weekend when children are not supported by the school food programs they depend on during the school week. The Strathcona Backpack Program has been running since November 2010 and has expanded to support over 275 children. Every Friday, families may fill up a bag with a variety of nutritious foods that is generously provided by the Greater Vancouver Food Bank Society and purchased at local community partners with funding from several charitable sources.

The VPD Neighbourhood Community Policing Officer helps support the program and those who run it, while being sensitive to the varied backgrounds of the families who use this program and how they may perceive the police. The VPD Neighbourhood Community Policing Officer engages with families in this program living in the neighbourhood to make them feel safe, provide education, and awareness around increasing their safety living in the DTES.

Vancouver Police Soccer and Service Club

The Vancouver Police Soccer and Service Club (VPSSC) is comprised of police officers and civilians primarily from the VPD, but also include members from other law enforcement agencies in B.C. Every year the men's and women's team play in leagues and tournaments locally and across North America. Additionally, the VPSSC are responsible for community initiatives where they engage at-risk youth and new immigrant youth through sports, to help break down barriers they may have with police. The following are three VPSSC youth initiatives:

Annual Soccer Camp

More than 300 kids gathered on the soccer pitch at Strathcona Park on July 2 to 5, 2019, for the 30th annual VPD Soccer Camp at. Supported by CIBC Wood Gundy, Bell, Whitecaps FC, and the VPF, this yearly soccer camp is a free event for at-risk youth aged 6 to 17 years. This camp is directed towards inner-city youth and features dozens of games and drills to teach the kids the basics of shooting, passing, and dribbling. Participants are encouraged to interact with other kids in their community, practice team work, learn new skills, and have fun.

The event was run by dedicated volunteers of the VPSSC and Whitecaps FC were on-hand to oversee it all. Special appearances were made by members of the VPD Canine Unit, the VPD Motorcycle Drill Team, and Whitecaps FC former star player, Carl Valentine, and the team's mascot, Spike. The VPD Youth Soccer Camp fills an essential summer programming need and helps to build confidence and resilience in vulnerable children.

Paul Sanghera Soccer Tournament

The VPSSC, supported by the VPF and the Masonic Lodges of the Lower Mainland, also coordinate the annual Paul Sanghera Soccer Tournament that honours a fallen member who tragically lost his life in a fatal car crash. The tournament hosts nine Vancouver high school soccer teams that play in a two day, indoor soccer tournament where top players will be rewarded with \$3,500 in scholarships for their post-secondary education. In April 2019 the 36th annual Paul Sanghera Soccer Tournament was held.

VPSSC Free Boot Program

Every year the VPSSC partners with Moresports to deliver 60 pairs of soccer boots, shin pads, and socks to impoverished youth of Vancouver. All the youth recipients are involved in community soccer programs but do not necessary have the means to purchase new equipment. The youth are invited to North America Sports where they are fitted with new soccer equipment by both police officers and store staff. Two weeks after fitting, the equipment is delivered to the 60 youth at a reception held at the VPD police building. Food is supplied and the police officers, youth, and their families share a meal supplied by the Tap and Barrel and are able to build relationships through the love of soccer.

Outreach for At-Risk Children: Working with Ministry of Children and Family Development

In addition to the VPD's numerous programs and outreach initiatives dedicated to youth populations, the department also shares a close working relationship with the MCFD. Inter-agency collaboration provides opportunity for VPD to expand upon their outreach capacity and ensure that the physical, mental and social needs of community members can be addressed through referred services.

Yankee 10

Yankee 10 is a partnership between the VPD and MCFD, pairing VPD police officers with probation/correction officers. The focus of the program is monitor youth involved in the criminal justice system, and/or youth who are likely to become criminally involved. The Yankee 10 partnership liaises with other probation officers in Vancouver as well as multiple

jurisdictions, conducts nightly curfew checks, attends locations where high-risk youth gather (e.g., local community centres), and assist foster parents/homes with problematic youth. Yankee 10 also connects with many other VPD sections including the VPD [Missing Persons Unit](#) (MPU) and supports frontline officers regularly.

Yankee 20

The VPD's Yankee 20 car pairs a VPD police officer with a youth outreach MCFD social worker to provide a coordinated response to sexually exploited and at-risk youth between the ages of 12 to 18 years old. The purpose of car is to work closely with community groups such as UNYA, PLEA Community Services Society of BC, Network of Inner City Community Services Society, and Covenant House to update previously identified youth in the community and bring attention to new youth in the community. The goal of Yankee 20 and the community groups are to build and maintain relationships with youth to influence them in a positive manner and deter them from negative street influences. This is done by connecting youth with resources and agencies that offer support services to meet their needs.

Car 86

Since 1977, the VPD's Car 86 program has been working in conjunction with a social worker from MCFD with the mandate to provide after-hours assessment and intervention for children deemed at-risk. The VPD police officer and social worker work as a team in assessing, managing, and determining appropriate actions that are required to ensure the safety of children. In the most extreme cases, children could be removed from homes deemed to be unsafe and placed into temporary or long-term foster care. In most instances, MCFD will have the guardian agree to a safety plan that they need to abide by to ensure the safety of their children. Car 86 also provides information and resources to families that require help in coping with their current situations.

Supporting and Connecting Youth

Implemented in 2006, Supporting and Connecting Youth (SACY) is a joint initiative of the VSB and VCH in collaboration with the VPD, CoV, UBC, and the Canadian Institute for Substance Use Research. It aims to apply all available resources and infrastructure to delay, prevent, and reduce substance use related problems in young people by listening to their experiences and supporting them. SACY utilizes activities to deliver coordinated prevention and early intervention strategies that emphasize relationships, connectedness, positive youth development, and social and emotional learning. Activities are categorized into four areas: youth prevention and engagement, parent engagement, curriculum and teacher training, and a three-day off-site program.

Contributing to Lives of Inner-City Kids

The VPD also supports Contributing to Lives of Inner-City Kids (CLICK), a non-profit organization created in 2004, which has distributed funds to over 400 programs helping vulnerable youth succeed in their goals. CLICK promotes, advocates, and champions the rights and needs of all youth across our community. All funded programs focus on youth being able to freely access resources and opportunities to safely enable them to excel. It is important that awareness around the issues facing inner city youth are brought forward via

fundraising, communication, collaboration, and open dialogue so that change can be made in perceptions and attitudes towards those youth. Applicable programs include school trips, summer camps, literacy groups, sports activities, and arts and culture activities.

Connecting with Indigenous Communities

Tied with past discriminatory government policies, the generational effects of colonization, displacement, and the Residential School system have disadvantaged Indigenous Peoples. The VPD recognizes this discrimination and acknowledges that we all have a responsibility to ensure that systemic racism and discriminatory practices do not continue.

Developing a positive relationship between the VPD and Indigenous Peoples is and will remain a priority; the VPD engages in ongoing initiatives with Indigenous Peoples, as described below. Importantly, the VPD recognizes that building relationships must be based on respect and understanding, and led by and in partnerships with Indigenous communities.

Indigenous Advisory Committee

The VPD and Vancouver's Indigenous community leaders collaborated in the creation of the VPD Indigenous Advisory Committee which was established in late 2018 with the first meeting in February 2019. The VPD Indigenous Advisory Committee is comprised of eight recognized and respected members of Vancouver's Indigenous community, including Métis representation, and executive representation from the VPD. The Indigenous Advisory Committee meets quarterly to connect with and advise the VPD on current issues relating to Indigenous and police relations within the community.

The Indigenous Advisory Committee initiative is a multi-faceted operation designed to enhance the relationship between police and the Indigenous community. Organizations and partners in this group include the Vancouver Aboriginal Transformative Justice Society, Metro Vancouver Aboriginal Executive Counsel, Vancouver Aboriginal Community Policing Centre (VACPC), and Warriors Against Violence.

The specific goals/objectives that direct its efforts include:

- relationship and trust building between the Indigenous community and the VPD;
- eliminating barriers between police and Indigenous residents and community;
- supporting education, cultural awareness, and other events to further build trusting relationships between residents, the Indigenous community and the VPD; and
- a procedure for sharing information on current issues within the Indigenous community.

Traditional Canoe Waking Ceremony

It is Coast Salish tradition for canoes be "woken up" after the winter before embarking onto the water. The VPD canoe Nchu'7mut (pronounced In-CHOTE-Mote, meaning *One Heart, One Mind*), is awakened by members of the Squamish Nation and the VPD Canoe Family, preparing it for travel in a series of reconciliation events throughout the year including the

Pulling Together Canoe Journey, described below. This ceremony highlights the important relationship the VPD shares with Vancouver's Indigenous community.

Pulling Together Canoe Journey

Each year, the VPD's sworn and civilian members join numerous Indigenous organizations, youth organizations, and other Lower Mainland police agencies to participate in the multiday [Pulling Together Canoe Journey](#); this paddling event aims to solidify bonds between Indigenous and police communities in B.C. The event includes over 400 participants, including civilian and sworn VPD members, including the VPD Executive, [Vancouver Police Board](#) (VPB) members, VPD Cadets, Indigenous Cadets, and Musqueam youth. This event has developed through the years to include dozens of agencies and Indigenous nations to help nurture mutual understanding and police awareness of Indigenous issues. In 2019, the 19th annual Pulling Together Canoe Journey included participation of over 400 individuals, including 25 VPD members, in over 20 canoe families, as well as 13 VPD youth Cadets, 3 VPD Indigenous youth cadets, and 10 youth from the Musqueam Nation.

National Indigenous Peoples Day

On June 21 of each year, the VPD celebrates National Indigenous Peoples Day, to recognize and celebrate the heritage, diverse cultures, and contributions of Indigenous Peoples. Staff from all areas of the VPD interact with the community, receive feedback, and answer any questions the community may have. This event is also utilized to capture public interest in policing as a career, with attendance from various VPD representatives including the VPD Traffic Section, Mounted Unit, and Emergency Response Section.

Neighbourhood Police Officer for the Vancouver Aboriginal Community Policing Centre

The [VACPC](#) was founded by Vancouver's Indigenous community to address social justice issues, improve safety for Indigenous Peoples and improve the relationship between the VPD and the Indigenous community through education, awareness, and open dialogue. As a non-profit organization, VACPC is governed by a Board of Directors elected by and from members of Vancouver's Indigenous community. In working with the Indigenous community, local organizations, and all levels of government, the VACPC is better able to provide services, programs and resources to help maintain the security and safety of Indigenous communities in Vancouver. The VACPC provides a safe place where community members can gather to identify, discuss, and address safety issues in Vancouver. The programs offered to the Indigenous community focus on social development, healing, life skills, support, and counseling, through a supportive environment.

As a conduit to the VACPC, the VPD maintains a dedicated Neighbourhood Police Officer (NPO) working with the Centre to support staff and community members accessing the VACPC. The NPO plays an integral part in fulfilling the mandate of the VACPC, providing support and representing the VPD. The NPO works with the Indigenous population to communicate their needs and concerns to the VPD. Specifically, this NPO is in a unique position to assist Indigenous Peoples when they file a missing person report, and will often assist individuals when liaising with the investigative units. The NPO works to achieve mutual

understanding on community policing issues, and serves as the primary contact for multiple Indigenous and non-Indigenous agencies in Vancouver

Indigenous Liaison and Protocol Officer

Reporting to the VPD Executive, the VPD recently implemented a new Indigenous Liaison and Protocol Officer position to work directly with the Indigenous community, to develop both VPD and community programming, to act as a resource for VPD members on Indigenous culture, and serve as a member of the VPD Indigenous Advisory Committee. This officer advises the VPD on all Indigenous protocols related to formal events and integrates these protocols into current VPD ceremonies. In addition to these duties, the Indigenous Liaison and Protocol Officer is a dedicated point of contact for community members to raise concerns they may have and that can be addressed through the VPD Indigenous Advisory Committee.

The Indigenous Liaison and Protocol Officer serves as the primary contact for multiple Indigenous agencies in Vancouver and serves as a Director on the UNYA, a registered non-profit society with the Province of B.C. and a Federally registered charitable organization. The Indigenous Liaison and Protocol Officer is also a Director at the Circle of Eagles Lodge, a men's residential facility providing care and custody to Indigenous men 19 years of age and over who have been conditionally released from federal institutions. This facility provides room and board, individual counseling, life skills training and job preparation, self-help programs, and traditional healing practices.

Musqueam Outreach

The MIB is located in the southwest area of Vancouver. There is a service agreement between MIB and the CoV, through which the City provides municipal services such as policing to the Musqueam area. The VPD has a dedicated Musqueam Liaison Officer who is responsible for this community and works closely with the Band administration. The Musqueam Liaison Officer works with the people of the Musqueam Nation and provides culturally sensitive police services. This includes partaking in speaking engagements that bring awareness to the history of the Indigenous Peoples of Canada, as well as

2019 Highlights

Indigenous Liaison & Protocol Officer

- Chairing the first VPD Indigenous Advisory Committee in February, 2019.
- Participating in ongoing recruit training at the Justice Institute of British Columbia.
- Facilitating Talking/Healing Circles on Tuesday evenings at Directions Youth Services.
- 2019 Tribal Journey with the Squamish Nation in Washington State.
- Participating in the 2019 Pulling Together Canoe Journey in Powell River, B.C.
- Facilitating Sweat Lodges on Sundays on the Squamish Nation in West Vancouver.
- Attending many community events through the year (e.g., funerals, marches, and other cultural events).

participation in activities to improve police relations with the MIB.

The Musqueam Liaison Officer has participated in the *Circle of Understanding* cultural competency training and also hosts university classes on a tour of the Musqueam lands as a way to share the history of the nation and region, while highlighting the positive policing that occurs in the community. Furthermore, the Musqueam Liaison Officer regularly engages in activities that take place in the Musqueam area including celebratory events (e.g., graduations) or otherwise (e.g., funerals).

More recently, the Musqueam Liaison Officer has been developing relationships with the Elders and youth through programming and safety talks. In the spring of 2019, the Musqueam Liaison Officer attended the Gathering our Voices (GOV) conference in Port Alberni with Musqueam youth. The Musqueam Liaison Officer endeavours to build strong relationships with the Musqueam community. All MIB members have access to the liaison's cell phone number and a timely call back is received from the officer regardless of the time of day. The Musqueam Liaison Officer develops knowledge of the history of the families in Musqueam, and endeavors to maintain positive relationships with those families.

The Musqueam Liaison Officer works with the MIB to improve safety in the community. One example is the advent of a Community Safety Committee, which mobilizes in the event of a community member going missing. The Musqueam Liaison Officer works closely with this community as liaison to other VPD specialty sections. This committee is made up of the managers from the critical departments of the MIB, such as Health, Safety and Security, Social Development, Drug and Alcohol Prevention, and Finance. The Community Safety Committee often acts on behalf of the family, and reaches out to the VPD MPU to coordinate efforts through the Musqueam Liaison member.

Indigenous Liaison Officer

The VPD has a dedicated Indigenous Liaison Officer who works with Vancouver's urban Indigenous population to communicate their needs and concerns to the VPD. The aim is to achieve mutual understanding and/or alignment on community and police issues. The Indigenous Liaison Officer also works closely with community partners to provide learning opportunities and healthy activities for high-risk Indigenous youth such as hiking and cultural outings. Many Indigenous youth have developed a trusting relationship with the Indigenous Liaison Officer through participation in different programs. The Indigenous Liaison Officer works one-on-one with Indigenous youth, and serves as a positive role model in the lives of many Indigenous youth, including current or former gang members.

Lunch with the Chief

Funded by the VPF, the Lunch with the Chief series is a popular quarterly event that has been well received by the DTES community, since the initial launch in 2014. The purpose of this event is to provide an informal platform for engagement where participants can share in food and conversation, to break down barriers in communication and have meaningful, positive interactions. Taking place in the heart of the DTES, at the Carnegie Community Centre, this event provides the opportunity for individuals to interact and create relationships with police members.

Many community members who have attended have indicated that they relished the opportunity to put names to faces, and appreciate the chance to have positive and engaging interactions with police members in a friendly environment. VPD's Sex Industry Liaison Officer (SILO), Indigenous Liaison and Protocol Officer, and Indigenous Liaison Officer distribute invitations to the community, and a large proportion of participants are Indigenous Peoples. The VPD invites guest speakers that are Elders from local nations and other key figures.

National Aboriginal Veterans Day

National Aboriginal Veterans Day is a memorial day observed in Canada in recognition of the contributions of Indigenous Peoples to military service, particularly in the First and Second World Wars and the Korean War. It occurs annually on November 8, and each year the VPD pays tribute to the contributions and sacrifices of Indigenous veterans who served our country bravely, so that all Canadians may inherit freedom.

Wreaths from the VPD and SisterWatch are laid, and VPD members take part in commemoration ceremonies, first in the Carnegie Centre and then at the cenotaph at Victory Square. Participation on this day of remembrance is from all ranks of the VPD including the Chief Constable, VPD Executive members, frontline police officers, SMCs, CPC volunteers, and VPD cadets.

Engaging Women and Girls

Although many crimes do not discriminate between genders, women are more vulnerable to certain types of crimes; the VPD recognizes that violence against young women and girls is an established barrier to gender equality. The trauma suffered by victims of violence can negatively impact their mental and physical health, relationships, and overall well-being.

Further, intersecting social disparities often disproportionately negatively impact marginalized groups such as Indigenous women, placing them at increased risk for violent victimization. For example, research has shown that the rate for Indigenous women who reported sexual assault was triple that of non-Indigenous women (11.3% compared to 3.5%). Additionally, in 2018, Indigenous women accounted for 27% of female homicide victims in Canada while only accounting for 2% of the population.

The VPD has developed specific programming, in consultation with the Indigenous community, tailored to prevent further violence against Indigenous women and has dedicated positions and programming to help ensure the safety of women and girls.

SisterWatch

Women in Vancouver's DTES community are particularly vulnerable to violence, injury, and death. Crime statistics in the DTES have never truly reflected the danger facing the women who live there. Whether the cause is fear of reprisals or general distrust of authority, women have traditionally been reluctant to report crimes against themselves and others. Following the tragic death of Ashley Machiskinic, the [SisterWatch](#) Project began in December 2010 with regular Town Hall meetings consisting of members of the DTES community and VPD

members. These members include the Chief Constable, members of the VPD Executive, senior management, as well as frontline officers, who form the SisterWatch committee. SisterWatch meetings are co-chaired by the VPD Chief Constable and an Elder from the community. The guiding principle of this committee is to provide a safe space for residents of the DTES to voice their concerns and to keep community members informed of police progress concerning investigations, and any advances in community safety.

In addition to the Town Hall meetings, the SisterWatch Project also established the SisterWatch tip line, a special telephone hotline that is staffed by civilian women from E-Comm, trained to assist callers who are concerned about their safety. This tip line encourages community members to come forward with information regarding crimes of gender violence, the death of Ashley Machiskinic, or any other safety concerns.

Women's Memorial March

The first women's memorial march was held in 1992 in response to the murder of a woman on Powell Street in Vancouver. Out of this sense of hopelessness and anger came a march to express compassion, community, and caring for all women in Vancouver's DTES, Unceded Coast Salish Territories.

Decades later, an annual march held on Valentine's Day, continues to honour the lives of missing and murdered women. This event is organized and led by women in the DTES because women, especially Indigenous women, have faced violence that has taken the lives of so many of both groups, leaving deep voids in their hearts. Individuals gather each year to mourn and remember those lost to violence by listening to their family members, by taking over the streets, and through spiritual ceremonies. VPD participation shows support for families of missing and murdered women and is a visible police gesture of respect and support for the Indigenous community.

Sex Industry Liaison Officer

The role of the VPD SILO has expanded in the community, moving beyond enforcement and into advocacy. This is a proven resource for many Indigenous women, including many who live and work in the DTES. The duties of this position include but are not limited to:

- accompaniment to follow up appointments (e.g., obtaining audio/video/written statements, victim services, medical appointments);
- transportation to out-of-town court commitments (e.g., Crown Counsel interviews, courtroom preparation, and testifying in court);
- assisting with placement in detox, recovery;
- transitional housing and second stage housing; and
- connecting with community programs that include housing, mental health, employment, and personal development.

The SILO works closely with the Women's Information and Safe Haven (WISH) Drop-in Centre where connections are made with Indigenous women of varying ages and backgrounds. As a result of the SILO's presence in the community and availability outside of regular office hours, the SILO assists in a wide range of ways including organizing violence prevention and safety workshops. For example, the SILO has participated in the Aboriginal

Cultural and Creativity Program, which hosts 8 to 12 participants who are all Indigenous sex workers. This program is held two times per year and includes a ceremonial sage-picking event hosted by a band in the Merritt Nicola Valley region and the Conayt Friendship Centre. In addition to VPD participating in picking this medicine, transportation is provided for up to nine women who would otherwise be unable to attend. Approximately 80 other Indigenous women generally attend the event.

Partnerships are essential to the success of the work done by the SILO. Community partners include WISH, the Prostitution Alternatives Counselling and Education (PACE), First United Church, Carnegie Outreach, VCH Intensive Case Management Team, Downtown Community Health Clinic, DTES residences, detox, recovery and transition houses, and various shelters (e.g., Triage, Al Mitchell Place, Yukon, and the Evelyn Saller Centre).

Select community work from 2019 includes the following:

- The SILO assisted vulnerable women and men in obtaining just over 100 pieces of provincial identification under the ID4ME program. Since the Kettle Society created a program specifically to assist individuals in obtaining identification, the demand on the SILO for ID has lessened, with the exception of self-initiated workshops, referrals from previous ID4ME recipients and their supports. Workshops are conducted on an as needed basis, generally once or twice per month.
- Approximately 120 emergency phones (911 calling capacity) were provided to vulnerable and more marginalized individuals in 2019.
- De-commissioned VPD notebooks are now prepared for distribution to the community for citizens interested in keeping important information including licence plates and descriptions of potential bad dates. An Indigenous community artist provided the images for the front cover and these notebooks are now being distributed in the community, at workshops and events including Lunch with the Chief raffle baskets. Approximately 200 notebooks have been distributed to date.
- The SILO continues to have a scheduled weekly presence at WISH and The Corner Drop in Centre where engagement with vulnerable women and men in the sex industry continues to be meaningful. Outreach efforts to residences, shelters and overdose prevention sites are places where informal introductions and meetings take place as well as information sharing. Developing stronger relationships with staff and support workers occurs when they are invested and see positive outcomes from collaboration. Some of these include vacating arrest warrants, amendments to conditions, educational opportunities, accompanying and transporting to detox, recovery and transition houses, as well as out of town family funerals, celebrations, and ceremonies.
- An increase in collaborative approaches in assisting vulnerable women continues to grow in the DTES with more frequent connections with SisterSpace, Fir Square at B.C. Women's Hospital, Indigenous Health Clinics, Overdose Prevention sites, SheWay, STOP Team, and AIDS Vancouver. Efforts are being made to further develop relationships with staff and newly housed residents in modular housing.

ID4ME

The SILO also initiated and operates the ID4ME program in the DTES. The ID4ME identification project is designed to assist low barrier and vulnerable individuals to move forward in their lives by providing them with photo identification. The success of this program has been particularly felt, in the DTES with the residents in the area using their new ID to open bank accounts, obtain improved housing, and upgrading their education. Every contact made with individuals in this program closes the gap in helping to strengthen existing relationships with the Police. Since 2015, the VPF has supported ID4ME which has acquired just over 650 pieces of identification including birth certificates, BCID, BC Services, and Status cards, thereby changing the lives of residents in our community.

Women's Personal Safety Team

In 2013, 16 female police officers of various levels of seniority and experience were recruited as volunteers and trained to form the [Women's Personal Safety Team](#) (WPST). As news of the WPST circulated, more female police officers expressed interest in participating. As of 2019, the WPST consists of 30 instructors who volunteer their time to teach women skills and concepts regarding crime prevention and dealing effectively with violent encounters. The workshops are designed to be easily learned and remembered by women with little or no tactical training. The WPST has several community partners, including SisterWatch, and the Right to Play program, that work with Indigenous Youth and the VACPC. To ensure Indigenous women are receiving training, workshops have been held in the Musqueam Nation and at the Vancouver Native Housing Society. Safety training has also been provided to other low-to-no barrier women's housing in the DTES. Approximately 30% to 40% of the participants are Indigenous women.

In 2019, the WPST continued to inform citizens about crime prevention and safety by:

- conducting 35 presentations (compared to 20 in 2018) reaching over 2000 women in the community (compared to 930 in 2018);
- partnering with DIIRS and hosting several presentations for ISSofBC. Many participants were from Middle Eastern countries and experiencing self-protection education for the first time;
- participating in the PLAY Program and working with Native Youth from B.C. and Alberta at Camp Sunshine in Gibsons, B.C.;
- having a delegation of police women from the Ukraine participating a WPSW to learn about this program; and
- connecting with Big Sisters of BC Lower Mainland and hosting a workshop for them during their summer program at Simon Fraser University.

The Shoebox Project

Funded by the VPF in 2019, VPD civilians in the Information Management Section (IMS) participated in the Shoebox Project for Shelters. This program provides women in need (e.g., in shelters, displaced from their homes) with shoeboxes containing approximately \$50 worth of items during the holiday season. The donated shoeboxes included something socks, scarfs, toiletries, gift card; a journal and each box had a message of hope. The shoeboxes go to women accessing agencies throughout the Lower Mainland, but include many in the city of Vancouver. The shoeboxes donated by IMS were earmarked for Vancouver area

shelters, including the YWCA. The VPD IMS will be participating in this program again in 2020.

Collaborating with Citizens: A Collective Effort Towards Safety

Citizens' Crime Watch

The VPD's [Citizens' Crime Watch](#) (CCW) program has been operating since 1986 and involves citizens volunteering their Friday and Saturday nights to assist the VPD, reporting incidents such as TFAs in progress or identifying stolen vehicles. Volunteers often assist the VPD Traffic section and have worked on Counter Attack Roadblocks to apprehend drug and alcohol impaired drivers. CCW also assist in searching for missing persons of a high-risk nature.

The assistance that the CCW volunteers provide the VPD is significant. For example, in 2019 CCW volunteers went out on patrol for a total of 842 shifts, accumulating 14 arrests, 230 Violation Tickets, 21 stolen vehicles recovered, and 6 Immediate Roadside Prohibitions issued. Additionally, volunteers have spotted at least three individuals who had overdosed and were responsible for getting medical assistance in time to revive the person.

With a commitment to this community-based model, the VPD maintains a CCW Coordinator who is responsible for the supervision and coordination of all activities relating to the CCW program, deployment of personnel, coaching, evaluation, administration, and planning. The CCW Coordinator also takes part and assists in the coordination of community events, including involvement in event coordination, staffing, scheduling, training, and other associated duties.

Watching out for Each Other: Block Watch



[Block Watch](#) is all about neighbours watching out for neighbours. Block Watch is a free community-based crime prevention program that trains over 1,000 Vancouver residents annually.

With the help of the VPD, residents form a communication chain among neighbours to share crime prevention information, crime alerts and more, in residential neighbourhoods comprised of single family dwellings, condos, townhouses and apartments. They are provided the opportunity to be trained on how to identify suspicious behaviour and make their homes less attractive and more difficult for thieves to target. Block Watch is a testament to the fact that neighbours who work together can deter crime before it starts.

The Vancouver Block Watch program started in 1989 and is managed and maintained by a civilian coordinator and a police officer. In 2019, Block Watch celebrated its 30th year as a VPD community-based crime prevention program. As of 2020, VPD Block Watch works with 400 active Block Watch groups across Vancouver. This amounts to 700 community leaders, called 'Captains and Co-Captains,' who have involved 7,300 of their neighbours in crime prevention. In perspective, this is 8,000 extra pairs of Block Watch trained eyes and ears who are looking out for each other and reporting suspicious activity to the police.

Block Watch members have direct access to a police officer, the Block Watch Investigations and Training Officer (BWITO), who provides support to Block Watch groups through training, guidance and assistance for all crime, suspicious activity and nuisance related issues. When a new Block Watch forms, the Captain(s) and Co-Captain(s) attend a four-hour training session, and then request the BWITO to attend their 'First Meeting,' where the neighbours gather in their neighbourhood or complex. Strategies are discussed to help protect residents and deter crime. The group is also shown a presentation demonstrating how to be an effective Block Watch participant, recognize the body language and profile of property crime thieves, how and when to report incidents to the police, as well as effective crime prevention tips. These community-based personalized sessions help develop an understanding of the role of the police and build positive police/public relationships with thousands of diverse Vancouver residents.

When Captains inform the BWITO of criminal activity or suspicious activity in their areas or complex, the BWITO can provide specific assistance and identify emerging neighbourhood crime trends. The officer will liaise and share intelligence with appropriate VPD resources and sections to help resolve the problem. The BWITO also works with external partners including the CoV, ICBC, and Metro Vancouver Transit Police for coordinated support.

The Block Watch Coordinator is the first point of contact for new enquiries to start a Block Watch and supports and tracks the activation of each group. The Coordinator provides ongoing administrative services and marketing supplies to maintain an active Block Watch status with the program. The position also works in partnership with the constable to develop and implement marketing strategies to grow the program. The Coordinator provides all Block Watch members with weekly crime statistics, links to the VPD's crime mapping program - GeoDASH, crime prevention tips, and other resources to Captains to share with their members.

Community Policing Centres

Vancouver's 11 [CPCs](#) hold a unique position among crime prevention initiatives in North America, with a strong partnership between the community and its police force. Unlike their counterparts in other cities, these centres are not satellite police stations, rather, they are operated, staffed, and governed by members of the community.

The name and contact information of each CPC is described below:

- [Chinese CPC](#)
203 - 618 Quebec Street, V6A 4E7
Tel: 604-688-5030 Fax: 604-688-5070
info@chinesecpc.com
- [West End Coal Harbour CPC](#)
1267 Davie Street, V6E 1N4
Tel: 604-717-2924 or 604-717-2925
Fax: 604-717-2926
info@wechcpc.com

- [Granville Downtown CPC](#)
1263 Granville Street, V6Z 1M5
Tel: 604-717-2920 Fax: 604-717-2922
info@granvillecpc.ca
- [Kitsilano Fairview CPC](#)
78 - 1687 West Broadway, V6J 1X2
Tel: 604-717-4023 Fax: 604-717-4029
kitsfaircpc@gmail.com
- [Vancouver Aboriginal CPC](#)
1719 Franklin Street, V5L 1P6
Tel: 604-678-3790 Fax: 604-678-3792
coordinator@vacpc.org
- [Grandview Woodland CPC](#)
1977 Commercial Drive, V5N 4A8
Tel: 604-717-2932 Fax: 604-717-2923
info@gwcpc.ca
- [Hastings Sunrise CPC](#)
2620 East Hastings Street, V5K 1Z6
Tel: 604-717-3584 Fax: 604-216-0991
info@hscpc.com
- [Collingwood CPC](#)
5160 Joyce Street, V5R 4H1
Tel: 604-717-2935 Fax: 604-430-4955
info@collingwoodcpc.com
- [South Vancouver CPC](#)
5435 Victoria Drive, V5P 3V9
Tel: 604-717-2940
info@svcpc.com
- [Kerrisdale Oakridge Marpole CPC](#)
6070 East Boulevard, V6M 3V5
Tel: 604-717-3434 or 604-717-3433
Fax: 604-717-3432
kompcc@shaw.ca
- [Strathcona CPC](#)
872 E Hastings Street, V6A 1R6
Tel: 604-717-0622
info@strathconacpc.ca

All the CPCs carry out a range of community engagement programs including foot/bicycle patrols, road safety programs, ethnic and cultural education programs, senior safety programs, and victim services. As of 2019:

- CPCs are now invested in the CoV Temporary Modular Housing Project by being a part of the Citizen's Advisory Committee;
- Collingwood CPC has been active in liaising with a refugee organization that assists women new to Canada;
- CPCs have been involved with theft from auto (TFA) initiatives in their communities to assist the VPD with property crime issues;
- The VPD's [Community Policing Services Unit](#) (CPSU) CPC Liaison Constable initiated a 'Field Day' experience for CPC volunteers/student volunteers, whereby they visited different VPD areas/facilities. Approximately 15-20 volunteers from two CPCs participated;
- 11 CPC Volunteer Field Days were completed in 2019. This initiative offers the CPC volunteers the opportunity to see the VPD facilities and observe members on their daily duties and gain a better understanding of the role of police in the community;
- the VPD's CPSU partnered up with the CPCs in the CPC Soccer Challenge, with the CPCs competing against one another. The CPC's designated VPD NPO also participate in the Soccer Challenge; and
- the CPSU's CPC Liaison Constable, meets regularly with CPC volunteers to advise and guide them along in their law enforcement career paths.

Khalsa Diwan Society CPC

To further develop positive relationships with members of Vancouver's South Asian Community, the South Vancouver CPC partnered with VPD and the Khalsa Diwan Society to open an outreach centre in South Vancouver. The Khalsa Diwan Society CPC is staffed by a VPD police officer and several volunteers. Visitors of the outreach centre are welcomed in a friendly environment, where they can seek assistance with their crime and safety concerns. Volunteers of this outreach office are tasked with foot patrols, organizing safety presentations and youth games or other activities in an attempt to help build and foster a positive relationship between youth and policing agencies.

Outreach to Guard Bicycle Theft

Over the last two decades, bicycle theft has grown to epidemic proportions, affecting over two million North Americans at an estimated economic impact in excess of \$500 million annually. Within B.C., data from Statistics Canada suggests that about 50,000 citizens of B.C. are affected by bicycle theft annually, with as many as 15 to 20% of these thefts attached to secondary crimes. Additionally, neighborhoods and residents face quality of life and safety concerns, even if they are not directly impacted by the criminal activity. Added costs aside, the direct impact of bicycle theft in B.C. is estimated to be approximately \$70 million annually.

While the direct property loss is approximately \$40 million within B.C., the impact to the community is more than the retail value of the bicycle. Stolen bicycles provide an agile getaway vehicle and are frequently associated with TFA and break-and-enter crimes.

The cost of seizing, processing, and storing the thousands of bicycles annually is time-consuming for police, and it ultimately fails to convert into a meaningful public service. Tens of thousands of policing hours ultimately result in less than five percent of recovered bicycles being returned to victims. Most of these seized bicycles are sent to auction, charity, or scrap yards. The CoV recovers over 2,000 bicycles a year of which the vast majority are auctioned or destroyed.

Project 529

To address these issues with bicycle theft, the VPD partnered with [Project 529](#), a community policing platform designed and implemented by Microsoft veterans with decades of large-scale software experience. Project 529 is a modern, simple, and highly efficient bicycle registration/reporting/recovery platform that allows the public and private sectors to attack this problem collaboratively. It permits cross-municipality cooperation (which is essential as bicycles are often illegally sold outside of the area they were stolen) through a single database that can scale provincially and nationally. Project 529 partners with CPCs and bicycle retailers to offer this free service. This successful bicycle registry and bicycle theft prevention/recovery program has registered over 100,000 bicycle since its inception.

Project 529 currently has two VPD police officers assigned to the program, which operates out of a space at the Mount Pleasant Community Centre. Project 529 conducts training for CPCs, CSPs, BIA, and other community partners. Project 529 also takes part in assisting Kwantlen College Criminology department with taking two practicum students for the spring semester.

In 2019, Project 529 participated in over 50 events throughout Vancouver including a regular presence at Granville Island. During Bike to Work Week, Project 529 held 10 “bike to work” registration stations throughout the city, operated by CPC volunteers, outside agency guests, VPD CSPs, VPD police officers, and CoV staff. Over 3,000 members of the public were assisted through these events. Many Vancouver bicycles are now being recovered across the province and being returned to their owners.

VPD is a world leader in tackling bicycle theft, and Project 529 is currently being sought out by over 30 police agencies in B.C., as well as others in Canada, and around the world. Over the last three years, bicycle theft in Vancouver has been reduced by 40%.

Project Rudy

In the summer of 2018 VPD, in conjunction with Project 529, developed Project Rudy to specifically address bicycle theft on Granville Island. At the time, Granville Island was the number one bicycle theft area for the CoV and possibly the Province. Project Rudy created a partnership with the federal government, the City, and private and public business. Initiatives of Project Rudy included the following elements:

- A bicycle valet system that operated daily from 10 a.m. to 7 p.m., allowing cyclists to valet their bicycles for free. While parked, the bicycles were registered with Project 529.

- Loaner locks were made available at six business where cyclists could get obtain ABUS locks in exchange for their drivers' licence, which they could utilize while on site.
- Advertising was developed to inform the public about how to properly lock their bicycles (e.g., not to use cable locks), the existence of the free valet and loaner lock availability, and the possibility of bait bicycles being located on the Island.
- VPD mapped the area and made recommendations on moving bicycle racks from high-risk areas to higher use and safer areas.

During the program's first year bicycle theft went from three bicycles stolen per day to one bicycle a week. VPD is presently in the early stages of expanding the program with Project Lucas to the Olympic Village neighbourhood in an attempt to reduce the bicycle thefts in that area, using the same techniques as Project Rudy.

Business Community Engagement Initiatives

The VPD regularly engages the business community by liaising with retailers and business organizations with matters such as: exchanging crime related information, providing crime analysis and advice to the business community, and assisting with crime prevention initiatives. The VPD Business Liaison portfolio is responsible for coordinating education and training for the business community on crime prevention and awareness. An example of work conducted in this capacity includes collaborating with stakeholders, including Vancouver Business Improvement Areas (BIA) in the creation of a Business Crime Prevention Tips booklet. The booklet was distributed via CPCs and hand delivered to businesses by volunteer foot patrols.

Project Access

Project Access, is a designed to reduce potential barriers and time delays when responding to emergencies at high security rental and/or strata residential buildings. Launched in 2014, Project Access involves partnering with building strata and rental companies to provide police with a secure method of entry should a resident of their building require immediate assistance. The idea is to work cooperatively with individual property managers and/or strata corporations in Vancouver to develop infrastructure and processes to provide rapid police access to select buildings during exigent situations through the VPD's communications partner, E-Comm.

Project Griffin

Adopted in 2009 from England, Project Griffin aims to increase public safety by supplying security-minded organizations and groups with information and support to assist them in their crime prevention efforts. Focusing on property crime, Project Griffin helps increase the quality of information/intelligence provided by these groups, thus improving our service delivery. The VPD provides a training session to business groups on five topics:

1. Basic suspect identification: Participants learn about the common denominators that can often identify a suspicious person by their actions and behaviours;
2. Communication protocol: Participants discover what is expected by E-Comm when they are reporting suspicious or criminal activity;

3. Counter-terrorism: Participants learn to recognize suspicious behaviours and incidents that may be precursors to Terrorist activities;
4. Gangs in Vancouver: Participants hear from VPD police officers about the current gang climate in Vancouver; and
5. Evidence preservation: Participants learn about the importance of crime scene protection and basic forensic identification techniques used by the police.

SECURUS and SHIELD

The SECURUS Program is a community awareness program about possible terrorist activities that may target a specific location or utilize the services of an unwitting business to carry out an attack. VPD's Criminal Intelligence Unit (CIU) has registered up approximately 300 businesses, schools, religious sites, sporting venues, hotels and other sites in Vancouver with SECURUS. Since 2015 CIU has delivered 107 SECURUS presentations to 3,673 civilians. More specifically, in 2019, there were 12 presentations and 6 to date in 2020.

CIU is currently in the process of evaluating/transitioning to the New York Police Department (NYPD) SHIELD Program and funding has been received from the CFO to assist in this process. This Shield Program is an umbrella program for NYPD initiatives that pertain to private sector security and counter-terrorism. In essence, SHIELD is a partnership with the community that provides training services to the public and private sector entities in defending against terrorism. Global SHIELD provides world class counter-terrorism resources to international law enforcement agencies that join the SHIELD program. These resources include publications, training, conferences, real-time intelligence and an on-line library of best practice security awareness.

CIU is invested in public awareness to counter violent ideology and depends on members of the community to be our 'eyes and ears'. With a possible transition to SHIELD, the VPD will have the full resources of the world-class NYPD Global SHIELD program which will only enhance our existing relationships with community contacts.

Terrorism Threat Awareness Video Project

CIU applied for and received a grant from the VPF to make three safety and educational videos on counter terrorism awareness. Each video scene runs approximately 90 seconds and takes place at high-risk business that have either been targeted in recent attacks in the West or have been used to facilitate an attack. The videos take place at a truck rental desk, hotel lobby check-in desk and outside a large public venue. CIU members produced each scene and they were filmed by members of the Public Affairs Section. The videos are meant to highlight suspicious indicators of a would-be violent extremist and are geared for civilians working in vulnerable businesses. These videos will be presented via VPD social media and/or through CIU presentations.

Other Community Liaison Positions

Homeless Outreach Officer

Strong partnerships between all levels of government, non-profit and co-operative housing providers, and community support services are required to build safe and inclusive

neighbourhoods. Organizations such as BC Housing, Ministry of Social Development and Poverty Reduction (MSDPR), faith-based organizations, non-profit housing operators working in single room occupancy and shelter systems, as well as community members, partner to provide support to the marginalized population. Towards this goal, in 2009, the VPD developed the role of a Homeless Outreach Constable. The Homeless Outreach Constable conducts outreach work with the homeless and coordinates with mental health, addiction, housing serving sectors, and municipal and provincial governments. The Constable also acts as a resource for external agencies, as well as within the VPD. In 2019, the Homeless Outreach Constable conducted significant outreach including:

- engaging with Raincity housing and the COV for the openings of winter shelters;
- conducting approximately 40 SRO Inspections in collaboration with CoV building Inspectors and Vancouver Fire Rescue Services (VFRS);
- conducting outreach with both the MSDPR and VCH in an effort to address some of the more challenging homeless individuals;
- presenting at the BC Crime Prevention Association conference;
- monitoring Temporary Modular Housing developments that were opened in 2019 (52 units at 258 Union Street, 98 units at 610 and 620 Cambie Street, and 52 units at 265 West 1st Ave);
- liaising with the Abbotsford Police Department and West Vancouver Police Department to discuss the VPD's Homeless Outreach position that both departments were researching in anticipation of creating a similar (or the same) position in their respective agencies; and
- forming a group comprised of multiple stakeholders including VPD, CoV, VCH, Carnegie Outreach, and BC Housing to work collaboratively tackling challenging homeless cases that all groups are dealing with.

Community Events Coordinator

This Community Events portfolio was created in 2017 and assigned to a temporary Constable to assist the CPSU Sergeant with event planning. The Community Events Coordinator works with multiple community partners throughout the year to facilitate VPD participation in events around Vancouver and within VPD.

In 2019, the Community Events Coordinator exclusively handled eight events including the VPD Volunteer Recognition Day, Family Day, PNE First Responders Weekend, Science World First Responders Weekend, Celebration of Light, and the VPD contingent in the Santa Claus Parade. Additionally, the Coordinator assists community stakeholders in organizing the VPD contingent for the various parades that occur every year such as Chinese New Year Parade, Vaisakhi Parade, Pride Parade, and the Remembrance Day Ceremony.

CPC Liaison Officer

The primary role of the CPC Liaison Officer for the Community Services Section (CSS) is to provide support and guidance to over 950 CPC volunteers. As a representative of the VPD during numerous events, the CPC Liaison is involved in organizing and leading the volunteers

at numerous functions, creating a cohesive image of the volunteers in attendance and reinforcing the position that they are partners with the VPD.

One positive effect of the interactions between the CPC Liaison Officer and CPC volunteers, is that volunteers are afforded the opportunity to connect with VPD members for guidance and mentorship when they are considering a career in law enforcement. Certain initiatives that the CSS has introduced to the CPCs, such as the Volunteer Field Day and VPD/CPC Volunteer Interactive Sessions, are well-received and attract high volunteer participation. Overall, having a designated VPD police officer that is consistently available to liaise, guide, and mentor the volunteers, benefits them and the community that they are serving. The CPC Liaison also works on a newsletter that provides information on events that the VPD and CPCs are involved with, as well as resources.

Community Safety Personnel

CSPs are distinct and separate from regular police members, and they are considered a unique element of the VPD. Structured within the Community Safety Unit, their primary purpose is to:

- assist with lower-level, lower-risk tasks, as directed, to alleviate regular police officers from such tasks, thereby providing regular police officers with more capacity to serve the community and to maintain high visibility while patrolling neighbourhoods;
- assist the VPD at community and public events by providing a visible presence to the community and promoting safety and security where the presence of a regular police officer is not required;
- act as a liaison between regular police officers and the community, as appropriate, to ensure the VPD continues to effectively serve citizens in Vancouver; and
- assist police officers in order to maximize their available proactive policing time.

The CSP program serves also a valuable hiring tool; several former CSPs have been hired as police officers in the VPD and other agencies.

Representing the Community on all Levels: The VPD Executive

Vancouver is a community that celebrates and benefits from the tremendous diversity of its residents and visitors. People of all backgrounds, ethnicities, cultures, colour, religions, gender, and sexual orientation comprise our community.

The VPD recognizes that our staff must reflect the community we serve and that includes the management and leadership levels of the Department. The [VPD Executive](#) is comprised of 12 (7 men and 5 women) accomplished police officers and civilian professionals that are indicative of the diverse and inclusive community we are proud to serve (please see Appendix).

Recruiting Initiatives

Although the typical age of recruitment for VPD police officers is between 23-27 years of age, recruitment efforts begin long before the actual hiring date in a potential applicant's life. VPD police officers act as direct role models and mentors for youth through various programs and initiatives. This investment by the VPD often instills youth with an aspiration to become future police officers and thereby begin to take the necessary steps and life choices required to do so.

Positive interactions between students and police are not limited to youth programs primarily delivered by youth service focused officers such as a SLOs. Police recruiters too, have a positive impact on the lives of youth by educating them and/or demonstrating what becoming a police officer entails. In addition to the myriad of youth programming delivered by various VPD police officers, the VPD's [Recruiting Unit](#) regularly attends schools, colleges, and universities to engage and inform students about a policing career, and what early steps they may take for a successful path into policing. As an example of this early outreach, in March 2019, the VPD Recruiting Unit travelled to Prince George and Cranbrook, targeting colleges and secondary schools. It is recognized that many of the students at these institutions will make their way to the Lower Mainland looking for work and it is the VPD's intention to recruit these potential applicants to be reflective of the greater community of B.C.

The VPD Recruiting Unit also works closely with VPD's DIIRS in efforts to engage communities including the LGBTQ2S+ and Indigenous communities and work together on programming and events to recruit members of these communities. Select examples include the following:

Gathering Our Voices Indigenous Youth Conference

The Recruiting Unit attends the annual GOV Indigenous conference hosted by the BC Association of Aboriginal Friendship Centres. This large event attracts thousands of Indigenous youth participants along with their chaperones and other guests of honour. The GOV has provided the VPD Recruiting Unit an excellent opportunity to promote career opportunities within the VPD.

Hoobiyee (Nisga'a New Year)

The Recruiting Unit attends the annual Vancouver Hoobiyee Festival, a celebration of the waxing crescent moon, hosted by the Nisga'a Ts'amiks Vancouver Society. This event draws thousands of Indigenous visitors every year, and has provided the VPD Recruiting Unit an opportunity to make positive connections with members of the Indigenous community through this event.

National Indigenous Peoples Day

National Indigenous Peoples Day is celebrated annually across Canada on June 21, and in Vancouver comprises a full day of events, activities, and performances. The VPD Recruiting Unit attends this event hosted by the Vancouver Aboriginal Friendship Centre Society at Trout

Reflecting Our Community

- VPD police officers represent at least 15 different ethnic backgrounds
- 25% of VPD police officers are ethnically diverse
- 35% of VPD civilian employees are ethnically diverse
- Currently, 27% of VPD police officers are female
- Of all VPD police officers hired in 2019, 20% were female
- VPD police officers speak over 50 languages



Lake. This celebration brings together a large population of the Vancouver Indigenous community, including First Nations, Métis, and Inuit People.

Indigenous Link

The VPD Recruiting Unit recently formed a partnership with Indigenous Link, an online employment search portal that reaches out to an Indigenous audience on a national level. With a virtual presence on this career website, the VPD Recruiting Unit has provided a unique opportunity for the Indigenous community to connect with the VPD and engage VPD Recruiters on career opportunities with the VPD.

Chinese New Year Parade

On February 10, 2019, the Recruiting Unit participated in the 46th annual Chinese New Year Lunar Parade through Chinatown. There were over 3,000 participants from other community and cultural groups, and the event drew over 100,000 spectators along the parade route. The VPD Recruiting Unit was able to not only showcase its initiatives to the community, but this event offered a fantastic opportunity to connect with other young volunteer participants with interest in law enforcement.

Korean Leadership Conference

On March 16, 2019, VPD recruiters attended the C3 Korean Leadership Conference to set-up a Recruiting booth during the lunch hour. Members engaged with 125 potential applicants, which included members of the Korean Consulate. The event was a success, and organizers were enthusiastic about having the Recruiting Unit attend further networking events throughout the year.

Vaisakhi Parade

The annual Vaisakhi celebration provides a valuable opportunity for VPD recruiters to engage with the South Asian community. On April 13, 2019, in one of its main outreach events of the year, the VPD Recruiting Unit participated in the Vaisakhi parade. The Recruiting Unit vehicles formed part of the VPD contingent in the parade as they proceeded from the starting point, the Khalsa Diwan Society Sikh temple, and along the entirety of the parade route. Throughout the festive day, VPD recruiting officers engaged with the community, handed out stickers, and answered questions as they moved through the busy streets of South Vancouver.

LGBTQ2S+ Community

Ensuring diverse communities are represented, the VPD Recruiting Unit created a dedicated information session for the LGBTQ2S+ community. To plan the event, members of the Recruiting Unit were involved in ongoing discussions with VPD's DIIRS, as well as VPD members from the LGBTQ2S+ community. The well-attended event was held on August 13, 2019 at the Roundhouse Community Arts and Recreation Centre. The evening included compelling speakers from the Department discussing their experiences with the VPD, and resulted in several prospective applications. This information was also made available through social media via Twitter, which provided an opportunity for prospective applicants to discreetly reach out to the VPD Recruiting Unit and ask questions in real-time.

The VPD Recruiting unit is also active on social media with [Twitter](#) and [Instagram](#) accounts; this footprint in the online world generates outreach opportunities for the unit. The VPD Recruiting Unit works to reach many different communities and groups across Vancouver, B.C., and western Canada. Efforts continue with several events planned throughout 2020. The efforts of recruiters to identify competitive candidates continues with innovative outreach and targeting not only regular member applicants, but also applicants for the SMC program.

Community Outreach for Mental Health

Awareness regarding mental health has been a long-standing priority for the VPD (e.g., in 2008, the VPD published [Lost in Transition](#), regarding the lack of capacity in the mental health system). In 2013, the VPD released [Vancouver's Mental Health Crisis: An Update Report](#), focusing on the increase in mental health incidents, particularly violent crimes that police, as the first responders, must deal with. The VPD's 2018 [Pathway to Wellness](#) video highlights the many partnerships and initiatives the VPD is involved in to lessen the impact untreated mental illness has on the community, on policing, on health services, and, most importantly, on those living with mental health issues.

The VPD, in collaboration with health partners, continues to provide a spectrum of mental health outreach, care, and support to the community, including challenging environments such as the DTES. Furthermore, the VPB meets annually with health partners to provide governance and direction to VPD and health working groups. More specifically, Project LINK is a collaboration among the VPB, the VCH Board, and the Providence Health Care Board. Initiated in October 2011, its goal is to achieve improved outcomes for those living with mental illness and addiction. A major first step was to enable the sharing of information across these police and health organizations. With that in place, LINK was able to make dramatic changes, including formation of the Assertive Outreach Teams (AOT) and Assertive Community Treatment (ACT) team, described below, these teams have greatly reduced negative contacts with police, emergency room visits, victimization, and criminal justice involvement for those living with mental health and substance use issues.

The Assertive Outreach Team

The AOT is a health care and police partnership unique to Vancouver. This program serves to stabilize high-risk clients and transition them to the appropriate level of care in the system. This program partners a police officer with a team of health care professionals including

psychiatric nurses, clinical supervisors and psychiatrists. This team works together to meet the needs of complex concurrent disorder clients, formulate treatment plans, and navigate intersections of various systems (e.g., criminal Justice, health care etc.). This team works with a cohort of 20-40 clients and works collaboratively to problem solve issues and provide care in the community.

Assertive Community Treatment

ACT provides long term tertiary level care to clients in the community. The ACT program is one police officer engaged with five ACT teams who serve 350 clients in the community. Each multi-disciplinary ACT team is comprised of approximately 10 health care professionals including but not limited to social workers, nurses, psychiatric nurses, vocational therapists, peer support members and psychiatrists to provide wrap around care to clients and improve their quality of life. Provincial ACT standards suggest three positive contacts per client/per week, preferably in person.

Car 87/88

VPD's Car 87/88 program is a partnership between a VPD plain clothes police officer and a registered nurse or registered psychiatric nurse to provide urgent assessment/intervention for individuals for people with mental health issues. The partnership of work as a team in assessing, managing and deciding the most appropriate action in the best interest of the patient and the community. The program is co-managed by the VPD and VCH, with appointments directed in consultation with VPD by VCH. Work for Car 87/88 typically includes but is not limited to:

- assessments of clients in community;
- connecting persons to mental health and addiction services;
- support of the work of Community Mental Health Teams including outreach, assessments and providing/administering of medication; and
- apprehension of clients, where necessary under Section 28 of the *Mental Health Act* or those with active warrants (i.e., Form 4¹ or Form 21²) intended to ensure the individual is supported and/or continues to be connected to mental health plan of care.

Community Outreach and Partnerships through VPD Investigative Sections

In addition to serving as members on the SisterWatch committee, members of the VPD's SIS are partners in The Treehouse Vancouver Child and Youth Advocacy Centre (CYAC), a collaborative initiative between the VPD, Family Services of Greater Vancouver (FSGV), BC Children's Hospital, MCFD, and Vancouver Aboriginal Child and Family Services Society (VACFSS).

¹ Form 4 – Medical Certificate issued by a physician to order a person detained involuntarily. When issued, the police officer has authority to apprehend that individual for the purpose of bringing them to a care facility.

² Form 21 – Director's Warrant issued to peace officers and to apprehend the named patient and transport him/her to a named facility.

The Treehouse coordinates a dynamic, multi-disciplinary response, which supports the investigation and intervention of child abuse, minimizes trauma, and works to enhance the community's ability to protect children. The team is comprised of VPD [Sex Crimes Unit](#) (SCU) detectives, social workers from MCFD, the VACFSS, and Victim Support Workers from FSGV. It also includes a service director and coordinator from The Treehouse, and an accredited facility dog from the Pacific Assistance Dogs Society. In addition to the Treehouse, investigators in the SCU rely on the support of VACFSS for child abuse or sexual assault investigations that are not conducted at the CYAC. For example, VACFSS counselors support Indigenous victims by providing counseling and/or treatment services in addition to providing supportive information on the criminal justice system.

VPD's [Domestic Violence and Criminal Harassment](#) (DVACH) Unit investigators and Victim Support Workers attend quarterly meetings at VACFSS headquarters in Vancouver. Other community partners in attendance include Probation Officers, MCFD representatives, and various advocacy group representatives. VPD's DVACH Unit collaborates with a variety of community partners to help those involved in violent situations with an intimate partner. For example, DVACH detectives will often work with the Musqueam Liaison Officer and the MIB Security when incidents of intimate partner violence occur in the community. This collaboration typically involves offender management and safety planning with the victims. DVACH also works closely with community services societies, namely VACPC and WISH. Continued training and sharing of appropriate information is vital to maintaining community relationships that are relied upon to ensure the safety of victims.

DVACH investigators ensure that they develop community connections via presentations and meetings with community members. For example, a DVACH sergeant and Victim Support Workers from FSGV present to group participants, including Indigenous women, transgendered persons, sex workers, and those with mental health and addiction issues. The participants are actively involved in relationships or situations that expose them to frequent physical violence - largely intimate partner violence. Select topics are presented including safety planning, justice system processes, counseling and support services, and discussions around bridging the barriers to reporting to police.

In 2015, DVACH created the [Safety Awareness for Elders](#) (S.A.F.E) program to increase awareness and education directed at victims and potential victims of elder abuse. The program includes specific information sessions for communities as well as training for community organizations. Simultaneously, the educational materials and the VPD S.A.F.E internet site are made available to community and various organizations. The goal is to increase reporting of these offences and ultimately decrease all forms of elder abuse in Vancouver. The program serves Vancouver's diverse communities, with information in multiple languages and disseminated through different modes of communication. The S.A.F.E program assists the VPD with engaging and educating the aging community, increasing positive and trusting relationships with elders who may become, who are, or have been victims of elder abuse

Another section within the SIS is the [Counter Exploitation Unit](#) (CEU). The CEU has an imbedded FSGV Case Worker who frequently acts as a bridge between sexually exploited Indigenous women and the police. This Case Worker is mindful of the systemic issues that

prevent women from disclosing their criminal victimization to the police. In addition to this partnership with FSGV, CEU members will exchange information related to identified risks, offenders, and exploitative practices, with community partners such as WISH, UNYA, and VACFSS.

VPD's CEU also conduct human trafficking workshops that they deliver to the health care and service industry (e.g., hotels). The primary objective of the workshops is to highlight the issue of human trafficking and educate the public on this growing industry. This includes awareness on the signs, how to recognize a victim, and how citizens can help. The presenters from CEU also provide information to sex workers pertaining to exit strategies and resources available.

The VPD's MPU investigations have been profoundly impacted by community input. MPU reports have increased due to community concern and awareness of the issues surrounding such files. For example, elderly individuals with Alzheimer's or dementia are more recognizable as high-risk and this increases public awareness and assistance. The VPD MPU has formed a partnership with Realty Watch and the taxi industry to assist in getting information out to the public for high-risk missing persons. In addition, The VPD MPU has worked with the Adolescent Psychiatric Unit of BC Children's Hospital to assist them with developing improved policies in the reporting and follow up of high-risk youth that go missing from their facility.

Highlights from VPD Investigative units in 2019 include:

- DVACH continues to regularly distribute S.A.F.E. magnets and brochures through the CPCs and the Public Information Counters at both VPD buildings. Over 1,000 S.A.F.E posters, over 700 wallet cards, and 2,500 magnets were made available for distribution.
- S.A.F.E program continues to be highlighted on the front page of the VPD website, receiving 544 page views in 2019, up from 401 in 2018.
- In 2018, DVACH partnered with VPD [Major Crime Section](#), other VPD units, and various community organizations (e.g., VCH, MedicAlert, and the Alzheimer's Society) to launch the inaugural Seniors Health and Safety Fair held at the Roundhouse Community Centre, which saw 370 participants. With the support of the VPF, a second Seniors Health and Safety Fair will be held in 2020 followed by a third in 2022.
- VPD's [Financial Crime Unit](#) (FCU) worked to educate elders and the general public regarding elder abuse scams through multiple media avenues including bi-weekly Tweets, website fraud alerts, and Facebook updates.
- Cybercrime prevention advice was newly added to the VPD's website and cybercrime prevention pamphlets were created and distributed through the CPCs.
- The FCU has assigned a detective to a financial elder abuse portfolio, which includes being a member of the Provincial Counsel, to reduce elder abuse.
- FCU hosted a two-day conference in 2019 focusing on reducing financial elder abuse. Presenters included financial institutions, the British Columbia Securities Commission, and the Public Guardian and Trustee of British Columbia.
- The VPD [General Investigation Section](#) once again teamed up with DIIRS to implement a one-day Youth-in-Action program in 2019, which had 17 youth living with

autism visit VPD headquarters to participate in fun and engaging activities with VPD members, including meeting with the VPD Executive. The program partnered with the Pacific Autism Centre and will be repeated in 2020.

Support through Victim Services

The VPD's [Victim Services Unit](#) (VSU) provides victims and witnesses with professional, supportive, and timely assistance, to lessen the impact of crime and trauma. Services may include emotional support, practical assistance, justice-related information and referrals to other agencies. Target outcomes include improved safety, reduced risk of further victimization, access to information and support, enhanced criminal investigations and increased willingness to participate in the criminal justice system.

VPD Victim Services Unit

The VPD's VSU follows mandated protocols to refer clients to specific community agencies, several of which are tailored towards Indigenous clients. If a victim of crime self-discloses that they are Indigenous to one of the VPD caseworkers, they are to refer them to Indigenous-focused services such as the Aboriginal Wellness Program, Watari, or AFDS. Referrals are also made to DEWC, WAVAW, Battered Women's Support Services, and others who have developed Indigenous culturally-focused support groups. Additionally, clients may be referred to the VACPC or liaise with the NPO at the VACPC. VPD's Investigative sections work with community members and groups in many ways to provide support and outreach.

In February 2016, Lucca an accredited Justice Facility Dog, joined the VPD VSU in February 2016. His role is to compliment the work of the VSU team by providing comfort and support to victims and witnesses of crime and other traumatic incidents. Lucca can be used at any point along the continuum of a police investigation – at the scene of an incident, in police interviews, in follow up meetings with VSU staff, in Crown Counsel meetings, and as a testimonial aid to witnesses during a trial. His calm and gentle demeanor helps to reduce anxiety, and mitigate the impact of stress and trauma on individuals involved in the criminal justice process.

Proactive Drug and Gang Prevention Engagement

In response to the opioid crisis, the VPD called for immediate access to evidence-based treatment services. In a 2017 report, [The Opioid Crisis: The Need for Treatment on Demand](#), the VPD presented several recommendations, including the need for expanded support from federal and provincial governments, more funding for evidence-based addiction treatment, and the need to increase public awareness about the risks of illicit drug use.

Since the 2017 report, considerable efforts by the VPD have been made to combat the opioid crisis, as outlined in the 2019 report, [A Journey to Hope](#). Key highlights include the VPD's work on the Provincial Joint Task Force on Overdose Prevention and Response. This task force, which included VPD representatives, was created to provide expertise and guidance to the Province on actions to respond to the crisis.

B.C. Overdose Action Exchange

The VPD actively participates in the B.C. Overdose Action Exchange (ODAX). Established in 2016, ODAX annual meetings facilitate dialogue between key stakeholders including first responders, local/provincial government, health care, and persons with lived experience. The goal of ODAX is to discuss solutions to the opioid crisis in a safe and welcoming environment. Key topics include drug policy, treatment options, providing safer drug supplies, and stigma.

Drug Overdose and Alert Partnership

VPD's [Organized Crime Section](#) (OCS) also participates regularly in the Drug Overdose and Alert Partnership (DOAP), a multi-sectoral committee established to prevent and reduce the harms associated with substance use. The membership consists of first responders including the VPD, regional health authorities, BC Coroner's Service, the BC Centre for Disease Control, and other partner agencies who identify and disseminate timely information about harms related to substance use including overdose and adverse reactions to contaminated products, and coordinates public health responses to these emerging issues. DOAP continues to maintain a public website with information on preventing and recognizing overdoses, treatment, take home naloxone, harm reduction, and health care.

Community Action Teams

Eighteen B.C. communities, including Vancouver, that were the hardest hit by the overdose crisis, created Community Action Teams (CAT). The B.C. government allocated \$100,000 in funding as part of the government's escalated response to the overdose crisis for these teams. The role of CAT is to intervene early to provide support to people at risk of overdose. The team focuses on expanding harm reduction services, increasing the availability of Naloxone, addressing the unsafe drug supply and connecting people to support services for treatment options. The VPD has been a member of Vancouver's CAT since it was formed in 2018.

The VPD was consulted by the Mayors Opioid Emergency Task Force on recommendations to lower the number of fatal and non-fatal illicit drug overdoses. VPD members attended a city council meeting and assisted city staff with developing some task force recommendations. In response to public concerns related to Federal and Provincial Cannabis legalization, the VPD continues to work closely with the CoV and public stakeholders to address community concerns.

In response to the opioid crisis, the VPD continues to work with health partners and community stakeholders to decrease fatal and non-fatal overdoses. The VPD has continued regular contact with these groups to share information on the location of all fatal drug overdoses so that harm reduction and other health care services can be delivered to prevent deaths. The VPD also collects and submits drugs for analysis for the BC Coroners Service to assist in determining the cause of death in fatal overdoses.

End Gang Life

In late 2018, the VPD adopted the Combined Forces Special Enforcement Unit – British Columbia's End Gang Life program, a comprehensive gang education, prevention, and awareness initiative that uses visually impactful images and messages. The End Gang Life

presentation was viewed and approved by the VSB and was delivered to 3,167 high school students at 14 schools in Vancouver in 2019.

Gang Tackle

The [Gang Crime Unit](#) (GCU) continues to organize and hold their annual Gang Tackle event which has run since 2013 and takes place annually every May. This anti-gang program deters vulnerable youth from a life of crime and violence, instills confidence, and develops relationships between the youth and VPD members. The program consists of a flag football game held at UBC Thunderbird Stadium with the involvement of members of the GCU, varsity and Canadian Football League football players and at-risk youth. One of the most exciting aspects of this initiative is the involvement and interaction with current professional football players. This program has proven to have a positive effect on this target group and has been funded since 2013 by the CFO and by the VPF.

Turning Point

Turning Point is another anti-gang program that provides education and strong alternative choices for at-risk youth who are vulnerable to become involved in the drug trade or gangs. The program is an extension of the Gang Tackle Program and is generously funded by the VPF. Many youth often have a romanticized view of gang life and drugs. Turning Point seeks to provide students with real life examples of how drugs and gang life can negatively impact their lives. At-risk youth are given the opportunity to spend a day with GCU. This event has taken place yearly in the fall since 2017 where participants are given a tour of the DTES, where they meet with several residents who are given the opportunity to tell their story to the youth. After the tour, the participants attend a BC Lions football or Vancouver Canucks hockey game where they have the opportunity to meet with players and staff before enjoying the game. VPD also provides dinner and game merchandise for the youth as well.

Her Time

Although the focus of many gang awareness programs has been conducted with a male lens, females are also victims of gang violence and the tragedies that come with involvement in gang life. [Her Time](#) was created by two VPD police officers to provide young women with a voice and to allow women to actively participate in taking control of their lives. Her Time has reached over 40 schools and over 5,000 students, educators, and community partners. Proactively, the program provides young women with the tools, resources and knowledge about the dangers of gang lifestyle. Reactively, the program offers women currently involved or at high-risk to becoming involved in gang life the opportunity to connect with the VPD police officers who can aid with an exit strategy. In 2019, this program was approved by the VSB for delivery in schools across Vancouver.

Disrupting Criminal Enterprises and Giving Back to Communities

The VPD has found a way to incorporate asset forfeiture of proceeds of crime and offence related property in its overall strategy to combat organized crime and community outreach. Through referrals of criminal investigations conducted by its officers, the VPD has contributed over \$36.2 million in referred property and assets which have been successfully forfeited by the CFO as of fiscal 2019 since its inception in 2007. This number is significant – over \$36.2 million in property and assets have been removed from criminals and put back into local community organizations.

The CFO is mandated by legislation to have all net forfeited funds go towards local communities throughout the province by way of grants to fund social programs. Since its inception in 2007, the CFO has forfeited over \$90.2 million; of that, approximately \$42 million has been put back into the local communities of B.C. Some of the largest grant amounts have been to organizations such as the Salvation Army (\$100,000), Treehouse Advocacy Centre (\$70,000), PLEA Community Services Society (\$75,000), WAVAW (\$85,000) and Network of Inner City Community Services (\$69,500).³

Overall, the VPD and the OCS asset forfeiture team has made very tangible and consistent contributions to the community. Referrals to the CFO from police are strictly voluntary, and through VPD's contributions, local Vancouver communities have benefited. VPD police officers are committed to ensuring that proceeds removed from the criminals can be reintegrated into the communities.

Bridging Communities with Rich History and Traditions

Entertaining Displays: The Motorcycle Drill Team

Since 1954, the VPD [Motorcycle Drill Team](#) has reached out to people in communities and entertained citizens with displays of riding precision, throughout Metro Vancouver and as far away as Penticton and Seattle.

Using Harley Davidson Electra Glide motorcycles, the Motorcycle Drill Team is comprised of police officers of the VPD Traffic Enforcement Unit. The Motorcycle Drill Team activities are separate from their regular work and officers join the Team on a voluntary basis. The VPD Motorcycle Drill Team engages and entertains the public at various community events and parades throughout the year. Each year, the Motorcycle Drill Team participates in approximately 12 parades, most of which are in the Vancouver area. Recent performances include the Vancouver Canada Day Parade, Point Grey Fiesta Days, Vancouver Pride Parade, West Seattle Seafair Parade, and Penticton Peach Festival. They Team also regularly supports charitable events such as the Ride to Live for prostate cancer research, Kops for Kids, and the Music Therapy Ride.

Musical Ambassadors of the VPD: The Vancouver Police Pipe Band

With a long and acclaimed history, the [Vancouver Police Pipe Band](#) (VPPB) was formed in 1914, when a handful of police pipers and drummers organized themselves to perform at the opening of a new police headquarters. Enthralled by the display, the Chief Constable at the time authorized the formation of a departmental pipe band. The band has been in continuous operation since that time. The VPPB is the oldest non-military pipe band in B.C. and ranks amongst the most senior police pipe bands in the world.

³ Established for transparency, the following website is available to the public to look up grant funding that is awarded each year to local communities:

<https://www2.gov.bc.ca/gov/content/safety/crime-prevention/community-crime-prevention/grants>.

This website has the breakdown of all of the net forfeited funds from the CFO granted to local community social programs for every fiscal year back to fiscal 2012.

The VPPB celebrated its centenary by performing Guard Mount ceremonies at Buckingham Palace and Windsor Castle in June of 2014. This marked the first and only time a non-military band has been granted the privilege in the 350-year history of the iconic ceremony.

The VPPB performs at numerous cultural events throughout the year including the annual Vaisakhi parade. In 2019, acting as ambassadors for their country, province, and city, the VPPB traveled to India to honour the victims, survivors, families, and all those affected, by participating in the commemoration of the 100th Anniversary of the Jallianwala Bagh massacre. The VPPB also attended many community and cultural events throughout India, including visits to Agra, Amritsar, Chandigarh, and Delhi. The VPPB performed at several venues including the Jang E Azadi Freedom Memorial in Kartarpur, and the Ellante Mall in Chandigarh. At his invitation, the VPPB also performed at the Official Residence of Canada's High Commissioner to India. While in India, the VPPB supported local charities including the Navjyoti India Foundation and the Guru Nanak Mission Hospital.

Sharing Customs and Traditions: The VPD Lion Dance Team

Proud of their heritage, a group of VPD police officers, civilian staff, and volunteers from the Chinese CPC came together in 2005 to form the VPD Lion Dance Team. The Lion Dance Team was created to recognize and enhance the multicultural diversity of the VPD, honour the Chinese community's cultural contributions to Vancouver, and build positive relationships with all community members. With support from the VPF, the Lion Dance Team was the first, and continues to be, the only police team in Canada.

Taking part in the Chinese New Year Parade is a highlight for VPD members each year, who are honoured to recognize the Chinese community's longstanding contributions to our city. The VPD Lion Dance Team has participated in numerous lion dance performances for functions and events for the VPD, CoV, and various communities, including the Vaisakhi, Santa Claus, and St. Patrick's Day Parades.

Courage, Strength, and Honour: The VPD Ceremonial Unit

Formed in 1985, the [Ceremonial Unit](#) primarily serves in a memorial function for all sworn members (serving and retired) of the VPD when requested by the family, and to the funeral or memorial of any sworn member of a Canadian or American police service as a show of support. In addition to Remembrance Day ceremonies, the Ceremonial Unit also attends police officer memorial services, across B.C., Canada, and the United States. The Unit also attends numerous other community events annually when requested or approved by the Chief Constable, attending approximately 75 events annually.

Members of the Ceremonial Unit, comprised of both serving and retired police officers, attend ceremonies on their own time; the essence of volunteerism of the Unit is embodied in this act and the members continue to volunteer their time for this noble endeavour.

A Focus on the Frontlines: Community Contacts

VPD's frontline officers routinely work alongside multiple community partners to better the lives of community members. This work includes advocating for better housing, working out next steps for recovery and treatment, and connecting people with family members.

Frontline members also regularly take part in community ceremonies and events throughout the year. Several patrol officers are active members of the SisterWatch Program. Finally, one patrol officer (from the Beat Enforcement Team) has been assigned as a liaison with the DEWC and works closely with the VPD's SILO.

Community Cultural Events

The VPD participate in a significant way in community cultural events. These community events develop relationships and positive engagement that allow the police to have a positive presence in communities. Participation involves all ranks from frontline officers to members of the VPD Executive, and includes sworn and civilian employees. Further, VPD is often involved in organizing and/or assisting to secure funding of these important cultural events. Examples include but are not limited to:

- Pride Parade;
- Annual Tribal Journey;
- Vaisakhi Parade;
- Chinese New Year celebrations;
- Orange Shirt Day; and
- National Aboriginal Veterans Day.

The Road to Safety

The VPD's [Traffic Section](#) works cooperatively with the Provincial Police Services Division, ICBC, the CoV, the VSB, and various other community groups to deliver road, pedestrian, and bicycle safety campaigns, along with several other educational initiatives. Officers in the Traffic Section attend monthly meetings with CoV Engineering, CoV Traffic Data Management, and ICBC to address specific community complaints or concerns about Traffic issues from a planning and engineering perspective.

The VPD Traffic Section continues to embark on pedestrian safety awareness campaigns with the primary goal of reducing the number of pedestrians involved in collisions. For



FRONTLINE CONNECTIONS

ENGAGEMENT HAPPENS NOT ONLY IN VERY RECOGNIZABLE WAYS THROUGH EVENTS LIKE PARADES CELEBRATING VAISAKHI, CHINESE NEW YEAR, AND PRIDE, BUT ALSO ON A GRASSROOTS LEVEL, THANKS TO OUR FRONT LINE OFFICERS.

EVERY DAY, THEY ARE OUT ON THEIR BIKES, ON FOOT, AND IN THEIR PATROL CARS INTERACTING WITH VANCOUVERITES. THEY HAVE FACE-TO-FACE CONVERSATIONS WITH RESIDENTS AND BUSINESS OWNERS IN EVERY CORNER OF THE CITY.

Chief Constable Adam Palmer
Vancouver Police Department

example, the VPD has a dedicated [School Safety Patrol Team](#) that aims to improve road safety in the CoV through the education of school children, seniors, and other community groups in pedestrian and bicycle safety.

VPD Traffic members are regular participants in the annual Cops for Cancer Tour de Coast with the BC Cancer Agency. They have also recently become involved in supporting the Driven Project, where children with life threatening illnesses take rides in high performance cars.

Engagement with Special Interest Groups

VPD frontline police officers routinely communicate with event organizers and community stakeholders in preparation for special events. This communication is vital to ensuring events are managed safely.

The VPD engages in one-on-one dialogue with organizers and stakeholders, but is also part of a larger working group called the Festival Expediting Service Team that brings event organizers together to discuss events with representatives from an array of city and provincial agencies including, Vancouver Parks Board, BC Ambulance Service, and VFRS.

Organizers and stakeholders work together to find solutions to problems related to traffic congestion, transit interruptions, waste abatement and public safety concerns. The collective community input is critical to safeguarding the public and ensuring special events proceed as intended.

Ensuring Cultural Competencies

To ensure positive engagement with communities, the VPD is committed to making all employees more culturally fluent. As such, DIIRS partners with VPD's Training Section and with organizations outside of the department to provide education and awareness workshops for frontline members. For example, workshops around Indigenous Peoples and the impact of colonization introduces VPD members to urban Indigenous communities who have over-represented levels of physical and sexual abuse, alcohol and drug addiction, victimization, and have a history of lacking trust in police.

The VPD provides a number of training initiatives to officers and civilians, including: VPD Aboriginal Cultural Competency Training; Circle of Understanding, Aboriginal First Nations Awareness Course; Indigenous Awareness for Special Municipal Constables; and Sex Work and Sex Workers Awareness Course. To educate police regarding the LGBTQ2S+ community and their experiences, and to address discrimination, the VPD offers training on gender frameworks and models contextualizing LGBTQ2S+ history in Canada, and reflections on LGBTQ2S+ lived experiences.

In addition, the VPD has implemented mandatory Fair and Impartial Policing training, a full day workshop delivered to all frontline VPD police officers. This important training illustrates how implicit biases may affect police perception and behaviour, and as a result negatively affect community members. Notably, the training provides specific focus to the effect of bias on Indigenous communities.

Indigenous Resource for Frontline Officers

Effective community work requires face-to-face coordination with someone in a position of trust and respect. The Indigenous Liaison Officer fulfills that role and acts as a resource for frontline patrol members who may have questions about specific individuals, resources available in the community, or how best to approach situations in a culturally sensitive manner. The Indigenous Liaison Officer also provides frontline officers with assistance, monitors Indigenous gang activity in Vancouver, and represents the VPD at many community functions and meetings.

Community Connections through Communication

Transparency in Policing our Community

An important pillar to effective, community-based policing is the need for police to be consultative and transparent in how police services are delivered and how important policies are developed. The VPD achieves this principle by engaging community members, stakeholders, and advocates in order to develop and implement major policy initiatives, many of which are discussed and approved publicly by the VPB. Furthermore, almost all of the VPD's operational policies are [publicly available](#).

As an example, in January 2013, the VPD implemented the [Sex Work Enforcement Guidelines](#) (SWEG) as a guiding document for the VPD to work with the sex industry community, open lines of communication, and foster increased engagement. These guidelines were created for frontline officers understanding of the VPD's philosophy and expectations of crime in the sex industry. In the final Missing Women Commission of Inquiry, the SWEG were commended and referred to as "a model of community policing at its best".⁴

Other examples of important policies/guidelines that are of notable interest to the community include (but are not limited to), the VPD's:

- [Homeless Policy](#);
- [Drug Policy](#);
- [Public Demonstration Guidelines](#);
- [Policy on Initial Contact with Transgender People](#); and
- [Mental Health Strategy](#).

Public Affairs

An important aspect of public safety and policing is education and awareness. The VPD's [Public Affairs](#) Section helps Vancouverites have the information they need to help them stay safe. The Public Affairs Section connects with the public and other stakeholders (like news

⁴ The VPD SWEG are outdated with the enactment of Bill C-36 (2015). The *B.C. Provincial Sex Enforcement Guidelines and Principles* were established in January 2018. The VPD was an active member of a provincial Police Services working group that helped establish these guidelines for the province. The Provincial Guidelines, which the VPD currently follow, closely resemble the VPD SWEG.

media) on behalf of the VPD through integrated marketing campaigns, news media tools, social media, and video.

Some of the topics covered are identified by areas in the Operations and Investigation divisions based on emerging crime trends or immediate public safety needs. Others can be tied to national or international campaigns creating awareness about topics related to public safety.

Public Affairs works with news media to provide the public with useful safety information about large public events (e.g., Celebration of Light, Canada Day celebrations). The section also provides warnings about people or events that could threaten public or personal safety (e.g., high-risk offenders, sex assaults, homicides, etc.), and to issue appeals for witnesses, information, and/or video.

A priority for Public Affairs is to ensure that material created by the VPD represents the diversity of the Department and the community. As such, social media posts celebrate the diversity of Vancouver by acknowledging cultural and religious celebrations like Lunar New Year, Vaisakhi, Holi, Nowruz, Ramadan, Eid, Rosh Hashana, and many more. In 2019, Public Affairs planned and implemented numerous campaigns. Examples include:

- **Anti-groping:** The VPD's SCU identified the need to remind potential offenders that groping is a crime. Public Affairs developed a marketing campaign to remind people that any sort of unwanted sexual contact is a crime. The VPD partnered with Barwatch and Metro Vancouver Transit Police to deliver the campaign and put up advertisements in bars and transit stations.
- **Fraud awareness:** The VPD's Cybercrime Unit noted that millennials are more susceptible to online fraud than any other group. Public Affairs developed an online advertising campaign to target millennials to raise awareness of the different types of fraud they need to be aware of. The [#NanaSays](#) campaign was developed to challenge the traditional assumption that seniors are most often victimized. The campaign played on the unexpected, with fraud-aware Nana texting advice to her millennial grandchild.
- **Senior safety:** New frauds are identified every single month. To ensure seniors are armed with the right information to protect themselves against fraud, Public Affairs compiled a booklet with fraud prevention tips. The booklets describe, in detail, eight different types of fraud and top practical tips for preventing against them. The booklets were also translated into Punjabi, Tagalog, and traditional and simplified Chinese. The booklets were tied into the existing S.A.F.E. campaign to ensure continuity and recognition.

Fast Facts:

In 2019, the VPD had...

- 171,300 [Twitter](#) followers
- 17,001 [Instagram](#) followers
- 31,499 [Facebook](#) likes
- 33,157 [Facebook](#) followers

**as of May 14, 2020*

Innovation at its Finest: Reaching Our Community

- *The VPD was the first major Canadian police department to launch a Facebook profile*
 - *The VPD was first Canadian police agency to have a YouTube profile*
-

Coming Together for Change: VPD Fundraising Initiatives

For causes that are important to the community, the VPD regularly works to raise awareness and money, to make a difference. Outlined in the following sections are several examples of fundraising initiatives the VPD is involved in.

Cops for Cancer

Cops for Cancer is a fundraising event where law enforcement and emergency services personnel cycle across regions and engage communities during the cycle route. This event helps the Canadian Cancer Society fund paediatric cancer research and to send children and their families to Camp Goodtimes, a medically supervised safe, fun, and recreational-based camp program.

The VPD team cycles over 800 kilometers in 9 days raising cancer awareness and money in communities all over the Lower Mainland, Sunshine Coast, and Sea-to-Sky corridor.

Kops for Kids

Kops for Kids is a program that started over 35 years ago by members of the VPD Motorcycle Drill Team and raises funds to purchase Christmas gifts for many underprivileged children in the city.

In 2019, throughout various fundraising initiatives, the Motorcycle Drill Team raised over \$21,000 almost exclusively from VPD police officers' contributions. The VPD Motorcycle Drill Team was able to purchase 500 presents and spread holiday cheer throughout the city. They distributed gifts to various BC Housing locations and worked with VPD SLOs to visit various schools as well. The remaining funds will be distributed throughout the year to provide funding for meals, programs, and therapy sessions to Vancouver students and families identified by VPD SLOs. Of note, the VPD Motorcycle Drill Team also participates in many community-based events throughout the year, travelling as far as Seattle and Penticton, for community events

Vancouver Police Community Fund

The VPCF is organized for the purpose of supporting people in particular need of assistance who reside in the community we police. There is specific focus on inner-city children and families, and those people who have physical and mental disabilities.

As a registered charity, the VPCF supports other registered charities as well as its own charitable activities including sponsoring families at Christmas. Contributions to local charities include:

- BC Children's Hospital;
- Kidsafe;
- Cops for Cancer;
- Tour de Coast;
- CKNW Orphans' Fund;
- Child Foundation;
- Empty Stocking Fund;
- Make a Wish Foundation;
- Heart and Stroke Foundation; and
- Rotary Hearing Foundation.

Variety Show of Hearts Telethon

The VPD participates annually in the Variety Show of Hearts Telethon which disburses over 1,300 grants for children:

- with medical emergencies,
- needing therapies, specialized equipment, or drug prescriptions; and
- out-of-town accommodation and travel costs.

Variety the Children's Charity, also provides grants to children's organizations for construction, renovations, equipment, and program costs.

CBC Vancouver's Annual Open House and Food Bank Day

The VPD is a proud supporter of the CBC's Vancouver's Annual Open House and Food Bank Day. The VPD annually participate in the food drive and donates gifts for auction. Last year the auctioned gift was a tour of the VPD's Canine Unit's kennels. CBC Vancouver's annual Open House and Food Bank Day has been raising money for those in need for three decades. At the 2019 event on December 6, total donations surpassed \$10 million.

Supporting Special Olympics: BC Law Enforcement Torch Run

The Law Enforcement Torch Run for Special Olympics British Columbia (SOBC) is an innovative initiative powered by dedicated law enforcement personnel around the province who want to help SOBC athletes experience acceptance, achievement, and personal value through sport. Members of the VPD run shoulder to shoulder with SOBC athletes and other law enforcement agencies, on the four-day multi-city run which travels through 15 cities in 13 legs. VPD members also attend athletic competitions to cheer athletes on and award medals and community events such as the Torch Run to raise awareness and support

for this important cause. Members of the VPD also represent the department and support athletes at various SOBC competitions internationally. The VPD is a participant and the top law enforcement team fundraiser for the Polar Plunge for SOBC held annually in March. In 2019, the event raised more than \$100,000.

Making Christmas Dreams Come True: Children's Wish Breakfast

In support of the Lower Mainland Christmas Bureau, each year the VPD donates thousands of toys at the Children's Wish Breakfast. Mountains of toys, clothing, and money are collected to be distributed to families in need throughout the Lower Mainland. A morning filled with festive cheer; this event is held at the Pan Pacific Hotel in Vancouver annually. VPD participation is of all ranks and with sworn and civilian staff attendance.

Covenant House: Sleep Out Vancouver

On any given night there are between 500 and 1,000 young people living on the streets in Vancouver. The majority of street youth have experienced physical, sexual, and or emotional abuse, often at the hands of the adults responsible for taking care of them. Covenant House is a not-for-profit organization that runs programs for youth between the ages of 16-24 who have fled abuse, have been forced from their homes, and those that have aged out of foster care. Raising funds and awareness for homeless youth, members of the VPD regularly participate in the Covenant House Sleep Out event by sleeping outside overnight.

VPD Police Dog Calendar

The annual VPD Police Dog Calendar was started in 2009 by retired VPD Sergeant Mike Anfield in honor of his wife, VPD Constable Candy Anfield who lost her battle with breast cancer. The calendar, featuring pictures of VPD police dogs and their handlers, is a fundraising initiative with proceeds going to the BC Cancer Foundation and the BC Children's Hospital Foundation. The calendar is funded and produced by the Candy Anfield Memorial Foundation. In 2019, the calendars raised \$150,000 and in 2020 thus far, the calendars have raised \$90,000. Since 2010, sales of the calendar have raised \$450,000 for charity.

Jeans Day

Entering its 30th year, Jeans Day is a fundraiser to ensure children in B.C. receive the best health care possible through the BC Children's Hospital. The VPD participate in Jeans Day by wearing jeans and buttons to work. Funds raised help push forward innovative research, purchase advanced equipment, and create spaces and practices that prioritize the unique needs of children and their families. Since it began in 1990, Jeans Day has raised more than \$21 million to transform health care for children in B.C.

Pink Shirt Day

Children and youth face a range of complex social factors that shape their opportunities and outcomes – unfortunately, bullying is one of these factors that impacts individuals negatively. Each year, Pink Shirt Day aims to raise funds to support programs that foster children's healthy self-esteem and bring awareness to bullying. VPD staff wear pink and a donation is made in the name of the best pink outfit to the CKNW Orphan's Fund by the Community Fund. Pink Shirt Day ties into VPD's ongoing respectful workplace and mental health initiatives.

Supporting this important cause, the VPD spreads awareness and kindness to create safe environments for all.

The Vancouver Police Foundation

In 1976, a group of Vancouver citizens and business leaders recognized the need for new and creative ideas in policing – initiatives that were not within the VPD’s regular operating budget. They established the [VPF](#) – a registered charity that to this day works in partnership with the VPD to fund programs that reduce crime, increase safety, and put a human face on policing.

Through the vision of the VPF founders, and the generous funding from supporters, the VPF has, to date, granted over \$10 million towards ground-breaking outreach programs and innovative policing equipment.

The VPF partners with individuals, companies, and foundations to fund programs for:

- youth;
- mental health and addictions;
- community outreach and engagement; and
- innovative technology and equipment.

The Vancouver Police Board: Ensuring Community-Police Links

As the VPD’s governing body, the [VPB](#) (Board) provides strategic oversight and direction and fosters police services which reflect the needs, values, and diversity of Vancouver’s many communities. The Board is made up of eight volunteer citizens, all residents or business people from Vancouver, and the Mayor is the Chair of the Board.

One of the VPB’s most important priorities is to ensure an open and transparent link between the community and the VPD. The VPB encourages opportunities for the community to engage with the VPD and with the VPB, to ensure that police services are responsive to the needs and priorities of Vancouverites.

The VPB regularly hears from a variety of community stakeholders either through delegations, or presentations. Members of the public speak to the Board about community programs, challenges and unique neighbourhood policing issues. In 2019, for example, the Board heard from members of the community on topics such as policing and safety in Yaletown, VPD enforcement on vehicle inspections, Metro Vancouver Crime Stoppers, employment in the public service, policing in the DTES, VPD’s SWEG, and the funding structure of CPCs.

The Board stresses the need for the VPD to create opportunities for citizens to have access to the Department and have input into police issues. To monitor these initiatives, the Board asks the VPD to report annually on the ways in which it facilitates community engagement. This report (available on the Board website) outlines a wide spectrum of activities and initiatives which the VPD undertake to connect with the community it serves.

Another way in which the Board endeavors to engage with the community is by periodically holding public meetings in a community location and focusing on topics of interest or concern to that community. In the past few years, the Board has held meetings at the Khalsa Diwan Society Sikh temple, the Al-Masjid Al-Jamia Mosque, the Musqueam Cultural Pavilion, ISSofBC, and S.U.C.C.E.S.S. Chinatown.

In 2019, the Board held two of its meetings at community locations. In June, the Board met at the Jewish Community Centre (JCC) and received presentations by the VPD, the Centre for Israel and Jewish Affairs, and JCC staff on topics such as hate crimes, the re-development of the JCC, inclusion and diversity programs, anti-Semitism and safety concerns for the Jewish Community, and the relationship between the Police and the Jewish community. In September the Board held its meeting at the Musqueam Cultural Pavilion. Board member Wendy John, who served three terms as Chief of the MIB, provided an introduction, and the Board received presentations on the VPD ICP, Musqueam culture, VPD Indigenous initiatives, and the Musqueam-police relationship. In addition to being highly informative, these meetings help the Board connect with the community, and help ensure that policing remains responsive and relevant to the people of Vancouver.

Board meetings are open to the public and are also webcast live on the [Board's website](#) and on the VPD [twitter account](#).

Our Community, Our Promise: A Commitment to Continue Outreach

The VPD will continue its commitment to building and sustaining relationships with local communities and cultures. Members of the VPD will continue to regularly meet with community representatives to develop programming to enhance community safety, and to participate in community forums, workshops, and events. The VPD acknowledges that enforcement alone is not sufficient to make neighbourhoods safer – collaboration will always form a significant and critical component in the delivery of policing services by the VPD.

The VPD will continue to build relationships with Vancouver's diverse communities. These communities include First Nations, LGBTQ2S+, recent immigrants, various neighbourhood groups, and specific vulnerable populations (such as the elderly and youth), amongst others. Through programs such as SisterWatch and Safe Place, the VPD has experienced first-hand success in forging strong, trusting relationships. Similarly, role-modelling programs such as the PAL, Student Challenge, and the Cadet Program have resulted in positive relationships with youth throughout the city.

The VPD is committed to transparency in its actions and remaining accountable in its service to the public. The VPD acknowledges that its success is inherently reliant upon maintaining and improving existing relationships with the communities it serves; *community matters*, to the VPD.

Glossary

ACT	ASSERTIVE COMMUNITY TREATMENT
AFDS	ABORIGINAL FRONT DOOR SOCIETY
ARC	ACCESS, RECREATION, AND CULTURE
AOT	ASSERTIVE OUTREACH TEAMS
B.C.	BRITISH COLUMBIA
BCLEDN	BC LAW ENFORCEMENT DIVERSITY NETWORK
BIA	BUSINESS IMPROVEMENT AREAS
BWITO	BLOCK WATCH INVESTIGATIONS AND TRAINING OFFICER
CAT	COMMUNITY ACTION TEAMS
CCW	CITIZENS' CRIME WATCH
CEU	COUNTER EXPLOITATION UNIT
CFO	CIVIL FORFEITURE OFFICE
CIU	CRIMINAL INTELLIGENCE UNIT
CLICK	CONTRIBUTING TO LIVES OF INNER-CITY KIDS
CoV	CITY OF VANCOUVER
CPA	CITIZENS' POLICE ACADEMY
CPCs	COMMUNITY POLICING CENTRES
CPSU	COMMUNITY POLICING SERVICES UNIT
CSP	COMMUNITY SAFETY PERSONNEL
CSS	COMMUNITY SERVICES SECTION
CYAC	CHILD AND YOUTH ADVOCACY CENTRE
DEWC	DOWNTOWN EASTSIDE WOMEN'S CENTRE
DIIRS	DIVERSITY, INCLUSION, AND INDIGENOUS RELATIONS SECTION
DOAP	DRUG OVERDOSE AND ALERT PARTNERSHIP
DTEs	VANCOUVER DOWNTOWN EASTSIDE
DVACH	DOMESTIC VIOLENCE AND CRIMINAL HARASSMENT SECTION
FCU	FINANCIAL CRIME UNIT
FSGV	FAMILY SERVICES OF GREATER VANCOUVER
GCU	GANG CRIME UNIT
GOV	GATHERING OUR VOICES
ICP	INDIGENOUS CADET PROGRAM
IMS	INFORMATION MANAGEMENT SECTION
ISSofBC	IMMIGRANT SERVICES SOCIETY OF BC
JCC	JEWISH COMMUNITY CENTRE
LGBTQ2S+	LESBIAN, GAY, BISEXUAL, TRANSGENDER, QUEER, TWO-SPIRIT, PLUS
MCFD	MINISTRY OF CHILDREN AND FAMILY DEVELOPMENT
MESH	MAKING EVERYONE SAFE AND HEALTHY
MIB	MUSQUEAM INDIAN BAND
MPU	MISSING PERSONS UNIT
MSDPR	MINISTRY OF SOCIAL DEVELOPMENT AND POVERTY REDUCTION
NPO	NEIGHBOURHOOD POLICE OFFICER
NYPD	NEW YORK POLICE DEPARTMENT
ODAX	OVERDOSE ACTION EXCHANGE
PACE	PROSTITUTION ALTERNATIVES COUNSELLING AND EDUCATION SOCIETY
PAL	POLICE ATHLETIC LEAGUE
ReMAKE	RESTORATION THROUGH THE MOBILE ARTS FOR KIDS EXCHANGE
SACY	SUPPORTING AND CONNECTING YOUTH
S.A.F.E	SAFETY AWARENESS FOR ELDERs
SCU	SEX CRIMES UNIT
SILO	SEX INDUSTRY LIAISON OFFICER
SIS	SPECIAL INVESTIGATION SECTION
SLO	SCHOOL LIAISON OFFICER

SLU	SCHOOL LIAISON UNIT
SMC	SPECIAL MUNICIPAL CONSTABLES
SOBC	SPECIAL OLYMPICS BRITISH COLUMBIA
SWEG	SEX WORK ENFORCEMENT GUIDELINES
TFA	THEFT FROM AUTO
TROO	TOTAL RESPECT FOR OURSELVES AND OTHERS
UBC	UNIVERSITY OF BRITISH COLUMBIA
UNYA	URBAN NATIVE YOUTH ASSOCIATION
VACFSS	VANCOUVER ABORIGINAL CHILD AND FAMILY SERVICES SOCIETY
VACPC	VANCOUVER ABORIGINAL COMMUNITY POLICING CENTRE
VCH	VANCOUVER COASTAL HEALTH
VFRS	VANCOUVER FIRE RESCUE SERVICES
VPCF	VANCOUVER POLICE COMMUNITY FUND
VPD	VANCOUVER POLICE DEPARTMENT
VPF	VANCOUVER POLICE FOUNDATION
VPB	VANCOUVER POLICE BOARD
VPPB	VANCOUVER POLICE PIPE BAND
VPSSC	VANCOUVER POLICE SOCCER AND SERVICE CLUB
VSB	VANCOUVER SCHOOL BOARD
VSU	VICTIM SERVICES UNIT
WAVAW	WOMEN AGAINST VIOLENCE AGAINST WOMEN
WISH	WOMEN'S INFORMATION AND SAFE HAVEN
WPST	WOMEN'S PERSONAL SAFETY TEAM
YSS	YOUTH SERVICES SECTION

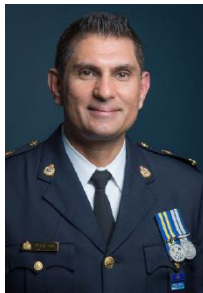
Appendix



Chief Constable Adam Palmer



Deputy Chief Howard Chow
Operations Division



Deputy Chief Steve Rai
Support Services Division



Deputy Chief Laurence Rankin
Investigation Division



Supt. Cita Airth
Investigative Services



Supt. Martin Bruce
Personnel Services



Supt. Michelle Davey
Investigative Support Services



Supt. Steve Eely
South Command



Sr. Director Nancy Eng
Financial Services



Supt. Marcie Flamand
North Command



Sr. Director Jason Rude
Information Services



Supt. Fiona Wilson
CFSEU-BC



VANCOUVER POLICE DEPARTMENT

Our Community *in* Need

THE VPD'S COMMUNITY-FOCUSED
SAFETY STRATEGIES

NOVEMBER, 2020



VANCOUVER POLICE DEPARTMENT

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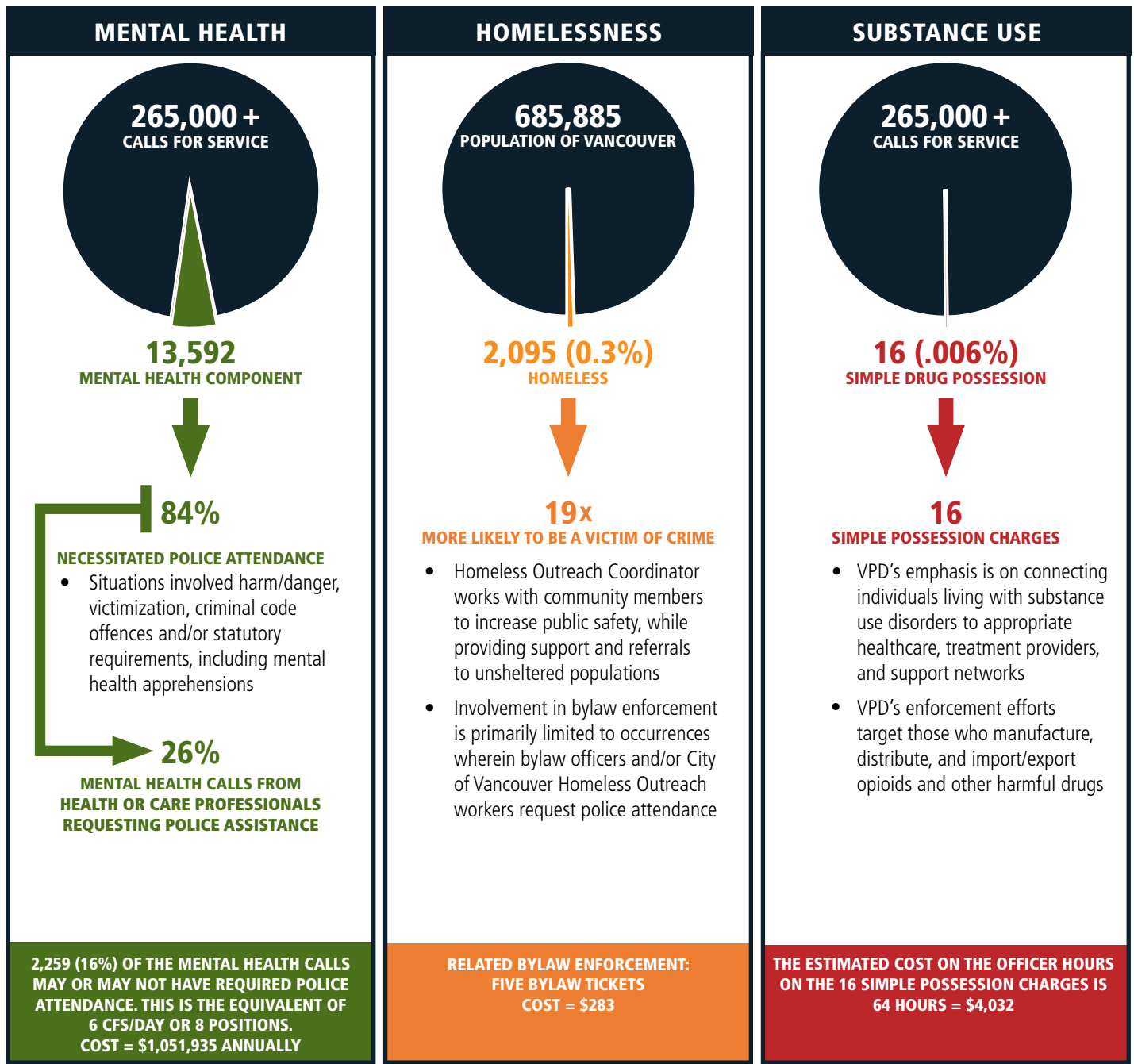
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In response to Vancouver City Council’s Motion – *Decriminalizing Poverty and Supporting Community-led Safety Initiatives*, the Vancouver Police Department (VPD) acknowledges that social issues, including mental health, homelessness, substance use and sex work, intersect with public safety issues. The VPD takes efforts to ensure inappropriate, ineffective, and unnecessary criminalization does not occur, but rather focuses on community-based, harm reduction strategies in collaboration with community service providers.



SEX WORK

- SEX INDUSTRY LIAISON OFFICER IS THE ONLY DEDICATED OFFICER WORKING DIRECTLY WITH SEX WORKERS AND PROVIDES SUPPORT, KNOWLEDGE, AND RESOURCES, WITH FURTHER ASSISTANCE TO THOSE WHO WISH TO EXIT THE SEX WORK INDUSTRY

THE VPD HAS NOT ARRESTED OR CHARGED A SEX WORKER FOR THE ACT OF PROSTITUTION SINCE SEPTEMBER 2008
THERE IS NO COST ASSOCIATED WITH POLICING SEX WORKERS IN VANCOUVER

EXECUTIVE SUMMARY

THE VANCOUVER POLICE DEPARTMENT (VPD) is recognized as leader in Canada and North America for its progressive approach to social issues, including mental health, homelessness, addictions, policing philosophy towards sex work, and engaging marginalized communities. The VPD remains receptive to new approaches to these multi-faceted issues and regularly examines its own service delivery, as well as those of other police agencies, throughout the world, to continually improve public safety.

The VPD recognizes that crime prevention cannot occur without successful partnerships with community groups and other government organizations. By working together we can alleviate the stigmas and societal impacts surrounding untreated mental health conditions, lack of stable and affordable housing, inability to access appropriate addictions treatment and safety concerns for marginalized sex workers. In this manner, the VPD strives to be a leader in policing, through collaboration in social programming, inter-agency information sharing, advocacy, and outreach work, as well as community-informed strategies to address these social issues.

SNAPSHOT: SUMMARY OF SECTIONS



Mental Health

For many years, the VPD has been highlighting the issue to all levels of government about the increasing mental health crisis in Vancouver. This has been supported by committing resources and forging partnerships with mental health services. The VPD has developed integrated treatment plans and collaboration, aimed at reducing harm to clients and the community, as well as reducing involvement with the criminal justice system and emergency health services.

Key Highlights:

- In 2019, there were over 265,000 calls for service (CFS) for the VPD. Of these, 13,592 were occurrence reports that indicated mental health was a contributing factor in the incident. Furthermore, of these 13,592 incidents:
 - o 84% required police attendance, as situations involved harm/danger, victimization, criminal code offences and/or statutory requirements, including mental health apprehensions;
 - o Approximately 26% were calls for police assistance, made from health or care professionals;
 - o Approximately 12% of these involved weapons;
- 2,259 may or may not have required police attendance, which is the equivalent of 6 CFS/day (VPD officers attend, on average, 727 CFS a day). These 2,259 CFS resulted in officers dedicating approximately 11,800 hours, and this equates to 8 officer positions (the cost of which is, \$1,051,935). Of note, there is no current program/community resource in existence that could have attended in lieu of police;
- VPD's Car 87 is both a proactive and reactive program that provides immediate referrals to community-based and/or emergency mental health services as deemed necessary. Car 87 was initiated in 1978 and is staffed by a mental health nurse and a plainclothes police officer. The primary objective of the program is to reduce unnecessary admissions to hospitals, while connecting individuals in crisis or who may be decompensating to appropriate mental health services and supports through community referrals;
- Formed in 2014, the proactive Assertive Community Treatment (ACT) program provides long-term tertiary level care to clients in the community. Each multi-disciplinary ACT team is comprised of approximately 10 healthcare professionals including but not limited to social workers, nurses, and psychiatrists to provide wraparound care to clients and improve

EXECUTIVE SUMMARY

their quality of life (serving 350 clients in community). Police officers in plainclothes play an active role on the ACT team;

- The Assertive Outreach Team (AOT) partners a plainclothes police officer with a team of healthcare professionals including psychiatric nurses, clinical supervisors, and psychiatrists. This program works with high-risk clients and has an average caseload of 40 (most serious) clients, operating seven days a week; and
- Through proactive policing and diversion to the healthcare system when possible, the VPD has had notable success in implementing data-driven, research-based programming.

Homelessness

The VPD takes a compassionate approach to homelessness in Vancouver, recognizing that homelessness is a social condition reflective of society's failure to adequately support those most vulnerable and marginalized.

Key Highlights:

- The VPD works collaboratively with stakeholders to provide support and referrals to vulnerable unsheltered populations;
- The VPD's Homeless Outreach Coordinator works closely with members of the community to increase public safety and prevent crime;
- The VPD recognizes that individuals may rely upon vehicles for shelter due to lack of access to housing, and as such, VPD officers avoid issuing tickets to individuals using vehicles for the purposes of shelter;
- VPD involvement in parking enforcement and other similar bylaw complaints are limited only to occurrences wherein bylaw officers and/or City of Vancouver (CoV) Homeless Outreach workers request police attendance to keep the peace and/or situation where other public safety considerations exist;

- o In 2019, there were five bylaws issued to individuals experiencing homelessness (specifically pertaining to street vending [one ticket] or erecting structures that are not allowed on the street [four tickets]). In comparison, in examining the same bylaw infractions in 2019, 2,230 municipal bylaw enforcement tickets were issued to individuals not experiencing homelessness. This difference demonstrates the comparably concerted measures taken by VPD officers to prevent unnecessary penalization and criminalization of the homeless population;
- o The cost of police time involved in issuing the five tickets described above is \$283.00;
- The VPD works to prevent victimization of individuals who are homeless recognizing they are at higher risk;
 - o Vancouver homeless population made up just 0.3% of the population in 2020 yet their victimization rate for violent offences accounted for almost 6% of all violent crimes in the city (approximately 19 times more likely to be a victim of violent crime); and
- It is important to recognize that CFS to the VPD are often precipitated by the public or community/health service providers who assist the homeless and who the VPD to keep the peace and maintain public safety.

EXECUTIVE SUMMARY

Substance Use Issues

The VPD recognizes that substance use disorders may cause immense harm to individuals, with implications to both personal and public safety. The VPD has adopted a progressive position on substance use issues, with the goal of enhancing individual and community safety, preventing harm, and protecting the vulnerable to build healthy and safe communities.

Key Highlights:

- The VPD advocates for evidence-based medical treatment, harm reduction, safe-supply and decriminalization of small quantities of personal-use street drugs;
- Ensuring safety for all individuals in Vancouver neighborhoods, the VPD encourages drug users to utilize supervised consumption sites, overdose prevention sites, and peer witnessing rooms/ facilities, instead of vulnerable community spaces such as schools, playgrounds, and parks;
- The VPD connects individuals in the community and in police custody, who are living with substance use disorders, to appropriate healthcare, treatment providers, and support networks;
- Given the severity of the present opioid crisis, the VPD's drug enforcement strategy targets those who manufacture, distribute, import or export opioids and other harmful drugs, which have caused countless tragic overdose deaths;
- The VPD was the first police department in Canada to train and deploy every frontline officer with Naloxone, to address the opioid crisis. Since first deploying naloxone, VPD officers have saved over 100 lives; and
- In 2019, the VPD handled over 265,000 CFS, only 16 of those resulted in a charge for simple drug possession. The time officers spent for those 16 simple possession charges was 64 hours, which equates to \$4,032.

Sex Work

The VPD's philosophy regarding the enforcement of sex work-related laws is, first and foremost, to ensure the safety and well-being of those engaged in the provision of sexual services for compensation. The [VPD's Sex Work Enforcement Guidelines](#) were developed in 2013, and the *Red Women Rising* report concluded "All police forces should implement Sex Work Enforcement Guidelines similar to those in Vancouver that support the safety of sex workers in police interactions."

Key Highlights:

- A trauma-informed, evidence-based, and unbiased approach to policing guides VPD investigations and interactions with sex workers;
- The VPD's enforcement priorities are guided by the duty to protect those who are marginalized and vulnerable, to prevent and investigate violence and exploitation, and to apprehend those who exploit and perpetrate violence;
- The VPD has not arrested or charged a sex worker for a sex-trade related offence since September 2008. As a result, there is no cost associated with the enforcement of sex work; and
- The VPD Sex Industry Liaison Officer (SILO) provides further support, knowledge, and resources, with further assistance to those who wish to cease working in the sex work industry. The SILO also connects individuals with community programs that include housing, mental health, and treatment/detox.

Through ongoing community partnerships and collaboration, significant strides have been made in the areas of mental health, homelessness, substance use issues, and sex work over the past decade. Despite improved measures, programs, and approaches, the VPD acknowledges that there is an ongoing need for improvement and recognizes that, in order to achieve this, continual efforts must be made to address these societal issues.

IMPROVING SOCIAL CONDITIONS THROUGH COMMUNITY COLLABORATION

THE VANCOUVER POLICE DEPARTMENT (VPD)

recognizes that social inequities surrounding access to resources result in varying social determinants of health, with lifelong, adverse health outcomes, and decreased life expectancy for those less fortunate. While great strides have been made in healthcare, numerous social factors including unstable housing, disproportionate exposure to violence, neighborhood crime, persistent poverty all contribute to an individual's overall health and well-being.

Similarly, social determinants of health are often contributing factors towards criminality, recidivism, and victimization, with marginalized individuals facing additional barriers to community functioning and prosocial living. Discrepancies in social determinants of health are especially prevalent amongst racial and ethnic minority groups. As such, through partnership with community stakeholders, levels of government, and advocacy groups, the VPD is dedicated to the ongoing progress of these social conditions, to improve public safety for all community members.

ELEMENTS OF COMMUNITY POLICING

The use of community policing strategies are integral to the VPD, with emphasis on proactive policing, community relationship building, and partnerships, representing the cornerstone of the VPD's approach to public safety. Much of the work conducted by the VPD is focused on mitigating the occurrence of crime wherever possible, rather than relying on response to crime. Through the use of community policing the VPD aims to address the social conditions which may contribute to criminal behaviour, towards reducing crime in Vancouver.

Recognizing that community agencies external to policing may best understand how to work with specialized populations to address specific needs through outreach and advocacy, the VPD works in partnership with many community members, groups and organizations. Through this approach, the VPD is better able to address significant, contributing factors to crime, as well as diminish prevalent, underlying social conditions, towards safeguarding community well-being.

Efforts made in community policing are not intended to replace the work of community organizations. Instead, through collaboration, information sharing, and coordinated referral programming, individuals in need are able to access services in a timely manner. The VPD strives to be a policing leader, through integrated collaboration in social programming, inter-agency information sharing, advocacy and outreach, and through community-informed strategies to address these social issues.

I. THE VPD'S MENTAL HEALTH STRATEGY

THE IMPACTS OF UNTREATED or poorly treated mental health issues have lasting and damaging effects upon both individuals and communities. The VPD has maintained its long-standing commitment in prioritizing the timely management of mental health conditions through established partnerships with community stakeholders and healthcare service providers.

Through proactive policing and diversion to the healthcare system wherever possible, the VPD has seen marked success in the implementation of data-driven, research-based programming and best practices from around the world. From initial assessments to assertive outreach and wraparound services, the VPD has been involved in the planning, development, and ongoing implementation of a multitude of client-centric programs and practices, aimed at minimizing the level of unnecessary involvement with the criminal justice system as a result of existing gaps within the mental health system.

AN ESTABLISHED COMMITMENT: HELPING INDIVIDUALS WITH MENTAL HEALTH ISSUES

Since the late 90s, the VPD has advocated for mental health support, due to government's lack of investment in providing support services for individuals with mental health issues, who are being treated in the community. First highlighted in 2008, in the VPD's [Lost in Transition](#) report, examined the lack of capacity in the mental health system. This report listed seven recommendations, including the need to have a dedicated mental healthcare facility to accommodate moderate to long-term stays, as well as the necessity to expedite hospital admission processes for officers who have detained an individual under Section 28 of the Mental Health Act.

Subsequent reports, including VPD's [Beyond Lost in Transition](#) (2010), and the joint VPD and Vancouver Coastal Health (VCH) report, [Vancouver's Mental Health Crisis: An Update Report](#) (2013), recognized

further legislative changes to the Mental Health Act, as well as the need for increased collaboration between the VPD, VCH, and Providence Health Care (PHC). Throughout each of these reports, findings consistently pointed to the need for integrated services in order to better address the health and safety of individuals living with mental health conditions. Further, the VPD recognizes that persons living with mental health issues are often targeted by offenders – resulting in them being 15 times more likely to be the victim of a crime, and 23 times more likely to be the victim of a violent crime.

PARTNERSHIPS FOR HEALTHY OUTCOMES

The VPD is committed to long-term partnerships with community stakeholders and healthcare service providers, such as Car 87, Project Link, the ACT Team, and the AOT. This approach is evidence-based and has a proven track record/has been demonstrably successful. However, the success of these partnership programs are predicated on the participation of the VPD and could not be replicated without VPD involvement. For example, police officers are essential to protect the safety of health professionals and welfare services workers facing rapidly evolving and volatile situations involving high-risk individuals, many of whom are in a mental health crisis.

Car 87

Established in 1978 in response to the exponential growth in mental health related calls, the Car 87 program was born from improved assessment and referral protocols. Car 87 is comprised of a VPD police officer (plainclothes) partnered with a nurse clinician/mental health professional to provide on-site assessment, management, and intervention services for individuals experiencing a mental health crisis. Referred through patrol files and other community service providers, Car 87 provides immediate referrals to community-based and/or emergency mental health services as deemed necessary. The Car 87 model has been replicated by other police agencies, recognizing the success and value it brings.

I. THE VPD'S MENTAL HEALTH STRATEGY

Utilizing the least intrusive resolution response for each situation, the program objective is to reduce the need for patrol response, reduce unnecessary admissions to hospitals, while connecting individuals in crisis to appropriate mental health services through community referrals. Car 87 staff members frequently provide phone and outreach assessments, support to clients and families, administration of medications, as well as bridging and referrals to health supports/services, including expedited screening and assessment at VCH's Access and Assessment Centre (AAC).

The role of the police officer within the Car 87 program is essential for the safety of the health service provider in emergent, rapidly-evolving, and potentially volatile situations, whereby an individual is in the midst of a mental health crisis without access to care. The VPD officer provides indispensable services during mental health crises in the case of Section 28 Mental Health Act apprehensions (and Form 21^a apprehensions). While emergency health services have the authority to complete Form 21 apprehensions without police involvement, in practice, the majority of these apprehensions are through police calls to Car 87 (furthermore, only law enforcement officers have legal authority to involuntarily apprehend individuals under Section 28). In other words, the success of the Car 87 program is predicated on the participation of the VPD and could not be successfully replicated without this support.

Project Link

The VPD, in collaboration with health partners, provides a spectrum of innovative mental health outreach, care, and support to the community. Furthermore, the [Vancouver Police Board](#) (VPB) meets annually with health partner boards to provide governance and strategic direction to VPD and health working groups. More specifically, Project LINK, created in 2011, is a collaboration among the VPB, the VCH Board, and the PHC Board. Focusing on an overarching shift from a crisis response model to a community-based case management model that aims to prevent individual

crises from occurring in the first place, Project Link strives to further address the existing issues and circumstances related to persons living with mental health conditions, while improving both health services and criminal justice system outcomes. The success of this collaborative approach has been contingent on the close, established partnership with the VPB, VCH, and PHC, and is informed by mutual information sharing, combined knowledge, and coordinated efforts in achieving common objectives. Through evidence-based decision making at a strategic level, Project Link helps clients receive the best care possible from healthcare and public safety supports where necessary.

Serving as an example of how inter-agency collaboration between health and police services can lead to improved treatment outcomes for individuals living with mental health conditions, Car 87 paved the way for the ongoing success of Project Link and other joint initiatives.

Assertive Community Treatment

Following the continuum of care, many Car 87 clients continue to access community mental health services following a mental health crisis, either through the AAC and/or other community clinics, provided compliance with treatment plans. However, individuals with mental health issues can often be resistant to treatment and it was determined that this traditional model of service provision was insufficient to address the existing gaps, with many individuals overlooked, without access to longer-term care and support. For a small group of the most marginalized individuals, frequent use of the emergency medical system was the norm, and with extensive police contacts, repeated cycling through the criminal justice system, as well as prevalent and pervasive barriers to housing and employment, this population experienced challenges with community living.

^a Form 21 – Director's Warrant issued to peace officers and to apprehend the named patient and transport him/her to a named facility

I. THE VPD'S MENTAL HEALTH STRATEGY

In 2011, the first Assertive Community Treatment (ACT) teams were established by VCH, with two full time VPD officers working with the program by 2012. In addition to the policing support, the 5 ACT teams are comprised of 10 – 12 dedicated professionals, including nurses, social workers, psychiatrists, and vocational counsellors. The objective of this support is to provide essential wraparound services for clients demonstrating a history of complex and/or concurrent disorders, to prepare clients for successful transition to traditional community-based care.

With a caseload of over 280 clients across 5 ACT teams, the 2 assigned VPD officers provide critical support to keep the peace during visits with clients, many of whom have a history of violent offences and unstable treatment history (often with complex and/or concurrent disorders). VPD participation in ACT is integral to the program's success, as it allows VCH healthcare providers to safely administer medications in the community, while also providing further context and collateral information about clients during ongoing assessments. The role of the police within ACT further assists clients to navigate the criminal justice system, as VPD ACT members often accompany clients to court dates and hearings, while providing knowledge and understanding for existing criminal charges. In doing so, VPD ACT members contribute to the decrease in the number of police contacts following ACT participation and encourage positive, prosocial behaviours.

Through an evidence-based, recovery-focused approach, significant reductions have occurred in both involvement with the healthcare and criminal justice systems. More specifically, data analysis of current ACT clients show that, amongst 289 active clients in the past year,^b there was a:

- 53% decrease in the number of negative police contacts among the client population;
- 49% decrease in clients committing violent crime;
- 62% decrease in mental health apprehensions;

- 57% decrease in street disorder, categorized as nuisances and/or disturbances;
- 26% decrease in incidents of victimization;
- 49% decrease in criminal justice system involvement, whereby a criminal charge was recommended and/or there was sufficient data to lay a charge;
- 61% decrease in emergency department visits; and
- 74% decrease in mental health bed days.

As of June 2020, 31 quarterly evaluations have been conducted and not a single evaluation has seen an increase in any of the healthcare and criminal justice system categories examined.

Assertive Outreach Team

Despite the success of the ACT program in treating the most high-risk, high-needs populations through long-term, wraparound services, gaps in service were still prevalent within both the health and criminal justice systems, as not all clients in need qualified as ACT clients. Statistics examined on a yearly basis, indicated a concerning upward trend of violent and unprovoked assaults committed by individuals living with untreated moderate to severe mental health conditions. As a result, the Assertive Outreach Team (AOT) was created in 2014 through the Project Link initiative, to provide short-term bridging services to assist clients in transitioning from emergency healthcare and/or criminal justice systems to longer-term, community-based services, such as ACT.

Four dedicated, full-time VPD police officers were reallocated to work with VCH psychiatrists, nurses, and clinical supervisors, to reduce incidents of violence, self-harm, victimization, treatment avoidance, and engagement with the criminal justice system. Similar to ACT, AOT's intent is to prevent further deterioration in the quality of life for individuals living with mental health and/or substance use issues during their

^b Percentage differences are calculated based on a comparison between ACT clients one year pre-intervention. Up until August 31, 2020

I. THE VPD'S MENTAL HEALTH STRATEGY

transition to long-term services. Many AOT clients are not mandated to receive mental health treatment, despite their need, and as such, the AOT program is centred on the increased well-being of the client through pre-crisis interventions and connections to mental health treatment.

Given that AOT provides a bridging service with a duration of one to two months, many clients initially accessing AOT services have not yet been stabilized and/or connected to a primary health service provider. As a result, the role of the VPD within this collaborative program is more extensive than with ACT, as police officers provide community safety support and crisis de-escalation in this interim, transitional period. The presence of a VPD officer helps to ensure the safety and security of both the client and healthcare providers attempting to administer medications in treatment-averse patients. As many of the AOT client population are individuals experiencing homelessness, VPD AOT members are also better equipped to locate clients for treatment services. VPD AOT members are also vital in their provision of contextual social histories for case management strategies, as well as in their knowledge in providing general criminal justice navigation support for outstanding warrants and charges.

With over 2,700 clients referred since inception in 2014, the AOT program currently has 39 clients in the program and in the past year, there has been a:

- 69% decrease in the number of negative police contacts among the client population;
- 92% decrease in clients committing violent crime;
- 75% decrease in the number of mental health apprehensions;
- 76% in street disorder, categorized as nuisance and/or disturbances;

- 100% decrease in incidents of victimization;^d
- 66% decrease in criminal justice system involvement, whereby a criminal charge was recommended and/or there was sufficient data to lay a charge;
- 86% decrease in emergency department visits; and
- 85% decrease in mental health bed days.

Much of this success has been contingent on the creative and collaborative problem-solving approach taken, with referrals to ongoing mental health treatment being the key to prevention of future mental health crises.

Early Warning System

The VPD Mental Health Unit (MHU), formally established in 2012, aims to reduce the number of individuals cycling through the criminal justice system as a result of untreated mental health disorders. In addition to the inter-agency collaborations established through Project Link, the VPD's MHU has been strategic and constructive in their pioneering approach to preventive policing through a social health lens. One significant innovation established by the VPD's MHU is the Early Warning System (EWS) in 2014, which supports the AOT's objective for pre-crisis intervention rather than post-crisis intervention.

The EWS proactively identifies potential mental health referrals based on an individual's existing police history and a set of pre-defined weighted factors (e.g., prior mental health apprehensions, prior police incidents with a mental health component, and history of violence within the past two years). Weighted factors occurring within the past 15 days are considered to be recent and are of greater significance in the EWS, which is used to monitor and forecast signs of early mental health intervention needs for all individuals with a recorded mental health related police incident.

^c The most recent sample consists of all AOT clients from the past year (up until August 31, 2020), with percentage differences calculated based on a comparison between AOT clients one month pre-intervention.

^d Prior to AOT program participation, there were 4 reported incidents of victimization among the AOT clients, which decreased to 0 in the 28 days following program intervention, thereby leading to 100% decrease in victimization in the most recent data sample.

I. THE VPD'S MENTAL HEALTH STRATEGY

Information for the EWS is pulled by the VPD MHU's data analyst on a biweekly basis from daily police briefing reports, as well as files flagged with a mental health component in the Police Records Information Management Environment (PRIME) database. The top 150 individual names are compiled by the EWS on a biweekly basis and sent to AOT to determine the need for bridging supports and mental health interventions, thereby providing a catalyst for action and an interruption to the criminal justice system cycle for the identified individual. In the first six months of 2020, the EWS identified 1,082 individuals in need of mental health intervention; and within a month of being identified by the EWS as needing intervention supports, 43 individuals committed a criminal offence, as a result of untreated mental health issues

This ability of the EWS to predict an imminent mental health crisis makes it an invaluable crime prevention and social health technology. As a referral tool for AOT pre-crisis intervention, not only will clients access necessary mental health treatment, but innumerable criminal offences will also be effectively prevented, given the timely intervention of joint VPD, VCH, and PHC services.

A FOCUS ON DIVERSION

With the formal development of the VPD's [Mental Health Strategy](#) in 2016, the approach of the VPD with the mental health crisis is clear – diversion from the criminal justice system through assertive treatment, inter-agency partnerships, and collaborative, preventive community-based policing. The VPD's 2018 [Pathway to Wellness](#) video highlights the many partnerships and initiatives the VPD is involved in to lessen the impact that untreated mental illness has on the community, on policing, on health services, and, most importantly, on those living with mental health issues. This solution-based, person-centric attitude towards diminishing crime is further demonstrated in the development of the St. Paul's HUB, and of note is the contributing role that the VPD played in its formation.

Built in 2018, the HUB serves as a compliment to existing emergency and transitional mental health and addictions facilities in the city, such as the AAC, as well as the newly built Rapid Access Addiction Centre at St. Paul's Hospital. Consisting of both a clinical unit and transition centre, the objective of the HUB is to divert 6,000 emergency department visits to a centralized space, where specialized, trauma-informed practices may be more effective in treating patients with emergencies relating to mental health and/or substance use issues. Recognizing the importance of relationship building for the purpose of connecting individuals to ongoing treatment, the VPD was instrumental in the development of the [Vancouver Police Foundation](#) (VPF) Transitional Care Centre (TCC), as part of the St. Paul's HUB. This space, funded by the VPF, provides mental health clients with transitional accommodation following discharge from St. Paul's Hospital, thereby offering further opportunity to connect HUB emergency department patients with appropriate ongoing care and mental health treatment. The role of the VPD in the development of this space cannot be overlooked and it is with the ongoing advocacy and support of the VPD that the St. Paul's HUB came to fruition.

Further to the mental health specific programs and initiatives outlined in this report, the VPD receives calls for service (CFS) every day which involve a mental health component. The ongoing efforts of the VPD in combating the mental health crisis with targeted, empirical solutions has led to a diversion away from unnecessary reliance on emergency first responder resources and has alleviated some of the burden on an overtaxed emergency system, conserving emergency resources and personnel, while improving mental health outcomes and decreasing recidivism in program participants. As the first agency in British Columbia (B.C.) to implement mandatory reporting of whether mental health is a contributing factor/component of a police call, every VPD file entered into the PRIME database since 2013 includes a mental health template. This has been instrumental in data tracking and the accurate identification of criminal trends and treatment needs with regards to the population living with untreated or inadequately treated mental health concerns.

I. THE VPD'S MENTAL HEALTH STRATEGY

Crime prevention notwithstanding, the role of the police officer within each of these collaborative initiatives is key to its function and success, as healthcare workers are unable to fulfill their course of duty if subjected to unsafe and volatile working conditions. It is important to note that individuals with untreated mental health and/or concurrent disorders may escalate to aggression and violence, both against themselves or others; in either instance, police officers are required to safely de-escalate the situation.

...the direction and approach of the VPD with the mental health crisis is clear – diversion from the criminal justice system through assertive treatment, inter-agency partnerships, and collaborative, preventive community-based policing.

A CLOSER LOOK: WHAT DOES THE MENTAL HEALTH DATA SHOW?

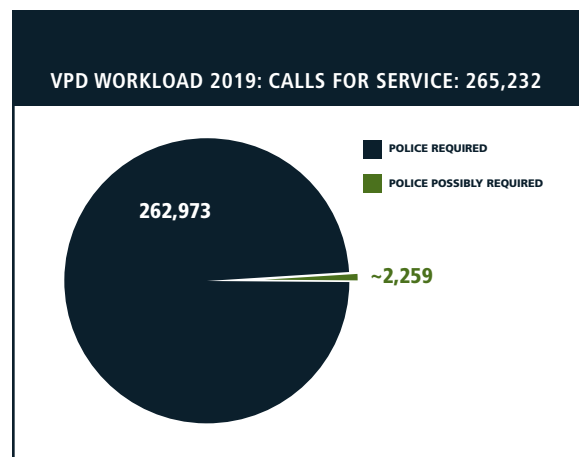
In 2019, there were over 265,000 total CFS for the VPD:

- Of these, 13,592 were occurrence reports that indicated mental health was a contributing factor in the incident^e (these include assaults, sex offences, weapons offences, robberies, threat/harassment offences);
 - 84% required police attendance, as situations involved harm/danger, victimization, criminal code offences and/or statutory requirements, including mental health apprehensions;
 - Approximately 26% were calls for police assistance, made from health or care professionals;
 - Approximately 12% of these involved weapons; and

- 2,259 may or may not have required police attendance, which is the equivalent of 6 CFS/day (VPD officers attend, on average, 727 CFS a day). These 2,259 CFS resulted in officers dedicating approximately 11,800 hours on these CFS, and this equates to 8 officer positions (the cost of which is, \$1,051,935).

For many years, the VPD has advocated for mental health support, due to government's lack of investment in providing adequate support services for individuals with mental health issues, who are being treated in the community. As a result, it should be noted that there are no other agencies that currently exist to deal with mental health related calls, given a number of considerations, including but not limited to, statutory authority, case law, crisis intervention/de-escalation training, and the availability of people to respond 24 hours a day.

VPD officers have unique skillsets and de-escalation capabilities needed for the safe apprehension of persons experiencing mental health crises (e.g., Section 28 apprehensions). Furthermore, as stated in the Mental Health Act, only law enforcement officers have legal authority to involuntarily apprehend individuals under Section 28 for immediate assessment and examination by a physician.



^e Refers to total CFS where the police officer indicated "mental health" issues on the PRIME template

II. HELPING INDIVIDUALS EXPERIENCING HOMELESSNESS

THE FINDINGS FROM THE 2020 HOMELESS

count show a slight decrease in homelessness in Vancouver, there were 2,095 individuals who were facing homelessness at the time of the count, including 547 unsheltered individuals. The pervasive social issue of homelessness in Vancouver is far-reaching, and over the past decade, the VPD has viewed the issue of homelessness through a compassionate, person-centric lens, recognizing that homelessness is a social condition reflective of society's failure to support those most vulnerable and marginalized. Often, individuals experiencing homelessness due to a lack of access to affordable and stable housing, are further besieged with a myriad of intra- and inter-personal concerns, including: addiction, trauma, criminal victimization, physical health concerns, and complex mental health conditions. Given the complex, concurrent, and nuanced needs of many individuals experiencing homelessness, the VPD is dedicated to efforts to minimize criminalization and penalization, in favour of housing supports wherever possible.

HOMELESS OUTREACH COORDINATOR

In January 2009, a Homeless Outreach Coordinator (HOC) position was created, within the Community Services Section (CSS). The role of the HOC is to support individuals who are experiencing homelessness by developing trust and relationships with this population, and offer referrals where appropriate. The HOC also addresses broader community concerns, both on the street and shelters, and help address any conflicts, criminal matters or public safety concerns that may arise. The HOC also provides assistance, assurance, and advocacy for the homeless population where necessary.

At present, the position of the HOC is a citywide role that is supervised within VPD's Community Policing Team, whose principal mandate is to work closely with members of the community in order to achieve the overall goals of increasing public safety and preventing crime, and improve community well-being.

IMPORTANCE OF COMMUNITY PARTNERSHIPS & COLLABORATION

In order to build and maintain safe and inclusive neighbourhoods, strong established partnerships between all levels of government, non-profit organizations, co-operative housing providers, and community support services are required. Within the Downtown Eastside (DTES), the VPD works closely with organizations such as BC Housing, Ministry of Social Development and Poverty Reduction (MSDPR), faith-based organizations, and non-profit housing operators, collaborating to provide support to vulnerable unsheltered populations, as well as under-housed individuals in single room occupancy hotels (SROs) and shelter systems. The HOC also sits on a Community Advisory Committee for temporary modular and supportive housing and heat shelters, and provides support and policing insight. As a key component of this network of partnerships, the HOC conducts outreach work with the homeless population and coordinates with mental health, addiction, and housing service providers, while liaising with municipal and provincial governments.

Engaging with BC Housing, City of Vancouver (CoV), Raincity Housing, Carnegie Outreach, and other partners, the HOC attends monthly meetings to participate in dialogue regarding shelters and discuss any concerns and/or issues that may arise. This collaboration between the VPD and shelter management is important in providing supported interventions and proactive problem solving to address issues that may arise in shelters and/or SROs prior to formal police involvement. Having created a community working group, the VPD's HOC works with community stakeholders to find cohesive, inter-agency solutions for individuals experiencing homelessness, recognizing that more resources and options are available to those in need if community agencies work together. Working in tandem with BC Housing staff, the HOC seeks to provide enhanced outreach services to individuals who are regarded as "hard to house", given the persistent, multiple barriers experienced, and in consultation with the individual, options for suitable housing are established.

II. HELPING INDIVIDUALS EXPERIENCING HOMELESSNESS

The HOC also works with the VCH and MSDPR, conducting twice weekly outreach services with either a nurse or a welfare services worker. This partnership was established to ensure that individuals experiencing homelessness were provided with requisite financial assistance through MSDPR and that all their medical needs were being addressed through VCH. Furthermore, in addition to the established partnerships and programs that the HOC is a part of, the VPD is further involved in approximately 40 SRO inspections per year, in collaboration with CoV Building Inspectors and Vancouver Fire and Rescue Services.

Within the scope of each of these partnerships, the HOC assists in supporting the health and well-being of the individual experiencing homelessness, while also helping to ensure that outreach staff and community members are safe and supported. Given that many individuals experiencing homelessness are simultaneously living with complex substance use disorders and/or mental health conditions, outreach work conducted by community groups present a unique challenge, whereby an element of aggression and/or risk of violence may be the result of severe and untreated mental health concerns, with behaviours exacerbated by substance use. As such, VPD presence through the HOC position helps to protect individuals involved in community outreach work by de-escalating during collaborative outreach endeavours.

SEPARATING SUPPORT FROM ENFORCEMENT

Encampments

The VPD plays an important role in managing and supporting the public safety in encampments and is relied upon to carry out court ordered injunctions when the locations become too dangerous. The HOC, as well as VPD Neighborhood Police Officers, and frontline officers, have all been heavily involved in the safe, secure, and

timely evacuation of the Oppenheimer Park encampment. Having first emerged in October 2018, the Oppenheimer Park encampment resulted in 593 CFS in 2018, which increased to 899 CFS in 2019. The VPD's focus is on the public safety impact of encampments including the violence and victimization that occurs in the encampments.

Bylaw Enforcement and Calls for Service

Not all under-housed individuals reside in SROs and shelters, as was evidenced by the number of people living in vehicles at the Oppenheimer Park encampment. The VPD recognizes that individuals may rely upon their vehicles for shelter due to lack of access to affordable housing in the city, and as such, it is common practice for both city bylaw officers and VPD officers to avoid issuing tickets to individuals using vehicles for the purposes of shelter. Furthermore, VPD involvement in parking enforcement and other similar bylaw complaints are limited only to occurrences wherein bylaw officers and/or CoV Homeless Outreach workers request police attendance to keep the peace.

In these scenarios, collaborative and respectful outcomes are sought by VPD officers to resolve complaints from residents and/or businesses while respecting the integrity, rights, and freedoms of the individual facing homelessness and/or under-housing. In 2019, there were five bylaw tickets issued to individuals experiencing homelessness (specifically pertaining to street vending [one ticket] or erecting structures not allowed on the street [four tickets]). In comparison, in examining the same bylaw infractions in 2019, 2,230 municipal bylaw enforcement tickets were issued to individuals not experiencing homelessness.^f This illustrates the concerted effort taken by the VPD to avoid the penalization and criminalization of an already vulnerable population, and it is only in extenuating and necessary circumstances that bylaw contravention tickets are issued by VPD officers to individuals facing homelessness.

^f See Appendix A for list of bylaws examined.

II. HELPING INDIVIDUALS EXPERIENCING HOMELESSNESS

Instead, the approach taken by the VPD is to resolve complaints peacefully and provide outreach and housing connective services.

ONGOING CHALLENGES

The findings from the recent Homeless Count further demonstrate that there remains a vast overrepresentation of Indigenous and Black populations experiencing homelessness. More specifically, 415 respondents identified as Indigenous in the city of Vancouver alone, as well as 98 respondents across Metro Vancouver identified as Black. In other words, while Indigenous Peoples represent just 2.5% of the general population in Vancouver, 19.8% of the homeless population in the city of Vancouver identify as Indigenous. Similarly overrepresented, Black respondents represented 6% of those experiencing homelessness in Metro Vancouver, while within the general population, only 1.2% identify as Black.

These findings reflect a requirement to address the specific needs of racialized groups experiencing homelessness. Ongoing outreach supports ought to be cognizant of this overrepresentation towards reconciling these issues, and the VPD is committed to continued collaboration with community groups in hopes of eradicating the issue of homelessness through inclusive, accessible, and affordable housing.

Higher Rates of Victimization

Individuals experiencing homelessness are often encumbered with a multitude of challenges on a daily basis, from an overwhelming lack of stability, shelter, and resources, to the complications that may arise from poor nutrition and health, often further compounded by substance use issues and mental health conditions. In addition, individuals experiencing homelessness are also at increased risk of victimization, particularly of violent crime, and the trend of violent crime against individuals experiencing homelessness is steadily increasing.

In 2019, 6% of violent victimization in Vancouver occurred within the homeless population, while the number of individuals experiencing homelessness represented just 0.3% of the city's population; individuals experiencing homelessness, are almost 19 times more likely to be victimized in Vancouver. This exorbitant overrepresentation speaks to the vulnerability of individuals experiencing homelessness, with precarious social situations exposing this population to violent offenders. This also speaks to the need for continued engagement of the police with our homeless population.

The scope of social services required to adequately assist individuals experiencing homelessness is broad, and in addition to the calls for police service as a result of violent victimization, frontline officers and the HOC are in consistent daily contact with others, providing outreach supports, connecting individuals to community services, and resolving conflicts between community groups. In this manner, VPD presence is often requested by the public and community service providers in order to keep the peace and maintain public safety.

III. SUBSTANCE USE ISSUES

THE VPD RECOGNIZES that substance use disorders and addiction issues^g cause immense harm to individuals and society as a whole, with implications on both personal and public safety. Individuals with substance use issues form a compulsive physiological and/or psychological need for a substance and/or behaviour, in spite of severe, ongoing, detrimental consequences. The complexity of this social issue has driven the attitudes and direction of the VPD, having adopted a progressive position on policing those living with substance use issues, with the goal of enhancing individual and community safety, preventing harm, and protecting the vulnerable to build healthy and safe communities.

BACKGROUND

In 2001, the CoV adopted the [Four Pillars Drug Strategy](#) to address substance use issues and went on to endorse a drug policy prevention plan, Preventing Harm from Psychoactive Substance Use in 2005. The VPD has been a key stakeholder and leader in these strategies from the start, which seeks to provide an integrated, multi-pronged approach to prevent the harmful use of alcohol, prescription drugs, and illicit drugs. The VPD has formally endorsed the Four Pillars approach, and is a key partner in the multi-agency strategy to address substance use issues, playing an important role in substance abuse prevention, access to treatment, enforcement, and harm reduction.

As a leader in advocating for legislation, treatment, harm reduction, and preventing crime and disorder related to illicit drug use, the VPD's work in this capacity includes, but is not limited to:

- Working with all levels of government to develop policy, legislation, and guidelines to address substance use issues, and illegal production of illicit substances;
- Providing education to youth, the Vancouver community, and marginalized and vulnerable populations to prevent psychoactive substance use and addiction issues;
- Advocating for evidence-based medical treatment, harm reduction, safe-supply and decriminalization of small quantities of personal-use street drugs on several national, provincial and local substance abuse committees and boards;
- Connecting individuals in the community and in police custody, who are living with substance use issues, to health and treatment providers and support networks;
- Training frontline police officers and civilian employees in the use of Naloxone^h nasal spray, cardiopulmonary resuscitation, and automated external defibrillator use to provide lifesaving emergency medical intervention in overdoses prior to the arrival of paramedics;
- Focused enforcement on mid and high-level drug traffickers, producers, importers/exporters, interdiction of organized crime groups and gangs, seizing weapons, drug production equipment (such as pill presses), and illegal substances such as fentanyl and other illicit drugs causing record fatalities in the overdose crisis;
- Ensuring safety for all individuals in Vancouver by encouraging drug users to utilize supervised consumption sites, overdose prevention sites, and peer witnessing rooms/facilities, instead of community spaces such as schools, playgrounds, and parks, where children may be present; and
- Caring for drug or alcohol intoxicated individuals who have been denied service at Vancouver Detox and local hospitals due to violent and/or uncontrollable behaviour in police custody, and providing medical care, withdrawal/overdose prevention medication, and referrals to community services upon release.

^g Given that problematic substance misuse and abuse may not always be formally diagnosed as a substance use disorder, as well as the understanding that problematic patterns surrounding other addictive behaviours can interfere with an individual's capacity to function, the broader, colloquial term of "substance use issues" will be utilized in reference to all substance misuse, abuse, and dependence issues, as well as other addictive behaviours and addiction disorders.

^h Naloxone (also known as Narcan®) is a medication called an "opioid antagonist" used to counter the effects of opioid overdose. Specifically, naloxone is used in opioid overdoses to counteract life threatening depression of the central nervous system and respiratory system, allowing an overdose victim to breathe normally.

III. SUBSTANCE USE ISSUES

THE VPD'S DRUG POLICY

Adopted in 2006, the VPD's [Drug Policy](#),²⁰ aligns with the VPD's [Strategic Plan](#) to support public safety, reduce crime, diminish the fear of crime, and create safe communities for all.²¹ The enforcement pillar in Vancouver's Four Pillars strategy encompasses the need for safety, peace, and public order in the DTES and other Vancouver neighbourhoods.

The VPD recognizes the careful balance that must be struck between enforcing the laws, maintaining public safety, and destigmatizing substance use issues. As such, the VPD's drug policy provides officers with a broad range of discretion when dealing with psychoactive substance use and possession of illicit drugs, and directs police officers to consider a broad view that includes an individual's behaviour rather than the act of unlawful possession of illicit drugs when deciding to recommend a criminal charge. Police officers consider if the person was behaving in an aggressive or threatening manner, threatening public safety, or disrupting the well-being of the community at large. The VPD's policy outlines consideration of other factors, including aggravating circumstances, such as an individual's location at the time of consumption. For example, someone who opts to consume substances at or near a school or playground may be causing undue harm to children and the community through exposure to illicit open drug use in vulnerable community spaces.

This position towards simple possession has been in place for close to 15 years, as the VPD seeks to decriminalize and divert individuals with substance use issues away from the criminal justice system using alternative measures. Instead, the VPD's drug enforcement strategy targets individuals who pose the greatest risk to public safety, such as those involved in organized crime, illicit drug production and trafficking.

VPD'S DRUG ENFORCEMENT STRATEGY

A significant contributor to the opioid epidemic is the poisoned supply of illegal street drugs. The VPD has made the toxic illicit drug supply reduction an enforcement priority, with the hope that treatment, diversion to healthcare and safe supply will contribute to demand reduction and save lives. VPD's enforcement efforts target those who manufacture, distribute, and import/export opioids and other harmful drugs. The VPD is dedicated to enforcement strategies against the predatory element who contribute to crime, violence, and disorder, as well as the victimization of our most vulnerable citizens in Vancouver.

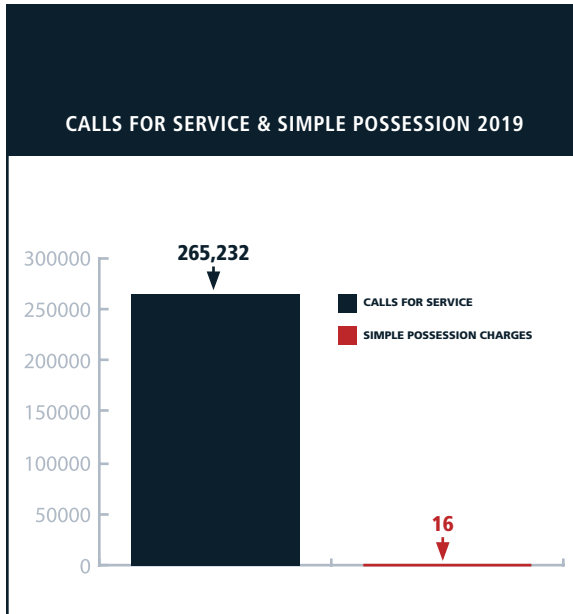
However, the number of simple drug possession charges approved by Crown Counsel has decreased 88% in the last decade – from 143 in 2009 to 16 in 2019. This decrease speaks to the efforts the VPD has undertaken to divert substance users from the criminal justice system to healthcare supports wherever possible, while focusing investigative efforts on the organized crime groups responsible for the opioid crisis. In 2019, the VPD handled over 265,000 CFS, only 16 of those resulted in a charge for simple drug possession. The time officers spent for those 16 simple possession charges was 64 hours, which equates to \$4,032.



... THERE HAS BEEN A SHIFT IN FOCUS FOR POLICE TO SUPPORT A HARM REDUCTION APPROACH...FOR EXAMPLE, THE VANCOUVER POLICE DEPARTMENT POLICY ON DRUGS PRIORITIZES THE CONTEXT OF DRUG USE RATHER THAN THE POSSESSION OF DRUGS, AND SUPPORTS CHARGES ONLY IF THE BEHAVIOUR AND CIRCUMSTANCES OF THE PERSON USING DRUGS IS HARMFUL TO THAT PERSON, TO OTHERS, OR TO PROPERTY.

DR. B. HENRY (2019)
PROVINCIAL HEALTH OFFICER, PROVINCE OF BRITISH COLUMBIA

III. SUBSTANCE USE ISSUES



In July 2020, as the President of the Canadian Association of Chiefs of Police (CACP), Chief Palmer recommended that that all police agencies in Canada recognize substance abuse and addiction as a public health issue to help reduce drug overdoses. The CACP endorsed the decriminalization of personal possession of illicit drugs. In response to this position, in August 2020, the Public Prosecution Service of Canada issued a directive for prosecutors to avoid pursuing simple drug possession charges under the *Controlled Drugs and Substances Act*, except in the event of major public safety concerns. This shift in approach is similar to the drug policy already implemented by the VPD and recognizes that criminal sanctions against substance users have limited effectiveness in deterrence unless other elements of criminality are also present. These changes could not come at a more opportune time, as the issue of addictions as a primary public health concern has become increasingly evident in recent years. The Chief Coroner of BC announced that June 2020 was the deadliest month on record for drug overdoses (breaking the record set just one month earlier) and in the past decade alone, 7,934 British Columbians have died from illicit drug overdoses.²²



“WE SUPPORT AN INTEGRATED HEALTH-FOCUSED APPROACH THAT LEVERAGES INNOVATIVE PARTNERSHIPS BETWEEN POLICE, HEALTHCARE AND ALL LEVELS OF GOVERNMENT. OUR ENFORCEMENT EFFORTS SHOULD FOCUS ON TRAFFICKING, MANUFACTURING AND THE IMPORT/EXPORT OF DANGEROUS DRUGS IN OUR COMMUNITIES.”

VPD CHIEF CONSTABLE ADAM PALMER
PAST PRESIDENT OF CACP (2018-2020)

TREATMENT AND HARM REDUCTION

Care at the Vancouver Police Jail

The Vancouver Jail is a short-term transition facility where most detainees remain for less than 24 hours. All detainees at the Vancouver Jail are assessed by a registered nurse upon arrival, who screens them for substance use and addiction/dependence disorders. This initial assessment is followed by a secondary assessment for treatment, including withdrawal management and opioid agonist therapy (OAT), such as the administration of Suboxone. While in custody, detainees are provided with a high level of care and are continually monitored to provide support for all needs relevant to substances use issues. The VPD Jail, the only short-term transition facility in Canada to provide a complete addiction response, offers overdose emergency response, harm reduction initiatives, such as the provision of take-home Naloxone kits upon release from custody, as well as referrals to community-based addiction treatment including the VCH Overdose Outreach Team. These strategies to mitigate risk of overdose and minimize harm to the individual detained are practical applications of the VPD drug policy in action, as the VPD approach to substance use issues remains firmly rooted in harm reduction and decriminalization.

III. SUBSTANCE USE ISSUES

In 2020, the Mayor’s Task Force approved a pilot project in the VPD Jail, whereby all detainees with substance use issues would be referred directly to outreach and treatment services in the community. There were 232 referrals made in the 4-week study period,ⁱ at which time the data analysis was unfortunately ceased as a result of the COVID-19 pandemic. A two-week study sample of the pilot project found that:

- 87% of detainees reported current substance use issues, and 46% reported current alcohol use;
- Of those reporting current substance use, 63% reported opiate use;
- Of the opiate users, 59% received OAT while in custody (those who did not receive treatment were generally either too intoxicated or refused);
- 79% of alcohol users received Alcohol Withdrawal Treatment while in custody; and
- For detainees who self-reported that they receive OAT (Methadone, Suboxone, or Kadian), 27% received their dose while in custody, with safety precautions to ensure there is no double-dosing.

In addition to serving as a short-term detention facility for those awaiting judicial process, the VPD Jail also houses individuals who are intoxicated from substances for sobering, when no other criminal charges are being considered. The first choice for sobering is always to send the detainee to Vancouver Detox, or even the hospital in some cases, but many times the detainee is rejected due to violent behaviour, past violent behaviour, or Vancouver Detox being closed at the time of admission. The VPD Jail has a duty to provide a safe sobering facility for these individuals, for their own safety, as well as for the safety of the community. In 2019, 347 individuals were held for their safety, where no criminal charges were involved.

The HUB at St Paul’s Hospital

The VPD has remained a vocal advocate for improved treatment and care for those with mental health and substance abuse issues. In 2017, through a donation to VPF, the VPD was able to advance this care by establishing a partnership with PHC and create the St. Paul’s Hospital Emergency Department HUB. This innovative treatment model is dedicated to timely assessment, treatment, and care for people living with substance use disorders and/or mental health issues. At the HUB, patients are connected to the TCC and the Overdose Prevention Site, with the VPD continuing to work in an advisory capacity to support both the HUB and TCC. Not only does the HUB provide rapid, specialized care for individuals with substance use issues, it reduces the amount of time VPD officers are required to spend with patients in hospital emergency departments, thereby allowing them to return to other policing priorities to keep Vancouver safe.

CANADA’S LEADER IN POLICING AND IMPROVING PUBLIC SAFETY

The opioid crisis and prevailing substance use issues in Vancouver remain departmental priorities. The VPD will continue to work with the CoV and other partners to focus on issues that have an impact on public safety, including helping individuals who suffer from harm from using illicit substances. With a focus on targeting predatory individuals or organized crime groups that traffic drugs and pose a risk to public safety, and in advocating for treatment and harm reduction initiatives for those living with substance use issues, the VPD will continue to work towards ending the crisis and reducing illicit drug use in the community.

ⁱ February 16 – March 18, 2020

IV. SAFETY FIRST: ENSURING THE WELL-BEING OF SEX WORKERS

VPD PHILOSOPHY WITH RELATION TO SEX WORK

The VPD's philosophy regarding violence against sex workers and the enforcement of sex work-related laws is, first and foremost, to ensure the safety and well-being of those engaged in sexual services for compensation. The VPD is focused on directing enforcement initiatives towards those who prey on, manipulate, violate, exploit, and abuse individuals offering sexual services.

To improve the safety, dignity, and well-being of individuals in the sex industry, the VPD's [Sex Work Enforcement Guidelines](#) were developed in 2013, in consultation with community advocacy and outreach groups including Women's Information and Save Haven (WISH) Drop-In Centre Society, Pivot Legal Society, BC Coalition of Experiential Communities, PEERS Vancouver Resource Society and PACE Society. The B.C. Provincial Sex Enforcement Guidelines and Principles were established in January 2018. The VPD was an active member of a provincial Police Services working group that helped establish these guidelines for the province, in fact, the provincial guidelines were modeled from the VPD's guidelines. Further, the Red Women Rising report concluded "All police forces should implement Sex Work Enforcement Guidelines similar to those in Vancouver that support the safety of sex workers in police interactions."

The VPD's philosophy towards sex work has evolved over the years through community consultation, the Missing Women Commission of Inquiry, the National Inquiry into Missing and Murdered Indigenous Women and Girls, the VPD Sex Work Enforcement Guidelines (2013), the BC Association of Chiefs of Police Sex Work Enforcement Guidelines (2018), case law and amendments to the Criminal Code of Canada through the Protection of Exploited Persons and Community Act. A trauma-informed, evidence-based, and unbiased approach to policing guides VPD investigations and interactions with sex workers, whereby VPD officers place emphasis on building relationships and establishing

trust, so as not to undermine and decrease the likelihood of an individual reaching out to police for assistance in the future. As a result of varying public attitudes, community complaints, and messaging from the courts on sex-industry related cases, enforcement action may sometimes appear to be at odds with relationship building, and as such, the VPD seeks to prevent indiscriminate enforcement by focusing on principles which are founded upon a respect for the health and safety of adults engaged in consensual sex work.

In Vancouver, the majority of sex work takes place indoors, out of public view, and communication for services takes place over the internet or via text. As a result, indoor sex workers are the most likely to have been victims of human trafficking and are at increased risk of exploitation by those profiting from their work, exercising control over them. The VPD recognizes that many sex workers, especially in the DTES, are involved in sex work as a survival mechanism (e.g., substance use issues and/or mental health concerns) and the VPD recognizes that these individuals are particularly vulnerable and marginalized, with a disproportionate number being Indigenous women. The environment that sex workers are sometimes obliged to provide services in inherently places them at risk for violence and exploitation, as it is noted that the majority of sex workers in Vancouver do not

A TRAUMA-INFORMED, EVIDENCE-BASED, AND UNBIASED APPROACH TO POLICING GUIDES VPD INVESTIGATIONS AND INTERACTIONS WITH SEX WORKERS, WHEREBY VPD OFFICERS PLACE EMPHASIS ON BUILDING RELATIONSHIPS AND ESTABLISHING TRUST

IV. SAFETY FIRST: ENSURING THE WELL-BEING OF SEX WORKERS

work on the streets or in the DTES. As such, the primary objective of VPD enforcement is to reduce victimization and violence through outreach and enforcement strategies, and when requested, to assist sex workers with exit strategies.

VPD COUNTER EXPLOITATION UNIT

The VPD Counter Exploitation Unit (CEU) is a specialized unit comprised of eight dedicated officers who respond to community issues and needs relating to criminal exploitation and services related to sex. VPD's CEU members assist sex workers, investigate crimes related to sexual services, including situations involving violence, exploitation, youth involvement, organized crime affiliations, and human trafficking. These situations are considered to be high-risk to personal and public safety, making them top priorities for intervention and investigation.

The CEU recognizes that the majority of sex work in Vancouver is conducted in a consensual manner. The approach of the CEU is not to disrupt or hinder these sexual practices, but rather, to mitigate and prevent incidents whereby consent has not or cannot be provided (e.g., with exploitation, abuse, violence, or youth-related incidents). Officers in the CEU adhere to trauma informed practices and have received specialized training which includes advanced trauma-based interview training with human trafficking victims/survivors. By implementing this specialized skillset, VPD officers are better able to understand and recognize the physical, emotional, and behavioural impacts of trauma, thereby minimizing any potential for unintended further harm against victims.

The VPD's CEU's enforcement priorities are guided by the duty to protect those who are marginalized and vulnerable, to prevent and investigate violence and exploitation, and to apprehend those who exploit and perpetrate violence. Based on a balance of risk assessment, enforcement priorities involve investigating incidents of violence and exploitation, whether investigating organized crime groups, reviewing intelligence and

trends, utilizing community resources, as well as considering any pertinent community concerns.

Any enforcement action conducted by the VPD is consistent and proportional to the risk presented to the community or the sex worker(s), with the least intrusive strategy implemented in order to keep the sex worker(s) safe, while mitigating the issue. In "high risk" situations, including those involving sexually exploited children or youth, gangs/organized crime, exploitive practices, sexual abuse, violence, and human trafficking, the enforcement action is always focused on targeting the offender rather than the sex worker and prioritizing investigations involving violence committed against sex workers, children and youth involved in sexual services, human trafficking, and targeting those who seek to purchase sex from children and youth.

The CEU and Sex Crimes Unit are currently working on a prioritized human trafficking project, focusing on organized crime groups that are targeting girls from in the DTES area. Girls as young as 10 years old have been identified as high-risk youth involved in this project, and thus far in 2020, the CEU has identified more than 20 underage girls associated to this organized crime group, with Indigenous girls being the highest risk for exploitation within this group (37% of the 20 high-risk youth identified were Indigenous).

Helping Victims of Human Trafficking

Victims of human trafficking and sex exploitation have suffered extensively and require specialized, trauma-informed approaches to support their recovery. For the past four years a Family Services of Greater Vancouver Victim Support worker has been embedded into the VPD's CEU, which has greatly assisted the VPD in securing appropriate and timely supports for survivors during their most vulnerable period in recovery. This collaboration and support with community partners is important to the healing process for the survivor and the CEU continues to work cohesively with other social service providers to support individuals

IV. SAFETY FIRST: ENSURING THE WELL-BEING OF SEX WORKERS

both during and after court processes. Community programs offered by agencies such as The Salvation Army, have proven to be of significant value in aiding survivors of human trafficking, and this inter-agency collaboration has been successful in providing support to the survivor, which further supports the work of the criminal justice system in prosecuting offenders and perpetrators.

CRIME REDUCTION WITH RELATION TO SEX WORK

The VPD's CEU has been successful in conducting on-line "decoy stings" wherein police posted electronic ads posing as an underage sex worker in order to arrest individuals seeking to exploit youth for the purpose of sex. In two 2018 operations (Projects Serrated and Steadfast), 46 men were charged with Obtaining Sexual Services for Consideration – from a person under the age of 18, demonstrating the effectiveness of targeted interventions for public safety purposes. This serves as just one example of the VPD's success in reducing the number of sex work related incidents, which is defined as any police incident involving a sex worker, including sexual assault and exploitation/assault/robbery/break and enter/unlawful confinement/extortion/and drug and gang related offences.

The VPD's CEU has been successful in their crime prevention strategies in relation to individuals and/or groups that exploit sex workers. Of note, the VPD has not arrested or charged a sex-worker for a sex-trade related offence since September 2008), as a result there is no cost associated with the enforcement of sex work.

SEX INDUSTRY LIAISON OFFICER

In addition to the CEU's work, the VPD has also created, within the VPD's Community Services Section, a specialized community outreach Sex Industry Liaison Officer (SILO), who works with sex workers in the DTES to provide support, knowledge, and resources, and assistance to those who wish to explore exiting strategies.

The SILO has direct access to specialized funding allocated for sex workers to obtain essential items such as government identification, status cards, transportation, medical assistance and/or prescriptions. The funds are further utilized for the purchase of personal items for sex workers including clothes, shoes, and toiletries. Sex workers are supported and encouraged to report incidents of violence, with access to social programs and community-based support services also provided to help individuals wherever possible, including programs such as detox and recovery facilities, housing complexes, as well as community supports in both the DTES and the Kingsway corridor. Through ongoing outreach, the SILO has solidified credibility among sex workers in Vancouver, creating a safe environment for sex workers to turn to in times of need.

WISH RED LIGHT ALERT

The VPD also utilizes the WISH Red Light Alert as a tool for knowledge and communication. This weekly community bulletin for sex workers began as a means to warn sex workers of potentially violent customers through peer reporting and community contributions. Since 2014, a VPD officer regularly reviews the bulletins to gather intelligence on predatory and/or violent behaviours, as well as identifying potential sex offenders. The VPD regularly shares information about sex offenders that pose significant risk to sex workers in the Red Light Alert bulletin, employing this community bulletin as an enforcement tool for improving community safety.

CONTINUING TO CARE FOR OUR COMMUNITY

CONCERTED EFFORTS HAVE BEEN TAKEN by the VPD to ensure that unnecessary criminalization does not occur. Rather, using a community-based, proactive policing approach, the VPD works in partnership with community stakeholders towards effective harm reduction strategies and programming, wherever possible. As also outlined in VPD's Community Matters (2020) report, given the VPD's progressive efforts, policing in Vancouver emphasizes engagement, prevention, and social responsibility.

It is important to the VPD that the considerable steps taken in the past decade continue towards appropriate continuums of care. The VPD recognizes that, while strides have been made, the significance of these societal issues necessitates that ongoing efforts be maintained. As such, the VPD remains dedicated to the pursuit of improved conditions, services, and programs in the areas of mental health, homelessness, substance use issues and sex work, in close collaboration with community partners and service providers.



GLOSSARY

AAC	ACCESS AND ASSESSMENT CENTRE
ACT	ASSERTIVE COMMUNITY TREATMENT
AOT	ASSERTIVE OUTREACH TEAMS
B.C.	BRITISH COLUMBIA
CACP	CANADIAN ASSOCIATION OF CHIEFS OF POLICE
CEU	COUNTER EXPLOITATION UNIT
CFS	CALLS FOR SERVICE
COV	CITY OF VANCOUVER
DTES	VANCOUVER DOWNTOWN EASTSIDE
EWS	EARLY WARNING SYSTEM
HOC	HOMELESS OUTREACH COORDINATOR
MHU	MENTAL HEALTH UNIT
MSDPR	MINISTRY OF SOCIAL DEVELOPMENT AND POVERTY REDUCTION
OAT	OPIOID AGONIST THERAPY
PHC	PROVIDENCE HEALTH CARE
PRIME	POLICE RECORDS INFORMATION MANAGEMENT ENVIRONMENT
SILO	SEX INDUSTRY LIASION OFFICER
SRO	SINGLE ROOM OCCUPANCY
TCC	TRANSITIONAL CARE CENTRE
VCH	VANCOUVER COASTAL HEALTH
VPB	VANCOUVER POLICE BOARD
VPD	VANCOUVER POLICE DEPARTMENT
VPF	VANCOUVER POLICE FOUNDATION
WISH	WOMEN'S INFORMATION AND SAFE HAVEN

APPENDIX A: BYLAWS EXAMINED IN RELATION TO HOMELESS POPULATION

<p>Bylaw 2849 Section 71</p>	<p>A person must not build, construct, place, maintain, occupy, or cause to be built, constructed, placed, maintained or occupied in any street, any structure, object, or substance which is an obstruction to the free use of such street, or which may encroach thereon, without having first obtained a permit issued by the City Engineer, in accordance with this bylaw</p>
<p>Bylaw 2849 Section 63(8)</p>	<p>No person shall: Park any vehicle on any roadway in any public park for a longer period that 15 minutes after 6:00 p.m. during the months of November, December and January; after the hour of 8:00 p.m. during the months of February, March, April and October and after the hour of 10:00 p.m. during the months of May, June, July, August and September</p>
<p>Bylaw 2849 Sections 17.1, 17.6(a), 17.6(b), 17.6(f), 20.1(a), 20.1(b), 20.2, and 20.3</p>	<p>Various stopping and/or extended parking related bylaws to both vehicles and larger vehicles/trailers</p>
<p>Board of Parks and Recreation ByLaw Section 11</p>	<p>No person shall erect, construct or build or cause to be erected, constructed or built in or on any park any tent, building, shelter, pavilion or other construction whatsoever without the permission of the General Manager</p>
<p>Board of Parks and Recreation ByLaw Section 14(k)(i) and 14(k)(ii)</p>	<p>Extended parking related offences</p>
<p>Bylaw 2849 Section 66</p>	<p>No person shall place or cause or suffer to be placed by any person in the employ of or under the control of such person, any merchandise, vehicle, chattel, or wares of any nature on any street, sidewalk or boulevard for the purpose of sale or display, or for any other purpose whatsoever except in the actual course of receipt or delivery, or to use any portion of any sidewalk for the purpose of selling any packaging goods, wares, or merchandise of any nature or for measuring, packing, or unpacking goods, wares or merchandise. Provided, however, that the provisions of this section shall not apply to any person duly authorized to conduct street vending pursuant to the Street Vending By-law.</p>

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VANCOUVER POLICE DEPARTMENT

OUR COMMUNITY IN NEED | THE VPD'S COMMUNITY-FOCUSED SAFETY STRATEGY



A JOURNEY TO HOPE

**AN UPDATE REPORT
ON THE VPD'S CONTINUED FIGHT
AGAINST THE OPIOID CRISIS**

**PREPARED BY
INSPECTOR BILL SPEARN
DR. JENNIE GILL**

NOVEMBER 2019



VANCOUVER POLICE DEPARTMENT

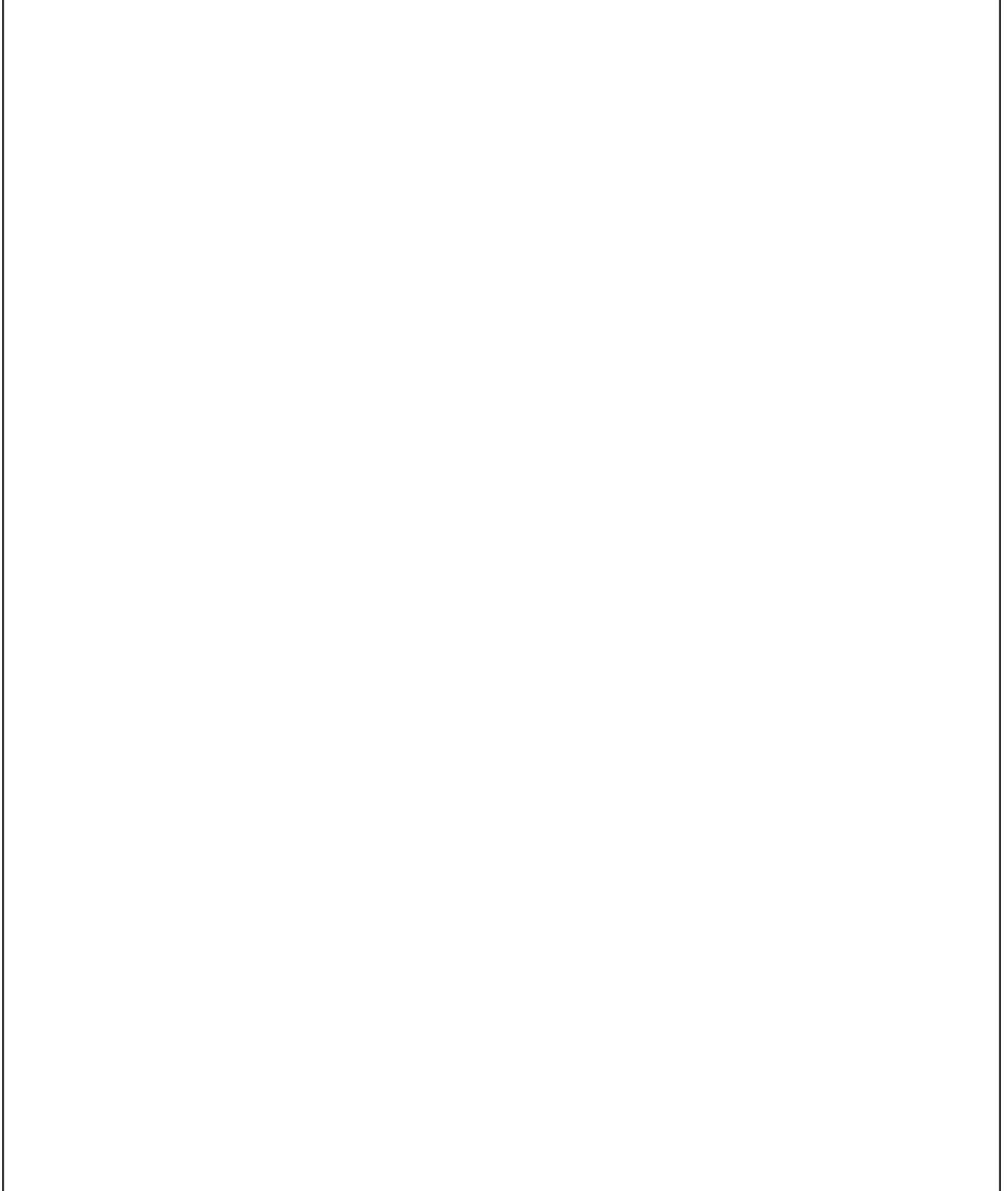


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Dear Dealer,

Since I don't know your name, I'll just call you Dealer. You had the greatest and most negative impact on my sister's life: You killed her...

Tell me who you are.

Were you with her when she died? Both her windows were rolled down when she was found. Were you in her passenger seat? Did you get scared and run? Did you sit there and watch her die?

Tell me. What were her last moments like? What were her last words? Do you think she knew that she was going to die that day? Do you think she was scared? I hope she wasn't scared....

*Yours Forever,
The Sister*

EXCERPT FROM N. BOWERS (2018)

EXECUTIVE SUMMARY

In 2017, in response to the opioid crisis, the Vancouver Police Department (VPD) released a report calling for immediate access to evidence-based treatment services. Several recommendations were presented in this report including the need for expanded support from federal and provincial governments, more funding for evidence-based addiction treatment, and the need to increase public awareness about the risks of illicit drug use.

Since the VPD's 2017 report, considerable efforts have been made to combat the opioid crisis. For example, the Province of British Columbia announced a *Joint Task Force on Overdose Prevention and Response*. This task force, which included VPD representatives, was created to provide expertise and guidance to the Province on actions to respond to the crisis.

Legislative changes have also been implemented. For example, with Bill C-37's royal assent, amendments were made to allow greater flexibility in addressing risks associated with opioids. These improvements include changes to the *Controlled Drugs and Substances Act* to streamline applications for supervised consumption sites and to regulate the import of drug manufacturing equipment.

However, as opioid-related deaths continue, so must the efforts. Over the last two years, significant contributions have been made by the VPD to lead the fight to end this epidemic, including:

- **Raising awareness** about the dangers of fentanyl through media interviews, speaking engagements, contributing to documentaries, forums at schools and a public service campaign targeted at adolescents;
- **Leading dialogue** with law enforcement partners including collectively advocating for legislative changes to protect public safety and disrupt the import of illicit substances;
- **Supporting the VPD's strategic mission** to fight crime and enhance public safety, the VPD continues enforcement efforts to

target those who manufacture and distribute opioids and other harmful drugs. In the last two years, the VPD has seized almost 64 kg of fentanyl – this would equate to at least 64 million individual lethal doses;

- **Guiding inter-sectoral collaboration** with health care partners including supporting overdose outreach teams and working on a hydromorphone distribution project;
- **Ensuring a continuum of care** for individuals that have been detained at the Vancouver Jail, with opportunities to continue or start treatment;
- **Advocating for harm reduction strategies and treatment** centres including supervised consumption sites, drug testing services, and the distribution of Naloxone;
- **Promoting partnerships** with the Provincial Government of B.C. to develop legislation including the *Pill Press and Related Equipment Act*, which is now implemented, so that police can disrupt criminal access to equipment that makes lethal drugs;
- **Creating** a safe processing drug lab so police officers can continue to safely remove dangerous drugs from the streets; and
- **Remaining active** with key stakeholders at various national, provincial, and local committees such as the Mayor's Overdose Emergency Task Force.

Ending the epidemic will require an integrated approach, which includes continued public funding for better access to treatment, public education and awareness campaigns, and legislative changes.

The VPD recognizes that addiction and substance use is a health care issue. The opioid crisis remains a departmental priority and the VPD will stay committed to helping individuals who may experience harm from these illicit substances. The VPD remains committed to working with other sectors, communities, and individuals province-wide in an effort to save lives.

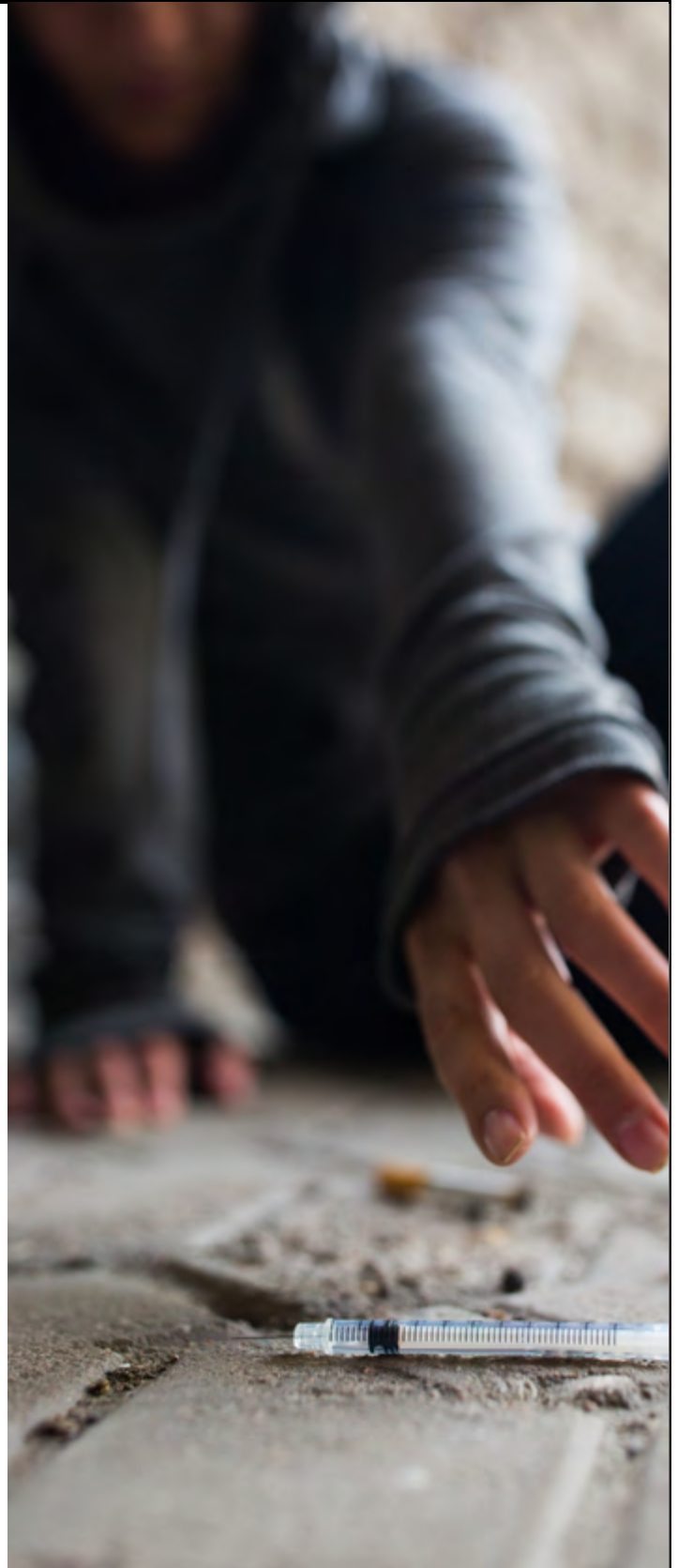
AN UPHILL BATTLE: THE BACKGROUND

In recent years, the dramatic increase in fatal and non-fatal drug overdoses has been driven by illicit fentanyl. Although fentanyl may be a prescription medication for pain management, the vast majority comes from illicit sources and is sold on the streets as a powder or pill.¹ Fentanyl is 50 times more potent than heroin and 100 times more potent than morphine.² Also regularly detected in the illicit drug supply is carfentanil, approximately 100 times more powerful than fentanyl and 10,000 times stronger than morphine.³

On April 14, 2016, British Columbia's (B.C.) former Provincial Health Officer (PHO), declared the opioid crisis a public health emergency, under the *Public Health Act*.⁴ This state of emergency was acknowledged in the wake of snowballing overdose deaths. For perspective the opioid crisis has contributed to a marked decrease in life expectancy in B.C.⁵ Impacting decedent's families, friends and communities, this tragedy has touched many. In addition to the overdoses that lead to death, non-fatal overdoses are linked to future overdoses, as well as a range of devastating health impacts including cognitive impairment, polysubstance use, and police encounters.⁶

Seeking solutions, in a 2017 report, the Vancouver Police Department (VPD) called for immediate access to evidence-based treatment services.⁷ Titled *The Opioid Crisis, the Need for Treatment on Demand*, this VPD report identified recommendations including a call for expanded support from federal and provincial governments, additional funding for evidence-based addiction treatment, and the need to increase public awareness about the risks of illicit drug use.

The current document serves as an update on the present state of the opioid crisis as well as VPD action to address the crisis since the last report.



THE CURRENT LANDSCAPE

Drug use occurs on a spectrum – from occasional and recreational to chronic dependence; however, given that the illicit drug supply in B.C. is highly toxic, there is considerable risk to many. The response to the risks and the crisis in B.C. has been multifaceted and widespread. Overall, there has been an increase in harm reduction and intervention strategies such as distributing Naloxone, offering drug checking services, outreach, and better access to treatment.

Three months after the opioid crisis was declared an emergency, the Province of B.C. announced a *Joint Task Force on Overdose Prevention and Response*. This task force, which included VPD representatives, was created to provide expertise and guidance to the Province on actions to respond to the crisis. Legislative changes were also implemented. For example, shortly after the release of the VPD’s 2017 report on the opioid crisis, Bill C-37 received royal assent.⁸ Bill C-37 amends the *Controlled Drugs and Substances Act* (CDSA) to streamline applications for supervised consumption sites (SCS) with community consultation, regulates the import of drug manufacturing equipment (e.g., pill presses), and makes other amendments to allow greater flexibility in addressing risks associated with opioids (e.g., *Customs Act*).^a

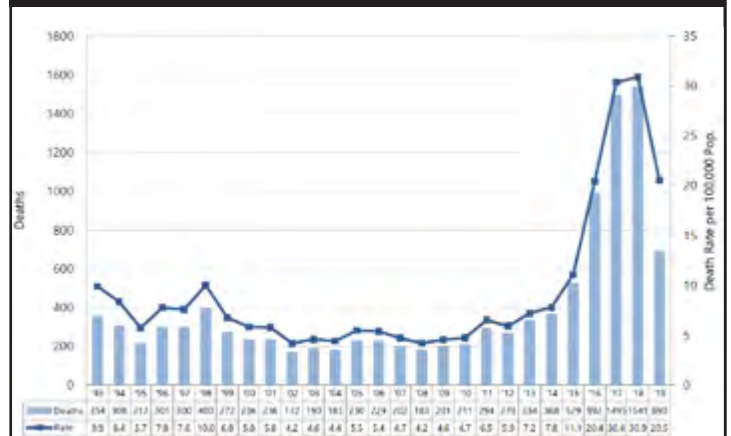
In the last couple of years, we have learned more about the decedents.⁹ The majority were males aged 30 to 59, who used drugs alone at the time of death.^b Many had contact with the health care system in the year before their overdose death. In addition, many of the decedents sought medical assistance for pain management and mental health issues prior to their deaths. To improve access and quality of mental health and addiction services, in 2017, the B.C. Provincial Government created the Ministry of Mental Health and Addictions. While the overall goal is to develop an accessible mental health and addictions system for all British

Columbians, this ministry is also responsible for leading the response to the provincial opioid crisis.¹⁰

According to some findings, the integrated response strategies are saving lives, suggesting that combined efforts have averted 60% of possible overdose fatalities since the PHO declared the opioid crisis a public health emergency.¹¹ That is, overdose deaths may have been at least twice as high, without emergency harm reduction and treatment efforts.¹² However, despite the collaborative efforts, illicit drug overdose deaths continue. As depicted in the epidemic curve below (Figure 1), in 2018, there were 1,541 illicit drug overdose deaths, an increase over the number of deaths occurring in 2017 (1,495).^c In 2018, fentanyl (or its analogues) was detected in approximately 87% of all illicit drug overdose deaths. In 2017, fentanyl was detected in 82% of all illicit drug overdose deaths.¹³

FIGURE 1.

ILLICIT DRUG OVERDOSE DEATHS AND DEATH RATE PER 100,000 POPULATION



*Reproduced from Coroner’s Service (2019). Fentanyl-Detected Illicit Drug Toxicity Deaths in BC. January 1, 2009 to August 31, 2019.

a The 2017 VPD report on the opioid crisis outlined the lack of search powers that CBSA had. An important change, Bill C-37 now has enhanced the capacity of CBSA to interdict packages under 30 grams.

b See Appendix A for complete data on illicit drug overdose deaths by gender and age.

c Reflects the most current available data, is currently only available up until June 30, 2019. Data subject to change as further toxicology results are received.

In 2019, thus far, there have been 690 overdose deaths in B.C., with Vancouver as the epicenter.^d The first eight months of 2019 hints to hope - the monthly data on overdose deaths in the first eight months of 2019 are lower than the previous two years (i.e., the first eight months of 2018 and 2017).^e

Despite lower numbers of overdose deaths in comparison to the previous two years, fentanyl and its analogue carfentanil, continue to be discovered. Fentanyl was detected in approximately 85% of illicit drug overdose deaths in the first eight months of 2019 (compared to 87% for all of 2018). Carfentanil has been identified in 119 illicit drug overdose deaths in 2019 (compared to 35 deaths in all of 2018).¹⁴ Distinctions in opioid use between males and females is supported by the 2019 data – of the 584 deaths in B.C. where fentanyl was detected, 451 were males, and 133 were females.

Deaths caused by overdoses are taking place for individuals in all “walks of life, across age groups, and across the socio-economic spectrum; however, there is a disproportionate impact... among Indigenous people in BC.”¹⁵ According to a review by the First Nations Health Authority, in 2018, 193 First Nations men and women died of an overdose in the province, a 21% increase from a year earlier. Overall, First Nations accounted for 13% of overdose deaths, up from 11% in 2017.¹⁶ According to a review by Vancouver Coastal Health (VCH), 10% of overdose decedents were Indigenous – much higher than the 2.8% population of VCH who reported having Indigenous identity in census data.¹⁷ Given this troubling data, the VPD is working with the Indigenous community on a number of committees examining this issue.^f

2019 AT A GLANCE:

DRUG OVERDOSE DEATHS IN B.C. BY MONTH:

- JANUARY: **96**
- FEBRUARY: **81**
- MARCH: **114**
- APRIL: **87**
- MAY: **89**
- JUNE: **74**
- JULY: **70**
- AUGUST: **79**

DRUG OVERDOSE DEATHS IN VANCOUVER BY MONTH:

- JANUARY: **23**
- FEBRUARY: **23**
- MARCH: **31**
- APRIL: **26**
- MAY: **25**
- JUNE: **18**
- JULY: **14**
- AUGUST: **22**

^d Data from the BC Coroners Service is currently only available up until August 31, 2019.

^e See Appendix B for complete monthly data on illicit drug overdose deaths (2009-2019) and Appendix C for fentanyl-detected deaths by month (2012-2019).

^f Examples of committees include the BC Drug Overdose and Alert Partnership, Vancouver Community Action Team, and the Mayor's Opioid Task Force.

COMBATING A CRISIS: CONTINUING TO SUPPORT THE FOUR PILLARS APPROACH

The City of Vancouver (CoV) implemented the Four Pillars Drug Strategy *in 2001 in response to Vancouver's increasing drug problem and open-air drug scene*.¹⁸ Adopted from Switzerland and Germany, the four pillars in VPD's drug policy are prevention, enforcement, harm reduction, and treatment. Grounded in these pillars, the VPD has continued its fight against the opioid crisis.

PREVENTION: STRATEGIES AND INTERVENTIONS TO AVERT HARM

Generally, the prevention pillar includes strategies and interventions that may assist in preventing the harmful use of illicit drugs. To illustrate the harmful effects from substance use, prevention requires commitment and connections with the community as well as other sectors. Maintaining public awareness may provide family, friends, and the community with a method of combatting the crisis. The VPD recognizes that impactful education and knowledge translation are highly significant to the prevention of harm.

Transformation with Awareness: Public Education

The VPD is committed to the pillar of prevention through the following education initiatives and projects:

- As indicated in VPD's 2017 recommendations, it is necessary to increase awareness about overdose symptoms with messaging in high visibility areas where drug consumption is likely to occur. To prevent drug use in schools, the VPD's Organized Crime Section (OCS), which includes drug specialization, and Youth Services Section hosted community forums on the fentanyl crisis at local high schools. Working collaboratively with VCH, Vancouver School Board, and School Aged Children, forums for youth were held at Britannia, John Oliver, McGee, and Templeton Secondary Schools in 2017 and 2018
- In 2018, the VPD, the Vancouver Police Foundation (VPF), and Odd Squad Productions released *Understanding Fentanyl*, a three-part documentary series aimed at educating students about the dangers of drug use, specifically opioids and fentanyl.¹⁹ The series features subject matter experts on addiction, enforcement, and recovery. It also follows three families impacted by the crisis, two that lost loved ones to an overdose and a father dealing with his son's addiction. The three-part series was provided at no cost to schools, Indigenous communities and police agencies across B.C. Outside of B.C., the cost for the series and facilitators guide is \$25.00 with proceeds going to Odd Squad Productions. Odd Squad Productions also provides this series free of charge to any individual or agency without the budget or financial means to pay.⁹
- With fentanyl increasingly detected in drugs popular among adolescents (e.g., ecstasy, and cocaine), youth experimenting with these substances are essentially risking or "*flirting with death*". In late 2018, the VPD released the public service announcement, "*flirting with death*" that aimed to increase awareness about the risks associated with illicit drug use among young adults and youth who may consider experimenting with drugs. This campaign was widely shared online and on television.^h
- The VPD continues to support VCH's Real-time Drug Alert & Response (RADAR) system. Established in 2017, RADAR is designed for anyone to anonymously report mass overdoses, whereby warnings are sent out to subscribers. Service providers may then relay information to clients with important harm reduction actions (e.g., not using alone, information on SCS, etc.). The VPD monitors the system as it disseminates information on new illicit drugs in circulation and sudden increases in overdoses.

g Please visit <https://vimeo.com/295692181> for a preview of the *Understanding Fentanyl* series.

h Please visit <https://boldly.ca/projects/vpd-flirting-with-death/> to view the Flirting with Death campaign.



Fentanyl is in molly, cocaine and fake pills.
Whatever you take, **you're flirting with death.**



COMBATING A CRISIS: CONTINUING TO SUPPORT THE FOUR PILLARS APPROACH ...CONTINUED

- Since the 2017 report on the opioid crisis, the VPD has participated in several interviews and speaking engagements to disseminate information on the dangers of fentanyl. This outreach includes but is not limited to the following:
 - o An interview with Vancouver Magazine to share information on where fentanyl is coming from, why this is a deadly epidemic, and the efforts required to end the crisis;²⁰
 - o A feature on France 24 TV where harm reduction strategies were discussed as well as the need for treatment on demand;²¹
 - o A television interview with the New York City Pix11 News. This was a two part series titled *Inside Supervised Injection sites and the Fight Against the Opioid Crisis*;²²
 - o VPD's Inspector of OCS traveled to Philadelphia to speak at the Lewis Katz School of Medicine at Temple University at the invitation of the City of Philadelphia. This forum provided an opportunity for VPD to discuss the benefits of SCS.²³ To offer lessons learned from Vancouver's opioid crisis, an interview with Philadelphia Public Radio was also conducted;²⁴ and
 - o Working with health care partners, the VPD contributed to a Public Broadcasting Service (PBS) Nova television documentary on addiction. The documentary premiered in October 2018, and discussed the easy access to drugs, how illicit drugs affect the brain, and discussions with experts on solutions.²⁵

Knowledge Exchange between Law Enforcement

Equally important as sharing information with the public are timely knowledge exchanges between law enforcement partners. This strategy is based on a shared goal of ending the crisis, which may be countered through extensive use of partnerships. In addition to collectively advocating for healthier options, a component of this cooperation is information and intelligence sharing on organized crime groups that traffic illegal opioids.

NATIONAL AND PROVINCIAL DRUG COMMITTEES

The VPD collaborates and shares knowledge with our public safety partners through active participation in national and provincial committees. The Canadian Association of Chiefs of Police (CACP) has an overarching mission of "supporting police professionals through innovative and inclusive police leadership to advance the safety and security of all Canadians".²⁶

The CACP's Drug Advisory Committee mandate is to promote safer and healthier communities through proactive leadership by addressing and influencing prevention, enforcement, harm reduction and treatment of substance use disorders. Representatives from the VPD have continued to be vital participants on this committee, contributing to significant achievements regarding opioids, including but not limited to the following:

- Preparing a CACP briefing document for police on SCS and pill press legislation;
- Participating in the development of training materials for frontline officers;

When somebody is using ...contaminated drugs and they are overdosing, being Narcan'd back to life, and then they are out of money.... They have to go commit crimes in order to get their drugs, like breaking into cars, assaulting people... It's just a revolving door. Really, it's much more humane and much more cost-effective to provide services to people...

INSPECTOR BILL SPEARN, VPD ORGANIZED CRIME SECTION

VANCOUVER MAGAZINE, 2017

COMBATING A CRISIS: CONTINUING TO SUPPORT THE FOUR PILLARS APPROACH ...CONTINUED

- Working with Drug Free Kids Canada to endorse and deliver public safety messages;
- Conducting media interviews on behalf of the CACP to endorse and deliver public safety messages;
- Presenting at several conferences on behalf of the CACP including, "*Pillars of Change - Priorities for Addressing the Opioid Crisis*" facilitated by Health Canada and the US Consulate;
- Advocating for changes to the Canada Post Corporation Act (CACP Resolution) and to federal pill press legislation;^{27 28}
- Working with Health Canada on Bill C-37 for legislative changes such as expedited destruction of drug exhibits²⁹ and the *Good Samaritan Drug Overdose Act*, which protects individuals from being charged with possession of controlled substances under the CDSA if they call for emergency assistance in an overdose situation;³⁰
- A potentially polarizing issue between law enforcement and health sectors, the CACP has established a Special Purpose Committee on the Decriminalization of Illicit Drugs (SPC-DID). The VPD is represented on SPC-DID along with being part of a broader study on decriminalization regimes, and other significant drug policy shifts; and
- The VPD has sponsored a representative to participate in a CACP professional development program for police executives. The six-month *Global Studies* program applies a research-driven and problem-based learning model. In the spring of 2019, the VPD representative travelled to Portugal to study their drug policy and diversion system with the view of bringing best practices to Canada. While in Portugal, a meeting was held with Dr. João Goulão, Portugal's national drug coordinator and the architect of their drug policy in 2000. This study examined this international model of decriminalization and its impact. The research from this program contributed to the SPC-DID position paper on decriminalization for the CACP.

Although the Portuguese drug policy and laws are referred to as decriminalization, it is better characterized as diversion or dissuasion. The possession of personal amounts of illicit drugs is illegal in Portugal and results in an administrative offense. Health care deals with the violators who are provided access to supports, incentives, and options or may even face compelling consequences for possessing drugs. The VPD supports diversion alternatives rather than criminal sanctions for simple possession.

At a provincial level, the British Columbia Association of Chiefs of Police (BCACP) represents the chiefs of police for both the Royal Canadian Mounted Police (RCMP) and municipal police agencies in B.C. The BCACP's Drug Committee promotes safer and healthier communities in B.C. by identifying drug enforcement strategies and initiatives. The VPD maintains an active role on the BCACP Drug Committee, with recent VPD contributions including:

- Working collectively with the provincial government to develop the *Pill Press and Related Equipment Control Act* to fight against the illegal production of counterfeit pills, particularly those containing opioids, and to help keep them off the streets.³¹ The *Pill Press and Related Equipment Control Act* was designed to limit the ownership, possession, use, and sale of manufacturing equipment used to make tablets and capsules, and became a law in B.C. in January of 2019;³²
- Advocating for enhanced legislation related to pill presses at the federal level;
- Advocating for changes to the Canada Post Corporation Act to disrupt the import of illicit opioids;³³ and
- Continuing to work with the provincial government to address the fentanyl crisis and associated outcomes. For example, the VPD is working with the Province of B.C. on solutions for the safe destruction and disposal of seized fentanyl.

COMBATING A CRISIS: CONTINUING TO SUPPORT THE FOUR PILLARS APPROACH ...CONTINUED

RECENT LAW ENFORCEMENT ENGAGEMENT EXAMPLES

With the intention of sharing knowledge and experiences, the VPD continues to encourage dialogue between law enforcement partners. Examples of VPD's recent efforts include the following:

- The VPD made an educational presentation to the Conference Board of Canada's Centre for National Security meeting on fentanyl and synthetic narcotics. This presentation provided an overview of the issue/impacts in Vancouver and nationally. Also discussed was the future of the crisis from a national perspective, particularly if other synthetic narcotics are introduced into the illicit drug market. Potential impact for private sector employers was also addressed;
- Working with the RCMP, Victoria Police Department (VicPD), and the Justice Institute of British Columbia, the VPD assisted in the organization and facilitation of four, two-day workshops in New Westminster, Nanaimo, Prince George, and Kelowna for first responders. These workshops were well attended by over 900 participants;
- A presentation at the Ninth Annual Law of Policing Conference was delivered by the VPD to an estimated 200 law enforcement personnel across Canada. Titled "Outside the Box Strategies for Policing the Opioid Crisis", the presentation discussed policing SCS, the VPD's work with health care partners, and the analysis of drug paraphernalia from fatal overdoses to track opioids and to determine cause of death;
- The VPD has hosted several police agencies from across North America, such as NYPD and Philadelphia Police Department, and around the world seeking information on the opioid crisis. Information on fentanyl awareness, training, harm reduction, treatment, VPD's drug policy, overdose response, and community cooperation has been widely shared;
- The VPD has hosted meeting with government officials from other cities including Seattle, Boston, Denver, and Philadelphia. These meetings included a tour of Vancouver's downtown eastside (DTES) and harm reduction sites. Staff from VPD's OCS have also traveled to Seattle, Philadelphia, and Washington, D.C. to inform police, city, and health officials on VPD's harm reduction and treatment strategies and policies; and
- The VPD participated in the delegation of United States Rising State Leaders Debrief and Panel Discussion in Vancouver on the opioid crisis. This panel included Democratic and Republican representatives from the states of Colorado, Michigan, North Dakota, Alaska, Nebraska, and Minnesota.



ENFORCEMENT: DISRUPTING THE DISTRIBUTION OF DRUGS

Supporting the departmental mission to *fight crime and enhance public safety*, the VPD's enforcement efforts target those who manufacture and distribute opioids and other harmful drugs. The VPD is dedicated to enforcement strategies that target those who contribute to crime, violence, and disorder, as well as the victimization of the most vulnerable citizens in Vancouver. Furthermore, targeting individuals who manufacture and distribute illicit drugs is in line with the VPD's current Strategic Plan.³⁴

The VPD trusts the professional judgement of its police officers to enforce the law in a fair and just manner consistent with policy and procedure. VPD officers have a range of discretion when dealing with substance use and drug possession in the CoV. This discretion includes options such as seizure of the substance, and/or arrest and/or charging of the offender(s).

As outlined in departmental policy, a "person's behaviour or the context of the psychoactive substance abuse, rather than the actual unlawful possession of the substance, should be the primary factor in determining whether to lay a charge."³⁵ This philosophy is supported by VPD data – the number of drug possession charges has decreased significantly in the last decade, towards a 97% reduction. For example, in 2008, there were 476 recommended charges for possession of a controlled substance (with no other substantive charges recommended) compared to 27 in 2018 and 15 in 2019 (as of August 13, 2019).

... THERE HAS BEEN A SHIFT IN FOCUS FOR POLICE TO SUPPORT A HARM REDUCTION APPROACH...FOR EXAMPLE, THE VANCOUVER POLICE DEPARTMENT POLICY ON DRUGS PRIORITIZES THE CONTEXT OF DRUG USE RATHER THAN THE POSSESSION OF DRUGS, AND SUPPORTS CHARGES ONLY IF THE BEHAVIOUR AND CIRCUMSTANCES OF THE PERSON USING DRUGS IS HARMFUL TO THAT PERSON, TO OTHERS, OR TO PROPERTY.

DR. B. HENRY (2019)
PROVINCIAL HEALTH OFFICER,
PROVINCE OF BRITISH COLUMBIA

Dealing with Drug Dealers: VPD’s Enforcement Projects

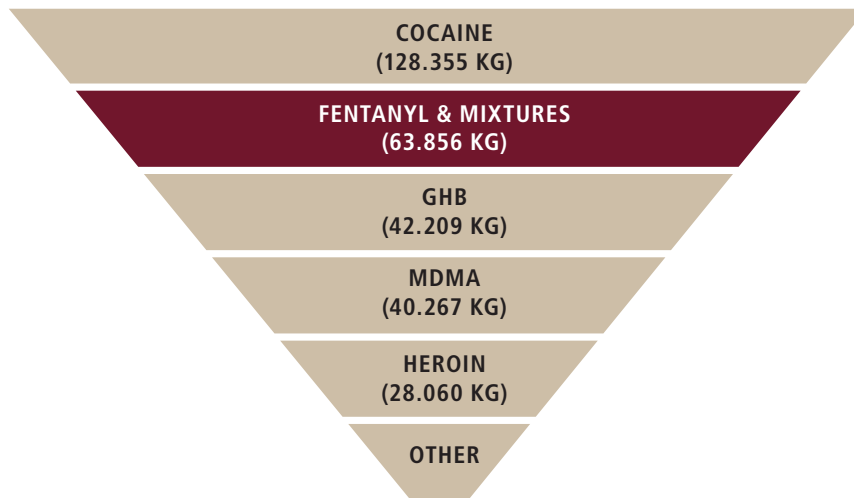
A significant contributor to the opioid epidemic is the illegal drug supply. The VPD has made the illicit drug supply an enforcement priority. Between April 2017 and April 2019, over 20,000 drug exhibits were logged at the VPD Property Office. VPD’s OCS worked on 27 large drug projects and several drug investigations were conducted by patrol officers (e.g., frontline officers in District 2 generated 31 drug files during this time). A breakdown of select drug quantities seized by the VPD is provided in Figure 2, below (Appendix D contains complete data).

In the last two years, almost 64 kg of fentanyl and mixturesⁱ has been seized by the VPD. This is significant; this amount could equate to at least 63,856,000 individual doses of fentanyl.^j While several factors may determine if a dose is lethal (e.g., tolerance, body weight, route of administration), 0.05 mg of fentanyl is enough to be life threatening for the average person.

Strategic and intelligence-led enforcement projects targeting traffickers and organized crime groups remain a priority for the VPD. Consistent with B.C. Provincial Policing Standards^l, the VPD utilizes the Provincial Tactical Enforcement Priority process.³⁶ This allows the VPD to identify and prioritize enforcement targets – those that pose the highest threats to public safety. The following is a list of select enforcement highlights in the last two years:

- **Task Force Tourniquet:** In response to increased regional gang violence, the VPD initiated and led Task force Tourniquet. Formed in 2017, the task force took a proactive approach to targeting known violent gang members and associates with links to organized crime for future offences. Over 18 months, the task force completed several projects including Projects Tariff, Temper, Triplet, Treachery, and Territory. The results of the investigations

FIGURE 2.
ESTIMATED VPD DRUG SEIZURE QUANTITIES ACROSS TWO YEARS^k



ⁱ Fentanyl mixed with other illicit substances.

^j T. Munro (personal communication, June 25, 2019).

^k Data from April 2017-April 2019. Please see Appendix D for substances and quantities that comprise the “other” category.

^l Effective as of January 1, 2019 (subsection 5.3, Specialized Investigations, Inter-agency Cooperation and Coordination).

COMBATING A CRISIS: CONTINUING TO SUPPORT THE FOUR PILLARS APPROACH ...CONTINUED

collectively yielded 52 kg of illicit drugs (including fentanyl, cocaine, and methamphetamine), along with 173 firearms, 3 improvised explosive devices, and large quantities of cash and jewelry. Task force Tourniquet resulted in 203 criminal charges against 120 individuals. These charges included multiple drug and weapons offenses, conspiracy to commit murder, firearms offenses, and extortion, amongst other offenses.

- **Project Tavern:** In May 2017, the VPD OCS collaborated with Canada Border Services Agency (CBSA) and initiated Project Tavern, an investigation into a group running a sophisticated drug-trafficking network. In November 2017, the VPD arrested two individuals associated to the network and executed search warrants on two vehicles and the target's residence that resulted in the seizure of over 26 kg of various drugs. Of note was the sophisticated concealment techniques used by the network to import and export drugs, which included 18.485 kg of opium, 1.079 kg of ketamine, 3.905 kg of heroin, and 2.096 kg of cyclopropylfentanyl (a fentanyl analogue). Sixteen charges are being sought for two individuals for possession for the purposes of trafficking and importation of a controlled substance.

In addition to OCS projects, frontline officers continue to disrupt the flow of fentanyl in Vancouver. Examples of patrol projects include:

- **Project Backup:** In June 2018, patrol officers executed a search warrant for Project Backup, where several categories of drugs and weapons were seized. The initial investigation involved a hit and run committed by the main target. While investigating the hit and run, officers received information that illicit drugs were sold out of a suite associated to the target at a hotel

in downtown Vancouver. Officers attended the hotel to serve a violation notice and as they approached the suite, they overheard an argument that appeared to be related to drug costs. Officers obtained and executed a search warrant on the suite that resulted in the seizure of fentanyl, methamphetamine, cocaine, heroin cannabis, oxycodone, and miscellaneous pills. In addition to the drugs, several weapons were seized including a semi-automatic rifle, ammunition, dynamite, a baton, pepper spray, knives, and a sword. This project led to five criminal charges against an individual, including firearms offenses, trafficking in a controlled substance, and unlawful possession of explosives.

- **Project Bonnie:** In October 2018, patrol officers received source information regarding a fentanyl trafficking operation related to a suite in the DTES. Targets were identified and a series of undercover scenarios led to the purchase of drug product. The patrol officers executed a search warrant for Project Bonnie, where approximately \$30,000 in cash, prohibited weapons, stolen bicycles, methamphetamine, cocaine, and fentanyl was seized. Two individuals were charged with trafficking and possession for the purpose of trafficking.

Safe Drug Processing Facility

The emergence of fentanyl and carfentanil along with a growing list of other synthetic drugs has only added another stressor for first responders. Accidental exposure to these substances could induce an overdose. Police officers may be exposed to opioids when coming to the aid of someone suffering an overdose, or when conducting searches of vehicles, residences, or individuals who are in possession of drugs.

In 2017, when a VPD police officer fell ill after being exposed to a suspected opioid, it was determined that the VPD did not have an adequate space for officers to process seized drugs in a safe manner. In May 2017, the VPD began planning temporary solutions, including retrofitting a shipping container. By the summer of 2017, the CoV became involved and partnered with the VPD to fund and design a state-of-the-art drug-processing facility at the VPD Property Office, with construction beginning in October 2018.

This state of the art facility contains safety equipment including panic alarms, high definition video surveillance, emergency wash stations, and supplies required to safely analyze and package seized drugs. The facility also has specialized ventilation designed to remove any particles in the air in the event of a spill. In addition to the physical elements of the facility, a number of safety protocols have been developed in the event of a spill. Opened as of July 18, 2019, all seized drugs are now processed at this site. This will ensure that all VPD staff are safe when these deadly substances are handled.

Education for Police Officers Handling Drugs

The VPD is continuously mindful of preventing harm to police officers and works to provide education for their safety. All VPD sworn members have received training on the safe handling of drugs. In 2018, the VPD's OCS and the Education and Training Unit began developing a training video to emphasize the safety aspect of processing and tagging drug exhibits. The training video was delivered to all frontline officers in July 2019, and it highlights best practices, including for officers to assume that any drug contaminated item, location, or paraphernalia may be contaminated with opioids.

HARM REDUCTION: VPD'S STRATEGIES TO PREVENT OVERDOSES

Harm reduction refers to programs or policies that reduce harm from the use of legal or illegal drugs.³⁷ Harm reduction includes SCS, drug checking services, the Take Home Naloxone (THN) program, and needle exchanges. Harm reduction approaches have continued to emerge, and B.C.'s current PHO recently called for an increase in these approaches.³⁸ To reduce the harms associated with drug use, the VPD supports harm reduction and works cooperatively with our health partners on these programs.

Supervised Consumption and Overdose Prevention Sites

The VPD continues to support medical therapies as a harm reduction service to save lives, and to provide a pathway to care and recovery. With exemptions from prosecution under federal drug laws^m, SCS are medically supervised places for individuals to use drugs under medical supervision. Often, these facilities offer free harm reduction supplies, wrap-around services, and referrals to drug treatment programs. SCS aim to decrease the adverse health, social and economic consequences of drug use without requiring abstinence from drug use. Supervised consumption sites help prevent

^m Under the CDSA (Section 56).

COMBATING A CRISIS: CONTINUING TO SUPPORT THE FOUR PILLARS APPROACH ...CONTINUED

people from transmitting infectious diseases, encourage people who use drugs to access health care services including primary care and addiction treatment, improve public order and reduce the number of injections taking place on the street.³⁹

Since the 2017 VPD report, a new SCS, the Powell Street Getaway, opened in July 2017.⁴⁰ This additional SCS brings the total of SCS in Vancouver to three (and nine in B.C.).⁴¹ Funded by VCH, this SCS offers harm reduction supplies, as well as opportunities to learn life skills such as vocational training, nutrition guidance, and access to rehabilitation programs.

Overdose Prevention Sites are nimble, low barrier models run by non-profit organizations and peers. These sites operate under a ministerial order in B.C., and in other provinces they operate with specific Health Canada exemptions. The VPD accepts that these sites provide an alternative to individuals using drugs alone, thereby increasing their safety. This is particularly important given that recent research shows that most decedents used drugs alone at the time of death.⁴²

Drug Testing Services

Another harm reduction strategy is the use of drug checking services, which informs users of the ingredients in their substance prior to consumption, potentially reducing any harm. This service is essential, as many drug users are unaware of what substances they are consuming.⁴³ A recent study of an SCS in Vancouver found that only a small proportion of drug users utilized drug checking services; however, of the drugs checked, a high proportion contained fentanyl.⁴⁴ The VPD supports drug testing services as a way to reduce associated harm and prevent overdoses.

Life-Saving Science: Naloxone

Naloxone (also known as Narcan) is an opioid antagonist medication used to reverse the effects of opioid overdoses. More specifically, Naloxone is used in opioid overdoses to counteract life-

FAST FACTS: NALOXONE

- NUMBER OF VPD SWORN AND CIVILIAN MEMBERS TRAINED TO ADMINISTER NALOXONE: **1,370**
- NUMBER OF TIMES NALOXONE HAS BEEN ADMINISTERED BY VPD STAFF: **74**
- NUMBER OF LIVES VPD OFFICERS HAVE SAVED WITH NALOXONE: **71**
- NUMBER OF TIMES VPD OFFICERS HAVE BEEN EXPOSED TO OPIOIDS: **7**
- NUMBER OF VPD OFFICERS THAT HAVE RECEIVED NALOXONE: **4**



**Data includes all VPD Naloxone deployments from implementation of Naloxone at VPD to present (September 2016 to June 2019).*

**In accordance with policy designed to encourage individuals to call 911 without fear of repercussions, VPD officers do not attend non-fatal drug overdoses (unless to assist with life-saving measures or threats to public safety).*

COMBATING A CRISIS: CONTINUING TO SUPPORT THE FOUR PILLARS APPROACH ...CONTINUED

threatening depression of the central nervous system and respiratory system, allowing an overdose victim to breathe normally. Since 2012, B.C. has implemented the THN program where individuals can receive a free Naloxone kit and training.⁴⁵

The VPD has supported and worked on the THN program with the BC Drug Overdose and Alert Partnership (DOAP). Currently, over 1300 sites participate in the THN program across B.C. In 2018, the BC Centre for Disease Control (BCCDC) and researchers at the University of British Columbia developed a model to estimate the effectiveness of certain interventions on preventing overdose deaths. The model found that over a 10-month period in 2016, the THN program prevented 226 deaths in B.C.⁴⁶

Given its efficacy, the VPD will continue to support the THN program. Furthermore, the VPD ensures that members (including Jail Guards and civilian staff) are prepared to use the life-saving medication. This training is mandatory for all frontline police officers. Currently, 1,370 VPD members are trained to administer Naloxone. Lives continue to be saved by VPD officers using Naloxone on individuals who may otherwise have fatally overdosed (please see sidebar for statistics on Naloxone).

VPD Harm Reduction Efforts

In addition to advocating the aforementioned strategies, the VPD has engaged in a number of recent initiatives that support harm reduction, including but not limited to the following:

- The VPD continues to work with the BCCDC on a hydromorphone dispensing project to save lives by providing those with an opioid use disorder with a safe alternative to contaminated street drugs. This would include low-barrier opioid dispensing that will be pilot tested before the end of 2019. The primary benefit of this program is saving lives with a secondary benefit of lowering crime. The VPD is the only law enforcement agency on the pilot's

Advisory Committee, which also includes representatives from health care and people with lived experience of substance use. The VPD promotes efforts such as these to provide a safe and regulated supply of uncontaminated drugs to those with substance use disorders.

- Since 2011, the VPD has been an active member of the DOAP Committee, which aims to prevent/reduce harms of drug use. Information regarding contaminated drugs, increases of overdoses in certain areas, and other emerging issues are shared in a timely manner. Meeting at least four times a year, DOAP members share agency data and concerns to increase awareness in other areas. Other committee members include the Abbotsford Police Department, VicPD, RCMP, BCCDC, Centre for Addictions Research of BC, BC Coroners Service, Centre for Excellence HIV/AIDs, Ministry of Health, B.C.'s Regional Health Authorities, Provincial Toxicology Centre, BC Ambulance Service, Health Canada, BC Drug and Poison Information Centre, and people with lived experience.
- In 2017, the VPD was instrumental in hosting a province-wide meeting for law enforcement agencies on SCS. Attendees were from communities that were exploring opening similar sites in their jurisdictions. The VPD's participation involved sharing information regarding drug and overdose policies. The VPD's role in policing around SCS such as Insite and crime levels were key topics.

Doors of Opportunity: A Continuum of Care for Individuals in VPD Custody

All individuals who have been detained at the Vancouver Jail are assessed by on-site nursing staff. The Primary Health Assessment includes a screening for fitness to be lodged in cells as opposed to hospital, current level of intoxication (if applicable), risk of overdose, and risk of withdrawal while in custody.

All detainees who are to be charged or remanded also receive an extensive initial health assessment during which they are screened for substance use, particularly for opioids. All detainees experiencing opioid or alcohol withdrawal are offered symptomatic treatment of the withdrawal, and further monitoring according to defined opioid withdrawal protocols. Those who are currently receiving Methadone, Suboxone, Kadian (high dose oral morphine replacement therapy), or injectable hydromorphone Opioid Agonist Therapies (OAT) are offered continuation or substitution of their existing therapy while in custody (subject to meeting the requirements of a safe administration protocol). Opioid dependent detainees not currently on OAT are offered the opportunity to start Suboxone induction while still in custody. This enables individuals to leave jail started on initial doses of OAT maintenance therapy.

Upon release, individuals newly started on Suboxone receive a prescription for one to three additional days of treatment to bridge the time delay between release and contact with community follow up. Often follow-up arrangements are made with VCH-operated Connections Clinic, a facility located close to the VPD Jail and the DTES (e.g., referral and information sharing). Any detainee who discloses opioid use is offered a THN kit upon release.

TREATMENT: ENCOURAGING HEALTHIER ALTERNATIVES

Generally, the treatment pillar refers to programs or interventions that lead to treatment and rehabilitation.⁴⁷ Effective treatment improves health and decreases preventable deaths, illnesses, and injuries from drug use. Crucial to treatment is ongoing engagement and individualized programs.

The VPD publicly supports new forms of treatment and services that offer safer regulated alternatives to contaminated street drugs to help people with opioid addictions. Select examples of VPD's advocacy for treatment include the following:

- Publicly supporting the Providence Crosstown Clinic,⁴⁸ which, in a supervised setting, offers substance use clients medical-grade heroin (diacetylmorphine) and the analgesic hydromorphone;⁴⁹
- Encouraging individuals to seek assistance from the DTES Connections Clinic, a drop-in treatment centre to help those suffering with issues related to illicit drug use.⁵⁰ Open year round, the Connections Clinic offers opioid substitution therapy and THN kits, provides access to social workers and community workers, and connections to housing and other services;
- Uniting with the health sector (e.g., Ministry of Health, Providence Health Care), by supporting St. Paul's Hospital Emergency Department HUB, an innovative treatment model that is the product of several partners, including the VPD. The HUB's origins began with an anonymous donation made to the VPF in 2015.⁵¹ This HUB has up to 10 treatment beds dedicated to timely assessment, treatment, and care of people living with mental health and/or substance use disorders.⁵² The VPD engaged St. Paul's Hospital to establish a treatment centre. Upon evaluation at the HUB, patients can be connected to the VPF Transitional Care Centre (TCC), which joins the Rapid Access Addiction Clinic and the Overdose Prevention Site (both at St. Paul's Hospital). The VPD continues to work in an advisory capacity, to support both the HUB and the TCC;

COMBATING A CRISIS: CONTINUING TO SUPPORT THE FOUR PILLARS APPROACH ...CONTINUED

- Supporting VCH's Overdose Outreach Teams, which consist of outreach and social workers who assist clients with beginning treatment. The outreach teams work to connect clients with health and social services, and to provide harm reduction education.⁵³ More specifically, the VPD refers people who use or have substance use issues to the VCH Overdose Outreach Team to link these individuals to appropriate services; and
- The VPD is actively participating in the B.C. Overdose Action Exchange (ODAX). Established in 2016, ODAX annual meetings are to facilitate dialogue between key stakeholders including first responders, local/provincial government, health care, and persons with lived experience. The goal is to discuss solutions to the opioid crisis in a safe and welcoming environment. Key topics included drug policy, treatment options, providing safer drug supplies, and stigma. In 2018, ODAX released a report summarizing discussions and actions discussed at the meeting (e.g., prevention, safer supply).⁵⁴ The collective efforts of ODAX have led to changes such as further access to THN kits, expansion of SCS, access to drug testing, and pill press legislation.

The HUB will not only provide better patient care but it will also greatly reduce the amount of time our officers wait with patients in the Emergency Department. The HUB will free up their time so they can get back on the road quicker to help keep Vancouver safe.

CHIEF CONSTABLE ADAM PALMER
VANCOUVER POLICE DEPARTMENT

The VPD will continue to advocate for innovative strategies including opioid assisted therapies, SCS, and drug checking services. Supporting VPD's advocacy is research that shows the efficacy of these strategies. For example, a recent study found that in a nine-month period, an estimated 3,030 deaths were averted with combined interventions that included THN, SCS, and opioid assisted therapy.⁵⁵ While these collective impacts work, more efforts are required as overdose deaths continue.

CONTINUING COLLABORATIONS TO CREATE CHANGE

The VPD recognizes that an effective response to the opioid crisis requires a collaborative and integrated approach; as such, the VPD continues to cultivate partnerships to increase information sharing and devise collective responses. These include continuing to work with the health sector, collaborations with the CoV, and efforts with the Government of B.C.

VANCOUVER COMMUNITY ACTION TEAMS

In February of 2018, the B.C. Government announced that 18 communities including Vancouver would receive up to \$100,000 for new Community Action Teams (CAT). These teams would consist of municipal staff, first responders, health care professionals and persons with lived experience, and would be designed to build on existing work in the community around the opioid crisis. The CoV and VCH chair the Vancouver CAT meetings, and the CoV contributed an additional \$50,000 funding for the CAT. The Vancouver CAT meets monthly to discuss the crisis and to examine methods for preventing overdose fatalities. The VPD has been a member of the CAT since its inception and worked collaboratively with the Vancouver CAT to develop a safe supply statement and video that that the Mayor will share with over government partners, including the Government of Canada, to advocate for access for a regulated drug supply.ⁿ

THE MAYOR'S OVERDOSE EMERGENCY TASK FORCE

On November 13, 2018, Vancouver City Council passed a motion to convene an Overdose Emergency Task Force to determine actions the CoV could take that would begin to save lives in this opioid crisis. The task force includes 115 individual members and the CAT, representing approximately 25 agencies and individuals.⁵⁶

The VPD is working on implementing recommendations from this task force. One such recommendation is a pilot project on continuity of

treatment for those in VPD custody. In collaboration with the CoV and VCH, the VPD will be implementing a four-month pilot project to address any gaps, improvements, and recommendations that may be made relevant to continuity of treatment for detainees with opioid use disorders. The pilot is expected to run into early 2020 with data available after that time. The data will be used to make further recommendations to the VPD Executive and community partners on how best to treat detainees with substance use disorders. Another role the VPD is playing is mobilizing a justice system response; the CoV and the VPD will be co-hosting a working group with Executive membership from key stakeholders (including the BC Ministry of Justice, BC Ministry of Mental Health and Addictions, Community Drug Court, VCH, People with Lived Experience). The goal of this initiative is to identify risks to overdose deaths due to interface with the criminal justice system of those addicted to illicit drugs. This working group will be preparing a report with a comprehensive program for action in Vancouver.

PARTNERSHIPS WITH THE PROVINCE

The VPD has had consultations with the Provincial Ministry of Public Safety and Solicitor General to discuss the opioid crisis. More specifically, discussions surrounding barriers to law enforcement and prosecution services, such as the limitations of the federal pill press legislation in Bill C-37.⁵⁷ Although it became law in May 2018, Bill C-37 dealt only with the importation of this equipment and failed to control domestic possession and sales. Together with the provincial government, members of the BCACP drug committee, including the VPD, worked to develop the provincial *Pill Press and Related Equipment Act*, designed to disrupt criminal access to equipment used to make tablets and capsules and to restrict the ownership, possession, use, and sale of equipment that has the potential to be used to make counterfeit pills. Thus far, B.C. and Alberta are the only Canadian provinces to have this type of legislation.

ⁿ Please visit <https://www.youtube.com/watch?v=l7re0RCQ1oQ> to view the video.

ENDING AN EPIDEMIC: LOOKING AHEAD

Ending the opioid crisis will require an integrated approach, and the VPD remains committed to working with other sectors, communities, and individuals in an effort to save lives. A collective approach must include increased government funding for better access to the full range of treatment options, including injectable opioid agonist treatment programs, a regulated safer supply of opioids, public education and awareness campaigns, and legislative changes.

The opioid crisis remains a departmental priority, as stated in VPD's most recent strategic plan, and the VPD will continue to "work with the City of Vancouver and other partners to focus on issues that have an impact on public safety."⁵⁸ The VPD will stay committed to helping individuals who may experience harm from these illicit substances. This includes maintaining support for harm reduction and treatment services, and continuing to refer people to these services. The VPD will remain open to progressive health initiatives that work towards saving lives – this includes regulated safe supply, diversion programs, and any mechanism that may prevent deaths. That is, the VPD commits to continuing to work with our partners to end this crisis; ending the opioid crisis requires a continued collaborative approach.

While helping those in need, the VPD will target individuals or organized crime groups who traffic drugs, including fentanyl. The VPD is alive to the various mechanisms by which these potent drugs are finding their way to vulnerable people, and will continue to work on strategic intelligence-led enforcement projects to identify individuals who pose significant threats to public safety.

Coined by Seligman, *learned helplessness* occurs when humans are faced with situations they cannot control, and they become passive.⁵⁹ Helpless responses occur when we are exposed to uncontrollable and noxious circumstances. The opioid crisis has left families, friends, first responders, and other communities across the province feeling helpless and hopeless. However, the VPD, along with British Columbians, is committed to taking action to solve this crisis.

The VPD will remain on a *journey to hope*, and continue to approach the challenges of the opioid crisis, with a determination for success.

GLOSSARY

BCACP	BRITISH COLUMBIA ASSOCIATION OF CHIEFS OF POLICE
BCCDC	BC CENTRE FOR DISEASE CONTROL
CACP	CANADIAN ASSOCIATION OF CHIEFS OF POLICE
CAT	COMMUNITY ACTION TEAMS
CBSA	CANADA BORDER SERVICES AGENCY
CDSA	CONTROLLED DRUGS AND SUBSTANCES ACT
CoV	CITY OF VANCOUVER
DOAP	BC DRUG OVERDOSE AND ALERT PARTNERSHIP
DTES	DOWNTOWN EASTSIDE
OAT	OPIOID AGONIST THERAPIES
OCS	ORGANIZED CRIME SECTION
ODAX	OVERDOSE ACTION EXCHANGE
PBS	PUBLIC BROADCASTING SERVICE
PHO	PROVINCIAL HEALTH OFFICER
RADAR	REAL-TIME DRUG ALERT & RESPONSE
RCMP	ROYAL CANADIAN MOUNTED POLICE
TCC	TRANSITIONAL CARE CENTRE
THN	TAKE HOME NALOXONE
VCH	VANCOUVER COASTAL HEALTH
VicPD	VICTORIA POLICE DEPARTMENT
VPD	VANCOUVER POLICE DEPARTMENT
VPF	VANCOUVER POLICE FOUNDATION
SCS	SUPERVISED CONSUMPTION SITES
SPC-DID	SPECIAL PURPOSE COMMITTEE ON THE DECRIMINALIZATION OF ILLICIT DRUGS

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APPENDIX A

ILLICIT DRUG OVERDOSE DEATHS IN B.C. BY GENDER AND BY AGE GROUP (2009-2019)

TABLE A1. ILLICIT DRUG OVERDOSE DEATHS BY GENDER*

Gender	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Female	55	49	82	76	79	86	106	200	271	305	162
Male	146	162	212	194	255	282	423	792	1,223	1,231	528
Unknown	0	0	0	0	0	0	0	0	1	0	0
Total	201	211	294	270	334	368	529	992	1,495	1,541	690

TABLE A2. ILLICIT DRUG OVERDOSE DEATHS BY AGE GROUP*

Age Group	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
10-18	2	4	4	5	6	3	5	12	25	18	12
19-29	46	40	74	61	94	83	117	204	274	299	123
30-39	51	49	75	61	77	101	137	261	400	402	184
40-49	57	66	77	67	74	85	130	232	355	340	154
50-59	33	45	54	56	62	72	110	229	313	352	152
60-69	12	7	10	19	21	24	29	50	121	123	62
70-79	0	0	0	1	0	0	1	3	7	7	3
80+	0	0	0	0	0	0	0	1	0	0	0
Total	201	211	294	270	334	368	529	992	1,495	1,541	690

*Reproduced from Coroner's Service (2019). Illicit Drug Toxicity Deaths in BC. January 1, 2009 to August 31, 2019.

APPENDIX B

ILLICIT DRUG OVERDOSE DEATHS BY MONTH IN B.C. (2009-2019)

TABLE B1. ILLICIT DRUG OVERDOSE DEATHS BY MONTH*

Month	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Jan	23	16	24	20	20	23	43	85	147	132	96
Feb	15	14	24	17	21	38	31	58	125	107	81
Mar	10	15	25	25	33	28	32	76	130	159	114
Apr	8	9	26	31	31	29	34	72	154	137	87
May	19	22	22	19	28	40	41	51	149	117	89
Jun	16	21	22	25	25	29	34	71	127	113	74
Jul	19	23	33	29	39	25	40	74	124	147	70
Aug	27	24	22	20	21	37	53	63	127	125	79
Subtotal	137	144	198	186	218	249	308	550	1,083	1,037	690
Sep	16	20	22	16	28	31	50	64	97	135	-
Oct	13	18	23	19	19	35	53	76	99	118	-
Nov	18	18	27	28	31	28	52	141	112	131	-
Dec	17	11	24	21	38	25	66	161	104	120	-
Total	201	211	294	270	334	368	529	992	1,495	1,541	690
Average	16.8	17.6	24.5	22.5	27.8	30.7	44.1	82.7	124.6	128.4	90.2

*Reproduced from Coroner's Service (2019). Illicit Drug Toxicity Deaths in BC. January 1, 2009 to August 31, 2019.

APPENDIX C

FENTANYL-DETECTED ILLICIT DRUG OVERDOSE DEATHS BY MONTH IN B.C. (2012-2019)

TABLE C1. FENTANYL-DETECTED DEATHS BY MONTH*

Month	2012	2013	2014	2015	2016	2017	2018	2019
January	0	5	5	20	46	106	116	88
February	0	3	5	8	30	106	91	72
March	0	6	9	8	48	117	136	100
April	1	8	8	12	48	129	115	72
May	1	3	8	8	37	113	92	72
June	1	2	6	11	42	104	91	56
July	0	1	3	14	41	106	128	62
August	1	4	8	15	38	111	114	62
September	1	2	9	15	43	81	122	-
October	0	4	13	16	52	82	107	-
November	4	6	6	13	111	90	120	-
December	3	6	11	13	131	82	106	-
Total	12	50	91	153	667	1,227	1,338	584

*Reproduced from Coroner's Service (2019). Fentanyl-Detected Illicit Drug Toxicity Deaths in BC. January 1, 2009 to August 31, 2019.

APPENDIX D

ESTIMATED VPD DRUG SEIZURE QUANTITIES ACROSS TWO YEARS (2017-2019)

TABLE D1. VPD DRUG SEIZURE QUANTITIES

General Drug Category	Quantity (kg)
Cocaine	128.355
Fentanyl + Mixtures	63.856
GHB (Gamma-hydroxybutyrate)	42.209
MDMA (Methylenedioxy-methamphetamine)	40.267
Heroin	28.060
Opium	14.312
Oxycodone	3.334
Psilocybin	1.582
Morphine	0.487
Percocet	0.234
Shatter (Butane Hash Oil)	0.052
LSD (Lysergic acid diethylamide)	0.029
Carfentanil	0.004

*Data from April 2017-April 2019.



VANCOUVER POLICE DEPARTMENT

A JOURNEY TO HOPE | AN UPDATE ON THE VPD'S CONTINUED FIGHT AGAINST THE OPIOID CRISIS

THE OPIOID CRISIS

THE NEED FOR TREATMENT ON DEMAND

REVIEW AND RECOMMENDATIONS | MAY 2017



VANCOUVER POLICE DEPARTMENT | *Beyond the Call*

FENTANYL

CAN BE DEADLY WHEN CUT WITH THE DRUGS YOU'RE TAKING

KNOW YOUR SOURCE? **BE DRUG SMART**

KNOW**YOURSOURCE**.CA



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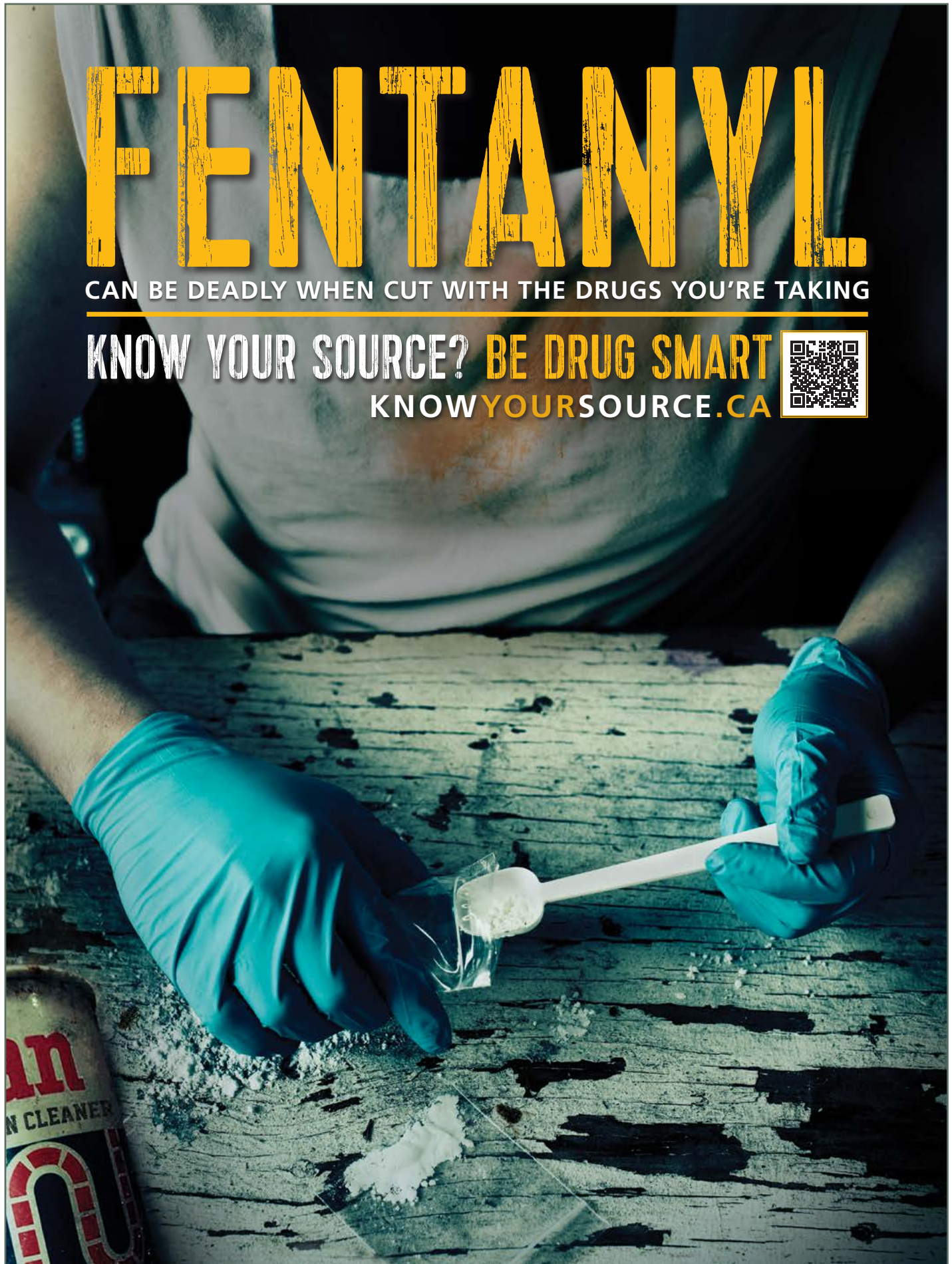
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EXECUTIVE SUMMARY

On April 14, 2016, British Columbia's Provincial Health Officer, Dr. Perry Kendall, declared the opioid crisis a public health emergency in B.C. In 2016, 931 British Columbians died from overdoses – 216 of these overdose deaths were in Vancouver. Fentanyl was detected in approximately 60% of those deaths (Coroners Service, 2017). The number of calls for service for Vancouver Fire and Rescue Services and the BC Ambulance Service have increased dramatically. In 2015, the agencies responded to 14,863 calls (combined). In 2016, this number rose to 23,987.

The crisis is continuing in 2017: by the end of March there had already been 347 overdose deaths in B.C. As high as these numbers are, there is evidence that overdoses are under-reported. Recent data from the Canadian Centre on Substance Abuse (2017) showed that between 2013 and 2016, up to 65% of individuals who were trained to administer naloxone (not including first responders and health officials) did not call 911.

IN PERSPECTIVE:

- In 2016, 931 British Columbians died from overdoses.
- Each year, about 600 British Columbians die from suicide.
- In 2015, 300 British Columbians died in motor vehicle accidents.
- In 2015, 95 British Columbians died due to homicides.
- Each year, 54 British Columbians, on average, die due to impaired driving.

China is the main source of supply for the fentanyl that flows into Canada, the United States, and Mexico (Drug Enforcement Administration, 2016). Sales of fentanyl have become widely available on the Internet.

Fentanyl is a less costly synthetic opioid being used by drug traffickers to boost their profits, and as a cheaper alternative to heroin. Fentanyl has been detected in all illicit drugs now, with the exception of marijuana.

There has been insufficient attention and funding for substance abuse treatment for many years. The opioid crisis has served to focus attention on the underfunding of addiction treatment that has contributed to the current crisis. The lack of evidence-based addiction treatment services contributes to a broad range of health and community harms that extend well beyond fatal overdoses. These harms can be prevented by investment in addiction care.

The results of numerous addiction research initiatives suggest that the provision of evidence-based addiction treatment, including opioid agonist therapy, where appropriate, can significantly mitigate risk and harm, facilitate addiction management, and contribute to overcoming addiction. It has been estimated by the U.S. National Institute of Drug Abuse (NIDA) that for every dollar invested in treatment, up to twelve dollars may be saved in health care and criminal justice costs (National Institute of Drug Abuse, n.d.).

The federal and provincial governments have dedicated additional funding to the opioid crisis. However, there is more work to do.

Based on the available research and in consultation with addictions specialists in B.C., the Vancouver Police Department (VPD) recommends the following:

1. **Expand federal and provincial government support and accountability.**

This support is required to enact an emergency response that is in keeping with the scale of the problem. The development of a functioning system for addiction prevention and care has long been neglected. The federal and provincial governments

should assign professionals to provide oversight and coordination of the efforts of various agencies working to address the crisis. Expanded support should include a full governance and accountability structure with real-time data analysis. It should foster structured communication with stakeholders and partners.

2. Expand and provide more funding for evidence-based addiction treatment, including opioid-assisted therapy¹ programs.

Opioid assisted therapy programs that provide people with substance use disorder with a range of effective opioid medications should be made immediately available in therapeutic and supported settings. The goal of this recommendation is to give addicted persons a “clean” opioid (with known contents) for their addiction and prevent them from contributing to the organized and disorganized crime-fuelled drug market through the purchase and use of contaminated street drugs.

3. Create a system for immediate evidence-based addiction treatment and concurrent mental health crisis intervention and support.

This should involve the opening/re-opening of in-patient beds for severe cases and the creation of sufficient community addiction and mental health services to support out-patients upon discharge from in-patient environments.

This must include a system to enable first responders or addicted persons to immediately gain access to assessment and evidence-based treatment. This should include withdrawal management and acute addiction treatment intake centres where first responders could transport those seeking treatment, or where

addicted persons themselves could go for immediate treatment.

4. Address the lack of health care information to allow for the creation of data-driven strategies.

Remarkably, unlike other areas of health care, there are glaring gaps in health information when it comes to addiction care. The lack of health informatics creates a situation where policy-makers do not have the information needed to address system gaps and other problems. This crucial information and data gap must be addressed.

5. Increase public awareness to support prevention through education – in line with the prevention and treatment pillars of the Four Pillars Drug Strategy.

It is necessary to increase awareness about overdose symptoms with more messaging in high visibility areas where drug consumption is likely. There also needs to be more education for students – elementary through post-secondary – about the dangers of opioid use, overdose prevention, and responses to overdoses. The development and delivery of this information should be coordinated across the province to ensure students in all areas of B.C. are receiving this information.

Establishing a national and provincial continuum of care and necessary systems requires resources. Financial, community, public safety, and public health gains can be made by acting with urgency and implementing the required substance abuse care structures. Providing timely and accessible evidence-based addiction treatment can reduce morbidity, mortality, crime, and health care costs across Canada. Maintaining the existing ineffective system is no longer an option.

¹This document uses the term opioid assisted therapy. Other terms (e.g., drug substitution) are common; professional guidelines reference opioid agonist therapy.

BACKGROUND: THE RISE OF OPIOID ABUSE

Opioids have a long history in Canada as pain management drugs. Some of the most common forms include fentanyl, hydromorphone, hydrocodone, morphine, methadone, meperidine, oxycodone, and codeine (Canadian Centre for Substance Abuse, 2013). Generally, low doses of opioids help reduce pain and a person's emotional response to pain. Despite the short-term pain-relieving benefits, the long-term effects are a cause for concern nationally at a public health level and for individual users. Long-term use can permanently damage a user's physiology and increase risk for other infections and diseases (Canadian Centre for Substance Abuse, 2013).

While opioids are prescribed by physicians for their pain-relieving properties, they may also put the user at risk for addiction. According to the Canadian Centre on Substance Abuse, "between 2005 and 2009, there were 815 deaths related to fentanyl, hydromorphone, morphine and oxycodone" in the province (2013). The rise of OxyContin in early 1992 created a mass market for opioids. Both legitimate patients and abusers were introduced to a new kind of product that had not been prevalent before. Despite the initial beliefs and claims that it was less addictive, many people moved from legitimate use, to dependence, and then abuse. With that, the illicit marketplace for stronger and cheaper alternatives greatly expanded. The misuse of opioid products containing oxycodone and hydrocodone increased, including the use of brands such as OxyContin, Vicodin, Percocet, and Lortab.

In 2012, OxyContin was removed from the marketplace and replaced with a new formulation marketed as more difficult to manipulate for misuse and abuse. This occurred

shortly before the patent protection on OxyContin was to expire. The removal of OxyContin from the Canadian marketplace left the abusers, and the patients who had become addicted to it, in search of a replacement. For many, that replacement was heroin.

Since then, the seizure by the VPD of synthetic opioids, including fentanyl, has risen steeply. Fentanyl is a powerful synthetic opioid analgesic that is similar to morphine, but more potent. It is now the fourth most analyzed drug in samples submitted to Health Canada (as of September 2016).

NEWER OPIOID ANALOGUES

FENTANYL

The Canadian Public Health Association defines fentanyl as a synthetic opioid pain reliever that shares similarities with other opioids such as morphine. However, a key difference between the two drugs is that fentanyl is approximately 50 to 100 times more powerful (Govindaraj, 2016). This drug was introduced to help people suffering from terminal pain. However, it has since then been used to treat less-severe pain (Govindaraj, 2016). It has also been used to treat patients with chronic pain who are physically tolerant to other opioids. When prescribed by a physician, fentanyl is often administered via injection or transdermal patch.

The majority of fentanyl associated with the opioid crisis is produced in clandestine labs, primarily in China, where the precursors to create fentanyl are unregulated. Large amounts of fentanyl are produced or purchased by drug traffickers. It is mixed with a number of illicit street drugs to increase the high and expand profits or, sold alone as a cheaper alternative to heroin.

CARFENTANIL

Carfentanil is one of the most potent opioids used commercially. It was first synthesized by a team of chemists at Janssen Pharmaceutical in 1974. This drug is approximately 10,000 times stronger than morphine and 100 times stronger than fentanyl (National Center for Biotechnology Information, n.d.). It was marketed under the name “Wildnil” and was only intended for use on large animals as a tranquilizer (National Center for Biotechnology Information, n.d.). Carfentanil is often used to sedate elephants. Elephants weigh between 5,000 and 14,000 pounds (the average adult male weighs 195 pounds).

In a nationwide warning to the public and law enforcement agencies, the United States Drug Enforcement Administration noted that carfentanil and fentanyl can come in several forms, including powder, blotter paper, tablets, and spray. Both can be absorbed through accidental inhalation of airborne powder (Drug Enforcement Administration, 2016).

Carfentanil was first detected in Vancouver in September 2016. In November, the first overdose in Vancouver occurred that could definitively be attributed to carfentanil. Since then, it has been detected in other situations. For example, VPD undercover officers purchased what they believed to be heroin, but after analysis, was confirmed to be carfentanil.

FENTANYL AND OVERDOSES

Illicit drug users are generally unaware if the heroin they are about to consume is laced with fentanyl. When they inject their standard dose of heroin, they may inadvertently consume a lethal amount of fentanyl. While drug dealers combine fentanyl with an illicit street drug to improve potency and increase profit, the lack of any “quality control” fails to ensure that a lethal amount of fentanyl has not been introduced.

For those intentionally seeking fentanyl, almost all fentanyl introduced to the illicit drug market is made in clandestine labs. This fentanyl is less pure than the pharmaceutical version and users have no way of determining the actual quantity in their supply. Those who are not seeking fentanyl, but other illicit drugs, such as cocaine, heroin, or methamphetamine, have no way of knowing if their drugs contain fentanyl or the quantity.

The estimated lethal dose of fentanyl for humans is two milligrams. The estimated lethal dose for carfentanil is 20 micrograms (a microgram is 1/1000 of a milligram). A typical business card weighs one gram. If a business card were torn into 1,000 pieces, the equivalent of two of those pieces of fentanyl could be fatal if it were ingested, inhaled, or absorbed through the skin.

THE FLOW OF FENTANYL INTO CANADA

THE PRIMARY SOURCE: CHINA

China is the main source of supply for illicit fentanyl that flows into Canada, the United States, and Mexico. China is reported not to have a fentanyl consumption issue (Drug Enforcement Administration, 2016).

Normally, fentanyl (in powder form) and pill presses are shipped to Canada via mail. Drug traffickers often mix the fentanyl with heroin, which is sold as heroin. Alternatively, the fentanyl is pressed into pills and sold in the drug market (e.g., into counterfeit prescription pills) (Drug Enforcement Administration, 2016).

Quality control is overlooked in favor of greater profits. Heroin may be combined with fentanyl at the source or smuggled into Canada and mixed again several times by various levels of traffickers – all to increase their profits. The end-user has no way of knowing what they are actually consuming or the quantity of other drugs, such as fentanyl, that are in their illicit drugs. The illicit drug supply has become contaminated as a result.

ENTRY INTO CANADA

Illegitimate suppliers in China have recognized that the Canada Border Services Agency (CBSA) is unable to monitor or search every package shipped into Canada. Further, pursuant to Section 99(2) of the Customs Act, the CBSA is not permitted to search packages that weigh less than 30 grams, without written consent of either the sender or the receiver. If fentanyl is being sent via mail with deadly dosages (which may be less than 30 grams), CBSA is currently unable to halt the entry of those envelopes (Canada Border Services Agency, 2008).

As a result, fentanyl has become widely available on the Internet. The drugs can be ordered online and then shipped to Canada in small- to medium-sized packages. There are currently provisions contained within Bill C-37 that would provide the CBSA with increased powers of search to close this loophole and would prohibit the unregistered importation of pill presses (House of Commons, 2016). Bill C-37 is currently in the third reading in the Senate.

THE OPIOID CRISIS IN BRITISH COLUMBIA

On April 14, 2016, B.C.'s Provincial Health Officer, Dr. Perry Kendall, declared the opioid crisis a public health emergency in B.C. In 2016, 931 British Columbians died from overdoses. There were 216 deaths in Vancouver alone. Fentanyl was detected in approximately 60% of the deaths in B.C. in 2016 (Coroners Service, 2017). The illicit overdose death rate in 2016 is an 80% increase over 2015, when 513 British Columbians died of overdoses. Fentanyl was detected in approximately 30% of the 2015 cases (Coroners Service, 2017). At the end of March 2017, there had been 347 overdose deaths in B.C.

Overdose fatalities are now the leading cause of unnatural deaths in B.C., and are increasing nationally as the spread of opioid analogues moves east from Western Canada.

Fentanyl is not solely restricted to being combined with heroin. It has been detected in every illicit drug tested by Health Canada except marijuana. As a result, overdose deaths are not confined to individuals who have addictions – occasional and first-time experimenters now risk death every time they use illicit drugs.

From 1999 to 2012, the number of overdose deaths each year in B.C. ranged between 172 and 294. The overdose death rates began steadily climbing after 2012 (depicted in Figure 1 below).

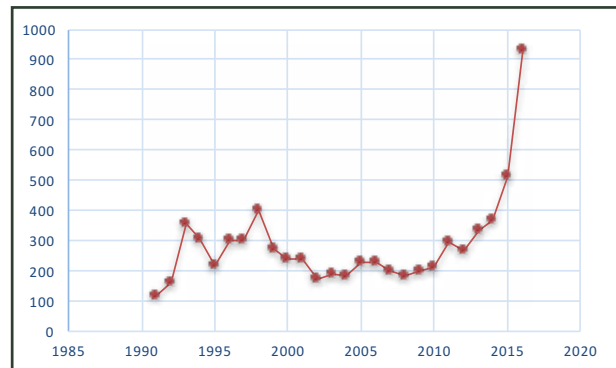


FIGURE 1. OVERDOSE DEATHS 1991-2016 (RETRIEVED FROM BC CORONERS SERVICE)

The following heat maps (Figure 2 and Figure 3) from the BC Centre for Disease Control (2017) compare, by region, deaths from illicit drug overdoses in 2012 to 2016.

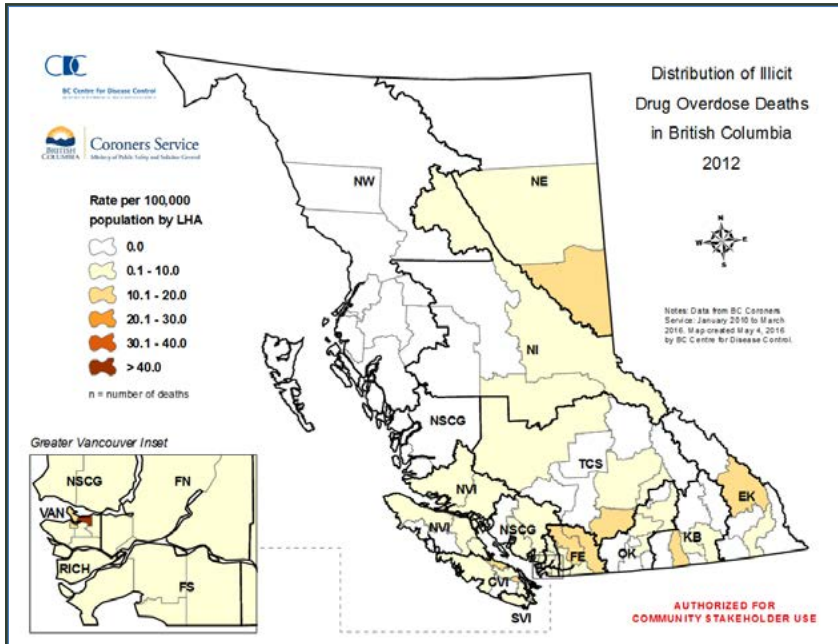


FIGURE 2. DISTRIBUTION OF OVERDOSE DEATHS IN 2012

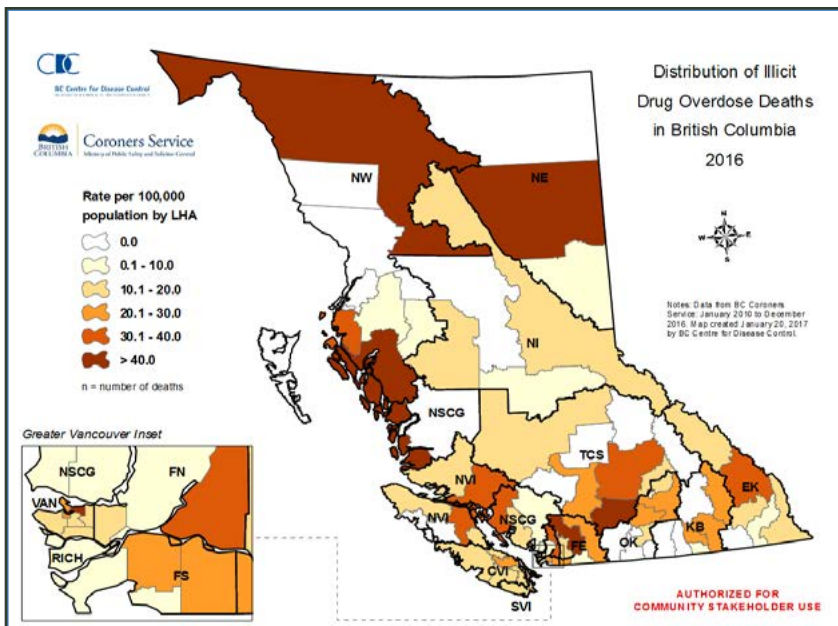


FIGURE 3. DISTRIBUTION OF OVERDOSE DEATHS IN 2016

IMPACT ON COMMUNITIES AND FIRST RESPONDERS

IMPACT ON COMMUNITIES

There is a misperception that opioid deaths are relegated primarily to individuals with substance dependency issues. The addition of fentanyl into other illicit drugs, such as cocaine, gamma-hydroxybutyrate (GHB), and ecstasy (3, 4-methylenedioxy-methamphetamine or MDMA), is exposing recreational users and young people experimenting with party drugs to the same risk of death as addicted persons.

The Downtown Eastside (DTES) of Vancouver has been hit particularly hard. It is a small community with a large number of individuals with substance dependency issues. The close-knit community has many outreach and community groups which have developed strong ties with the residents. Many outreach and community workers and residents are now grieving the death of someone they knew and cared for.

Many community groups and providers have instituted services to provide naloxone² intervention in their buildings and to the larger community. Paid workers and volunteers are regularly providing lifesaving first aid to those who overdose. The longer-term adverse psychological and emotional impact of the crisis on these people will only be seen in the coming years. Unlike professional first responders, these individuals sometimes lack institutional support systems for emotional and mental health, and are often left to deal with the psychological impact on their own.

Several managed housing buildings providing housing to the most vulnerable residents of the DTES, have turned rooms into monitored consumption sites for building residents.

Vancouver Coastal Health (VCH) responded by placing a mobile medical unit (MMU) into the DTES at a cost of about \$10,000 per day. This mobile emergency room was previously used for the 2010 Olympics. It is staffed by specialist physicians and nurses who provide immediate lifesaving intervention for people who overdose. Every overdose victim is provided options for treatment, although immediate access to long-term treatment and support is in very short supply. The services will continue at the newly opened Connections Clinic at 623 Powell Street, which is a step in the right direction.

VCH has also recently opened five overdose prevention sites in Vancouver, where addicted persons may consume illicit drugs with staff present to intervene if an overdose occurs. There have been no deaths at these sites. Between December 8, 2016, and February 19, 2017, there were more than 20,000 visits to these five sites and 202 overdoses were reversed.

The long-term impacts to survivors, their families, caregivers, and the economy will only be realized in the coming years. Overdose victims who manage to survive, can sustain irreparable brain injuries due to oxygen deprivation during their overdose. These injuries can be life-altering and may require lifelong care.

²Naloxone (also known as Narcan®) is a medication called an “opioid antagonist” used to counter the effects of opioid overdose, for example morphine and heroin overdose. Specifically, naloxone is used in opioid overdoses to counteract life-threatening depression of the central nervous system and respiratory system, allowing an overdose victim to breathe normally.

IMPACT ON FIRST RESPONDERS

Paramedics, firefighters, and police officers are often the first to respond to an overdose. The current crisis and volume of overdose calls has significantly impacted response times for first responders and has reduced service levels for others in need. It has also negatively impacted the mental health and emotional well-being of first responders, who have experienced stress, anxiety and “compassion fatigue” – a helplessness feeling that they are not making a difference (Britten, 2017).

Figure 4 shows how the opioid crisis has increased the number of calls for service for Vancouver Fire and Rescue Services (VFRS) and the BC Ambulance Service (BCAS) in the last two years. In 2015, VFRS responded to 2,600 overdose calls in Vancouver. In 2016, the number of calls almost doubled to 4,712. In 2015, BCAS attended 12,263 suspected overdose and poisoning events in B.C. (3,055 were in Vancouver). In 2016, this number rose to 19,275 (5,944 occurred in Vancouver). As high as these numbers are, there is evidence that overdoses are under-reported. Recent data from the Canadian Centre on Substance Abuse (2017) showed that between 2013 and 2016, up to 65% of individuals who were trained to administer naloxone (not including first responders and health officials) did not call 911.

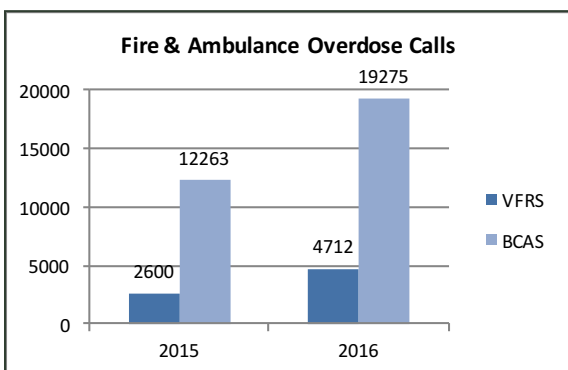


FIGURE 4. VFRS & BCAS OVERDOSE CALLS FOR SERVICE 2015 - 2016

FRONT-LINE FRUSTRATIONS

Constable Linda Malcolm, a 35-year member of the VPD, has worked with the most marginalized members of society in the DTES. Constable Malcolm has personally helped more than 50 people navigate the complex, disjointed, and under-resourced medical system to access withdrawal management or treatment.

Recently, Constable Malcolm was working with three women to secure help for their addictions. In one case, she was told that space in a treatment facility would not be available for nine days. She was able to find space for the other two women, but not in Vancouver.

The fact that the VPD has to source treatment outside of Metro Vancouver for residents of the largest city in the province is indicative of a fractured and under-resourced health care system.

In 2006, routine police response to overdose calls was recognized by the VPD as a barrier for people seeking help. It was apparent that people feared that asking for help would lead to police enforcement. As a result, the VPD implemented a new overdose policy: police officers are not dispatched to overdose calls unless the overdose results in death, the circumstances are suspicious, a safety concern exists for other first responders, or if it is an attempted suicide.

The presence of fentanyl poses an increased safety risk for police officers as they must deal with drug exhibits and enter buildings that may be contaminated with fentanyl. In B.C., as of March 2017, three police officers have been accidentally exposed to opioids during the course of their duties. They were administered naloxone to counter the effects of the substances and prevent an overdose. In December 2016, a VPD Community Safety member was exposed to an unknown substance while handling drug exhibits and was taken to the hospital. The member did not require the administration of naloxone. However, the emergency room physician attributed the symptoms to opioid exposure.

In September 2016, the VPD initiated a naloxone training program to mitigate the risk to members. Since that time, 870 members have been trained and equipped to administer intra-nasal naloxone.

Police officers regularly deal with individuals with addictions and recreational drug users. In unique communities such as the DTES, people often turn to the VPD for help. Frequently, officers face frustration when a drug-user finally agrees to treatment, but they don't have immediate access to resources or a coordinated health care system to turn to.

EXAMINING SOLUTIONS

WHAT IS WORKING ELSEWHERE? THE ANGEL PROGRAM

In the United States, the fentanyl crisis began on the East Coast. Several agencies initiated innovative strategies to reduce the overdose rates. In 2015, the Gloucester Police Department (Massachusetts) implemented the ANGEL program and placed almost 400 individuals into treatment in its first year of operation, thanks to a partnership with a local treatment centre (Gloucester Police Department, 2017). Under the program, when an addict asks a police officer for help getting into treatment, access is immediate. The innovative program saw addicted persons voluntarily reach out to the police for assistance. The fact that the State of Massachusetts mandates funding for drug treatment ensures sufficient treatment beds and immediate access.

The ANGEL program was reviewed by the Boston Medical Center and Boston University's School of Public Health. This study found that the program provided individuals with treatment at a rate of 95% while similar hospital-based initiatives provided assistance at a rate of only 50 to 60%. This successful initiative has been replicated by more than 150 police departments in 28 states since its inception (Gloucester Police Department, 2017). The key to the program's success is immediate access to appropriate treatment on demand.

OTHER INITIATIVES INSPIRED BY THE ANGEL PROGRAM

Other agencies across North America have adopted programs similar to the ANGEL program. A police department in North Carolina implemented the HOPE initiative. The HOPE initiative allows addicted individuals to

"...that drug-users could walk into the police station, hand over heroin, and walk out into treatment within hours – without arrest or charges. The concept of help rather than handcuffs became a national sensation."

FORMER CHIEF LEONARD CAMPANELLO
(MACQUARRIE, 2017)

turn in their drugs or paraphernalia without the fear of arrest, in exchange for treatment and resource options (Thomas, 2016).

The Hope Not Handcuffs program in Macomb County (Michigan) operates with a similar philosophy: individuals may walk into any police station in that county and ask for help. They are paired with volunteers from the community, while police arrange for accommodation at treatment centres.

LIVES AND COSTS CAN BE SAVED

Several studies have demonstrated that timely and appropriate addiction initiatives, including replacement therapy, may result in decreased adverse health risks to study participants. One such study, North America's first ever clinical trial of prescribed heroin, is the North American Opiate Medication Initiative (NAOMI). NAOMI examined how heroin-assisted therapy benefits persons with opioid dependency whom have not had success with other treatments. The findings show: "diacetylmorphine (DAM), administered under medical supervision, offered additional benefits over and above optimized

methadone maintenance therapy (MMT) alone for patients with opioid addiction who are refractory to treatment” (Providence Healthcare, 2016).

Furthermore, research findings have demonstrated that substitution therapy, with concurrent supports, is effective in the treatment of opioid addiction (e.g., Gossop, Marsden, & Stewart, 2006; Rehm, et al., 2001; Van Den et al., 2003). NIDA reports that for every dollar spent on treatment options, up to twelve dollars may be saved in health care and criminal justice costs. (National Institute of Drug Abuse, n.d.). In 2002, the cost to Canadians as a result of illicit drug abuse was estimated at \$8.2 billion (Canadian Centre for Substance Abuse, n.d.). Other studies have demonstrated that psychiatric symptoms may be reduced or eliminated as a result of concurrent drug abuse treatment (Gossop, Marsden & Stewart, 2006).

OVERCOMING BARRIERS TO ENFORCEMENT

Domestically, there has been increased scrutiny and pressure placed on China by the federal government and the Royal Canadian Mounted Police (RCMP) to stop the flow of fentanyl and other analogues into North America. Towards this, the RCMP and Chinese Ministry of Public Security announced joint efforts to disrupt the flow of fentanyl into Canada (British Columbia Ministry of Public Safety and Solicitor General, 2016).

The federal government has proposed legislation to provide CBSA with the authority to search packages entering Canada weighing less than 30 grams. Parliament is currently in the process of amending Bill C-37.

THE GAP

Many municipalities and agencies have adopted a common response to substance abuse– the Four Pillars Drug Strategy. This approach recognizes that four pillars support the response to substance abuse: prevention, harm reduction, enforcement, and treatment. All four pillars must work in concert for success.

The VPD released its drug policy in 2006. It was one of the first police agencies in Canada to adopt a drug policy and an overdose response policy that ascribes to the Four Pillars Drug Strategy.

The VPD has devoted significant resources to the enforcement pillar and supported the work done in the other pillars. Many agencies work proactively in promoting prevention. Harm reduction initiatives have received significant exposure and funding.

Effective treatments for substance abuse have been identified through many research studies. However, limited implementation and lack of funding and availability have resulted in treatment being one of the least supported of the pillars.

The federal and provincial governments have recently dedicated more funding to help with the crisis. However, there are insufficient organized treatment systems in place to enable first responders, or individuals with substance dependency themselves, to receive treatment immediately when it is sought. Delays in access to treatment results in missed opportunities to reduce harm, aid recovery, and prevent overdose deaths.

VPD INITIATIVES TO DATE

As the issues related to opioid abuse have grown, the VPD continues to actively participate and seek solutions outside of traditional policing initiatives, some of which include:

PARTNERING WITH OTHER AGENCIES

- The VPD is one of the original members of the Drug Overdose Alert Partnership (DOAP) – a group chaired by the BC Centre for Disease Control (BCCDC). DOAP is a multi-sectoral committee, established to prevent and reduce the harms associated with substance abuse. The committee identifies and disseminates timely information about harms related to substance abuse, including overdose and adverse reactions to contaminated products, maintains an informational website, and coordinates public health responses to emerging issues. Members of this committee include the VPD, all provincial health authorities, BC Coroners Service, RCMP, Victoria PD, Vancouver Area Network of Drug Users, and Health Canada.
- In October 2016, a meeting between the boards and the executive of the VPD and VCH was held to discuss treatment-on-demand services.
- In November 2016, the VPD and the Abbotsford Police Department were in attendance at the National Opioid Conference in Ottawa.
- The VPD Youth Services Section (YSS) works closely with the Vancouver School Board (VSB) and School Age Children and Youth (SACY). SACY is a substance use prevention initiative in VSB schools and the surrounding community, that works to prevent and delay substance use and reduce

substance use related problems. YSS has helped develop a fentanyl overdose pamphlet that will be distributed to VSB high school youth. In addition, members of VPD's School Liaison Unit have given fentanyl presentations to several VSB high schools. Members of the Youth Services Unit have given fentanyl presentations to elementary schools through the Police Athletic League program.

ADVOCACY

- In December 2015, the VPD formalized a desire to seek the creation of a treatment-on-demand system that would enable first responders, among others, to gain quick access to treatment for substance abusers. This approach is supported by the Vancouver Police Board.
- In January 2016, members of the VPD Executive met with representatives from BC Police Services to explain the need for treatment-on-demand in B.C.
- In February 2016, VPD Chief Constable Adam Palmer received support from members of the BC Association of Municipal Chiefs of Police (BCAMCP) for the VPD's efforts to continue lobbying the provincial government for treatment-on-demand.
- In July 2016, Premier Christy Clark announced that the Provincial Health Officer, Dr. Perry Kendall, and Assistant Deputy Minister, Clayton Pecknold, Director of Police Services Policing and Security Branch, would co-chair a new joint task force to provide advice to the provincial government on what could be done to prevent and respond to overdoses. VPD Deputy Chief Constable Laurence Rankin, is an active member of the committee.

- In December 2016, following nine overdose deaths in one day in Vancouver, Chief Palmer, in partnership with VFRS Chief John McKearney and Mayor Gregor Robertson, held a news conference calling for treatment-on-demand. They were supported by Dr. Bill MacEwan (Psychiatry, St. Paul's Hospital), Dr. Michael Krausz (Chair of Addiction Research UBC-Providence Health Care Leadership), Dr. Mark Tyndall (Executive Medical Director of BCCDC), and Dr. Kerry Jang.
- In January 2017, VPD Chief Adam Palmer and Deputy Chief Constable Steve Rai attended the Canadian Association of Chiefs of Police (CACP) President's Council meeting and advocated for the addition of the opioid crisis as a national priority for the CACP.

COMMUNITY ENGAGEMENT

- In June 2016, the VPD participated in the BCCDC's BC Overdose Action Exchange. Over 30 organizations came together to share their expertise and experience. Those directly impacted and threatened by overdose were also in attendance to provide their lived experiences. This action exchange collected submissions from participants to guide further discussion and action.
- In December 2016, more than 200 people participated in a public forum hosted by the mayor of Vancouver about the depth of the opioid crisis. Chief Palmer was a panellist, alongside other experts, like Dr. Patricia Daly, the Chief Medical Health Officer for VCH. Attendees learned from

the lived experiences of those most affected, including the parent of an overdose victim, an Aboriginal community member, a youth organization, and drug-user groups. Participants engaged in dialogue and identified key gaps and areas for action, including treatment-on-demand.

EDUCATION AND TRAINING

- In June 2016, two fentanyl workshops for first responders were developed and delivered by the VPD, RCMP, and Victoria PD, and hosted by the Justice Institute of BC. The workshops were delivered in Victoria and New Westminster and funded through the BC Civil Forfeiture Office (CFO). The workshops were the first to be held in Canada and generated significant interest with more than 100 in attendance in Victoria and almost 200 in New Westminster. Four more workshops are planned for May 2017 in New Westminster, Nanaimo, Kelowna, and Prince George. They will be funded by Police Services and the CFO.
- An officer safety concern warranted an immediate response to protect members from accidental exposure. The VPD developed a comprehensive training program for members to administer intranasal naloxone. In September 2016, the VPD began delivering the program to over 870 sworn, civilian, and jail members. The training continues in 2017 and the VPD has shared training materials with numerous police departments across Canada to expedite their training.

- The nursing staff at the Vancouver Jail determine upon intake if prisoners are at risk of overdose when they are released. Where indicated, the nursing staff will issue take-home naloxone kits to the prisoner upon release. This has been underway since October 2016.

PUBLIC AWARENESS

- To increase public safety, the VPD, in cooperation with health care partners at VCH and DOAP, proactively issues public warnings when unexpected drugs are detected or when an increase in overdoses is observed.
- The “Know Your Source” website is a VPD-led resource developed in partnership with the RCMP, BCAS, Fraser Health Authority, VCH, the Provincial Health Services Authority, and BCCDC. The website has been a key resource for the public for fentanyl awareness.
- The VPD has partnered with Odd Squad Productions Society (a charitable organization that takes a reality-based approach to address major social issues affecting the community). Odd Squad will produce a video for youth that focuses on education and prevention by highlighting the current crisis, its impacts on all walks of society, and the urgent need for treatment-on-demand.

ENFORCEMENT

Targeting organized crime groups (OCG) that manufacture and distribute fentanyl has been a public safety priority for the VPD since October 2014. The VPD Organized Crime Section (OCS) has conducted investigations that have targeted higher-level drug networks involved in the production and distribution of fentanyl. OCS continues to assist VPD’s Operations Division with targeted enforcement of street level drug networks. Additionally, OCS collaborates with the Combined Forces Special Enforcement Unit - BC (CFSEU) and the RCMP’s “E” Division Federal Serious and Organized Crime (FSOC) to combat the issue.

There are currently several enforcement projects underway, and some significant projects have been completed since 2014.

PROJECT TAINTED

Project Tainted (October 2014 to February 2015) targeted an OCG distributing fentanyl into the DTES and the Yukon. The project cost approximately \$450,000. Ten suspects were charged and most have already pleaded guilty. The project resulted in the seizure of:

- 25,000 fentanyl pills,
- 147,000 alprazolam pills,
- 9.5 kg of crack cocaine,
- 5 kg of powdered cocaine,
- 19.5 kg of marijuana,
- 1 kg methamphetamine,
- 3 kg of hashish,

- 0.5 kg of heroin,
- one pill press,
- four guns (3 handguns, 1 long gun),
- \$1.2 million in property,
- seven vehicles, and
- \$261,000 in cash.

PROJECT TROOPER

Project Trooper (October 2014 to March 2015), targeted an OCG distributing fentanyl in the DTES, Metro Vancouver, and Alberta. The project cost was approximately \$300,000. The eight-month investigation resulted in drug and weapon charges against six suspects, and the forfeiture of over \$3 million in property including a DTES single room occupancy (SRO) hotel. The arrests and executions of eight search warrants resulted in the seizure of:

- 25,000 fentanyl pills,
- 20.5 kg of cocaine,
- 12.2 kg of methamphetamine,
- 1.6 kg of heroin,
- 228 kg of phenacetin,
- 12 guns (6 handguns, 2 shotguns, 4 rifles),
- \$570,000 in cash, and
- eight vehicles.

PROJECT BREAKOUT

Project Breakout (December 2016 to February 2017) resulted in the execution of ten search warrants. The investigation is ongoing and charges are pending against six individuals. Seizures included:

- 70 gold and silver bars,
- three vehicles,
- \$90,000 in cash, and
- several kilograms of drugs (including fentanyl and heroin).

SAVING LIVES: TREATMENT ON DEMAND

The VPD recognizes that our expertise lies in public safety and not in addictions treatment. However, we cannot arrest our way out of the opioid crisis. As first responders, we routinely come across individuals who require addiction care but have nowhere to turn. First responders are uniquely positioned to help refer individuals to treatment services. Unfortunately, there is a lack of services that are immediately accessible. This usually means that the cycle of addiction and crime continues.

We are seeing the effects of the opioid crisis firsthand in the neighborhoods we serve and feel an ethical obligation to call for change. We have developed partnerships with many physicians and addiction experts to work towards a solution for this crisis.

As a result of insufficient funding and a lack of coordination for substance abuse treatment, everyone pays in the form of “downstream” medical and mental health costs, and there continue to be community concerns about crime and other challenges. The mental health consequences of untreated addiction often cost much more than providing substance abuse care. Further, the medical consequences can be a significant cost in the form of avoidable HIV and hepatitis C infections, and brain injuries from non-fatal overdoses.

It is through the information gleaned from partnerships and from experience on the front-line, that the VPD is proposing a number of initiatives to mitigate the impacts of the opioid crisis. These recommendations are based, in part, on the insight and research conducted by Dr. Kerry Jang, Dr. Michael Krausz, Dr. Bill MacEwan, Dr. Mark Tyndall, and other senior medical professionals, as well as numerous research studies. This position is further informed by the outcomes of the BC Overdose Action Exchange. B.C.’s Provincial Health Officer, Dr. Perry Kendall, has also provided his insight and review of these recommendations.

RECOMMENDATIONS

1. Expand federal and provincial government support and accountability.

This support is required to enact an emergency response that is in keeping with the scale of the problem. The development of a functioning system for addiction prevention and care has long been neglected. The federal and provincial governments should assign point people to provide oversight and coordination of the efforts of various agencies working to address the crisis. Expanded support should include a full governance and accountability structure with real-time data and analysis. It should foster structured communication with stakeholders and partners. It may also include dedicated projects aimed at addressing the health and social consequences of the opioid crisis and the long-standing limitations of the substance abuse treatment system.

2. Expand and provide more funding for evidence-based addiction treatment, including opioid-assisted therapy programs.

Opioid assisted therapy programs that provide addicted persons with opioid medications must be made immediately and easily accessible in therapeutic and supported settings. The goal of this recommendation is to give addicted persons a “clean opioid” (with known contents) for their addiction and to prevent addicted persons from contributing to the organized and disorganized crime-fuelled drug market through purchasing and using contaminated street drugs. While not nearly adequate in capacity, the Crosstown Clinic (which has treatment capacity for about 150 individuals) and Connections

Clinic that opened in March 2017 (Vancouver Coastal Health, 2016), are examples of progressive programs.

Immediately needed initiatives will require funding for medical staff to witness injections and funding for physicians. Support is needed from the federal and provincial governments to permit the wide use of new effective substitution drugs, such as slow release morphine, hydromorphone, methadone, extended release naltrexone (Vivitrol), and diacetylmorphine.

These services must also be integrated into the full spectrum of recovery-oriented services to ultimately help individuals stop using drugs altogether. This will require expanding addiction recovery programs and ensuring these programs are linked with the above models of care.

3. Create a system for immediate evidence-based addiction treatment and concurrent mental health crisis intervention and support.

- a. This should involve the opening/re-opening of in-patient beds for severe cases and the creation of sufficient community addiction and mental health services. These services are required to support out-patients and related care upon discharge from in-patient environments.
- b. This must include a 24/7 system to enable first responders or addicted persons to immediately gain access to assessment and evidence-based treatment. This should include withdrawal management and acute addiction treatment intake centres where first responders can transport those seeking treatment, or

where addicted persons can attend themselves for immediate addiction treatment-on-demand. An example of this is in Seattle, at the Crisis Solutions Center. This program provides rapid stabilization, treatment, and referrals for up to 46 individuals at a time (DESC, n.d.).

- c. Care models aimed at supporting acute addiction care through to recovery must be urgently expanded. These require after-care post-withdrawal management, such as mental health treatment and supports, and recovery services to be integrated into opioid agonist therapy and other treatment programs. This will require supportive recovery housing and longer-term publicly-funded addiction treatment bed capacity to be urgently expanded.

4. Address the lack of health care information to allow the creation of data-driven strategies.

Remarkably, unlike most areas of health care, there are glaring gaps in health information when it comes to addiction care. The lack of health informatics creates a situation where policy-makers do not always have the information needed to address system gaps and other problems. To address these gaps, a number of strategies are urgently required:

- a. Given that withdrawal management and acute addiction treatment programs need to be expanded and are often a first point of contact for persons struggling with addiction, there is a need for the creation of a province-wide information

system for tracking wait-lists. There must be evidence-based metrics for linking individuals seeking help with withdrawal management to ongoing evidence-based addiction care. The provincial government must create data systems to inform policies which immediately address the revolving door whereby individuals wait, sometimes weeks, to get access to withdrawal management programs, only to be discharged without being linked to ongoing addiction treatment.

- b. Supportive recovery housing and longer-term publicly-funded addiction treatment beds must be urgently expanded. Therefore, data to provide information about standards and outcomes from these programs must be immediately addressed by developing systems to ensure the health care system has the necessary data to provide quality care.
- c. It is necessary to create a clinical system to allow for assertive outreach (e.g., post-non-fatal overdose or presentation to the emergency department) to link at-risk individuals to addiction care after acute presentation. With a view to providing timely addiction care, anonymized data should be shared publicly and in real-time with all partners – front line workers, non-profits, cities, and police. This will enable each stakeholder to implement responses to the risk factors within their control or influence.
- d. The development of drug testing and other metrics to inform the creation of an early warning system that will

assist with the early identification and detection of new toxic drugs entering the illicit market. The information should be disseminated widely. Those presenting negative health effects of toxic drugs should be offered evidence-based alternatives to reduce the size of the illicit drug market and improve public health.

- e. An accurate and comprehensive study of the actual population size of persons with opioid dependency for major cities across British Columbia and Canada.
- f. A review of the overdose crisis should be conducted by internationally recognized experts, for an independent gap analysis of the resources, response, and overall situation. An analysis of all of the 2016 data should be conducted with a national view to be used as a planning document.
- g. The introduction of mandatory data collection and documentation of all overdoses and related fatalities and reports out to the public monthly.

5. Increase public awareness to support prevention through education in line with the prevention and treatment pillars of the Four Pillars Drug Strategy.

The VPD supports increasing public awareness on not just the dangers of opioids, but also how to respond to and treat overdoses.

- a. Increase awareness about overdose symptoms with increased messaging in high visibility areas (e.g., shopping malls) and areas where drug consumption is likely (e.g., night clubs, washrooms). There is also a need to reach people who can't access traditional media or social media. This may require the use of new and innovative systems and channels.
- b. Provide education to universities and colleges about the dangers of fentanyl use, overdose prevention, and responses to overdoses.
- c. Expand drug prevention education to elementary, secondary, and post-secondary institutions. The development and delivery of this information should be coordinated across the province to ensure students in all areas of B.C. are receiving this information.

When police or first responders are approached, or when individuals with drug dependency issues self-present at hospitals seeking assistance, we must have an established, coordinated, and properly resourced system to help. It must provide managed withdrawal or treatment/recovery assistance that is immediately available. We require a long-term health strategy that does more than revive people temporarily with naloxone and send them back to the street to continue their addiction.

CONCLUSION

Whether directly through the loss of loved ones, or indirectly through the adverse impacts to their communities, British Columbians are experiencing the impacts of the opioid crisis. The proposed recommendations are intended to reduce this impact. The number of overdoses and deaths associated with opioid addiction is steadily increasing, and without significant intervention, they will continue to rise. If change is implemented to create an effective system of substance abuse care, not only will the current opioid crisis receive appropriate attention, but longstanding challenges related to untreated addiction may also be addressed.

Research has provided evidence-based options for treatment that reduce overdose deaths, reduce the negative impacts on communities, and reduce costs. However, without sufficient access to treatment-on-demand, these options cannot be implemented. Therefore, we must invest in creating effective addiction treatment and realize the widespread public safety and public health benefits that would result.

The VPD supports improved coordination and proper resourcing to ensure that appropriate treatment with ongoing support is available for every person with a substance use disorder who seeks it. We are calling for appropriate and research-based treatment-on-demand to help save lives.

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VANCOUVER POLICE DEPARTMENT
Beyond the Call

VPD.CA

LEARNING FROM LOST LIVES

EXAMINING THE CALLS FOR JUSTICE FOR POLICE
FROM THE NATIONAL INQUIRY INTO MISSING
AND MURDERED INDIGENOUS WOMEN AND GIRLS

PREPARED BY
DEPUTY CHIEF CONSTABLE LAURENCE RANKIN
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VANCOUVER POLICE DEPARTMENT

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Acknowledgements

The Vancouver Police Department proudly serves its community and acknowledges the City of Vancouver is located on the traditional, ancestral, and unceded territories of the Musqueam, Squamish, and Tsleil-Waututh First Nations.

The Vancouver Police Department acknowledges that there are differing opinions on the appropriate use of terminology. For the purposes of this document, and in observance of the Federal Government's recognition of First Nations, Inuit, and Métis as Indigenous Peoples, we refer to these populations as Indigenous; this is also consistent with standard terminology used in the United Nations Declaration on the Rights of Indigenous Peoples.ⁱ The term Aboriginal is used when referencing pre-existing organizations or materials.

Executive Summary

In September 2016, the Canadian Government initiated the National Inquiry into Missing and Murdered Indigenous Women and Girls (MMIWG).ⁱⁱ The federal government and the 13 provincial and territorial governments mandated that this inquiry report on systemic causes of all forms of violence, which has contributed to violence and vulnerabilities of Indigenous women and girls. In addition, the Inquiry recommended institutional policies and practices be implemented in response to violence experienced by Indigenous women and girls in Canada, including the identification and examination of practices that have been effective in reducing violence and increasing safety.

On June 3, 2019, the final findings from the National Inquiry into MMIWG were released to the public. The extensive review found that there are 231 steps, or Calls for Justice, that are required by all levels of government to end violence against Indigenous women, girls, and 2SLGBTQQIA (Two-Spirit, lesbian, gay, bisexual, transgender, queer, questioning, intersex, and asexual) people. All Calls for Justice are aimed at tackling root causes of violence, and improving the safety, and thus lives, of Indigenous women, girls, and 2SLGBTQQIA people. The MMIWG Inquiry identifies 28 Calls for Police Services, which are examined in this report. An additional six Calls for Justice, outside of those specific to police services, yet nonetheless important for police to review, are also addressed in this report.

The Vancouver Police Department (VPD) accepts those voices heard by the Inquiry into MMIWG. Indigenous women, girls, and 2SLGBTQQIA people have the right to feel safe and be protected; their human rights must be upheld. The VPD concurs that Indigenous Peoples have rights to culture, health, security, and justice. The VPD acknowledges the courage of the survivors and families and recognizes that all police services, including the VPD, have a role to play in ending the violence, death, and unexplained disappearances of Indigenous women and girls and 2SLGBTQQIA people.

Canada has a disturbing history of systemic discrimination against Indigenous Peoples – the legal system, correctional institutions, government policies, and the police have administered policies and practices in ways that discriminate against women, Indigenous Peoples, and other racialized or marginalized groups. The VPD recognizes that this discrimination has led to substance use, poverty, homelessness, and overrepresentation of Indigenous people in the criminal justice system.

The National Inquiry into MMIWG outlines an imperative component to re-examine police practices that reduce the violence, death, and unexplained disappearances of Indigenous women and girls and members of the 2SLGBTQQIA community. In response to the Calls for Justice in the National Inquiry into MMIWG, this document provides an overview of the following VPD practices and procedures:

- **Recruiting Practices:** This included a full review of VPD's recruiting practices as they relate to the Calls for Justice for Police Services. Covered in this section is the

VPD's Indigenous and gender diversity, specialized recruitment programming, and the process the VPD has in place for screening recruits for racial, gender, gender identity, and sexual orientation bias. In collaboration with VPD's Indigenous Advisory Committee, the VPD Training and Recruiting Section will undertake a review of their Indigenous outreach efforts and host information sessions with Indigenous communities in an effort to attract qualified candidates.

- **Mechanisms to Strengthen Community Relations:** The VPD has a dedicated Diversity, Inclusion, and Indigenous Relations Section that provides outreach, develops partnerships, and maintains relationships with various communities and interest groups. Relationships are developed with communities at both the management and frontline levels. To address safety issues, members regularly meet with representatives from diverse communities to provide advice, suggestions, and recommendations. The VPD also has several full-time positions embedded in Indigenous communities and engaged in specific liaison initiatives. These positions collaborate with frontline organizations that work to heighten the safety for Indigenous women, girls, and 2SLGBTQQIA people.

The VPD commits extensive resources to community partnerships, yet acknowledges that partnerships between police, Indigenous communities and 2SLGBTQQIA people need to be expanded. The VPD's responses to Calls for Justice regarding engagement and partnerships with Indigenous Peoples, communities, and 2SLGBTQQIA people are discussed in this section. This includes the VPD's Indigenous Advisory Committee, comprised of recognized and respected members of Vancouver's Indigenous community and executive representation from the VPD.

- **Culturally Appropriate and Gender-Neutral Policy, Practices, and Procedures:** The VPD implements departmental policy with gender-neutral language. The VPD's policies, practices, and procedures are developed, and consistently reviewed, so they do not impact people differently based on any identifying factor such as gender. Furthermore, policy analysis is done beyond gender, and includes potential impacts on other identifying factors including age, sexual orientation, sexual expression, race, ethnicity, religion, and culture. In developing policy and procedures, the VPD incorporates the principles of the *B.C. Human Rights Code*ⁱⁱⁱ and the *Canadian Human Rights Act*.^{iv}
- **Cultural Competence Training and Trauma Informed Practices:** The VPD is committed to making all employees more culturally fluent. To that end, it provides a number of training initiatives to officers and civilians, including: VPD Aboriginal Cultural Competency Training; Circle of Understanding (through the Justice Institute of BC); Aboriginal First Nations Awareness Course; Indigenous Awareness for Special Municipal Constables; and Sex Work and Sex Workers Awareness Course. To educate police regarding 2SLGBTQQIA people and their experiences, and to address discrimination, the VPD offers training on gender frameworks and models,

contextualizing 2SLGBTQQA history in Canada, and reflections on 2SLGBTQQA lived experiences.

In addition, the VPD has recently implemented mandatory Fair and Impartial Policing (FIP) training, a full day workshop delivered to frontline VPD officers. This important training illustrates how implicit biases may affect police perception and behaviour, and as a result negatively affect community members. Notably, the training provides specific focus to the effect of bias on Indigenous communities.

Furthermore, the VPD is sensitive to the fact that trauma has a neurobiological impact and for these reasons, sections of the VPD introduced trauma informed investigative practices in 2017. VPD's Sex Crimes and Domestic Violence Units continue to educate members on the impact of trauma since first introducing the concept in 2014. Currently, the VPD is working on expanding trauma informed practices to other sections.

- **Investigative Practices:** The VPD follows the same investigative process regardless of a victim's race, gender, sexual orientation, or any other identifying factor. Nevertheless, VPD investigators are keenly aware of the unique historical and cultural sensitivities surrounding Indigenous victims and consider those during investigations, both to provide resources for the victim and families, and to aid the investigation.

The VPD recognizes that receiving information about a missing and murdered loved one is vital to begin the healing journey; families need to receive timely information. VPD maintains communication with the family members if required and desired by the family, through Family Information Liaison Units and/or through assigned family liaison roles, as mandated by provincial standards.

Important to investigative success and to provide support for victims and families, VPD investigative sections collaborate with community partnerships. For example, the VPD's Special Investigations Section has developed a partnership with The Treehouse Vancouver Child and Youth Advocacy Centre, a collaborative initiative between the VPD and other stakeholders including but not limited to the Ministry of Justice, Vancouver Aboriginal Child and Family Services Society, and the Vancouver Regional Crown Counsel.

The VPD also supports the Calls for Justice that will necessitate a nationwide response. This includes support for provincial and territorial governments to establish a nationwide emergency number. Furthermore, if a national task force to review and, if required, to reinvestigate each case of all unresolved files of missing and murdered Indigenous women, girls, and 2SLGBTQQA people is established, the VPD will support it and commits to submitting all such cases to the task force.

The VPD recognizes that police have played a role in the historical trauma to Indigenous Peoples; some of the effects of this trauma have been lasting and passed across generations. Acknowledgement of both the history and trauma, as well as the current state, is important for a path forward. All police agencies, including the VPD, have an imperative role to ensure that systemic racism and discriminatory practices do not continue. In addition to the responsibility the criminal justice system has, the VPD understands why the National Inquiry into MMIWG has called for action from other sectors including educators, health and wellness service providers, social workers amongst others – there is a responsibility to act for all.

Developing a positive relationship between the VPD, Indigenous Peoples, and 2SLGBTQQIA people, will remain a priority. The VPD engages in ongoing initiatives with diverse communities, as described in this report. The VPD commits to working towards the safety of Indigenous women, girls, and 2SLGBTQQIA people.

Far too many Indigenous and 2SLGBTQQIA lives have been taken - the VPD commits to *learning from lost lives*.

Reference Guide

The Calls for Justice from the National Inquiry into MMIWG are consolidated and organized in this report within the thematic sections outlined below. The Calls for Justice below are condensed from the original form – please refer to Appendix A for the uncondensed list of Calls for Justice for Police Services and Appendix B for other Calls for Justice that this report addresses.

Acknowledgement		
Call for Justice		Page
9.1	Acknowledge that the historical and current relationship between Indigenous women, girls and 2SLGBTQQIA people and the justice system has been largely defined by colonialism, racism, bias, discrimination and fundamental cultural and societal differences. Acknowledge that, going forward, this relationship must be based on respect and understanding, and must be led by, and in partnerships with, Indigenous women, girls, and 2SLGBTQQIA people.	17
Reviewing Recruiting Practices		
9.3 (i)	Achieve representative Indigenous and gender diversity through specialized recruitment;	23
9.3 (ii)	Indigenous language capacity;	25
9.3 (iii)	Screen recruits for racial, gender, gender identity, and sexual orientation bias; and	27
9.3 (iv)	Include Indigenous community in recruitment process.	28
Strengthening Community Relations		
9.2 (ii)	Engagement and partnerships with Indigenous Peoples, communities, and 2SLGBTQQIA people;	28
9.4 (ii)	Specialized Indigenous policing units to lead community liaison work, relationships building, and crime prevention within and for Indigenous communities;	28
9.7	Partner with front-line organizations that work in service delivery, safety, and harm reduction for Indigenous women, girls and 2SLGBTQQIA people to expand and strengthen police services delivery;	29
9.8	Establish and engage with a civilian Indigenous advisory committee;	32
9.5 (i)	Establish communication protocol with Indigenous communities to inform them	32,

	of policies, practices, and programs that make communities safe;	54
17.14	Police must establish better communication with Métis communities and populations through representative advisory boards; and	33
17.12	Build partnerships with Métis communities, organizations and people to ensure culturally safe access to police services.	36

Culturally Appropriate and Gender-Neutral Policy, Practices, and Procedures

9.2 (i)	Review and revise all policies, practices, and procedures to ensure culturally appropriate and bias free service delivery;	36
9.3 (vi)	Retain Indigenous officers through relevant employment supports, and offer incentives to Indigenous officers to meet their unique needs as Indigenous officers serving Indigenous communities, to ensure retention and overall health and wellness of the service;	38
9.3 (vii)	End the practice of limited-duration posts in all police services, and instead implement a policy regarding remote and rural communities focused on building and sustaining a relationship with the local community and cultures;	38
9.11	Develop and implement guidelines for the policing of the sex industry in consultation with women engaged in the sex industry, and create a specific complaints mechanism about police for those in the sex industry; and	40
18.14	Ensure the safety of 2SLGBTQQIA people in the sex industry.	40

Training: Increasing Cultural Competence & Ensuring Trauma Informed Practices

9.3 (v)	In training, include history of police in the oppression and genocide of Indigenous Peoples, anti-racism and anti-bias training and culture and language training;	40
9.2 (iv)	Train all staff on culturally appropriate and trauma-informed practices, especially when dealing with families if MMIWG and 2SLGBTQQIA people;	41
17.13	Educate police about the unique history and needs of Métis communities; and	43
18.13	Educate police regarding 2SLGBTQQIA people and experiences to address discrimination, especially homophobia and transphobia, in policing.	46

Reviewing Investigative Practices		
18.12	Better investigate crimes against 2SLGBTQQIA people, and ensure accountability for investigations and handling of cases involving 2SLGBTQQIA people;	47
9.5 (iii)	Improve coordinating across government departments and between jurisdictions and Indigenous communities and police services;	49, 51
9.5 (vi)	Establish standardized response times to reports of missing Indigenous persons and women, girls, and 2SLGBTQQIA people experiencing violence, and conduct a regular audit of response times to monitor and provide feedback for improvement.	51
9.5 (ii)	Improve communication between police and families of MMIWG and 2SLGBTQQIA people from first contact with police, with regular communication through investigation;	54
9.5 (i)	Establish communication protocol with Indigenous communities to inform them of polices, practices, programs;	32, 54
9.5 (iv)	Recognize and have protocols to mitigate impacts of high turnover among officers may negatively impact progress of an investigation and relationship with family members;	56
9.9	Establish a national task force to review and, if required, to reinvestigate each case of all unresolved files of missing and murdered Indigenous women, girls and 2SLGBTQQIA people from across Canada;	57, 62
9.10	Submit all unresolved cases of missing or murdered Indigenous women, girls and 2SLGBTQQIA people to the national task force	57, 62
9.4 (i)	Specialized Indigenous policing units are to be staffed with Indigenous investigators, who will be the primary investigative teams and officers overseeing the investigation of cases involving Indigenous women, girls, and 2SLGBTQQIA people;	57
9.6	Establish an independent, special investigation unit for the investigation of incidents of failures to investigate, police misconduct, and all forms of discriminatory practices and mistreatment of Indigenous peoples within their police service; and	58
9.2 (iii)	Ensure appropriate Indigenous and 2SLGBTQQIA representation on police boards and oversight bodies.	59

Inspiring Change: Future Directions for the VPD

9.5 (vii)	Lead the provincial and territorial governments to establish a nationwide emergency number;	62
9.9	Establish a national task force to review and, if required, to reinvestigate each case of all unresolved files of missing and murdered Indigenous women, girls and 2SLGBTQQIA people from across Canada;	56, 62
9.10	Submit all unresolved cases of missing or murdered Indigenous women, girls and 2SLGBTQQIA people to the national task force	57, 62
9.5 (v)	Create a national strategy, through Canadian Association of Chief of police, to ensure consistency in reporting mechanisms; and	63
9.4 (iii)	Specialized Indigenous policing units, within non-Indigenous police services, are to be funded adequately by governments.	63

Introduction

Background

In September 2016, the Canadian Government initiated the National Inquiry into Missing and Murdered Indigenous Women and Girls (MMIWG).^v The federal government and the 13 provincial and territorial governments mandated that this inquiry report on:

- Systemic causes of all forms of violence – including sexual violence – against Indigenous women and girls in Canada, including underlying social, economic, cultural, institutional, and historical causes contributing to the ongoing violence and particular vulnerabilities of Indigenous women and girls in Canada; and
- Institutional policies and practices implemented in response to violence experienced by Indigenous women and girls in Canada, including the identification and examination of practices that have been effective in reducing violence and increasing safety.

Family members and survivors of violence who wished to participate in the Inquiry could do so and share their testimony, as part of the Truth-Gathering Process. Other components of the Truth-Gathering Process included Institutional Hearings regarding the systemic causes of institutional violence and institutional responses. Expert and Knowledge Keeper hearings involved Elders, academics, legal experts, among others, who provided insight on systemic causes of violence and offered solutions. In addition, groups that represent non-government organizations, Indigenous women's groups, civil societies, and some police services participated in the Inquiry.

The MMIWG Inquiry encompassed the voices from:

- over 2,380 individuals who participated in the National Inquiry into MMIWG;
- 819 people created artistic expressions through the MMIWG Inquiry's Legacy Archive;
- almost 750 people shared by providing statements;
- a total of 486 family members and survivors shared their experiences and recommendations at 15 Community Hearings;
- over 270 family members and survivors shared their stories in 147 private, or in-camera, sessions; and
- another 84 Expert Witnesses, Elders, and Knowledge Keepers, front-line workers, and officials provided testimony in nine Institutional and Expert and Knowledge Keeper Hearings.

VPD Participation in the National Inquiry into MMIWG

Recognizing the importance and in support of the National Inquiry into MMIWG, the Vancouver Police Department (VPD) participated in the Inquiry by collaborating in working groups, attending meetings with the City of Vancouver (CoV), and conducting a comprehensive file review, as described in the following sections. In addition, upon the release of the National Inquiry's Interim Report, the VPD prepared *Breaking Barriers and Building Bridges*, a report that informed VPD's submission to the National Inquiry.

Working Meeting to Support National Inquiry into MMIWG

On April 25, 2017, the CoV hosted a Working Group Meeting to support the National Inquiry into MMIWG. The goal of this meeting was to develop a support plan for the Inquiry. Over 50 participants attended the full-day event to better understand how families involved with the MMIWG Inquiry could be more fully supported in Vancouver. The VPD had several representatives participate in this meeting including a Deputy Chief Constable and police officers from the VPD Missing Persons Unit (MPU), the VPD Indigenous Liaison Officer, and the VPD Sex Industry Liaison Officer.

During facilitated group discussions, participants were asked through a visioning process to reflect upon what families might need throughout the MMIWG Inquiry in Vancouver. The event included facilitated discussions, group discussions using a strengths-based approach to strategic planning, and dialogue around areas of need.

British Columbia Association of Chiefs of Police MWCI Subcommittee

The VPD also supported the Inquiry by participating on a committee to ensure dialogue with other police departments. The British Columbia Association of Chiefs of Police (BCACP) Missing Women Commission of Inquiry (MWCI) special purpose committee was established to provide strategic advice on how to facilitate coordinated actions on MWCI police-related recommendations.^{vi} This committee, working on completing the MWCI recommendations, engaged as a subcommittee when the National Inquiry into MMIWG was announced. The subcommittee continues to meet and review information from the community and provincial government, and will incorporate the recommendations from the National Inquiry into MMIWG.

Review of MMIWG Cases

The VPD fulfilled all requests received from the National Inquiry into MMIWG. The VPD received four requests for information on 39 Indigenous women and files related to them ranging from 1983 to 2016. Some requests, believed to have originated from Vancouver, in fact did not. In support of the Inquiry, the VPD provided information on the original reporting agency and a synopsis of these files. The files that were VPD cases were located and disclosed to the National Inquiry.

As part of the VPD's submission for the National Inquiry into MMIWG, a file review process was completed in accordance with the Province of British Columbia (B.C.) Police Services guidelines. In addition, as part of VPD's commitment to the National Inquiry into MMIWG,

questions and data requests were tracked in accordance with national reporting standards. This process was adopted by municipal agencies in B.C.

Key Findings from the National Inquiry into MMIWG

On June 3, 2019, the final report for the National Inquiry into MMIWG was released to the public. The report found that there are 231 steps that are required by governments and Canadians, to end the genocide against Indigenous women and girls. These steps or “Calls for Justice” are imperative, and not optional, according to the Inquiry’s final report. Some Calls for Justice are directed at federal, provincial, and Indigenous governments, while others are directed at media, educators, correctional services, and police, among other sectors. Finally, the findings call on all Canadians to have a role in creating change.

An important element of the Inquiry was to identify how police practices can assist in reducing the violence, death, and unexplained disappearances of Indigenous women and girls along with members of the 2SLGBTQQIA community. The MMIWG Inquiry identifies 28 Calls for Police Services (see Appendix A for full list of all Calls for Police Services), which are examined in this report. An additional six Calls for Justice, outside of those specific to police services, yet nonetheless important for police to review, are also addressed in this report (see Appendix B).

In general, expressions in the review included but were not limited to:

- an overall lack of trust in police;
- fear of reporting crimes to the police;
- a desire for improved relationships between police services and Indigenous communities;
- increased Indigenous representation in police services;
- designated investigators, police units, protocols or regional offices to address violence against Indigenous women;
- a need to determine how best to protect Indigenous women involved in survival sex work;
- calls for improved cooperation between police departments;
- improved communication between the police and Indigenous families;
- greater awareness of 2SLGBTQQIA issues, including the history and culturally-specific solutions for 2SLGBTQQIA people;
- increased knowledge of Indigenous issues and distinctive realities, cultural competency and practical supports for Indigenous families;
- more immediate, proactive, and thorough investigations into the deaths and disappearances of Indigenous women, girls, and 2SLGBTQQIA people; and

- more responsive, transparent, and accountable policing (including comprehensive and independent police oversight).

Receiving Voices: The VPD’s Acknowledgement of the Findings

The VPD trusts the power of voices, and accepts those voices heard by the Inquiry into MMIWG. Indigenous women, girls, and 2SLGBTQQIA people have the right to feel safe and be protected; their human rights, like all individuals, must be upheld. Unfortunately, a truth not uncommon, violence permeates the lives of many of these individuals and many lives have been lost due to this violence. The VPD acknowledges the courage of the survivors and families and recognizes that all police services, including the VPD, have a role to play in ending the violence, death, and unexplained disappearances of Indigenous women and girls and 2SLGBTQQIA people.

Canada has a disturbing history of systemic discrimination against Indigenous Peoples – this has been extensively researched and documented. Historically, the legal system, correctional institutions, and the police have administered policies and practices in ways that discriminate against women, Indigenous Peoples, and other racialized or marginalized groups. When coupled with discriminatory government policies, the generational effects of colonization, displacement, and the Residential School system have disadvantaged and impoverished Indigenous Peoples. The VPD recognizes that this discrimination has led to substance use, poverty, homelessness, and overrepresentation of Indigenous people in the criminal justice system. We have a responsibility to acknowledge that as a society, we have failed Indigenous Peoples, and a responsibility to ensure that systemic racism and discriminatory practices do not continue.

Developing a positive relationship between the VPD and Indigenous Peoples will remain a priority. One strategic goal in the 2017-2021 VPD Strategic Plan is to *build relationships, understanding, and trust with diverse communities*.^{vii} Accordingly, the VPD engages in ongoing initiatives with Indigenous Peoples, as described in this report. However, in light of the findings in the National Inquiry into MMIWG, the VPD accepts that this work needs to be expanded and further solidified; the VPD will continue to listen and act to work towards safety for everyone, including all Indigenous women and girls and 2SLGBTQQIA people. The VPD recognizes that building relationships must be based on respect and understanding, and led by and in partnerships with Indigenous communities and 2SLGBTQQIA people.¹

¹ *MMIWG Call for Justice 9.1: We call upon all police services and justice system actors to acknowledge that the historical and current relationship between Indigenous women, girls, and 2SLGBTQQIA people and the justice system has been largely defined by colonialism, racism, bias, discrimination, and fundamental cultural and societal differences. We further call upon all police services and justice system actors to acknowledge that, going forward, this relationship must be based on respect and understanding, and must be led by, and in partnerships with, Indigenous women, girls, and 2SLGBTQQIA people.*

IN LIGHT OF THE FINDINGS IN THE NATIONAL INQUIRY INTO MMIWG...THE VPD WILL CONTINUE TO LISTEN AND ACT TO WORK TOWARDS SAFETY FOR EVERYONE, INCLUDING ALL INDIGENOUS WOMEN AND GIRLS AND 2SLGBTQQIA PEOPLE.

Embracing Diversity: The VPD's Community Engagement Philosophy

The VPD embraces Vancouver's blend of diverse cultural groups, ethnicities, and religions from all over the world, and Indigenous communities in Canada. The VPD ensures active engagement with the culturally diverse communities it serves; this engagement has been in place for many years and will continue. The VPD's Diversity, Inclusion, and Indigenous Relations Section (DIIRS), established over 20 years ago, has an over-arching goal of building trust and confidence with Indigenous, and other vulnerable communities, in Vancouver.

DIIRS engages actively with the community, including participation in a variety of Indigenous community events. These events promote cultural awareness, safety, and help build trust in police. VPD members participate in these events and the VPD is often involved in organizing and/or assisting to secure funding. Examples include but are not limited to:

- The annual Women's Memorial March;
- The annual Walk a Mile in Her Shoes;
- The annual Canoe Waking Ceremony;
- The annual Pulling Together Canoe Journey;
- The annual Tribal Journey;
- Orange Shirt Day;
- National Indigenous Peoples Day; and
- National Aboriginal Veterans Day.

In addition, to bridge gaps between police and the community, the VPD has established several full-time community liaison positions. These include the following full-time positions: an LGBTQ2S+ Liaison Officer, a Sex Industry Liaison Officer, a Homeless Outreach and Supportive Housing Coordinator, a dedicated police officer at the Vancouver Aboriginal Community Policing Centre, a Musqueam Liaison Officer, an Indigenous Liaison Officer, and an Indigenous Liaison and Protocol Officer. These positions, described throughout this report, are a vital component of the VPD's strategic mission to engage and build trust with the community.^{viii} Further, the MWCI report provided positive feedback on the work carried out by VPD liaison officers.^{ix}

Engaging Indigenous Women and Girls

Scars in Spirits and Souls

With roots in a matriarchal society, Indigenous women in Canada were esteemed for their spiritual and mental strength; money and power flowed down through mothers. When European colonists ratified legislation reflecting their patriarchal views, “women were not viewed as *persons*; recognizing only indigenous men as leaders of their communities”.^x However, with racist and sexist views, European colonial ideology, repressed and controlled all Indigenous Peoples in Canada, resulting in significant impacts.^{xi}

A primary example of colonial government policies and forced assimilation is the Residential School system. Indigenous children were removed, with force, from their homes and communities to attend church administrated Residential Schools. The purpose of the Residential Schools was to remove Indigenous culture from children and replace it with European colonial culture. Children were treated in horrifying ways; with physical, sexual, and psychological abuse that left them scarred and impacted generations. For example, the trauma from Residential Schools left many Indigenous women suffering from lasting psychological effects, substance use disorders, and a suicide rate that is considerably higher than non-Indigenous people in Canada.^{xii}

I'm ... part of the residential school. I'm part of the healing process.... I want people to understand that wounds - open wounds, they - they don't heal, they just get scars. And believe me, I've got enough of my scars, not only on my outside, but in my spirit, in my heart, in my soul.

Reclaiming Power and Place: The Final Report of the National Inquiry into MMIWG (2019)

The National Inquiry into MMIWG substantiates the troubling history of Indigenous Peoples and how this has led to unbalanced interactions between police and Indigenous Peoples, including notably high rates of domestic violence. For example, Indigenous women experience higher rates of violent victimization than non-Indigenous women do, with domestic violence being the most pervasive form of victimization experienced.^{xiii,xiv,xv} The 2014 Statistics Canada General Social Survey (GSS) found that 10% of Indigenous women self-reported having been assaulted by a current or former spouse within the last five years compared with 3% of their non-Indigenous counterparts.^{xvi}

Furthermore, the GSS survey has shown that the rate for Indigenous women who reported sexual assault was triple that of non-Indigenous women (11.3% compared to 3.5%). Additionally, in 2018, Indigenous women accounted for 27% of female homicide victims in Canada while only accounting for 2% of the population.^{xvii,xviii}

This unsettling trend with Indigenous women is a concern when examining Vancouver-specific data as well. For example, over a three-year period (2016-2018), 6,671 women were reported as victims in violent incidents in Vancouver. Indigenous women, representing only 2% of the female population in Vancouver, were victims in these incidents 20% (1,333) of the time. Within this same period (2016-2018), Indigenous females comprised 28% of all women reported missing (and 11% of all missing people in the three-year span).

The VPD is aware of the history and intergenerational trauma experienced by Indigenous women, and realizes the effects of colonialization on Indigenous women. The VPD has developed specific programming, in consultation with the Indigenous community, tailored to prevent further violence against Indigenous women and has dedicated positions and programming to help ensure the safety of Indigenous women and girls.

Sex Industry Liaison Officer

Indigenous women have been found to be significantly overrepresented as sex industry workers compared to non-Indigenous women.^{xix,xx} A two-year research study focusing on 181 women involved in Vancouver's sex trade found that 31% of the women were Indigenous.^{xxi} In another study, 96% of the Indigenous women involved in the sex trade reported childhood sexual abuse, compared to 82% of the non-Indigenous women.^{xxii}

The Sex Industry Liaison Officer role has expanded in the community, moving beyond enforcement and into advocacy. This is a proven resource for many Indigenous women, including many who live and work in the Downtown Eastside (DTES).

The duties of this position include but are not limited to:

- accompaniment to follow up appointments (e.g., obtaining audio/video/written statements, victim services, medical appointments);
- transportation to out-of-town court commitments (e.g., Crown Counsel interviews, courtroom preparation, and testifying in court);
- assisting with placement in detox, recovery;
- obtaining transitional housing and second stage housing; and
- connecting with community programs that include housing, mental health, employment, and personal development.

The Sex Industry Liaison Officer works closely with the Women's Information Safe House (WISH) Drop-in Centre where connections are made with Indigenous women of varying ages and backgrounds. As a result of the officer's presence in the community and availability outside of regular office hours, the Sex Industry Liaison Officer assists in a wide range of ways including organizing violence prevention and safety workshops. For example, the Sex Industry Liaison Officer has participated in the Aboriginal Cultural and Creativity Program, which hosts between 8 to 12 participants who are all Indigenous sex workers. This program is held two times per year and includes a ceremonial sage-picking event

hosted by a First Nation community in the Merritt Nicola Valley region and the Conayt Friendship Centre. In addition to VPD participating in picking this medicine, transportation is provided for up to nine women who would otherwise be unable to attend. Approximately 80 other Indigenous women generally attend the event.

Partnerships are essential to the success of the work done by the Sex Industry Liaison Officer. Community partners include WISH, the Prostitution Alternatives Counselling and Education (PACE), First United Church, Carnegie Outreach, Vancouver Coastal Health Intensive Case Management Team, Downtown Community Health Clinic, DTES residences, detox, recovery and transition homes and various shelters (e.g., Triage, Al Mitchell Place, Yukon, and the Evelyn Saller Centre).

The Sex Industry Liaison Officer also initiated and operates the ID4ME program in the DTES. Many community members did not have identification and faced difficulty accessing better housing, bus or airplane travel, and banking as a result. The Sex Industry Liaison Officer secured funding from the Vancouver Police Foundation to help community members obtain government-issued photo ID.

Frontline Officers: Ongoing Engagement with Marginalized Women

As a large proportion of marginalized Indigenous women reside in the DTES and surrounding areas, frontline patrol officers assigned to those areas actively take part in a number of initiatives to support this group. For instance, VPD's patrol members routinely work alongside multiple community partners to better the lives of marginalized Indigenous women, such as advocating for better housing, working out next steps for recovery and treatment, and connecting them with family members. Several patrol officers are active members of the SisterWatch Program; a program designed to learn from and support marginalized Indigenous women.

Frontline members also routinely take part in Indigenous-based ceremonies and events throughout the year. Finally, one patrol officer (from the Beat Enforcement Team) has been assigned as a liaison with the Downtown Eastside Women's Centre (DEWC) and works closely with the VPD's Sex industry Liaison Officer.

SisterWatch

Women in Vancouver's DTES are particularly vulnerable to violence, injury, and death. Crime statistics in the DTES have never truly reflected the danger facing the women who live there. Whether the cause is fear of reprisals or general distrust of authority, women have traditionally been reluctant to report crimes against themselves and others.

Following the tragic death of Ashley Machiskinic, the SisterWatch Project began in December 2010 with regular Town Hall meetings consisting of members of the DTES community and VPD members. These members include the Chief Constable, members of the VPD Executive, senior management, as well as frontline officers, who form the SisterWatch committee. SisterWatch meetings are co-chaired by the VPD Chief Constable

and an Elder from the community. The guiding principle of this committee is to provide a safe space for residents of the DTES to voice their concerns and to keep community members informed of police progress concerning investigations, and any advances in community safety.

In addition to the Town Hall meetings, the SisterWatch Project also established the SisterWatch tip line, a special telephone hotline that is staffed by civilian women trained to assist callers who are concerned about their safety. This tip line encourages community members to come forward with information regarding crimes of gender violence, the death of Ashley Machiskinic, or any other safety concerns. Furthermore, a SisterWatch reward of \$10,000 was established for information that proves how and why Ms. Machiskinic fell to her death from a window of a hotel on Hastings Street on September 15, 2010. To date, despite repeated calls for public assistance, no information has come forward.

In order to raise awareness for the SisterWatch Project, special events are held annually to promote the ongoing activities and functions of the SisterWatch Committee and the SisterWatch tip line. As well as attending and hosting events promoting awareness, the SisterWatch Committee also participates in several community and cultural events.

Arising from a recommendation in the MWCI, an evaluation of SisterWatch was completed in 2015, which indicates that SisterWatch has had an optimistic impact on the VPD, the women and Indigenous organizations in the DTES, and their relationships with each other.^{xxiii} As stated in the evaluation, “Is it worth the work involved? There is clear evidence that SisterWatch is worth it.” Further, the enhanced relationships and developing trust has contributed to important investigations and judicially successful cases; notably, these cases would not have come to light without SisterWatch. As outlined in the evaluation, the “capacity of women’s advocates to connect with the leadership of the VPD has had a positive impact on the way in which conflict is addressed between those involved in the committee and therefore how conflict is resolved. This, in turn, has opened the door to collaboration and mutual support...”

VPD Review of Calls for Justice

Reviewing Recruiting Practices

Consistently ranked as one of the most livable major cities in the world, Vancouver attracts diversity from across the globe. A high population density within a large metropolitan area results in significant diversity among the citizens who live in, work in, and visit the CoV. Hiring officers to police such a city requires qualified candidates reflective of the community.

VPD's Recruiting Unit is tasked with hiring the most qualified applicants through outreach, community engagement, and other strategies to connect with communities, individuals, and groups. The VPD Recruiting Unit upholds a philosophy of inclusion.

The following sections outline a review of VPD recruiting practices based on recommendations from the National Inquiry into MMIWG that speak to hiring police officers. This includes the recommendation in the Inquiry of achieving Indigenous and gender diversity through specialized recruitment.²

Promoting Ethnic Diversity

The VPD is committed to diversity in the workplace, with the goal of proportionately representing the citizens of Vancouver. Vancouver residents self-identify as a myriad of ethnicities as listed within the 2016 Statistics Canada census.^{xxiv} The VPD ensures that it reaches out to ethnic communities in their recruitment initiatives to hire personnel that is reflective of Vancouver's population.

Specifically, through recruitment initiatives that place value on diversity, VPD police officers represent numerous ethnic backgrounds with over a quarter of all VPD police officers (26%) being visible minorities. The VPD currently has 27 police officers that are Indigenous, comprising almost 2% of all police officers at the VPD, and representative of the Indigenous population in Vancouver.^{xxv} In addition, three Special Municipal Constables (SMC) (Jail Guards, Traffic Authority, and Community Safety Personnel), and seven civilian members are Indigenous. Diversity in recruiting efforts remains a priority, for example, 3% of the recruits hired in the 2018-2019 year were Indigenous, with 26% of these recruits representing other visible minorities.

Programming and Initiatives to Recruit Indigenous Peoples and 2SLGBTQQIA People

The VPD Recruiting Unit works closely with VPD's DIIRS on efforts to engage communities including the 2SLGBTQQIA and Indigenous communities. For example, the Recruiting Unit participates in programming and events to recruit members of the Indigenous community. Select examples include the following:

² *MMIWG Call for Justice 9.3 (i): Achieve representative First Nations, Inuit, and Métis diversity and gender diversity within all police services through intensive and specialized recruitment across Canada.*

Indigenous Cadet Program

Implemented in 2007 and funded by the Aboriginal Community Career Employment Services Society, the Indigenous Cadet Program (ICP) program is intended to mentor and coach Indigenous youth aged 19 to 31 years who demonstrate a desire to become police officers with the VPD. This unique summer program is open strictly to youth of Indigenous ancestry. During their VPD internship, the Cadets work with Fleet Services, ride along with members from various sections, engage in cultural activities, and participate in the annual Pulling Together Canoe Journey. Individuals that have completed the ICP have been hired as VPD police officers, SMCs, and civilian staff. VPD staff who completed the ICP program prior to being hired have since become mentors to new cadets.

Gathering Our Voices Indigenous Youth Conference

The Recruiting Unit attends the annual Gathering our Voices (GOV) Indigenous conference hosted by the BC Association of Aboriginal Friendship Centres. This large event attracts thousands of Indigenous youth participants along with their chaperones and other guests of honour. The GOV has provided the VPD Recruiting Unit with an excellent opportunity to promote career opportunities within the VPD.

Hoobiyee (Nisga'a New Year)

The Recruiting Unit attends the annual Vancouver Hoobiyee Festival, a celebration of the waxing crescent moon, hosted by the Nisga'a Ts'amiks Vancouver Society. This event draws thousands of Indigenous visitors every year, and has provided the VPD Recruiting Unit an opportunity to make positive connections with members of the Indigenous community.

Haida Gwaii

In 2018, Executive members and recruiters of the VPD Recruiting Unit made two visits to Haida Gwaii. They connected with local youth through a presentation at the Gidgalang Kuuyas Naay Secondary and a community open house at the Skidegate Recreational Centre and Band Council office. Recruiters also had discussions with the Chief of the Band and a number of executive members about innovative recruiting initiatives to involve their young Indigenous members in VPD youth programs and the ICP.

National Indigenous Peoples Day

National Indigenous Peoples Day is celebrated annually across Canada on June 21, and in Vancouver it is a full day of events, activities, and performances. The VPD Recruiting Unit attends this annual event hosted by the Vancouver Aboriginal Friendship Centre Society at Trout Lake. This celebration brings together a large population of the Vancouver Indigenous community, including First Nations, Métis, and Inuit People.

Indigenous Link

The VPD Recruiting Unit recently formed a partnership with Indigenous Link, an online employment search portal that reaches out to an Indigenous audience on a national level. With a virtual presence on this career website, the VPD Recruiting Unit has provided a

unique opportunity for the Indigenous community to connect with the VPD and engage VPD Recruiters on career opportunities with the VPD.

2SLGBTQQIA

Ensuring diverse communities are represented, the VPD Recruiting Unit created a dedicated information session for the 2SLGBTQQIA community. To plan the event, members of the Recruiting Unit were involved in ongoing discussions with VPD's DIIRS, as well as VPD members from the 2SLGBTQQIA community. The well-attended event was held on August 13, 2019 at the Roundhouse Community Arts and Recreation Centre. The evening included a presentation about the hiring process. Additionally, compelling speakers from the VPD discussed their experiences with the VPD, and resulted in several prospective applications from the VPD's recruiting perspective. This information was also made available through social media via Twitter, which provided prospective applicants with another avenue to reach out to the VPD Recruiting Unit and ask questions in real-time.

Bridging the Gap: Gender Diversity

Gender balance in recruitment is a priority. Currently, females represent 26.6% of all police officers (73.4% are males) and females represent 53.05% of all VPD civilian staff (46.95% are males).

The VPD remains dedicated to ensuring gender diversity through ongoing outreach efforts. For example, in 2018, the VPD Recruiting Unit and multiple sections from the VPD attended an event celebrating female empowerment in Abbotsford. The effectiveness of the targeted female recruitment outreach is consistently reflected in the composition of the recruit classes graduating from the Justice Institute of British Columbia (JIBC). On average, approximately 40% of the VPD recruits in each JIBC class are women.

Respect for equity, diversity, and inclusion is of utmost importance to the VPD and communications are being updated to ensure gender diverse options are provided as a selection criteria when identifying gender in internal and external correspondence.

A Foundation of Culture: Preserving and Revitalizing Indigenous Languages

In 2019, the UN General Assembly declared 2019 as the *International Year of Indigenous Languages*. This was followed by the federal government announcement that the *Indigenous Languages Act* received Royal Assent.^{xxvi} VPD recognizes that language is not just a tool for communication; it is the foundation of culture. Stories, histories, and connections are contained in languages. For these reasons, the VPD considers the continuity of Indigenous languages, regardless of where they are practiced – in urban or rural areas, as important and supports the MMIWG Inquiry's recommendation on Indigenous language capacity within police services.³

³ *MMIWG Call for Justice 9.3 (ii): Ensure mandatory Indigenous language capacity within police services.*

For this reason, VPD's DIIRS has used their newsletter to educate VPD personnel on Indigenous language and culture, including the Coast Salish languages. Furthermore, VPD's Indigenous Liaison Officer is currently learning Halmokomelem, a common Coast Salish language.

In addition, the VPD offers an incentive system after 10, 15, and 20 years of service for the Constable rank and within the Sergeant and Staff Sergeant ranks. This incentive program includes specific criteria which when met can be considered as part of this incentive. VPD members have the option of selecting an Indigenous language course and obtain an increment for doing so.

Language Diversity in the VPD

In the ranks of the VPD are police officers from different ethnic backgrounds. These individuals often bring with them unique skills including second languages. The VPD employs officers that speak over 50 different languages. The VPD encourages applicants with diverse language skills to apply to the VPD. Indeed, as recruiting from diverse communities increases, the VPD expects the language diversity to also increase.

The VPD's Human Resources section maintains a list of sworn and civilian members who speak second languages, the proficiency in that language, and whether the language is read, written, and/or spoken. This list is available to all officers in situations where language barriers may exist. Alternatively, police officers may also use external resources such as the Chinatown Community Police Office or the Multi-Lingual Orientation Service Association for Immigrant Communities. These services are made available to all officers, and outlined in departmental policy, to reduce communication barriers with citizens.

Testing for Bias in Police Recruits

To hire police officers that treat citizens with fairness and equality, the VPD Recruiting Unit assesses biases that police recruits might have as part of the hiring process. Once applicants pass written and physical testing, they are invited to an intake interview that is performed by a Constable from the Recruiting Unit. The intake interview includes reviewing the integrity and lifestyle questionnaire and personal history of the applicants. In addition, it assesses the applicants' integrity, problem-solving abilities, respect for diversity, community service orientation, self-initiative, and acceptance of responsibility. These traits are relevant in determining biases that do not meet VPD standards, thus rejecting applicants from being hired. Furthermore, three specific questions target biases in the intake interview and are revisited during the polygraph phase and again in the Sergeant's Interview (with follow-up questions, as required).

As applicants approach the polygraph stage of the recruiting process, they have already passed through a significant part of the selection process including the intake interview, and psychological testing. The polygraph testing is an integral part of the VPD selection process and is the next step that incorporates screening for biases. This step ensures that applicants are honest and forthright, especially around at-risk behaviours that lead to

integrity issues. Often, information withheld from the previous stages is determined during polygraph testing.

Further along the application process is another interview conducted by a Sergeant in the Recruiting Unit. This interview consists of a comprehensive review of the applicant's file and assessment of the candidate's suitability for proceeding to the background stage.

Prior to the final approval process, a thorough and extensive background investigation is conducted. More specifically, 15 references are interviewed to provide more context and information on the applicant. Importantly, reference checks are also conducted with people not on the reference list supplied by the applicant. The background interview includes questions on the applicant's character, employment history, work ethic, and personality traits. In order to further assess biases, the references are asked if they have: "ever observed or heard the applicant make any overt comments that may suggest a prejudice or discriminatory behaviour? To what extent and concerning which group?" At this point, references will have the opportunity to disclose whether they think an applicant has shown any biased tendencies.

The VPD agrees with the MMIWG recommendation to assess biases in recruits and has protocols in place to ensure that applicants with biases are not hired by the VPD.⁴ The VPD recruiting process offers a robust mechanism, with triangulation, to ensure screening of recruits for racial, gender, gender identity, and sexual orientation bias.

Indigenous Perspective in Hiring VPD Officers

To provide an Indigenous lens, the VPD Recruiting Unit currently has one full-time detective who is of Métis descent. This officer is involved in several aspects of the recruiting process for the SMC and police officer positions. This includes attending outreach events, screening incoming applications, interviewing applicants, and conducting background investigations.

This police officer is also the coordinator of the ICP and is responsible for program promotion and recruitment. Throughout the program, he assists with mentoring the cadets and monitoring their development. At the conclusion of the program, he assesses their competitiveness for other positions in the VPD and assists cadets with the application process for those opportunities.

In collaboration with the Indigenous Advisory Committee, the VPD Training and Recruiting Section will undertake a review of their Indigenous outreach efforts and host information sessions with Indigenous communities in an effort to attract qualified candidates. This will

⁴ *MMIWG Call for Justice 9.3 (iii): Ensure that screening of recruits includes testing for racial, gender, gender identity, and sexual orientation bias.*

continue working towards the recommendation in the National Inquiry into MMIWG to include Indigenous community members in the recruitment of police officers.⁵

Strengthening Community Relations

For more than 20 years, the VPD has had a dedicated diversity section (DIIRS) that directly works with populations experiencing significant public safety issues or who are distrusting of the police. Cultural, economic, ethnic, sexual, sexual expression, racial, religious, marginalizing, or other distinguishing characteristics may define these populations. Therefore, the primary goal of DIIRS is to improve outcomes applicable to populations with key issues such as overrepresentation in the criminal justice system, under-reporting of crimes, perceptions of fear and safety, and lack of confidence in the police. This specialized section, with specialized roles, meets the recommendations in the National Inquiry into MMIWG to lead the efforts to engage the Indigenous community (as described below).⁶

VPD's DIIRS provides outreach, develops partnerships, and maintains relationships with various communities and interest groups. Members in this Section act as resources for frontline members who have questions surrounding specific individuals, community resources, or culturally sensitive situations. A total of seven sworn officers and two civilian members are assigned to DIIRS. The Inspector in charge of the DIIRS is responsible for the management and coordination of all section activities and reports directly to the Chief. The Inspector also provides leadership, support, and strategic advice to other VPD sections regarding diverse communities in Vancouver.

Strategies used by DIIRS to address safety issues and cultural factors include supporting the VPD Recruiting Unit to ensure the VPD has a reflective workforce. The Section also works with VPD's Training Unit and other VPD units to provide professional development to frontline members. Relationships are developed with communities at both the management and frontline levels. Outreach is also accomplished through local media and participation in community forums and workshops. To address safety issues, members regularly meet with representatives from diverse communities and provide advice, suggestions, and recommendations.

⁵ *MMIWG Call for Justice 9.3 (iv): Include the Indigenous community in the recruitment and hiring committees/process.*

⁶ *MMIWG Call for Justice 9.2 (ii) Establish engagement and partnerships with Indigenous Peoples, communities, and leadership, including women, Elders, youth, and 2SLGBTQIA people from the respective territories and who are residents within a police service's jurisdiction; and*

MMIWG Call for Justice 9.4 (ii): Specialized Indigenous policing units are to lead the services' efforts in community liaison work, community relationship building, and community crime-prevention programs within and for Indigenous communities.

The VPD also has several full-time positions embedded in Indigenous communities and engaged in specific liaison initiatives, as described in the following sections. These positions collaborate with frontline organizations that work to heighten the safety for Indigenous women, girls, and 2SLGBTQIA people, in line with the MMIWG recommendation to do so.⁷

Furthermore, the B.C. Provincial Policing Standards (BCPPS) on Missing Person Investigations require that police agencies have protocols in place with the Ministry of Children and Family Development (MCFD) and Delegated Aboriginal Agencies (an agency that has established a delegation agreement with the Provincial Director of Child Welfare to undertake administration of all or parts of the *Child, Family, and Community Service Act*).^{xxvii} These protocols are to facilitate missing person investigations involving youth that are in local group homes or foster care. According to these standards, police agencies in B.C. are to have access to specified resources to obtain advice or assistance during a missing person investigation (e.g., an Indigenous liaison officer).

Neighbourhood Police Officer for the Vancouver Aboriginal Community Policing Centre
To address social justice issues, improve safety for Indigenous Peoples, and improve the relationship with the VPD through education, awareness, and open dialogue, Vancouver's Indigenous community founded the Vancouver Aboriginal Community Policing Centre (VACPC). As a non-profit organization, VACPC is governed by a Board of Directors elected by members of Vancouver's Indigenous community. In working with the Indigenous community, local organizations, and all levels of government, the VACPC is better able to provide services, programs and resources to help maintain the security and safety of Indigenous communities in Vancouver. The VACPC provides a safe place where community members can gather to identify, discuss, and address safety issues in Vancouver. The programs offered to the Indigenous community focus on social development, healing, life skills, support, and counseling, through a supportive environment.

As a conduit to VACPC, the VPD maintains a dedicated Neighbourhood Police Officer (NPO) working with the centre to support staff and community members accessing the VACPC. The NPO plays an integral part in fulfilling the mandate of the VACPC, providing support and representing the VPD. The NPO works with the Indigenous population to communicate their needs and concerns to the VPD. Specifically, this NPO is in a unique position to assist Indigenous Peoples when they file a missing person report, and will often assist individuals when liaising with the investigative units. The NPO works to achieve mutual understanding on community police issues, and serves as the primary contact for multiple Indigenous and non-Indigenous agencies in Vancouver.

⁷ *MMIWG Call for Justice 9.7: We call upon all police services to partner with front-line organizations that work in service delivery, safety, and harm reduction for Indigenous women, girls, and 2SLGBTQIA people to expand and strengthen police services delivery.*

Indigenous Liaison Officer

The VPD has a dedicated Indigenous Liaison Officer who works with Vancouver's urban Indigenous population to communicate their needs and concerns to the VPD. The aim is to achieve mutual understanding and/or alignment on community and police issues.

The Indigenous Liaison Officer also works closely with community partners to provide healthy activities for high-risk Indigenous youth such as hiking, learning opportunities, and cultural outings. Many Indigenous youth have developed a trusting relationship with the Indigenous Liaison Officer through participation in different programs. The Indigenous Liaison Officer works one-on-one with Indigenous youth, and serves as a positive adult role model in the lives of many Indigenous youth, including current or former gang members.

Effective community work requires face-to-face coordination with someone in a position of trust and respect. The Indigenous Liaison Officer fulfills that role and also acts as a resource for frontline patrol members who may have questions about specific individuals, resources available in the community, or how best to approach situations in a culturally sensitive manner. The Indigenous Liaison Officer also provides frontline officers with assistance, monitors Indigenous gang activity in Vancouver, and represents the VPD at many community functions and meetings.

Musqueam Liaison Officer

The Musqueam Indian Band (MIB) is located in the southwest area of Vancouver. There is a service agreement between MIB and the CoV, where the City provides municipal services such as policing to the Musqueam area. The VPD has a dedicated Musqueam Liaison Officer who is responsible for this community and works closely with the Band administration.

The Musqueam Liaison Officer works with the people of the Musqueam nation and provides culturally sensitive police services. This includes partaking in speaking engagements that bring awareness to the history of the Indigenous Peoples of Canada, as well as participation in activities to improve police relations with the MIB.

The Musqueam Liaison Officer participated in the "Circle of Understanding" cultural competency training, with police recruits at the JIBC and takes part in events such as the UBC Circle of Juvenile Justice (2012) and the Brown Bag Lunch Series (JIBC, 2012). The Musqueam Liaison Officer also hosts university classes on a tour of the Musqueam lands as a way to share the history of the nation and region, while highlighting the positive policing that occurs in the community. Furthermore, the Musqueam Liaison Officer regularly engages in activities that take place in the Musqueam area including celebratory (e.g., graduations) or otherwise (e.g., funerals). More recently, the Musqueam Liaison Officer has been developing relationships with the Elders and youth through programming and safety talks. In the spring of 2019, the Musqueam Liaison Officer attended the GOV conference in Port Alberni with Musqueam youth.

The Musqueam Liaison Officer endeavours to build strong relationships with the Musqueam community. All MIB members have access to the liaison's cell phone number and a timely

call back is received from the officer regardless of the time of day. The Musqueam Liaison Officer develops knowledge of the history of the families in Musqueam, and endeavors to maintain positive relationships with those families.

The Musqueam Liaison Officer works with the MIB to improve safety in community. One example is the advent of a “Community Safety Committee” which mobilizes in the event of a community member going missing. The Musqueam Liaison Officer works closely with this community as liaison to other VPD specialty sections. This committee is made up of the managers from the critical departments of the MIB, such as Health, Safety and Security, Social Development, Drug and Alcohol Prevention, and Finance. The Community Safety Committee often acts on behalf of the family, and reaches out to the VPD MPU to coordinate efforts through the Musqueam Liaison member.

LGBTQ2S+ Liaison Officer

The LGBTQ2S+ Liaison Officer is responsible for working with various interest groups in the 2SLGBTQQIA community. This officer also works with VPD members to increase organizational awareness and facilitate resolution of issues affecting all members of the 2SLGBTQQIA community.

The LGBTQ2S+ Liaison Officer is actively involved in committee work that furthers departmental and community interests. The core functions of this position include ongoing cultural training of VPD personnel regarding 2SLGBTQQIA communities. This liaison supports other police departments with regards to 2SLGBTQQIA issues, and is working on the implementation of the CoV Trans*, Gender Variant, and Two-Spirited Inclusion recommendations.

The LGBTQ2S+ Liaison Officer works with 2SLGBTQQIA community groups and organizations (youth groups – senior groups – sex worker groups – trans groups and individuals) and has oversight of the Safe Place Program. This program is an initiative that distributes rainbow decals to businesses, schools, and other locations, to provide a safe refuge for members of the 2SLGBTQQIA community, who feel their safety is threatened. Other work includes ongoing training of community groups and organizations that serve the 2SLGBTQQIA communities, committee work through the CoV LGTBQ2S+ Advisory Committee, and the development of 2SLGBTQQIA programming such as the *Love Who You Want* campaign.

Homeless Outreach Officer

In December 2018, a report by the Homelessness Services Association of BC, Urban Matters and the BC Non-Profit Housing Association, detailing the regional distribution and general characteristics of the homeless population was released.^{xxviii} The findings revealed a steep increase in homelessness across Metro Vancouver, with 828 more people identified as homeless in 2018 (3,605) compared to 2014 (2,227), representing a 30% increase in homelessness and the highest numbers to date. Indigenous homelessness is also on the rise, with 34% (746) of all homeless people identifying as Indigenous in 2018, compared to 31% (582) in 2014.

Strong partnerships between all levels of government, non-profit and co-operative housing providers, and community support services are required to build safe and inclusive neighbourhoods. Organizations such as BC Housing, Ministry of Social Development, faith-based organizations, non-profit housing operators working in single room occupancy and shelter systems, as well as community members, partner to provide support to the marginalized population. Towards this goal, in 2009, the VPD developed the role of a Homeless Outreach Constable. The Homeless Outreach Constable conducts outreach work with the homeless and coordinates with mental health, addiction, housing serving sectors, and municipal and provincial governments. The Constable also acts as a resource for external agencies, as well as internal sections within the VPD.

Indigenous Liaison and Protocol Officer

The VPD recently implemented a new Indigenous Liaison and Protocol Officer position in the Community Services Section to work directly with the Indigenous community to develop both VPD and community programming, act as a resource for VPD members on Indigenous culture, and serve as member of the VPD Indigenous Advisory Committee. This officer advises the VPD on all Indigenous protocols related to formal events and integrating these protocols into current VPD ceremonies. In addition to these duties, the Indigenous Liaison and Protocol Officer is a dedicated point of contact for community members to raise concerns they may have and that can be addressed through the VPD Indigenous Advisory Committee.

The Indigenous Liaison and Protocol Officer serves as the primary contact for multiple Indigenous agencies in Vancouver and serves as a Director on the Urban Native Youth Association (UNYA), a registered non-profit society with the Province of B.C. and a federally registered charitable organization. The Indigenous Liaison and Protocol Officer is also a Director at the Circle of Eagles Lodge, a men's residential facility providing care and custody to Indigenous men 19 years of age and over who have been conditionally released from federal institutions. This facility provides room and board, individual counseling, life skills training and job preparation, self-help programs, and traditional healing practices.

Indigenous Advisory Committee

The VPD and Vancouver's Indigenous community leaders collaborated in the creation of the VPD Indigenous Advisory Committee, which was established in late 2018 with the first meeting in February 2019. The VPD meets the recommendation from the National Inquiry on establishing a civilian Indigenous Advisory Committee⁸ and the call to increase communication with Indigenous communities to inform them on policies, practices and programs that make communities safe.⁹

⁸ *MMIWG Call for Justice 9.8: We call upon all police services to establish and engage with a civilian Indigenous advisory committee for each police service or police division, and to establish and engage with a local civilian Indigenous advisory committee to advise the detachment operating within the Indigenous community.*

⁹ *MMIWG Call for Justice 9.5 (i): Establish a communication protocol with Indigenous communities to inform them of policies, practices, and programs that make the communities safe.*

The VPD Indigenous Advisory Committee is comprised of eight recognized and respected members of Vancouver's Indigenous community, including Métis representation,¹⁰ and executive representation from the VPD. The Indigenous Advisory Committee meets quarterly to connect and advise the VPD on current issues relating to Indigenous and police relations within the community.

The Indigenous Advisory Committee a multi-faceted initiative designed to enhance the relationship between police and the Indigenous community. Organizations and partners in this group include the Vancouver Aboriginal Transformative Justice Society, Metro Vancouver Aboriginal Executive Council, VACPC, and Warriors Against Violence.

The specific goals/objectives that direct its efforts include:

- relationship building and trust building with the Indigenous community and the VPD;
- eliminating barriers between police and Indigenous residents and community;
- supporting education, cultural awareness, and other events to further build trusting relationships between residents, the Indigenous community and the VPD; and
- sharing information on current issues within the Indigenous community.

Partnerships Established through Investigative Sections

In addition to serving as members on the SisterWatch committee, members of the VPD Special Investigations Section (SIS) are partners in The Treehouse Vancouver Child and Youth Advocacy Centre (CYAC), a collaborative initiative between the VPD, Family Services of Greater Vancouver (FSGV), BC Children's Hospital, MCFD, and Vancouver Aboriginal Child and Family Services Society (VACFSS).

The Treehouse coordinates and houses a dynamic, multi-disciplinary response to child abuse, which includes the investigation of child abuse and access to other supportive services. The Treehouse works to minimize trauma and to enhance the community's ability to protect children. The dedicated on-site team comprises VPD Sex Crimes Unit (SCU) detectives, social workers from MCFD and VACFSS, community-based victim support workers from FSGV, a service director and coordinator from The Treehouse, and an accredited facility dog from Pacific Assistance Dogs Society.

In addition to the Treehouse, investigators in the SCU rely on the support of VACFSS for child abuse or sexual assault investigations that are not conducted at the CYAC. For example, VACFSS counselors support Indigenous victims by providing counseling and/or

¹⁰ *MMIWG Call for Justice 17.14: We call upon police services to establish better communication with Métis communities and populations through representative advisory boards that involve Métis communities and address their needs.*

treatment services, they also assist by providing more information on the criminal justice system. VPD's Domestic Violence and Criminal Harassment (DVACH) Unit investigators and Victim Support Workers attend quarterly meetings at VACFSS headquarters in Vancouver. Other community partners in attendance include Probation Officers, MCFD representatives, and various advocacy group representatives.

VPD's DVACH Unit collaborates with a variety of community partners to help those involved in violent situations with their intimate partner. For example, DVACH detectives will often work with the Musqueam Liaison Officer and the MIB Security when incidents of intimate partner violence occur in the community. This collaboration often involves offender management and safety planning with the victims. DVACH also works closely with community services societies, namely VACPC and WISH. Continued training and sharing of appropriate information is vital to maintaining community relationships that are relied upon to ensure the safety of victims.

DVACH investigators ensure that they develop community connections via presentations and meetings with community members. For example, a DVACH Sergeant and Victim Support Workers from FSGV present to group participants, including Indigenous women, transgendered persons, sex workers, and those with mental health and addiction issues. The participants are actively involved in relationships or situations that expose them to frequent physical violence, largely intimate partner violence. Select topics are presented including safety planning, justice system processes, counseling and support services, discussions around bridging the barriers to reporting to police, amongst other topics.

Another section within the SIS is the Counter Exploitation Unit (CEU). The CEU does not have programs, initiatives, or training specifically targeted towards Indigenous Peoples. However, the CEU philosophy focuses on protecting all vulnerable and exploited persons in the sex industry. A high percentage of such sex workers are Indigenous. The CEU has an imbedded FSGV Case Worker who frequently acts as a bridge between sexually exploited Indigenous women and the police. This Case Worker is mindful of the systemic issues that may prevent women from disclosing their criminal victimization to the police. In addition to this partnership with FSGV, CEU members will exchange information related to identified risks, offenders, and exploitive practices with community partners such as WISH, UNYA, and VACFSS.

Connections through Victim Services

The *BC Victims of Crime Act*^{xxix} and the *Canadian Victims Bill of Rights*^{xxx} stipulates that victims of crime must receive information on the services available to them. In line with this, the VPD's Victim Services Unit provides victims and witnesses with professional, supportive, and timely assistance, to lessen the impact of crime and trauma. Services may include emotional support, practical assistance, justice-related information and referrals to other agencies. Target outcomes include improved safety, reduced risk of further victimization, access to information and support, enhanced criminal investigations and increased willingness to participate in the criminal justice system.

VPD's Victim Services Unit follows mandated protocols to refer clients to specific community agencies, several of which are tailored towards Indigenous clients. When a victim of crime self-discloses that they are Indigenous to one of the VPD caseworkers, they refer them to Indigenous-focused services such as the Aboriginal Wellness Program, the Indigenous Court Support Worker, Watari Youth, Family and Community Services, or Aboriginal Front Door. Referrals are also made to DEWC, Battered Women's Support Services, Women Against Violence Against Women, and other community partner agencies that also offer culturally-specific services as required by the victim.

Other Community Programming to Heighten Safety

Women's Personal Safety Team

In January 2013, 16 female police officers of various levels of seniority and experience were recruited as volunteers and trained to form the Women's Personal Safety Team (WPST). As news of the WPST circulated, more female police officers expressed interest in participating. As of 2019, the WPST consists of 30 instructors who volunteer their time to teach women skills and concepts regarding crime prevention and dealing effectively with violent encounters. The workshops are designed to be easily learned and remembered by women with little or no tactical training.

The WPST has several community partners, including SisterWatch, and the Right to Play program, that work with Indigenous Youth and the VACPC. Ensuring Indigenous women are receiving training, workshops have been held for women in the Musqueam nation and at the Vancouver Native Housing Society. Safety training is also provided to other low to no barrier women's housing in the DTES. Approximately 30% to 40% of the participants are Indigenous women.

Safe Place

The Safe Place program was launched in July 2016 with the goal to increase 2SLGBTQQIA community safety. Safe Place is a partnership program with the business community. Partnering businesses welcome people in need of police assistance, and provide safe shelter until officers arrive. Participating businesses display the Safe Place decal and are vetted by the VPD. Participating businesses sign a pledge indicating their support for the community and acknowledge their willingness to assist any potential victims.

Originally developed by the Seattle Police Department, the VPD is the first Canadian police department to launch this program. The CoV and the Vancouver School Board also partner with this initiative and display the Safe Place decals in each of their schools. To date, there are over 500 participating businesses in the CoV.

Lunch with the Chief

The Lunch with the Chief series is a popular quarterly event that has been well received by the DTES community, since the initial launch in February 2014. The purpose of this event is to provide a casual environment with frontline VPD members, and members of the VPD Executive, to foster positive relationship building while sharing in meaningful conversations

and food. Taking place in the heart of the DTES at the Carnegie Community Centre, this event provides the opportunity for individuals to interact and create relationships with police members.

Many community members who have attended have indicated that they relished the opportunity to put names to faces, and appreciate the chance to have positive and engaging interactions with police members in a friendly environment. VPD's Sex Industry Liaison Officer, Indigenous Liaison and Protocol Officer, and Indigenous Liaison Officer distribute tickets in the community, and a large proportion of participants are Indigenous Peoples. The VPD invites guest speakers that are Elders from local nations and other key figures.

Throughout the year, many community events are held to foster positive relations between diverse communities, including Métis and 2SLGBTQQIA people and the VPD. For example, the VPD participates in the annual Pulling Together Canoe Journey, which has been successful in building cooperation amongst various cultures, non-profit groups, and government agencies in B.C. for the past 18 years. Designed to encourage understanding and bring public safety agencies and Indigenous Peoples together, the annual event includes canoe families from the Pulling Together Canoe Society, and Métis, Squamish, Musqueam and Tsleil-Waututh nations.¹¹

Culturally Appropriate and Gender-Neutral Policy, Practices, and Procedures

The Planning, Research, and Audit Section (PR&A) is responsible for policy development for the VPD. Staff in PR&A are responsible to ensure that departmental policy uses gender-neutral language, and to ensure that policy is written so that it is equitably applied. The VPD ensures that its policies, practices, and procedures do not impact men and women differently. Furthermore, policy analysis is done beyond gender, and includes potential impacts on other identifying factors including age, sexual orientation, sexual expression, race, ethnicity, religion, and culture. In developing policy and practice, the VPD incorporated the principles of the *B.C. Human Rights Code*^{xxxix}, as well as the *Canadian Human Rights Act*^{xxxix}, which prohibit discrimination against any person on personal characteristic grounds. Collectively, the VPD regularly revises and reviews policies, practices, and procedures to ensure culturally appropriate and bias-free service delivery, compliant with the recommendation in the Inquiry for police services to do so.¹²

¹¹ *MMIWG Call for Justice 17.12: We call upon police services to build partnerships with Métis communities, organizations, and people to ensure culturally safe access to police services.*

¹² *MMIWG Call for Justice 9.2 (i): Review and revise all policies, practices, and procedures to ensure service delivery that is culturally appropriate and reflects no bias or racism toward Indigenous Peoples, including victims and survivors of violence.*

Culturally Appropriate Policy

The VPD recognizes the many diverse cultures and religions that co-exist in Vancouver, each with unique customs, beliefs and traditions. This may include wearing special garments, carrying cultural or religious items, or observing traditional ceremonies and practices. In the course of their duties, members may be required to search arrested persons in possession of cultural, religious or spiritual items. These items may pose unique considerations for members when balancing the need to ensure safety, enforce the law and conduct criminal investigations while preserving the person's dignity and respecting the sanctity of their culture.

VPD policies and practices balance officer safety, legal authority and investigation, with cultural sensitivity and respect. In 2017, the VPD amended its search policy as such so that members must refer to guidelines referencing cultural considerations; this includes when VPD officers are searching an individual with an Indigenous medicine bag, for example. A medicine bag is a small pouch containing objects of spiritual significance to its owner, such as stones, herbs and other objects intended to bring health, protection or healing. The medicine bag is considered sacred and traditionally the objects within should only be handled by its owner or an Elder. If a search of a medicine bag or other religious or spiritual articles is required, the examining officer should request the owner open the pouch and manipulate the objects for visual inspection if possible and if safe to do so.

The arresting officer, with approval of the Jail Sergeant, should allow the person to keep the medicine bag in their possession while in custody if it is deemed safe to do so. If the owner cannot be permitted to retain their medicine bag, the owner should place the medicine bag into a property bag separate from other possessions, and place the property bag into the larger property bag containing their remaining possessions. This is because a medicine bag should only be handled by its owner or an Elder, and should not be touched by others. When returning the item, the owner should be permitted to remove the medicine bag from the property bag so that no one else touches it.

Respecting Gender Identity

Part of the core values of the VPD are compassion and respect. Effectively serving diverse communities begins with understanding and respecting the sensitivities of individuals. With these values in mind, persons may identify, or present themselves, as a gender that is different to their perceived appearance or what is stated on their official identification.

The courts have established that transgender people are protected from discrimination because they are covered by the ground of 'sex'. As such, VPD police officers, in departmental policy, are advised to make reasonable attempts to avoid mislabeling a person during interactions and when recording the name and gender of a person in police documentation and reports.

Employment Supports for Indigenous Police Officers

VPD Peer Support is based on the idea that a police officer is more likely to confide in someone he or she trusts. A trained peer has the cultural competence necessary to understand the unique challenges faced by a colleague and can provide confidential help and resources when needed. Peer support is not intended to replace formal mental health care, however it can provide easily accessible, 24/7 emotional support for fellow officers.

The members of the VPD Peer Support Unit offer outreach services to sworn personnel and their families, provide mentorship, emotional support, problem solving, goal setting, crisis risk assessment and referrals to other community resources. In addition to these functions, the VPD Peer Support Unit is responsible for two formal "peer based" wellness programs at the VPD; The Road to Mental Readiness Program and the Critical Incident Stress Management Team (CISM).

Providing employment support, the VPD CISM and Peer Support Program offer culturally sensitive referrals upon requests. Should an Indigenous officer require health and wellness referrals, these units can liaise with the Indigenous Liaison and Protocol Officer and obtain relevant community resources that meet the individual needs of the police officer.

Furthermore, VPD encourages Indigenous members to attend relevant Indigenous cultural events as part of their duties. For example, in line with the recommendation to retain Indigenous officers through employment support and offer incentives to Indigenous officers, VPD personnel who attend the Pulling Together Journey are credited on-duty time while on the Journey during their scheduled workdays.¹³

Policy on Limited Duration Posts

A recommendation in the National Inquiry into MMIWG is for police services to end the practices of limited-duration posts, and instead implement a policy regarding remote and rural communities focused on building and sustaining a relationship with the local community and cultures.¹⁴ Limited-duration posts generally applies to Royal Canadian Mounted Police (RCMP) detachments in communities that are considered remote or have a reduced level of community services, such as education or health care. RCMP posts typically last three to four years, with possibilities of extension by up to two years.

Although the VPD does not have limited-duration posts, the VPD provides policing services to Indigenous communities within the CoV. Examples of specialty positions within the VPD

¹³ *MMIWG Call for Justice 9.3 (vi): Retain Indigenous officers through relevant employment supports, and offer incentives to Indigenous officers to meet their unique needs as Indigenous officers serving Indigenous communities, to ensure retention and overall health and wellness of the service.*

¹⁴ *MMIWG Call for Justice 9.3 (vii): End the practice of limited-duration posts in all police services, and instead implement a policy regarding remote and rural communities focused on building and sustaining a relationship with the local community and cultures. This relationship must be led by, and in partnership with, the Indigenous Peoples living in those remote and rural communities.*

that have mandates directly related to servicing the Indigenous community were outlined in previous sections (including the Indigenous Liaison Officer, Musqueam Liaison Officer and the Indigenous Liaison and Protocol Officer).

The VPD's Tenure Policy allows the majority of officers to remain in a specialty position for a duration of five years. The VPD Tenure Policy has provisions that allow for tenure length extensions to be granted according to the following conditions:

- the exemption is in the best interest of the member and the organization;
- no other member has the requisite training, skills, abilities or expertise for the specified assignment; and
- there are extenuating or exceptional circumstances that could not be foreseen, that require consideration to vary the Tenure Policy.

Guidelines for Policing the Sex Industry

Stemming from long-term systemic issues resulting from colonization, racism, and the Residential School system, the VPD recognizes that Indigenous Peoples are overrepresented among survival sex workers.^{xxxiii} To open lines of communication and foster increased engagement, the VPD implemented the "Sex Work Enforcement Guidelines" in January 2013 as a guiding document to establish a process by which the VPD may work with the sex industry community to open lines of communication and foster increased engagement.^{xxxiv} The Sex Work Enforcement Guidelines assisted frontline officers in understanding the VPD's philosophy and expectations regarding the investigation of crime in the sex industry.

In his MWCI report,^{xxxv} Commissioner Wally Oppal supported the VPD's Sex Enforcement Guidelines. Specifically, he commended the community engagement process taken in their development, while referring to guidelines as "a model of community policing at its best."^{xxxvi} Further, in the recommendations, Commissioner Oppal suggested that all other police forces in B.C. consider implementing similar guidelines.^{xxxvii}

The VPD Sex Work Enforcement Guidelines are outdated now as the Criminal Code changed with the enactment of Bill C-36 in 2015.^{xxxviii} Nonetheless, the B.C. Provincial Sex Enforcement Guidelines and Principles were established in January 2018. The VPD was an active member of a provincial Police Services working group that helped establish these guidelines for the province. The Provincial Guidelines, which the VPD currently follow, closely resemble the VPD Guidelines. Nonetheless, VPD's enforcement strategy within the VPD guidelines has not changed. VPD's enforcement priority is to maintain the safety of sex workers by targeting those that exploit, abuse, and or use violence against sex workers, especially youth and other vulnerable sectors of our community.

The VPD values building relationships with those involved in the sex industry to increase the safety of the workers, reduce victimization and violence, and where appropriate (such as with youth) assist with exit strategies. In all situations, VPD officers will treat those in the

sex industry with respect and dignity. These guidelines, in line with a recommendation in the MMIWG Inquiry for police services to develop and implement guidelines for the policing of the sex industry¹⁵, and to ensure the safety of 2SLGBTQQIA people in the sex industry,¹⁶ outline response strategies, and ensure a consistent and respectful message when VPD officers deal with anyone involved in the sex industry.

Training: Increasing Cultural Competence & Ensuring Trauma Informed Practices

The VPD is sensitive to unique needs associated with particular communities. For example, the Indigenous Peoples of Canada include diverse groups of Peoples with distinct cultural and social characteristics. For police and other law enforcement personnel, understanding the unique history and culture of Indigenous Peoples is an important part of effective communication and interaction with the Indigenous Peoples, and communities they serve. The VPD ensures staff are educated with cultural competency training, and working with vulnerable groups. The following sections outlines VPD training initiatives that speak to recommendations in the Inquiry, regarding appropriate training and education for officers.

Recruit Training at the JIBC

All municipal police officers in B.C. receive their foundational training at the JIBC. The VPD supports recommendation 9.3 (v) to train police recruits on the oppression of Indigenous Peoples as well as anti-racism, anti-bias training.¹⁷

The VPD agrees with the Inquiry's findings that Canada's historical mistreatment of Indigenous people needs to be a core component of police recruit training. Further, it is the VPD's position that this training may be best facilitated by Indigenous Elders and persons who can best convey the intergenerational effects that have resulted.

Promising Practices: Trauma Informed Investigators

Experts agree that the attitude conveyed by police is "the single most important factor in determining the success of the victim interview, and therefore the entire investigation."^{xxxix} Effective investigations, including sexual assaults files, require unbiased, capable, empathic, and well-trained investigators. Research has found that victims of sexual assaults

¹⁵ *MMIWG Call for Justice 9.11: We call upon all police services to develop and implement guidelines for the policing of the sex industry in consultation with women engaged in the sex industry, and to create a specific complaints mechanism about police for those in the sex industry.*

¹⁶ *MMIWG Call for Justice 18.14: Police services take appropriate steps to ensure safety of 2SLGBTQQIA people in the sex industry.*

¹⁷ *MMIWG Call for Justice 9.3 (v): In training recruits, include: history of police in the oppression and genocide of Indigenous Peoples; anti-racism and anti-bias training; and culture and language training. All training must be distinctions-based and relevant to the land and people being served; training must not be pan-Indigenous.*

often omit information during police interviews, if they perceive the officer is rushed, impatient, aggressive, or unfriendly.^{xi} Furthermore, the VPD is aware that inadequately trained officers may contribute to assaulted victims experience with secondary victimization; if victims feels unsafe during interviews, they may not be able to retrieve certain memories.^{xli}

In recent years, trauma informed practices (TIP) have evolved out of the neurobiological understanding of how trauma influences the brain's ability to process, retain, and relay information. Traditional police interview methods were not based on this knowledge and did not yield the best information. The VPD is sensitive to the fact that trauma has a neurobiological impact and for these reasons, it has adopted trauma-informed practice.

The VPD's SIS began exploring a trauma informed investigative practice in 2017. The section continues to educate members in other investigative areas on the impact of trauma since first introducing the concept in 2014. The VPD recognizes the importance and is compliant with the recommendation to ensure all staff understand and implement culturally appropriate and TIP practices.¹⁸

In 2018, all investigators in SIS received training on *Trauma Informed Policing: Understanding the Neurobiological and Psychological Effects of Sexual Assault*. The VPD is currently working on delivering this training to the Major Crime Section (MCS) as well. To expand trauma-informed training, in 2019, two VPD SIS investigators attended an International Association of Chiefs of Police (IACP) course in the United States for training and course evaluation (*Trauma Informed Sexual Assault Investigations*). The VPD members are in the process of preparing a report on the IACP course, with the intention of determining the applicability of this course for VPD.

WE ARE IN THE MIDST OF A SEA CHANGE IN THE WAY POLICE ARE CONDUCTING SEXUAL ASSAULT INTERVIEWS. THIS COMES FROM THE NEW KNOWLEDGE AND INSIGHTS FROM THE NEUROBIOLOGY OF TRAUMA AND THE BEST PRACTICES EMERGING FROM THE FIELD.

Department of Justice (2019)

Fair and Impartial Policing

Recently, the VPD has implemented mandatory Fair and Impartial Policing (FIP) training, a full day workshop delivered to more than 600 frontline operational members. Developed in the United States, FIP was adopted and redesigned by the Provincial Government in response to the 2012 MWCI. Specifically, the Inquiry recommended that police officers in B.C. undergo mandatory training concerning vulnerable community members.

¹⁸ *MMIWG Call for Justice 9.2 (iv): Undertake training and education of all staff and officers so that they understand and implement culturally appropriate and trauma-informed practices, especially when dealing with families of missing and murdered Indigenous women, girls, and 2SLGBTQIA people.*

The workshop (most recently provided in 2018 to all frontline officers) illustrates how implicit biases may affect police perception and behaviour, and as a result negatively affect community members. The objective of the FIP workshop is to help police officers recognize “implicit-bias” and develop skills and tactics to reduce the influence of bias on police practice. There is specific focus given to the effect of bias on Indigenous and Black communities. A fundamental concept in the training is that all people can have biases that could influence actions and that policing based on stereotypes can be unsafe, ineffective, and importantly—unjust. Learning objectives in FIP training include the following:

- reflect on the lived experience of an Indigenous person who experienced racial profiling by a police officer and how it impacted them;
- understand biases are normal and that all people, even well-intentioned, have biases;
- explain why persons who are part of a vulnerable population are likely to be subject to implicit bias;
- explain how implicit bias played a role in investigations of missing women in the DTES of Vancouver (as described in the MWC1);
- reflect upon and articulate the impact biased policing has on community members;
- explain the importance of police legitimacy and the threats to it;
- describe some historical examples of threats to police legitimacy in Canada;
- explain how procedural justice produces police legitimacy and be able to articulate the major components of procedural justice;
- explain and demonstrate strategies that will help them be aware of personal biases; and
- explain and demonstrate strategies (i.e., FIP skills) to ensuring that their behaviour is bias free.

Increasing Cultural Awareness

VPD Aboriginal Cultural Competency Training

Aboriginal Cultural Competency (ACC) training was designed to increase knowledge, enhance self-awareness, and strengthen the skills of those who work both directly and indirectly with Indigenous Peoples. The goal of the ACC training was to further develop individual competencies and promote positive partnerships. Participants learned about aspects of colonial history such as the Residential School system, a timeline of historical events, and contexts for understanding social disparities and inequities. Through interactive activities, participants examined culture, stereotyping, and the consequences and legacies of colonization. Participants were also introduced to tools for developing more effective communication and relationship building skills. Two Residential School survivors and Elders from the Indigenous community have conducted this training, since 2015, for approximately

650 frontline members, volunteers, jail and civilian staff of the VPD. This training was also delivered to the VPD Executive.

Special Municipal Constable Program: Indigenous Peoples' Awareness Course

The Community Awareness: Indigenous Peoples' Awareness course has been a mandatory component of the SMC Program since 2014. Through the use of the video "The Spirit Has No Colour" and classroom discussion, learners become familiar with the impact of European contact on Indigenous culture, the role of law enforcement and its impact on Indigenous culture, and the steps law enforcement may take to build relationships. Learning outcomes of this course include:

- development of an awareness of the history of Indigenous Peoples (including the history of Métis peoples)¹⁹ particularly in B.C.;
- familiarity with the role of police in the enforcement of the laws of Canada that today are deemed to have been damaging to Indigenous Peoples, destructive to their culture, language and spiritual values and practices, and based on the belief that Indigenous Peoples are culturally inferior;
- demonstration of an understanding of the consequences of generations of children being taken from their families and placed into the Residential Schools of this country, systematically destroying family systems, and the possible learning of family practices and parenting skills; and
- the ability to demonstrate an understanding of the connection between drug and alcohol abuse, family disintegration, and the loss of cultural identity to the sexual, psychological, physical and other abuse that was common in Residential Schools.

Aboriginal and First Nations Awareness Course

A six-hour eLearning course has been offered since 2016 to all new VPD members hired from other police departments (referred to as exempt employees). These employees would have missed the previous ACC offered in 2015. The Aboriginal and First Nations Awareness course provides basic knowledge of the history and geography of Indigenous Peoples. It is the foundation for understanding contemporary issues pertaining to Indigenous lands, cultures, and communities. This course has several learning outcomes:

- an understanding of who Indigenous Peoples are and definitions of the terms that are commonly used to refer to Indigenous peoples in Canada;
- knowledge of the history, geography, and demographic characteristics of Indigenous Peoples;
- understanding how Indigenous Peoples perceive relationships with land;

¹⁹ *MMIWG Call for Justice 17.13: We call upon police services to engage in education about the unique history and needs of Métis communities.*

- recollection of the history of Indigenous treaties;
- define culture and its influence on the Indigenous way of life, communication, and points of view;
- recognition of the characteristics of the six Indigenous cultural regions in Canada;
- familiarity with the differences between Indigenous and traditional Western cultures; and
- understanding the impact of the various social and economic factors facing Indigenous communities across Canada today.

Circle of Understanding at the JIBC

The Circle of Understanding serves as cultural competency training for all municipal police recruits completing their Block III training sessions, and prior to graduation from the JIBC. This training was designed to help increase knowledge and understanding of Indigenous culture, history and heritage, with an emphasis on the history of colonization in Canada and the impact of Residential schools upon Indigenous Peoples. During the training, the film “The Spirit Has No Colour” is screened for recruits and participants hear stories from Residential School survivors to comprehend the extent of trauma and suffering endured. An Elder is often in attendance to impart wisdom and culture through singing and drumming, and the Indigenous Liaison Officer helps to lead a smudging ceremony.

In October 2016, the Circle of Understanding was held at the JIBC, and the NPO from the VACPC provided training sessions for all attendees. This marked the first time that a Circle of Understanding session was conducted with a Sheriff’s class in attendance, and there was great feedback from all of the participants. In addition, the VPD Indigenous Liaison and Musqueam Liaison Officers led several training sessions with various municipal police forces in order to increase cultural understanding and awareness of Indigenous topics within policing.

KAIROS Blanket Exercise

The KAIROS Blanket Exercise is an experiential teaching tool based on participatory education methodologies and employs Indigenous practices to build awareness and understanding of our shared history as Indigenous and non-Indigenous peoples in Canada. This exercise is utilized by government agencies across Canada as part of the reconciliation through education. Members of the VPD Executive and senior management team received this training in April 2019.

Developing Awareness on Other Vulnerable Populations

Homelessness Awareness

The Homelessness Awareness course provides all patrol and SMC officers with information about homelessness and the impact it has on Canadian society. The course also reviews the various legal authorities VPD police officers have at their disposal. In 2014, the

Homelessness Awareness course was delivered online to all frontline officers, where they were required to complete a 60-minute session that includes videos, practice activities and a final assessment. This course has several learning outcomes:

- develop an awareness of homelessness and its causes in Canada;
- develop an awareness of Canada's homelessness situations; and
- develop an awareness of the impact homelessness has on Canadian society.

Youth at Risk

The Youth at Risk course provides all frontline and SMC of the VPD information about at risk youth in relation to anti-social/delinquent behaviours and sexual exploitation.

Mandatory for all patrol officers, this course also reviews the various legal authorities VPD police officers have at their disposal, including the *Youth Criminal Justice Act*. The Youth at Risk course was delivered online in 2014, and officers were required to complete a 60 minute session that including videos, practice activities and a final assessment. This course has several learning outcomes:

- develop an awareness of adolescent brain development and its impact on decision making;
- analyze how youth at risk can be impacted by gangs;
- develop an awareness of sexual exploitation and at risk youth; and
- paraphrase key points of the *Youth Criminal Justice Act*.

Sex Work and Sex Workers Awareness Course

Offered first to all frontline officers in 2014, *Sex Work and Sex Workers Awareness* is a 90 minutes eLearning course that provides a comprehensive overview of sex work and the impact it has on society in Canada. This course provides practical knowledge for officers working with sex workers, case studies that highlight various perspectives, as well as the legal authorities police officers have at their disposal. The VPD is currently working on revising this course, as it will continue to be offered.

Since 2014, all newly hired exempt VPD members receive this course as part of their education. In addition, the course is a mandatory component of the Community Awareness Component in the SMC Program. In total, 924 VPD members have taken the course, which includes a final assessment. The learning outcomes for this course consisted of:

- an awareness of the language and misconceptions surrounding sex work;
- an awareness of the impact of human trafficking on the sex work industry: defining human trafficking;

- an awareness of the criminal law relating to sex work; and
- an awareness of the role of the VPD's Sex Work Enforcement Guidelines.

In March and April of 2019, SIS delivered condensed training to all frontline members on sex workers awareness.

Gay, Trans, and Blue LGBTQ2S+

Offered in 2017, the *Gay, Trans and Blue LGBTQ2S+* training provided all VPD patrol members an awareness and appreciation for Vancouver's 2SLGBTQQIA community.²⁰ The course developed an understanding of the importance of the VPD's role within this community. The *Gay, Trans, and Blue LGBTQ2S+* training was delivered in-class, where participants were required to complete an eight-hour session that included instructor led presentations, videos, group activities and discussions with a guest speaker.

The training addressed the following topics based on the Human Rights Tribunal Recommendations:

- LGBTQ2S+ language and terminology competency;
- gender frameworks and models;
- LGBTQ2S+ pronouns and relation to VPD Policy;
- contextualizing LGBTQ2S+ histories in Canada; and
- reflection on LGBTQ2S+ lived experiences.

Learning outcomes for this training include:

- identify appropriate language or terminology for the LGBTQ2S+ Community;
- acknowledge the sensitivities of the LGBTQ2S+ community;
- define the language used in the LGBTQ2S+ community;
- identify appropriate communication methods with the LGBTQ2S+ community;
- identify challenges for transgendered persons; and
- review VPD policy and legal authorities.

Training On Missing Persons Investigations

On September 1, 2016, the B.C. Policing and Security Branch launched an online course for *Missing Person Investigations in British Columbia* for police services in B.C. This 30-

²⁰ *MMIWG Call for Justice 18.13 Police services engage in education regarding 2SLGBTQQIA people to address discrimination, especially homophobia and transphobia.*

minute eLearning course is designed to orientate the learner to the BCPPS on Missing Person Investigations (BCPPS 5.1) and the *Missing Persons Act* (the Act).^{xiii}

The course promotes awareness of standards, highlights key aspects for police services at the organization level, and identifies key procedural elements of the standards. The course also promotes awareness of the tools available to police under the Act, and the circumstances and constraints governing their use. All frontline officers were required to take this course in 2016 (673 VPD officers completed it). This course is also a component in the VPD Patrol Re-Integration Education Program; this ensures that all VPD officers who were not in patrol during the cycle offering and are returning to patrol are aware of the important content in this course.

The VPD recognizes the value and importance of training designed to increase cultural awareness and enhance service delivery. The VPD will continue to deliver training that is timely, trauma informed, and sensitive to the unique requirements of the culturally diverse communities of Vancouver.

Reviewing Investigative Practices

The VPD follows the same investigative process regardless of a victim's race, gender, sexual orientation, or any other identifying factor. This involves thorough investigations for all victims, including crimes against 2SLGBTQQIA people. However, when crimes are motivated by bias, prejudice, or hate towards an identifiable group, they are investigated by the VPD Hate Crime Investigator.²¹ Furthermore, VPD investigators are keenly aware of the unique historical and cultural sensitivities surrounding Indigenous victims and consider those during investigations, both to provide resources for the victim and families, and to aid the investigation.

Overview of the VPD Missing Persons Unit

The CoV, by its location and size within the Greater Vancouver area, holds a unique position; the city is the economic, cultural, and entertainment centre for both the Lower Mainland and the province. This places the VPD in a unique position to investigate more missing person reports than any other municipality in B.C.

The VPD averages over 5,000 missing person reports a year and has a dedicated unit to review, co-ordinate, and investigate all missing person files. The MPU is staffed with eight detectives who review and assess risk in every missing person file initiated in the CoV. When the missing person is not located during the initial investigation conducted by frontline officers, the MPU continues the investigation and retains the file until the missing person is located. The MPU's investigators and civilian coordinator are supervised by a Sergeant who reviews and oversees file management, ensuring provincial and departmental

²¹ *MMIWG Call for Justice 18.12: Police services better investigate crimes against 2SLGBTQQIA people and ensure accountability for investigations and cases involving 2SLGBTQQIA people.*

standards are maintained. From the initial report of a missing person, the VPD applies several review layers and continual risk assessments dependent on varying situational factors. Furthermore, there is an MPU investigator on call at all times.

VPD MPU members continue to provide training to police members in settings such as the JIBC, cycle training, and Sergeant Education programs. As well, training is provided to volunteers at various community police offices (e.g., the Collingwood Community Policing Centre and VACPC) on missing persons issues, and the cultural and historical sensitivities that all persons associated to the policing community would benefit from knowing. The MPU provides training and education to the wider community by speaking to the Citizen's Police Academy. This is facilitated by DIIRS in order to foster an understanding of missing person files. Finally, since 2012, members of the MPU give presentations at the B.C. Missing Persons Centre bi-annual training symposium, Unidentified Human Remains, and Counter Exploitation Training Symposium. They have also presented at the British Columbia Aboriginal Policing Services Annual Training conference.

MPU members have attended MMIWG Inquiry working groups to provide and gain insight into the issues around missing persons and Indigenous Peoples. These meetings have continued to build trust and cooperation on issues that are present or arise between the police and Indigenous Peoples. Members of the MPU have attended training supplied by VPD on cultural sensitivities and historical issues as seen by the Indigenous Peoples themselves. Some MPU members have had the honour of attending sweat lodges and meeting with community Elders to better understand and appreciate the beliefs of the Indigenous Peoples.

Crossing Jurisdictions and Improving Coordination

Like all VPD investigative units, the MPU, follows the same investigative process regardless of any demographic factor. Nonetheless, MPU investigators are also aware of the sensitivities around Indigenous Peoples and missing person investigations. The MPU has worked, and continues to work, on fostering new community partnerships, and maintaining those already established. These community partnerships, both inside and outside of the Indigenous communities are with, but not limited to; outreach workers (e.g., WISH, UNYA, Carnegie, and Covenant House), MCFD, VACFSS, group home staff, supportive housing staff (e.g., Atira Women's Resource Society, and Portland Hotel Society), Canadian Centre for Child Protection, and many others. These partnerships are vital to build trust and work effectively together to shorten the time a person is missing and lessen the likelihood of repeat missing reports on the individual.

Through the VPD Executive, the MPU maintains a relationship with the SisterWatch program; when community members raise concerns, the MPU is promptly made aware of them and works to solve the issue in collaboration with them. The VPD MPU attends meetings and communicates often and effectively with youth outreach workers from Indigenous organizations. Assisted by the VPD's Sex Industry Liaison Officer, the VPD has a positive working relationship with several non-profit groups and organizations both inside and outside DTES.

In June 2015, new provincial legislation, the *British Columbia Missing Persons Act*, came into effect, improving police access to information that could help locate a missing person.^{xliii} This *Act* allows police to apply for court orders to access records or conduct searches, in cases where a criminal offence is not suspected. The *Act* also allows police officers to directly demand access to records in emergency situations.^{xliiv}

The VPD's MPU regularly works with other police jurisdictions in requesting and providing assistance during ongoing investigations. This can range from checking addresses, obtaining video, to interviewing witnesses or family in order to further each jurisdiction's investigations. This assistance is not limited locally or even provincially. For example, the MPU has, over the last several years, kept records of the different areas they have had contact with, either requesting assistance or to provide assistance. In 2018, the MPU had contact with people involved in VPD files in all Canadian provinces and territories, over 30 states in the USA, and 22 foreign countries. The ease in which people are able to move about is a factor that the MPU is highly cognizant of; the need to cooperate with other jurisdictions on a daily basis is paramount to finding missing people.

Crossing boundaries, the VPD also works with the British Columbia Missing Persons Centre (BCMPC) a "*provincial force unit that provides guidance and support to all police in the province for missing person investigations, and coordinates and supports unidentified human remains investigations.*"^{xliv} The VPD MPU works efficiently with the BCMPC, especially in relation to coordination of the DNA and dental databases for Unidentified Human Remains.

The MPU, therefore, works with both government and non-government organizations to cross jurisdictions and improve communication, meeting the recommendation in the National Inquiry into MMIWG to improve coordination.²² These partnerships exist at the CoV, Lower Mainland, provincial, national, and international levels.

Standardization of Protocols

Provincial Policing Standards for Missing Person Investigations

In December 2012, The Honourable Wally T. Oppal released MWCI report, which provided 63 recommendations with 33 directly related to policing.^{xlvi} Among those recommendations, Commissioner Oppal called for improved missing person policies and practices and recommended that provincial standards be developed.

Since 2002, the VPD has improved policies and practices related to missing person investigations, complied with the MWCI recommendations, improved relationships with the

²² *MMIWG Call for Justice 9.5 (iii): Improve coordination across government departments and between jurisdictions and Indigenous communities and police services.*

Indigenous community and contributed to the development of the BCPPS for Missing Person Investigations.^{xlvii} The BCPPS for Missing Person Investigations came into effect on September 1, 2016. The intent of these provincial policing standards is to ensure that all missing person investigations in BC are prioritized and undertaken at a high standard, appropriate to identified risk, and that a consistent approach is maintained throughout the province. The standards and associated guiding principles establish the overall approach to missing person investigations for all B.C. police agencies. The standards recognize the necessity for officer discretion to address the unique needs of each case, with accountability for decisions through supervisory review. These standards guide VPD investigations and jurisdictional responses.

The VPD has carefully reviewed the standards and updated policies and procedures where required to ensure compliance. Given the strides that the VPD has made since 2002, the VPD was well-positioned to assimilate the new standards as many of them were already established within the business practices of the MPU. However, the implementation of a risk assessment template (an investigative aid that assists the initial investigating officer in assessing risk) is an excellent example that resulted from the MWCI recommendations. This template must be completed upon initial contact with the complainant, reviewed by a supervisor, and immediately if any risk is identified, or as soon as practicable otherwise. Another example is the implementation of a checklist of initial investigative steps to ensure consistency and thoroughness of missing person investigations. All VPD police officers now have access to this checklist through the Regulations and Procedures Manual.

The VPD acts in accordance with provincial standards, and all reports, as outlined in BCPPS Section 5.1.1., are accepted at the time they are made and given full consideration and attention regardless of gender, age, race, national or ethnic origin, colour, religion, sexual orientation, belief, or lifestyle. Furthermore, there is no length of time an individual needs to wait to be able to report someone as missing. In summary, there should be “no barriers” in reporting someone as missing.

An important issue in all missing persons investigations is the jurisdictional ownership of the file. In other words, determining which department takes the leadership role on a file. The BCPPS sets out the following criteria to determine which police force has jurisdiction in relation to a missing persons report^{xlviii}:

- *The police force for the jurisdiction in which the missing person was last seen is the police force of jurisdiction; or*
- *If the location where the missing person was last seen is not known or their presence there was transient in nature, then the police force for the jurisdiction where the missing person resides or last stayed is the police force of jurisdiction;*
- *If jurisdiction is unclear and cannot be resolved between police forces, the police force contacts the Officer in Charge BC Police Missing Person Centre/designate as soon as practicable, who makes the decision regarding jurisdiction.*

Importantly, VPD officers conduct risk assessments immediately and do not delay pending any questions concerning jurisdiction. Therefore, the VPD, in accordance with provincial standards, views all Indigenous missing person investigations as high risk until the risk assessment is completed. The VPD conducts risk assessments with urgency and without delay; a timely response is critical to the well-being of the missing individuals and to a successful investigation.²³

The VPD acknowledges that Indigenous women and girls are at an increased risk of harm; Indigenous background is considered when determining the appropriate response and resources.

Major Case Management Principles

Provincial standards for consistent investigative approaches across the province have also been created for the management of major crimes. The VPD is compliant with BCPPS 5.2, Major Case Management (MCM) designed to ensure that the police response to a major crime is appropriate to the needs of an investigation while maintaining substantive services to the community.^{xlix} The need for systematic MCM practices and standards was a recommendation made by the MWCI Commission, which recommended that the Provincial Government mandate that MCM be used during all major crime investigations and that provincial standards be established.^l The Commission further recommended that these standards address multi-jurisdictional and multi-agency investigations, and called for the creation of a protocol to support the timely and seamless implementation of multi-agency teams.

The standards identify the required minimum elements of MCM to be applied by all police agencies in B.C. to enhance consistency in investigations and to facilitate cooperation and coordination on multi-jurisdictional investigations. The standards allow the VPD to improve coordination across departments and jurisdictions, as called for in the National Inquiry into MMIWG.²⁴

Standards on Inter-Agency Cooperation and Coordination

The purpose of the B.C. Provincial Policing Standards for Inter-Agency Cooperation and Coordination is to support information-sharing, consistency in practices, and collaboration between all forces in B.C. when conducting investigations involving serious crimes.^{li} These standards also bring B.C. in line with other provinces where compliance with Violent Crime Linkage Analysis (ViCLAS) reporting requirements is mandatory. Underlying principles of the Inter-Agency Cooperation and Coordination standards include:

²³ *MMIWG Call for Justice 9.5 (vi) Establish standardized response times to reports of missing Indigenous persons and women, girls, and 2SLGBTQIA people experiencing violence, and conduct a regular audit of response times to monitor and provide feedback for improvement.*

²⁴ *MMIWG Call for Justice 9.5 (iii): Improve coordination across government departments and between jurisdictions and Indigenous communities and police services.*

- public interest is best served when police agencies communicate and work together to identify and pursue common objectives; and
- the power of systems and tools is enhanced when used consistently within and across policing jurisdictions.

CRIMINAL BEHAVIOUR INCREASINGLY CROSSES JURISDICTIONAL BOUNDARIES. EFFECTIVE INFORMATION SHARING AND COLLABORATION BETWEEN POLICE AGENCIES CAN INCREASE THE ABILITY OF POLICE TO IDENTIFY OFFENDERS AND SOLVE CRIMES, PROMOTING PUBLIC SAFETY AND THE EFFICIENT USE OF RESOURCES.

Provincial Policing Standards (Inter-Agency Cooperation and Coordination, 5.3)

Violent Crime Linkage Analysis System

ViCLAS is national computer database program created for the collection of information on serial offences. Stemming from a series of complex serial homicides that spanned multiple jurisdictions, law enforcement officers recognized there was the need for a central repository system accessible by all policing agencies.^{liii} In 1991, the RCMP, in collaboration with several other police services, developed and operated the ViCLAS system to track, identify, and compare specific violent or interpersonal crimes and criminals.^{liiii} Used as an important investigative tool to identify links between crimes, investigators are able to discover crimes committed by the same offender. Police agencies across Canada contribute to ViCLAS by submitting comprehensive and detailed information booklets about violent, especially sexual, crimes in their jurisdictions. Information from each incident includes all aspects of victimology, modus operandi, forensics, and behavioural patterns. Reportable incidents include but are not limited to homicides, sexual assaults, and missing persons.

In accordance to BCPPS, VPD must comply with the reporting requirements and timelines of ViCLAS.^{liv} VPD provides completed ViCLAS booklets to meet the 30-day compliance deadline. Currently, VPD has a temporary designated compliance officer to complete all the ViCLAS booklets. This practice aims to decrease the administrative burden on patrol officers while increasing VPD's compliance rate. This also increases officers' productivity and ensures the consistency of information provided. Additionally, VPD has a full-time civilian ViCLAS Coordinator who is responsible for collecting and assessing files for completion and following-up with officers when necessary to ensure VPD meets the deadline. The coordinator also serves as the VPD liaison to the ViCLAS specialists of RCMP "E" Division.

Due to the sensitive nature of ViCLAS incidents, some victims do not wish to report an incident to the police.^{lv} Instead, they are able to report to a third party agency such as Women Against Violence Against Women (WAVAW), a rape crisis centre. Staff at WAVAW can fill out an anonymous report where the victim wishes to remain anonymous.

Alternatively, staff can also take reports from a victim's friend or family member, reporting on the victim's behalf. All reports received from WAVAW are completed by VPD's ViCLAS Coordinator and then forwarded to RCMP's "E" Division's specialists.

Real Time Intelligence Centre

The MWCI also recommended the creation of a regional Real Time Crime Centre, scalable to the province.^{vi} The BC Ministry of Justice incorporated this recommendation in the 2013 B.C. Policing and Safety Plan. Established in January 2015, the Real Time Intelligence Centre of B.C. (RTIC-BC) is a centralized data system that provides analysts with multi-jurisdictional records, databases, and other information. The goal is to accelerate serious criminal investigations and investigations of missing persons and locate suspects at the earliest opportunity through information sharing. RTIC-BC delivers real-time operational support to frontline officers and investigators by providing actionable intelligence. The centre operates 24/7 and is accessible by all BC police agencies. RTIC-BC provides real-time situational awareness and a coordinated response, as suggested in the National Inquiry into MMIWG; recognizing that importance, the VPD has seconded a Staff Sergeant, a civilian investigational assistant, and three police officers to RTIC-BC, in full-time capacities.

National Policing with Indigenous Peoples Committee

Also towards enhancing communication between jurisdictions, communities, and police services, the VPD contributes to committee work. For example, with Executive representation, the VPD is an active participant in the Canadian Association of Chiefs of Police (CACP) Policing with Indigenous People's (PWIP) Committee. The mandate of CACP's PWIP Committee is to "Consider matters relating to sustainable policing services and enhanced public safety for Indigenous peoples and their communities throughout Canada."

Its objective include supporting a measured and consistent approach to large-scale protest management, supporting the MMIWG Inquiry and supporting the First Nations Policing Program (FNPP).

The VPD contributed to significant accomplishments achieved in 2017-2018 including:

- supporting the FNPP and the Assembly of First Nations commitment to make community safety and policing a priority in an MOU signed with Canada;
- continuing support of practical and culturally competent training and policing services that Indigenous people support. For example, the RCMP's Eagle Feather Initiative was created in the spirit of reconciliation and community engagement to offer witnesses, victims, suspects, and officers an alternative form of swearing to an oath. Committee members were provided with materials to support implementing similar initiatives in their police services; and
- discussing research that can be used to help Canadian police to become better equipped to address higher incarceration rates for Indigenous populations and

addressing the Calls for Action as outlined by the Truth and Reconciliation Commission.

Provincial Policing with Indigenous Peoples Committee

The purpose of the BCACP PWIP Committee is to work collaboratively in sharing best practices regarding Indigenous policing issues and trends to enhance relationships with Indigenous communities. The committee seeks input from the BCACP members to distribute information, and identify and invite subject matter experts to speak with the membership.

Helping the Healing Journey: Improving Communication with Families

Healing is a vital concept in Indigenous culture, bringing together knowledge, spirituality, and ways of restoring connections.^{vi} Necessary for the healing journey is receiving information about a missing and murdered loved one. Families will often have questions about the police investigations, or decisions made by government agencies such as Crown Counsel. Families need to receive timely information.

Improving communication between families and VPD investigators is and will remain a priority, towards the call for justice to improve communication with families.²⁵ VPD investigative units, as described in the following sections, have protocols in place to improve communication with families of MMIWG and 2SLGBTQQIA people.²⁶

Family Liaison Roles

Members of the VPD understand that communication is vital with partners and other police services, but most importantly with the families of the missing. When a person is missing, the unknown outcomes and circumstance of the cases are very trying for the family and loved ones. Communication between police and families is vital to ensure loved ones are updated and informed regarding the status of the investigation.

For some families, the particulars of an investigation may bring some calmness to what otherwise is a maelstrom of emotions. The MPU assigns an investigator as the “family liaison” who updates the family on the status of the investigation and planned next steps. This is in accordance with BCPPS on Missing Person Investigations, which require families and reportees to be kept informed on the progress of an investigation.^{lviii}

²⁵ *MMIWG Call for Justice 9.5 (ii): Improve communication between police and families of missing and murdered Indigenous women, girls, and 2SLGBTQQIA people from the first report, with regular and ongoing communication throughout the investigation.*

²⁶ *MMIWG Call for Justice 9.5 (i): Establish a communication protocol with Indigenous communities to inform them of policies, practices, and programs that make the communities safe.*

The VPD MPU communicates with all families, including Indigenous families, to give them hope, knowledge, and insight into the investigation and to instill confidence that the VPD will continue to work relentlessly to find their family member.

Utilizing FILU

Since 2017, the VPD's MCS has been working with the BC Family Information Liaison Unit (FILU). FILU, a relatively new service for families of MMIWG, helps families access available information about their missing and murdered loved ones from multiple government sources, including police services. FILU is available in every province and territory and builds on the existing victim services frameworks in each region.^{lix}

FILU is designed to be a "one-stop information service" for all families of missing and murdered Indigenous women and girls. In addition to working with police, BC FILU works with families to coordinate information gathering from government agencies and services, including Crown Counsel, social services, and FILU offices from across the country.

Although VPD's MCS has worked almost exclusively with BC FILU, they have also received referrals from other FILU offices in Canada. To date MCS has received 14 FILU requests and maintain communication with BC FILU regularly. The majority of the requests are from family members of MMIWG. Most of these requests have been for historic files, with the majority from the family members who want to initiate or re-establish contact with the VPD and receive investigative information surrounding the death or disappearance of their family member. When requested, MCS investigators will meet with family members to review their loved one's file and answer any questions or concerns the family may have. The VPD strives to have these meetings in person and a FILU staff member is also present to assist in providing the information in a compassionate, culturally-sensitive, and trauma-informed manner. Furthermore, VPD's MCS maintains communication with the family members if required and desired by the family, through FILU and/or through assigned family liaisons, as directed by BCPPS.

Finding Ways to Improve Communication with Families

The VPD recognizes that it needs to regularly assess the methods in which investigators communicate with the families of missing and murdered individuals. As such, the VPD is regularly reviewing and developing new processes to ensure that families are kept informed. For example, recently, MCS implemented new procedures to assist in maintaining accurate family contact information, logging all family contacts, and ensuring timely and respectful contact is made. Furthermore, in all new cases, the victims' families are provided contact information for Victim Services and in many cases are introduced to Victim Services personnel.

VPD Victim Services Unit

The VPD's Victim Services Unit follows mandated protocols to refer clients to specific community agencies, several of which are tailored towards Indigenous clients. If a victim of crime self-discloses that they are Indigenous to one of the VPD caseworkers, they are to refer them to Indigenous-focused services such as the Aboriginal Wellness Program, Watari

Youth, Family and Community Services, or Aboriginal Front Door. Referrals are also made to DEWC, Battered Women's Support Services, Women Against Violence Against Women, amongst others who have developed Indigenous culturally-focused support groups. Additionally, clients may be referred to the VACPC or liaise with the NPO at the VACPC.

The Impact of Officer Turnover

For a variety of reasons, investigators may leave sections. For example, often VPD investigators may work in a section for several years and then either seek promotion, or other sections for a new experience. Alternatively, investigators may reach their "tenure level" in a designated position. The VPD Tenure Policy provides the timeframes allowable for members to remain in a position. The policy also provides a structure that creates a level of equity in the workplace. A goal of the Tenure Policy is to provide sworn staff an opportunity to work in varied assignments throughout the organization. Tenure also provides opportunities for career development, promotes succession planning, and creates an atmosphere conducive to the sharing of knowledge and skills between experienced and less experienced staff.

The VPD recognizes that high turnover has the potential to negatively impact an investigation and communication with families. However, the VPD, in line with a recommendation in the MMIWG Inquiry²⁷, has provisions in place to mitigate these potential effects and has succession and transition plans between changes in personnel in a section. First, within the VPD Tenure Policy, extensions may be provided for the investigating officer to remain on the file, if it is in the best interest of the investigation, including if no other investigator has the skills or abilities for the specified assignment. This may include the rapport an investigator has established with families or if the family liaison role would not be suitable for another investigator.

However, in those situations when VPD investigators are transferred in the midst of an investigation they still work within the CoV and can provide investigative continuity. Importantly, VPD officers are not transferred to other cities or outside the province, as may occur with the RCMP. Therefore, if an officer were to be transferred, but has a key role in an investigation (e.g., family liaison), they may still serve in that capacity.

Finally, the VPD is compliant with BCPPS on Missing Person Investigations, which require that the family/reportee be aware of who they should contact so that open lines of communication between police and families are maintained.^{ix}

²⁷ *MMIWG Call for Justice 9.5 (iv): Recognize that the high turnover among officers assigned to a missing and murdered Indigenous woman's, girl's, or 2SLGBTQIA person's file may negatively impact both progress on the investigation and relationships with family members; police services must have robust protocols to mitigate these impacts.*

Unresolved Files of MMIWG

A recommendation in the MMIWG Inquiry is for all levels of government, including police services, to establish an independent specialized national task force to review and re-investigate unresolved files of MMIWG and 2SLGBTQQIA people.²⁸ The VPD supports this recommendation.

It is noteworthy, that commencing in 2016 and running until 2017, the VPD conducted a review of all unsolved murdered or missing Indigenous women files. This review was initiated before the National Inquiry.

- The VPD has nine unsolved homicide files dating between 1985 to 2002. The VPD has not had a known unsolved homicide involving an Indigenous woman since 2002 or prior to 1985.
- The VPD has 14 unsolved missing Indigenous women files dating between 1978 to 2007. The majority (12) of these files, from 2002 to 2007, were investigated by the joint VPD and RCMP Missing Women's Task Force specifically for Project Evenhanded and Project Amelia. The VPD has not had an unsolved missing Indigenous woman file since 2007 or prior to 1978.

The VPD supports the establishment of a national task force and should it be created, the VPD agrees to voluntarily disclose all unresolved cases of MMIWG, and 2SLGBTQQIA people to this task force.²⁹

Investigative Teams at VPD

The VPD encourages all its police officers to pursue career options that are suitable or of interest to them. Therefore, the VPD cannot assure that all investigations involving Indigenous women, girls, and 2SLGBTQQIA people are investigated by primary investigators of Indigenous descent.³⁰ However, regardless of the investigation, the VPD does ensure, as outlined in earlier sections, that all major crime investigations and missing person investigations are compliant with provincial policing standards. Furthermore, during investigations involving Indigenous women, girls, and 2SLGBTQQIA people, VPD investigators engage culturally appropriate resources and victim services, as described

²⁸ *MMIWG Call for Justice 9.9: We call upon all levels of government and all police services for the establishment of a national task force, comprised of an independent, highly qualified, and specialized team of investigators, to review and, if required, to reinvestigate each case of all unresolved files of missing and murdered Indigenous women, girls, and 2SLGBTQQIA people from across Canada. Further, this task force must disclose to families and to survivors all non-privileged information and findings.*

²⁹ *MMIWG Call for Justice 9.10 We call upon all police services to voluntarily produce all unresolved cases of missing or murdered Indigenous women, girls, and 2SLGBTQQIA people to the national task force.*

³⁰ *MMIWG Call for Justice 9.4 (i): Specialized Indigenous policing units are to be staffed with experienced and well-trained Indigenous investigators, who will be the primary investigative teams and officers overseeing the investigation of cases involving Indigenous women, girls, and 2SLGBTQQIA people.*

earlier (e.g., VACPC, Indigenous Court Support Worker, etc.). This also includes engaging the Indigenous Liaison Officer, Musqueam Liaison Officer, LGBTQ2S+ Liaison, Sex Industry Liaison Officer and/or the Indigenous Liaison and Protocol Officer.

Ensuring Public Trust: Independent Civilian Oversight of the VPD

The VPD prides itself on transparency and regularly provides information about policing to the citizens of Vancouver. The VPD understands that when police investigate themselves, there may be concerns about conflict of interest from the public.^{lxvi} That is, the public may believe that police officers investigating other police officers from the same agency may not be impartial; even if this were not to occur, the perception may undermine public trust.

The VPD recognizes that concept of public trust, does not equate to a unified public; experiences and a range of variables shape and influence perceptions of the police. For example, Indigenous Peoples may not have trust in police given past negative encounters (e.g., the role of police in enforcing Residential Schools).^{lxvii} The history between Indigenous Peoples and police makes police oversight a sensitive issue. In a review on police oversight that had extensive consultation, Indigenous people sensed that filing complaints is ineffective; perceptions were that if complaints were filed about police, they would face retribution, and many felt that oversight bodies were inaccessible.^{lxviii}

The Indigenous people consulted expressed a lack of understanding of the complex system of police oversight. When it comes to oversight in general, many felt that filing complaints is futile, that they would face retribution for filing complaints, that oversight bodies were inaccessible (especially for rural and remote communities), and that treatment from oversight bodies was often inappropriate.

Toward Peace, Harmony, and Well-being: Policing in Indigenous Communities (2019)

The VPD must ensure that police do not engage in criminal behaviour and agrees that where criminal conduct occurs, the law must be applied the same, to police and public alike. In addition, police officers must be held to standard for offenses under the *BC Police Act* and violations of *Charter of Rights and Freedoms*.^{lxix} Overall, the VPD is subject to a high degree of civilian oversight and meets the recommendation in the National Inquiry into MMIWG for independent oversight.³¹ Existing mechanisms for independent oversight are described in the following sections.

³¹ *MMIWG Call for Justice 9.6: We call upon all police services to establish an independent, special investigation unit for the investigation of incidents of failures to investigate, police misconduct, and all forms of discriminatory practices and mistreatment of Indigenous Peoples within their police service. This special investigation unit must be transparent in practice and report at least annually to Indigenous communities, leadership, and people in their jurisdiction.*

Office of the Police Complaint Commissioner

The Office of the Police Complaint Commissioner (OPCC) is a civilian, independent office of the Legislature that is responsible for overseeing and monitoring complaints and investigations involving municipal police in BC, including the VPD.^{lxv} The OPCC is responsible for the administration of discipline and proceedings under the *Police Act*. It is the role of the OPCC to ensure, with transparent civilian oversight, that *Police Act* investigations taken by the VPD are conducted with impartiality and fairness, to enhance public confidence.

Independent Investigations Office

Public trust may be tested when a police officer is involved in the death or serious injury of a civilian. The Independent Investigations Office (IIO) of B.C. provides independent civilian oversight to the VPD in these situations.^{lxvi} The IIO is responsible for investigations into incidents of death or serious harm, which may have been the result of a police officer, on duty or off duty. The VPD, under the *Police Act*, must notify the IIO of any incident that falls within its jurisdiction. Undertaking public interest, all IIO investigations are conducted to a criminal law standard, with civilian-led transparency.

BC Human Rights Tribunals

The VPD also maintains oversight through the BC Human Rights Code, which maintains a process, through the BC Human Rights Tribunal (Tribunal),^{lxvii} for dealing with complaints of discrimination. The complainant must have a personal characteristic that is protected under the Human Rights code, or be seen to have one. These personal characteristics include, race, colour, sex, gender identity or expression, ancestry, among other protected characteristics.

Civilian Governance: The Vancouver Police Board

Established as an independent and autonomous authority pursuant to the *Police Act*,^{lxviii} the Vancouver Police Board (VPB) is the employer and governing body of the VPD, providing civilian governance and oversight of the VPD. More specifically, the VPB provides governance as the employer of all sworn and civilian VPD staff, service and policy and direction setters, oversees finances, and provides authority for policy and service complaints.^{lxix}

VPB board members are appointed with considerations of diversity and knowledge of communities. Although not a requirement, the VPB, historically and currently, have had Indigenous representation from board members — in line with a recommendation in the National Inquiry into MMIWG to ensure appropriate representation on police boards.³² At the July, 2019 VPB meeting, Wendy John (taxʷtəna:t), a former Chief of the MIB was appointed as a board member. This appointment gives the VPB two Indigenous voices. Claire Marshall, who is Mi'kmaq from the Millbrook First Nation in Nova Scotia, has served on the board since June 2014. Over the years, other members of the Indigenous

³² *MMIWG Call for Justice 9.2 (iii): Ensure appropriate Indigenous representation, including Indigenous women, girls, and 2SLGBTQIA people, on police services boards and oversight authorities.*

community, including First Nations leader Jerry Adams (a member of the Eagle Clan from the Nisga'a Nation) and Wade Grant (MIB member) have served on the VPB.

Furthermore, in 2018, VPB members received Indigenous Awareness and Indigenous Relations training. Working with the Indigenous Protocol Officer, the VPB is currently planning Indigenous cultural training to be delivered to board members in the fall of 2019. Ensuring that it reaches various communities, the VPB meetings are often held in community. For example, a VPB meeting was held at Musqueam in 2016, and again in September, 2019.

The VPD appreciates the contributions of all VPB members, and the important offerings they make to cultural diversity.

Civil Lawsuits

The VPD is also subject to civil lawsuits that include liability including abuse of public office, negligent investigations, and Charter damages. Everyone is subject to the rule of law and legal oversight allows independent courts to assess police behaviour.

Review of Police Conduct in Criminal Cases

Oversight of police conduct occurs during criminal cases, through the judiciary. Judges review police actions and conduct; their role is to assess whether the Charter, Criminal Code, or case law were violated within the investigation. Through their case decisions, they provide remedies that may be pertain to exclusion of evidence, stays of proceedings, or sentence reductions should be awarded".^{lxx} These court decisions have significant ramifications to police practice.

Public Inquiries and Coroners Inquests

Public inquiries, "the gold standard" of independent review, are high profile and frequently requested for review of police conduct. Governments must order a public inquiry and reserve the right to refuse to appoint them. Coroner's inquests lack the high profile nature of public inquiries but serve an important role in cases of police related-deaths and lead to recommendations regarding police training. All deaths in police custody necessitate a coroner's inquest.

Provincial Oversight

Under the *Police Act* the Policing and Security Branch, a component of the Ministry of Public Safety and Solicitor General, is responsible for overseeing law enforcement by a variety of functions.^{lxxi} These include developing and coordinating policy and legislation, and as outlined in earlier sections, establishing policing standards. They are also responsible for inspecting the quality of police services, thereby providing an external oversight.

Inspiring Change: Future Directions for the VPD

The VPD is committed to ensuring that police practices are applied judiciously and do not infringe on citizen rights; the VPD will continue to work on initiatives that support this commitment. The VPD also remains dedicated to preventing violence against Indigenous women, girls and 2SLGBTQQIA people. The VPD will continue to work on initiatives that support this commitment, as described below.

Continued Education for VPD Officers

The VPD will continue to review its training in an effort to ensure that its police officers are culturally aware and serve the citizens of Vancouver in fair and impartial ways. The VPD will continue to offer the materials from the courses that were detailed in this report (e.g., in the fall of 2019, the VPD will be offering the *Major Case Management* eLearning course).

The VPD Training section will continue to update its courses as required with the perspectives of the National Inquiry into MMIWG (e.g., the 2014 *Sex Work and Workers Awareness* eLearning course will be updated and delivered in the fall of 2019).

Expansion of Trauma Informed Training

Additional trauma informed policing and interviewing training is in the planning stages for delivery in 2020; the VPD's Training section will review the National Inquiry into MMIWG as it applies to course curriculum. It is the VPD's intention to research and evaluate more comprehensively the training that is currently available and/or recommended for police regarding TIP. For example, the Justice, Public Safety and Anti-Violence Community Sectors have embarked in the TIP Project. The TIP Project is a five-year federal Department of Justice funded project, currently in its fourth year. The project is led by a cross-sector Steering Committee including representatives from Crown Counsel, police, corrections, victim services, and programs that work to prevent violence against women.

The TIP program has recently developed and made available an online TIP Foundations Course. The VPD is currently in the process of reviewing this eLearning course. With the current cross-sector online course, there is a concern regarding the volume of material and the potential for redundancy based on what VPD is doing or will be doing from a training perspective. As such, the VPD plans to review the TIP course and design a curriculum specifically for all of our members from frontline to those in investigative sections.

Supporting Calls for Justice at a National Level

The National Inquiry into MMIWG identified Calls for Justice for police services that require cooperation and efforts at a national level. The VPD acknowledges that the efforts must be collective and supports working at a national level towards the shared goal of ending violence against Indigenous women, girls, and 2SLGBTQQIA people.

Supporting a Nationwide Emergency Number

The VPD supports the National Inquiry's call for the establishment of a nationwide emergency number and is current working with police services at a national level.³³

Unresolved Files of MMIWG

As outlined earlier, a recommendation in the MMIWG Inquiry was for all levels of government, including police services, to establish an independent specialized national task force to review and re-investigate unresolved files of MMIWG and 2SLGBTQQIA people.³⁴ Although the VPD believes that it has exhausted all potential investigative avenues in each of these unsolved files, the VPD welcomes independent file reviews and recommendations on how any of these files can be further advanced. As such, the VPD will be happy to participate in this task force and will provide any of VPD's unresolved cases of MMIWG, and 2SLGBTQQIA, as requested.³⁵

National Strategy to Ensure Consistency in Reporting Mechanisms

The CACP sought and was recognized as a party with standing for the National Inquiry into MMIWG. The CACP attended seven of the nine institutional and expert hearings, submitted oral and closing submissions, and put forward Retired Chief Clive Weighill as a witness for the Police Policies and Practices hearing in Regina, Saskatchewan.

Within the submission, the CACP provided over 20 recommendations ranging from improvements in socio-economic funding by governments, culturally sensitive and trauma-informed missing persons manuals and policies, civilian oversight, and increasing officer knowledge relating to traditional, spiritual and cultural awareness.

³³ *MMIWG Call for Justice 9.5 (vii): Lead the provincial and territorial governments to establish a nationwide emergency number.*

³⁴ *MMIWG Call for Justice 9.9: We call upon all levels of government and all police services for the establishment of a national task force, comprised of an independent, highly qualified, and specialized team of investigators, to review and, if required, to reinvestigate each case of all unresolved files of missing and murdered Indigenous women, girls, and 2SLGBTQQIA people from across Canada. Further, this task force must disclose to families and to survivors all non-privileged information and findings.*

³⁵ *MMIWG Call for Justice 9.10 We call upon all police services to voluntarily produce all unresolved cases of missing or murdered Indigenous women, girls, and 2SLGBTQQIA people to the national task force.*

The CACP will be responsible for leading a national strategy to ensure consistency in reporting mechanisms for reporting MMIWG and 2SLGBTQQIA people (as outlined in MMIWG recommendation 9.5 (v)).³⁶ The VPD will be supporting this strategy and will work with CACP towards this important approach.

Funding for Specialized Indigenous Policing Units

A call for justice in the National Inquiry into MMIWG is for adequate funding by the government for specialized Indigenous policing units (within non-Indigenous police services).³⁷ The VPD is supportive of this recommendation for additional funding for DIIRS and other specialized positions tailored for the Indigenous community.

Enhancing Investigative Practices

As described earlier, VPD engages culturally appropriate resources when dealing with investigations of missing and murdered Indigenous women and girls (e.g., Indigenous Protocol Officer, Indigenous Liaison Officer, 2SLGBTQQIA Liaison Officer, Sex Industry Liaison Worker or the Musqueam Officer). However, the VPD is in the preliminary phases of formalizing the process to ensure engagement and consultation with Indigenous police officers. The VPD agrees that this perspective is important to investigations, opening lines of communication with families, and building trust.

Remaining Dedicated to Build Community Relationships

In addition to the dedicated positions discussed throughout this report, the VPD will continue its commitment to building and sustaining relationships with the local communities and cultures. Members of the VPD will continue to meet regularly with community representatives to develop programming to enhance community safety, and to participate in community forums, workshops, and rallies.

Among other programs, the VPD will continue the SisterWatch program to help ensure that all women are safe from harm and that women feel comfortable reporting crimes to the VPD. The VPD will also continue to build relationships with the 2SLGBTQQIA people and work on programming to ensure the safety of this community. The VPD has made strides with programming such as Safe Place, and will continue to engage community members so that the VPD can serve and protect them.

³⁶ *MMIWG Call for Justice 9.5 (v) Create a national strategy, through the Canadian Association of Chiefs of Police, to ensure consistency in reporting mechanisms for reporting missing Indigenous women, girls, and 2SLGBTQQIA people. This could be developed in conjunction with implementation of a national database.*

³⁷ *MMIWG Recommendation 9.4 (iii): Specialized Indigenous policing units, within non-Indigenous police services, are to be funded adequately by governments.*

Commemorate the Missing and Murdered Indigenous Women and Girls

The VPD is working with SisterWatch to create a commemorative House Pole for the missing and murdered Indigenous women and girls. It will be located in the VPD investigative building where the MPU and Homicide units are located.

The VPD House Pole will serve to remember the missing and murdered Indigenous women and girls. This location is also where VPD members are sworn into service and the VPD House Pole will be a guiding foundation for new recruits.

The unveiling of the House Pole is expected in the spring of 2020 and will occur as part of a community traditional Indigenous feast.

Eagle Feather Oath

The VPD is currently exploring the use of a sacred eagle feather as an alternative method of oath taking in swearing-in ceremonies for the VPD's Indigenous recruits. This form of swearing oaths is in practice in a number of legal capacities across Canada, including testimony provided by participants in court processes from police officer to victims, witnesses, and accused persons. As an alternative to the Bible or affirmation, using the eagle feather acknowledges its spiritual significance and rightful place in formal occasions of truth-telling for Indigenous Peoples.

Display Indigenous Artwork

The VPD is looking forward to the unveiling and displaying of a piece of artwork commissioned from Kwantlen First Nation artist Brandon Gabriel. Laminated on red cedar, the central symbolism on the artwork is the Thunderbird, representing transformation and change. Also symbolized is the wolf, representing service to the community and family. The centre of the artwork is the mask dancer, who symbolically removes illness and suffering, while bringing wellness to those who need it. Towards reconciliation and through dialogue with the VPD Indigenous Advisory Committee, this artwork will be displayed prominently at the VPD's Court and Detention Services, and is funded by the Vancouver Police Foundation.

Commitment to Continue VPD Indigenous Advisory Committee

The VPD prioritizes the elimination of barriers between police and the Indigenous community and acknowledges that these barriers exist and have existed for too long. Towards building trust with the Indigenous community, the VPD will ensure the continuation of the VPD Indigenous Advisory Committee.

In the short time this committee has been established, important steps have already taken place. To ensure this committee is effective and communication flow is improved, the VPD Indigenous Advisory committee will be preparing a year-end report to outline key accomplishments and assessment of the committee's success. This report will provide important insight and allow modifications to be made if necessary. Furthermore, to ensure

that any concerns or issues raised by the committee are not lost, the Chief Constable, along with other members of the VPD Executive commit to remain as members on this committee.

... people in the police department who have tirelessly promoted healthy policing. How the VPD recognized the need to include the Elders and Youth from the Indigenous community...It is the heart and soul that the Indigenous people see and they slowly believe that changes are occurring. The symbols of Indigenous people on the police cars; the Thunder Bird. The inclusion of ceremony from the Coast Salish people and their protocols.

Elder Jerry Adams

VPD Indigenous Advisory Committee Member

Continued Programming for Indigenous Youth

Canada's Indigenous population is increasing; and if "the future of a country is its youth, then Canada's future is increasingly Aboriginal. Canada's Aboriginal youth population is growing at three times the national average."^{lxxii} The literature on the victimization of this growing population is dark — the results of the 2014 GSS revealed that more violent crimes were committed against Indigenous youth than their older counterparts.^{lxxiii} Childhood sexual abuse against Indigenous youth has been found to be prevalent, according to some studies. For example, on average, 25% to 50% of Indigenous women were victims of sexual abuse as children compared to 20% to 25% average within the non-Indigenous population.^{lxxiv}

A comparison of Indigenous children to non-Indigenous children found that 40% of Indigenous people reported being physically or sexually abused before the age of 15 (compared to 29% of non-Indigenous people).^{lxxv} The study found that 14% of Indigenous girls and 5% of Indigenous boys reported being both physically or sexually abused before the age of 15.^F

Further emphasizing the need for proactive measures, there is a correlation between childhood domestic victimization, and subsequent victimization and criminal activity later in life.^{lxxvi} There is an association between the severity of the abuse and the likelihood of the victim becoming involved in juvenile delinquency — this is particularly the case among males.^{lxxvii} In light of these serious findings, and an effort towards preventative programming, the VPD has the several youth-oriented initiatives in place, and programming focused on Indigenous Youth. For example, aimed at Indigenous youth aged 19 to 31, the VPD's Indigenous Cadet Program (ICP) continues to successfully employ two to four Indigenous applicants per cohort, with the focus on promoting employment and career development opportunities for Indigenous Peoples within law enforcement agencies.

Another example, for the past several years, the VPD has been involved in the planning and implementation of the annual Community Celebration Series at Grandview/ᓵuuqinak'uuh Elementary School in Vancouver. Indigenous Peoples represent over 70% of the student population and include Nations such as: Squamish, Musqueam, Tsleil Waututh, Haida, Nisga'a, Cree, Ojibwe, Dakelh, Piapot, Kwakwaka'wakw, Namgis, Kwaqitl, Tsimshian, and Métis.^{lxxviii}

In addition, The Indigenous Liaison works with Native Education College program, to involve practicum students within the DIIRS programming. As a result of these practicum students, the DIIRS women's safety seminar was developed and delivered into community. Further educational opportunities were secured for practicum students, after completion of their program.

Focusing on Indigenous Youth: The Access, Recreation, and Culture Program

In October 2018, VPD's DIIRS launched the first session of the Access, Recreation, and Culture (ARC) Program, which engages high-risk, urban Indigenous youth in cultural and recreational activities, and encourages pro-social behaviours and healthy life choices. The ARC program is intended for youths between the ages of 16 to 24 who may have any combination of the following risk factors: substance use issues; physical and/or mental health concerns; homelessness or lack of stable housing; low socio-economic status and lack of access to resources for survival; poor educational attainment and/or limited employment history; involvement with the criminal justice system; and, social isolation and attachment to negative associates.

The first cohort comprised of eight males aged 15 to 18. They engaged in a series of meaningful seminars designed to introduce them to Indigenous cultural practices as well as key aspects of policing. These seminars included teaching on the Medicine Wheel with Indigenous Elders, Cedar Weaving, Drumming, a guided hike with members of the Tsleil-Waututh Nation, and field trips to the VPD's Marine Squad and Mounted Squad.

In April 2019, a second cohort, with two females and six males, aged 14 to 20, started the ARC program. To date they have spent an extensive and meaningful session under the guidance of an Indigenous Elder, participated in a field trip with the VPD Marine Unit, and in a coaching session with a member of the VPD Recruiting Unit. Work towards obtaining drivers licences for these participants has already started, along with coaching them towards participation in the VPD's ICP.

An independent review of the program was conducted in January 2019, and the results revealed that the program is being well received and impactful in terms of inspiring youth to continue to work towards a career in the criminal justice system. Further, the review identified a recommendation by the youth to visit the Vancouver Police Museum; this recommendation has been implemented.

Extensive VPD resources are committed to youth engagement, namely through programming that provides positive interactions and nurture relationships, understanding,

and trust between youth and police. Concurrently, these efforts serve to develop self-esteem and positive life skills among youth, while deterring them from engaging in criminal activities such as gang involvement. The VPD will continue these programs, as well as develop new other youth oriented programming.

Conclusion

A collective responsibility to end the systemic causes of violence and increase the safety of Indigenous women, girls and 2SLGBTQQIA people is required. The VPD accepts the voices in the National Inquiry into MMIWG and will continue taking action to address the concerns raised.

Sexism, racism, stereotypes, and any other discriminatory behaviour does not have a place in the VPD; *all* citizens have the right to feel safe in their communities and all citizens have human rights to be upheld. Efforts are made to ensure that the police officers that comprise the VPD treat people with respect, fairness, and compassion. Once hired, the VPD provides regular training to ensure that VPD officers serve citizens with cultural competence.

The VPD is committed to transparency in its actions and remaining accountable in its service to the public. The VPD respects that its success is inherently reliant upon maintaining, improving, and learning from its existing relationships with the communities it serves.

Glossary

2SLGBTQIA	TWO-SPIRIT, LESBIAN, GAY, BISEXUAL, TRANSGENDER, QUEER, QUESTIONING, INTERSEX AND ASEXUAL
ACC	ABORIGINAL CULTURAL COMPETENCY
ARC	ACCESS RECREATION AND CULTURE
BCACP	BRITISH COLUMBIA ASSOCIATION OF CHIEFS OF POLICE
BCMPC	BRITISH COLUMBIA MISSING PERSONS CENTRE
BCPPS	BRITISH COLUMBIA PROVINCIAL POLICING STANDARDS
CACP	CANADIAN ASSOCIATION OF CHIEFS OF POLICE
CISM	CRITICAL INCIDENT STRESS MANAGEMENT
CEU	COUNTER EXPLOITATION UNIT
CoV	CITY OF VANCOUVER
CYAC	CHILD AND YOUTH ADVOCACY CENTRE
DEWC	DOWNTOWN EASTSIDE WOMEN'S CENTRE
DIIRS	DIVERSITY, INCLUSION, AND INDIGENOUS RELATIONS SECTION
DTES	VANCOUVER DOWNTOWN EASTSIDE
DVACH	DOMESTIC VIOLENCE AND CRIMINAL HARASSMENT SECTION
FILU	FAMILY INFORMATION LIAISON UNIT
FIP	FAIR AND IMPARTIAL POLICING
FNPP	FIRST NATIONS POLICING PROGRAM
FSGV	FAMILY SERVICES OF GREATER VANCOUVER
GOV	GATHERING OUR VOICES
GSS	GENERAL SOCIAL SURVEY
HR	HUMAN RESOURCES
IACP	INTERNATIONAL ASSOCIATION OF CHIEFS OF POLICE
ICP	INDIGENOUS CADET PROGRAM
JIBC	JUSTICE INSTITUTE OF BRITISH COLUMBIA
MCS	MAJOR CRIME SECTION
MCFD	MINISTRY OF CHILDREN AND FAMILY DEVELOPMENT
MCM	MAJOR CASE MANAGEMENT
MIB	MUSQUEAM INDIAN BAND
MMIWG	NATIONAL INQUIRY INTO MISSING AND MURDERED INDIGENOUS WOMEN AND GIRLS
MPU	MISSING PERSONS UNIT
MWCI	MISSING WOMEN COMMISSION OF INQUIRY
NPO	NEIGHBOURHOOD POLICE OFFICER
OPCC	OFFICE OF THE POLICE COMPLAINT COMMISSIONER
PACE	PROSTITUTION ALTERNATIVES COUNSELLING AND EDUCATION SOCIETY
PR&A	PLANNING, RESEARCH, AND AUDIT SECTION
PWIP	POLICING WITH INDIGENOUS PEOPLE'S
RCMP	ROYAL CANADIAN MOUNTED POLICE
RTIC-BC	REAL TIME INTELLIGENCE CENTRE
SCU	SEX CRIMES UNIT
SIS	SPECIAL INVESTIGATIONS SECTION

SMC	SPECIAL MUNICIPAL CONSTABLES
TIP	TRAUMA INFORMED PRACTICES
UN	UNITED NATIONS
UNYA	URBAN NATIVE YOUTH ASSOCIATION
VACFSS	VANCOUVER ABORIGINAL CHILD AND FAMILY SERVICES SOCIETY
VACPC	VANCOUVER ABORIGINAL COMMUNITY POLICING CENTRE
ViCLAS	VIOLENT CRIME LINKAGE ANALYSIS SYSTEM)
VPB	VANCOUVER POLICE BOARD
VPD	VANCOUVER POLICE DEPARTMENT
WAWAW	WOMEN AGAINST VIOLENCE AGAINST WOMEN
WISH	WOMEN'S INFORMATION AND SAFE HOUSE
WPST	WOMEN'S PERSONAL SAFETY TEAM

Appendices

Appendix A: Calls for Police Services

9.1 We call upon all police services and justice system actors to acknowledge that the historical and current relationship between Indigenous women, girls, and 2SLGBTQQIA people and the justice system has been largely defined by colonialism, racism, bias, discrimination, and fundamental cultural and societal differences. We further call upon all police services and justice system actors to acknowledge that, going forward, this relationship must be based on respect and understanding, and must be led by, and in partnerships with, Indigenous women, girls, and 2SLGBTQQIA people.

9.2. We call upon all actors in the justice system, including police services, to build respectful working relationships with Indigenous Peoples by knowing, understanding, and respecting the people they are serving. Initiatives and actions should include, but are not limited to, the following measures:

- i) Review and revise all policies, practices, and procedures to ensure service delivery that is culturally appropriate and reflects no bias or racism toward Indigenous Peoples, including victims and survivors of violence.
- ii) Establish engagement and partnerships with Indigenous Peoples, communities, and leadership, including women, Elders, youth, and 2SLGBTQQIA people from the respective territories and who are resident within a police service's jurisdiction.
- iii) Ensure appropriate Indigenous representation, including Indigenous women, girls, and 2SLGBTQQIA people, on police services boards and oversight authorities.
- iv) Undertake training and education of all staff and officers so that they understand and implement culturally appropriate and trauma-informed practices, especially when dealing with families of missing and murdered Indigenous women, girls, and 2SLGBTQQIA people.

9.3 We call upon all governments to fund an increase in recruitment of Indigenous Peoples to all police services, and for all police services to include representation of Indigenous women, girls, and 2SLGBTQQIA people, inclusive of diverse Indigenous cultural backgrounds, within their ranks. This includes measures such as the following:

- i) Achieve representative First Nations, Inuit, and Métis diversity and gender diversity within all police services through intensive and specialized recruitment across Canada.
- ii) Ensure mandatory Indigenous language capacity within police services.

iii) Ensure that screening of recruits includes testing for racial, gender, gender identity, and sexual orientation bias.

iv) Include the Indigenous community in the recruitment and hiring committees/process.

v) In training recruits, include: history of police in the oppression and genocide of Indigenous Peoples; anti-racism and anti-bias training; and culture and language training. All training must be distinctions-based and relevant to the land and people being served; training must not be pan-Indigenous.

vi) Retain Indigenous officers through relevant employment supports, and offer incentives to Indigenous officers to meet their unique needs as Indigenous officers serving Indigenous communities, to ensure retention and overall health and wellness of the service.

vii) End the practice of limited-duration posts in all police services, and instead implement a policy regarding remote and rural communities focused on building and sustaining a relationship with the local community and cultures. This relationship must be led by, and in partnership with, the Indigenous Peoples living in those remote and rural communities.

9.4 We call upon non-Indigenous police services to ensure they have the capacity and resources to serve and protect Indigenous women, girls, and 2SLGBTQQIA people. We further call upon all non-Indigenous police services to establish specialized Indigenous policing units within their services located in cities and regions with Indigenous populations.

i) Specialized Indigenous policing units are to be staffed with experienced and well-trained Indigenous investigators, who will be the primary investigative teams and officers overseeing the investigation of cases involving Indigenous women, girls, and 2SLGBTQQIA people.

ii) Specialized Indigenous policing units are to lead the services' efforts in community liaison work, community relationship building, and community crime-prevention programs within and for Indigenous communities.

iii) Specialized Indigenous policing units, within non-Indigenous police services, are to be funded adequately by governments.

9.5 We call upon all police services for the standardization of protocols for policies and practices that ensure that all cases of missing and murdered Indigenous women, girls, and 2SLGBTQQIA people are thoroughly investigated. This includes the following measures:

i) Establish a communication protocol with Indigenous communities to inform them of policies, practices, and programs that make the communities safe.

ii) Improve communication between police and families of missing and murdered Indigenous women, girls, and 2SLGBTQQIA people from the first report, with regular and ongoing communication throughout the investigation.

iii) Improve coordination across government departments and between jurisdictions and Indigenous communities and police services.

iv) Recognize that the high turnover among officers assigned to a missing and murdered Indigenous woman's, girl's, or 2SLGBTQQIA person's file may negatively impact both progress on the investigation and relationships with family members; police services must have robust protocols to mitigate these impacts.

v) Create a national strategy, through the Canadian Association of Chiefs of Police, to ensure consistency in reporting mechanisms for reporting missing Indigenous women, girls, and 2SLGBTQQIA people. This could be developed in conjunction with implementation of a national database.

vi) Establish standardized response times to reports of missing Indigenous persons and women, girls, and 2SLGBTQQIA people experiencing violence, and conduct a regular audit of response times to monitor and provide feedback for improvement.

vii) Lead the provincial and territorial governments to establish a nationwide emergency number.

9.6 We call upon all police services to establish an independent, special investigation unit for the investigation of incidents of failures to investigate, police misconduct, and all forms of discriminatory practices and mistreatment of Indigenous Peoples within their police service. This special investigation unit must be transparent in practice and report at least annually to Indigenous communities, leadership, and people in their jurisdiction.

9.7 We call upon all police services to partner with front-line organizations that work in service delivery, safety, and harm reduction for Indigenous women, girls, and 2SLGBTQQIA people to expand and strengthen police services delivery.

9.8 We call upon all police services to establish and engage with a civilian Indigenous advisory committee for each police service or police division, and to establish and engage with a local civilian Indigenous advisory committee to advise the detachment operating within the Indigenous community.

9.9 We call upon all levels of government and all police services for the establishment of a national task force, comprised of an independent, highly qualified, and specialized team of investigators, to review and, if required, to reinvestigate each case of all unresolved files of missing and murdered Indigenous women, girls, and 2SLGBTQQIA people from across

Canada. Further, this task force must disclose to families and to survivors all non-privileged information and findings.

9.10 We call upon all police services to voluntarily produce all unresolved cases of missing or murdered Indigenous women, girls, and 2SLGBTQIA people to the national task force.

9.11 We call upon all police services to develop and implement guidelines for the policing of the sex industry in consultation with women engaged in the sex industry, and to create a specific complaints mechanism about police for those in the sex industry.

Appendix B: Additional Calls for Justice Relevant for Police Services

Calls for Justice – Métis - Specific

17.12 We call upon police services to build partnerships with Métis communities, organizations and people to ensure culturally safe access to police services.

17.13 We call upon police services to engage in education about the unique history and needs of Métis communities.

17.14 We call upon police services to establish better communication with Métis communities and populations through representative advisory boards that involve Métis communities and address their needs.

Calls for Justice – 2SLGBTQQIA – Specific

18.12 Police services better investigate crimes against 2SLGBTQQIA people and ensure accountability for investigations and cases involving 2SLGBTQQIA people.

18.13 Police services engage in education regarding 2SLGBTQQIA people to address discrimination, especially homophobia and transphobia.

18.14 Police services take appropriate steps to ensure safety of 2SLGBTQQIA people in the sex industry.

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VANCOUVER POLICE DEPARTMENT

REPORT TO THE VANCOUVER POLICE BOARD

REPORT DATE: September 13, 2018
COMMITTEE MEETING DATE: September 26, 2018
BOARD REPORT # 1809C01

Regular

TO: **Vancouver Police Board Service and Policy Complaint Review Committee**
FROM: Drazen Manojlovic, Director, Planning, Research, and Audit Section
SUBJECT: Service or Policy Complaint (#2018-133) on Street Checks

RECOMMENDATION:

THAT the Vancouver Police Board Service and Policy Complaint Review Committee instruct the Vancouver Police Department (VPD) to implement the six recommendations detailed in the attached report titled *Understanding Street Checks*, to ensure that street checks are used in a transparent and accountable manner that balances the need to maximize public safety while respecting the experiences, and addressing the concerns, of the communities that the VPD serves.

BACKGROUND:

In May 2018, the VPD publicly released data on street checks. The data included the annual number of street checks conducted over the ten-year period from 2008-2017, and provided data regarding the ethnicity and gender of persons that were checked by front-line VPD officers. In June 2018, the Union of BC Indian Chiefs and the BC Civil Liberties Association submitted a Service or Policy Complaint to the Office of the Police Complaint Commissioner. The complainants stated, "in 2017, Indigenous people accounted for over 16 percent of the checks despite making up just over two percent of the population", and "in 2017, Black people accounted for five percent of the checks despite making up only one percent of the population." Based on these figures, the complainants concluded that street checks were "being conducted in a discriminatory manner" and that the street check data is "statistical evidence of discrimination." An amended complaint, submitted in July 2018, similarly questioned the statistical overrepresentation of Indigenous females in VPD street check data, stating, "in 2016, Indigenous women accounted for over one-fifth of all checks of women (21%)."

DISCUSSION:

Accompanying this report is a comprehensive review of street checks. This review provides:

- Context and background on what a street check is;
- The circumstances under which street checks are conducted and the legal authorities for these checks;
- A statistical analysis of the frequency, location and background of persons that were checked by VPD officers;

- A discussion of what steps the VPD has taken to ensure street checks are not conducted in a random or arbitrary manner; and,
- An examination of the ongoing training that the VPD has conducted to educate its members about Indigenous Peoples and Black persons and the challenges they face.

General Findings:

The review's statistical analysis shows that the vast majority of street checks (80% of those conducted in 2017) involved persons that were already associated to crime by Metro Vancouver police agencies and who, on average, had been the subject of 22 previous criminal investigations prior to VPD officers conducting a street check of the individual.

The police have a legal obligation to preserve the peace, prevent crime, and keep citizens safe. This obligation, and the corollary police authority, are based on the public's expectation that police officers will proactively interact with persons who are exhibiting behaviour that is indicative of criminal activity. Examples of such behaviour include a known sex offender loitering in an area that children frequent, a person shining a flashlight into cars in a parking lot where there have been high rates of thefts from vehicles, and a person found in a secluded building alcove of a closed business late at night. In assessing such situations, a person's race or gender does not form any basis to support an officer's decision to conduct a street check.

In addition to preventing crime, the police are required to be responsive to calls for service from the public. This review found that street checks also result from calls for service from the public when citizens call to report concerns about something that they have observed, as opposed to solely being initiated by police officers based on observations of suspected criminal or suspicious behaviour.

Police officers are also required to take action that prevents harm to any individual. This duty is even more vital to fulfil when it pertains to potentially vulnerable persons including those dealing with mental health challenges, addiction issues or homelessness. As such, police officers also utilize street checks to ensure the well-being of individuals in the community. In respect of the issue of missing and murdered Indigenous women and girls, VPD officers have utilized street checks to check on the well-being of Indigenous females. In the ten years from 2008-2017, there were a total of 3,988 street checks of Indigenous females; it was found that the majority of these street checks (53%) involved Indigenous females who were the subject of a missing person report. The documented street check information – including locations where the at-risk female may frequent, friends or associates that she was with who may have a means of contacting or later locating the female – provide valuable information that can be used by police if the woman goes missing. It is important to note that in such circumstances, the police interaction with the female and the information recorded is used to ensure that public safety is maximized for all persons and especially for vulnerable segments of the community.

A geographic analysis of street checks was also conducted for the attached report. This analysis determined that street checks occurred most frequently in areas of Vancouver where the violent crime rate was highest – an indication that these checks are being used as a proactive response to prevent violence in these high crime areas. This geographic analysis also found that street checks are strongly correlated to areas where the VPD receives the highest concentration of calls for service from the public – indicative of street checks being conducted to address neighbourhood and community crime issues. Collectively, these findings indicate that street checks are not being conducted in an arbitrary manner. Rather, street checks are being conducted of persons already associated to crime that have extensive prior dealings with police and occur in locations where the violent crime rate is highest and where the community makes the greatest number of requests for police service.

Representation of Genders and Ethnicities:

The VPD remains wholly transparent around its use of street check and the data that is captured in an effort to prevent crime and ensure public safety. The conclusion advanced by the complainants that street check data is evidence of police discrimination oversimplifies the complex societal factors and historical context of our community.

While the VPD strives for the equal and equitable treatment of all persons under the law, we acknowledge that historical factors have influenced the environment in which we police. We respect and continually strive to better understand the troubling Canadian history of systemic discrimination against Indigenous Peoples. The impact that this history has on our society was highlighted in the seminal 1999 Supreme Court of Canada ruling in *R. v. Gladue*, regarding the sentencing of an Indigenous woman from British Columbia, that discussed how the particular circumstances that brought an Indigenous Person before the court must be carefully considered:

Years of dislocation and economic development have translated, for many aboriginal peoples, into low incomes, high unemployment, lack of opportunities and options, lack or irrelevance of education, substance abuse, loneliness, and community fragmentation. These and other factors contribute to a higher incidence of crime and incarceration.

The generational effects of colonization, displacement, discriminatory government policies and the residential school system have disadvantaged Indigenous Peoples. We recognize that this discrimination has led to overrepresentation of Indigenous Peoples in all aspects of the criminal justice system.

Locally, the VPD appreciates that in 2017, 39 percent of homeless persons in Metro Vancouver were Indigenous Peoples, despite comprising just 2.5% of the population. This rate of homelessness was nearly two and a half times the percentage of Indigenous Peoples that were street checked in 2017 (16%). The conclusion that the overrepresentation of Indigenous Peoples in street check data is evidence of discrimination fails to control for complex societal factors and the generations of mistreatment of Indigenous Peoples.

In addition to controlling for societal factors, attempts to draw conclusions from VPD street check data must also control for the rate of criminal charges laid by Crown counsel and the rate of imprisonment following conviction by the courts. Both of these bodies, Crown counsel and the courts, serve as important independent entities that respectively review and try facts collected by the police. The attached review of street checks found that there was a strong relationship between street checks and criminal charges. The analysis showed that the percentage of street checks by ethnicity is comparable to the percentages of criminal charges. For example, the complainants note street checks of Black persons was 5% in 2017. However, the review of VPD data found that in the ten-year period from 2008-2017, 4.7% of violent crime offenders were Black persons – a result which supports the conclusion that the rate of street checks is highly correlated to the rate at which offenders are charged. This outcome is not an indictment of any community or group; rather, it indicates that overrepresentation of specific communities or groups is likely primarily driven by complex socio-economic factors.

Similar to criminal charges, the ethnicity and gender of incarcerated persons does not align with population data. In Canada, Indigenous Peoples comprise 5% of the population; however, in 2016-17, Indigenous Peoples represented 28 percent of the adults admitted to provincial or territorial correctional facilities and, similarly, 27 percent of the adults admitted to federal facilities. In British Columbia, Indigenous Peoples comprised 30 percent of the men admitted to correctional

facilities, while Indigenous women comprised nearly half (47%) of all women admitted – highlighting the need to be especially cognizant of the challenges faced by Indigenous women.

It is unrealistic and overly simplistic to expect racial and gender population statistics to align uniformly with crime data. For example, women make up about half of the population and men make up the other half. However, men commit approximately 80 percent of crime. In addition, the overrepresentation of specific groups within street check data is not unique to visible minority communities, as the majority of street checks involved Caucasians: in 2016, Caucasian people made up 46 percent of the Vancouver population and were overrepresented in the street check data, as they comprised 57 percent of total street checks conducted by the VPD.

The front-line police work performed by VPD officers to ensure public safety, including street checks, is not discriminatory. The VPD does not condone police officers carrying out arbitrary or random stops that are unlawful or do not have a valid policing purpose. A person's gender or ethnicity are not grounds that can be used to justify police action. Furthermore, the VPD adheres to, and reinforces, the Canadian *Charter of Rights and Freedoms* and the *BC Human Rights Code* in order to guard against arbitrary detention and any other potentially discriminatory practice.

MOVING FORWARD:

While there is no statistical basis for the conclusion that the actions of VPD officers are systematically discriminatory, the VPD respects that the analysis of street check data over the past ten years is limited in its ability to capture the unique concerns and experiences of the communities that the VPD serves. While not being motivated by ethnicity or gender, the VPD appreciates that persons being checked can sometimes perceive that these factors may be at play, especially in instances where the person has limited previous interactions with the police. This potential and the experiences of the diverse communities that comprise Vancouver are critical for the VPD to further understand and appreciate. The public's trust in the professionalism and impartiality of the VPD is critical to ensuring public safety in Vancouver.

The VPD is committed to transparency in its actions and remaining accountable in its service to the public. The VPD respects that its success is inherently reliant upon maintaining and improving on its existing relationships with the communities it serves. Unquestionably, the public must have complete confidence that the VPD's practices, including its use of street checks, are not discriminatory. To ensure this, the attached report recommends:

- Formalizing our existing VPD street check standards into policy and ensuring that our policy adheres to new provincial standards that are currently being developed;
- Additional training to ensure that VPD officers are utilizing street checks appropriately;
- Committing to publicly releasing VPD street check data annually;
- Furthering existing community relationships to better understand the unique experiences, perceptions and histories of the communities that we serve;
- Assigning an Indigenous Liaison Protocol Officer to support greater communication between our patrol officers and our partners in the Indigenous community; and,
- Establishing a new street check category in the records system to specifically document when officers are dealing with an individual to ensure their safety and well-being.

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Date: September 13, 2018

Submitting Executive Member: _____



Deputy Chief Constable Chow

Date: September 18, 2018

Understanding Street Checks:

An Examination of a Proactive Policing Strategy

September 2018



VANCOUVER POLICE DEPARTMENT
Beyond the Call

Message from Chief Constable Adam Palmer

As Chief Constable of the Vancouver Police Department, my most important responsibility is to ensure that our communities are safe. I also have an obligation to safeguard the public's confidence in the police. I commissioned a full review into how the Vancouver Police Department conducts street checks in response to a complaint received by the Vancouver Police Board.

Sadly, we have a troubling history in Canada of systemic discrimination against Indigenous Peoples – this has been extensively researched and documented. The generational effects of colonization, displacement, the residential school system and discriminatory government policies have disadvantaged and impoverished Indigenous Peoples. We recognize that this discrimination has led to substance use, poverty, homelessness and over-representation of Indigenous people in the criminal justice system. As a society, we failed Indigenous People, and as Chief, I feel strongly that we all have a responsibility to ensure that systemic racism and discriminatory practices do not happen, ever.

This history has relevance in all aspects of the criminal justice system, not just policing. That is why it is critical that we continue to train and educate our officers to ensure that they understand and respect the history and culture of Indigenous Peoples. At the same time, we must continue to build and strengthen partnerships with Vancouver's Indigenous communities to learn from their personal experiences and to implement proactive crime prevention initiatives that protect everyone.

Street checks are a very small component of the proactive policing work we do: the numbers average out to one street check, per officer, per month. Although the Vancouver Police Department uses them infrequently, street checks are an effective tool in keeping the city safe. Here is what the analysis of our street check data shows us:

- The overwhelming majority of street checks are of persons previously involved in crime;
- Street checks occur in areas where violent crime is most prevalent;
- Street checks can be a result of a call for service from the public and street checks occur most in areas where we have high concentrations of calls for service from the public; and,
- Street checks are also used to check on the well-being of vulnerable individuals, such as those who are struggling with mental health, addiction issues, or homelessness.

I recognize that the relationship between the police and the communities they serve can be complex. In Vancouver, I am very proud to lead a progressive police department, made up of diverse, open-minded people. However, I fully understand that our success in keeping Vancouver safe, hinges on maintaining the trust and support of all our communities. To ensure that we remain transparent and accountable to the communities we serve, we are implementing the following changes moving forward:

- Formalizing our existing VPD street check standards into policy and ensuring that our policy adheres to new provincial standards that are currently being developed;
- Additional training to ensure that VPD officers are utilizing street checks appropriately;



- Committing to publicly releasing VPD street check data annually;
- Furthering existing community relationships to better understand the unique experiences, perceptions and histories of the communities that we serve;
- Assigning a special liaison officer to support greater communication between our patrol officers and our partners in the Indigenous community; and,
- Improving data collection by establishing a street check category in the records system to specifically document when officers are dealing with an individual to ensure their safety and well-being.

I hope this comprehensive review will provide clarity about the use of street checks by the Vancouver Police Department and their role in ensuring the safety of our community.



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Note on Language Use

The Vancouver Police Department acknowledges that there exists differing opinions on the appropriate use of terminology. For the purposes of this document, and in observance of the Federal Government's recognition of First Nations, Inuit, and Métis as Indigenous Peoples, we refer to these populations as Indigenous; this is also consistent with standard terminology used in the United Nations Declaration on the Rights of Indigenous Peoples.¹ The term Aboriginal is used when referencing existing organizations or material.



Executive Summary

Upon the release of data on street checks, on June 14, 2018, the Vancouver Police Department (VPD) received notification of a complaint filed with the Office of the Police Complaint Commissioner (OPCC) by the Union of BC Indian Chiefs (UBCIC) and the BC Civil Liberties Association (BCCLA). The complaint states that, based on the release, the “data create [sic] a strong suggestion that street checks are being conducted in a discriminatory manner.” This conclusion of discrimination is based on their position that the statistical proportion of ethnicities that are street checked, do not match their statistical proportion in the population of Vancouver. Specifically, Indigenous Peoples make up approximately 2% of Vancouver’s population and they represented 16% of street checks in 2017. Likewise, 5% of 2017 street checks were of Black persons; however, Black persons comprise 1% of Vancouver’s population. While not specified in the complaint, Caucasians were also statistically overrepresented in the street check data; while comprising 46% of Vancouver’s population, Caucasians made up 57% of those that were street checked in 2017.

The complaints also questioned the need and effectiveness of street checks as a policing tool. An addendum to this complaint, received on July 12, 2018, requested an investigation into the overrepresentation of Indigenous women. Specifically, “Indigenous women accounted for over one-fifth of all checks of women (21%), despite making up only two percent of the population of women in the city – overrepresentation by a factor of nine.”

In response to this complaint, the VPD conducted a comprehensive statistical review of street checks in Vancouver. Part of this review includes important background and context, which appropriately frames this multi-faceted discussion. Amongst others, this context refers to themes such as the VPD’s efforts focused on engaging Vancouver’s Indigenous Peoples, along with a discussion on the negative effects of racial profiling. The review then proceeds to examine how street checks are utilized in Vancouver, outlines their function as a valuable proactive policing practice, and presents analyses on *who* VPD officers street check, and the locations of these street checks.

The empirical findings of this review suggest that the statistical overrepresentation of certain ethnic groups in street checks is not based on arbitrary discriminatory police practices. Rather, it may be related or symptomatic of broader socioeconomic disadvantages. For example, Indigenous statistical overrepresentation in the criminal justice system has been widely acknowledged and linked to historical factors that include poverty, history of abuse, and the intergenerational scars of Residential Schools. Moreover, for example, within Metro Vancouver in 2017, Indigenous Peoples accounted for 34% of the entire homeless population. There would be a strong likelihood that all of these societal issues and risk factors affect police interactions with citizens.

An examination of VPD’s data on street checks supports the view that VPD officers conduct street checks in a non-random manner. Rather, street checks generally occur when a police officer views unusual, suspicious, or potentially criminal behaviour. In addition, street checks are also commonly used to check on the well-being of citizens, or in response to calls for assistance from the public. Overall, street checks are an integral component of a community safety strategy.



SUMMARY OF KEY FINDINGS:

Street Checks Target Repeat Offenders

Research shows that repeat offenders commit a considerable amount of crime. It is a preventative policing and VPD strategy to engage repeat offenders if they are seen in areas where crimes are frequently reported. This is done with the widely accepted theory that police presence and a conversation with a police officer deters crime. Criminologists, crime analysts, and police leaders acknowledge the benefits of engaging repeat offenders as a strategy to decrease crime.²

- The 2017 analysis showed that the VPD conducts the majority (80%) of street checks on individuals who have been suspects in an average of 22 separate criminal investigations by police departments in Metro Vancouver (they were suspects before the street check). Of these:
 - 89% of Indigenous Peoples that were street checked in 2017 were identified as suspects in previous criminal investigations (an average of 29 separate criminal investigations per person);
 - 84% of Caucasians that were street checked in 2017 were identified as suspects in previous criminal investigations (an average of 23 separate criminal investigations per person); and
 - 83% of Black persons that were street checked in 2017 were identified as suspects in previous criminal investigations (an average of 26 separate criminal investigations per person).

Street Checks Occur in High Crime Areas

An important facet in the detection and prevention of delinquency is that crime is often concentrated in clusters of areas, often referred to as 'hotspots'. As a result, the VPD's crime prevention work is developed around problem areas, and the use of street checks is a tool to support these prevention efforts and to keep Vancouver a safe place.

- The analyses illustrated that the area where street checks were conducted by VPD officers is highly co-related to the areas where the VPD received the most calls for assistance from public; and
- The data also showed that street checks conducted by VPD officers were in the areas with the most violent crime (e.g., sexual assaults, robberies, and attempted murders).

Street Checks are Used to Ensure the Well-Being of At-Risk Citizens

To further the fundamental principle of ensuring safety, police officers play an important role in ensuring the well-being of citizens, which in many cases involves those members of the community that are most vulnerable. For example, VPD officers conduct well-being checks of homeless individuals during the winter months, when temperatures drop below freezing and vulnerable members of the community are at risk for exposure to the elements. VPD officers also regularly work to provide assistance with finding available accommodations for those sleeping out on the street.



- Of all street checks that the VPD conducted from 2008-2017, it is estimated that 23% were of individuals that were homeless (or had no fixed address).

The link between well-being street checks and positive outcomes for missing person's cases also exists. For example, street checks regularly assist in locating missing persons.

- Over a 10-year period, there were 3,988 street checks of Indigenous females. Of these women, 53% had been the subject of a missing persons report.

As outlined in the findings, street checks are policing strategies to mitigate crime or used to check on the well-being of citizens. The VPD is committed to ensuring that citizen rights are respected, and accordingly does not stop, question, or detain citizens for a reason based on prohibited grounds of discrimination, or engage in racial profiling. The VPD is also committed to ensuring staff are trained on the appropriate use of street checks, as well as continued training on working with diverse communities. The *Fair and Impartial Policing* training objectives and its exposure to our members to persons with lived experience will continue to reinforce the principles of impartiality and equity to our officers. Community engagement with Vancouver's culturally diverse communities continues to be a priority and is reflected in the VPD's countless community engagement initiatives.



What are Street Checks and how do they Improve Public Safety?

Communication with citizens in a variety of circumstances is a vital aspect to a police officer performing their duties. Police have hundreds of thousands of interactions with the public each year. These interactions form an integral aspect of a police officer's role in pursuing public safety. The value of communication between the police and the public is an integral component to public safety. The VPD considers a street check as a type of interaction arising from non-random contact between members of the public and the police. Street checks typically occur when a police officer views suspicious or potentially criminal behaviour by a person or persons. Also, and of note, street checks are not necessarily negative in nature, as many street checks are done to ensure the well-being and safety of citizens.

A Component of Proactive Policing

The role of police officers in Canada has undergone significant reform in the past 20 years. The duties performed by police have expanded beyond traditional crime prevention and law enforcement to include a role more akin to that of a social worker, mental health professional, and community outreach worker. For example, a 2017 study by the VPD found that approximately 34% of calls for service (CFS) involved responding to crime. The other two-thirds of CFS that VPD officers attended were comprised of public safety calls (e.g., missing persons, well-being checks) and disorder calls (e.g., disturbances, fights). Police attendance at these disorder-related calls have a moderating effect on criminal activity and often prevent further crimes from occurring. As the first resource to be called whenever an issue develops within the community, police officers must now manage competing, and at times, challenging demands for assistance that span a range of services far removed from crime prevention. It is from this lens that one should consider how VPD officers work, which also includes a duty to detect and prevent crime.

Preventing and monitoring crime in Vancouver is a key responsibility for the VPD. The VPD works to detect and prevent crime through several proactive strategies. Proactive work is an important aspect of policing and refers to work that officers engage in when they are not actively responding to citizen calls for assistance. VPD officers use information from crime analysts towards evidence-led approaches to identify crime problems. This is accomplished through the collection and analyses of data, to develop a critical and objective understanding of crime in Vancouver. Police experts and criminologists agree that "rather than just focusing on the incidents of crime, police need to consistently examine their data to better understand what exactly is the problem or problems that are contributing to crime or disorder in their communities and use this information to develop strategies to respond to and prevent the problem(s)."³

Based on the analysis of evolving and emerging crime issues within the community, the VPD in turn, uses that information to help determine the best use of limited police resources. Police deployment and special attention to a particular area, is premised on an evidence-based decision-making approach, where officers are guided by detailed analysis of developing issues, with the intent of preventing the escalation and furtherance of a crime issue. For example, crime analysis may identify an emerging crime series, in that a chronic offender is targeting a particular neighbourhood where they are active on specific days of the week and/or at particular times. The VPD may respond by deploying specialty units to identify and



apprehend the individual based on the recommendations of the analysis. This is a cornerstone of evidence-based policing, where data analysis helps to make more efficient and effective use of police resources. As a result, the deployment of police to a particular neighbourhood is not random and arbitrary, but rather, premised on addressing an emerging crime and street disorder issue and the best use of police resources to ensure community safety.

Police should, as a matter of routine, consistently use data to understand historical and contemporary crime trends, understand what drives their specific crime trends, and understand the 'rhythms' of crime in their jurisdictions. In other words, data analysis provides police with a wealth of information about crime and its predictable patterns in a jurisdiction...⁴

The utility of street checks in proactive crime-prevention strategies has been documented by criminologists. For example, in their description of essential crime reduction principles, Cohen, Plecas, McCormick & Peters (2014) outline that deliberate street checks can effectively contribute towards relevant investigative information and developing crime trends. Street checks can show relationships between individuals, vehicles and places at a particular time. That is, "street checks...provide police with useful information about relationships between potential suspects that, when combined with technologies for network analysis, have the potential to uncover complex relationship between criminal networks."⁵ This information, in turn, often provides valuable data to police in future investigations. For example, street checks are a particularly valuable method for monitoring and informing crime prevention strategies to address chronic offenders.

Street checks are Used when Responding to Citizens

Towards the goal of serving the community, a primary function of the VPD is to respond to citizen requests for police assistance, or CFS. A CFS is initiated whenever the public calls either the police non-emergency number, calls 911, or sees a police officer and asks for assistance (e.g., flags down a police vehicle). Depending on the nature of the call, a police officer is often dispatched to investigate further. VPD officers respond to these community calls for assistance for countless situations. For example, in 2017, the VPD received 267,937 CFS, which on average, is a CFS every 1 minute and 58 seconds (or 734 calls per day).

Citizen-initiated calls may lead to a street check, as the attending officer conducts an investigation to determine whether an offence has been committed and the persons responsible. Consequently, some street checks are not necessarily police-initiated. For example, it is common for citizens to call the VPD if they see an individual engaged in suspicious activity. For example, the VPD commonly receives calls from citizens when they see a suspicious individual peering through car windows with a flashlight. In this circumstance, a crime may not have yet been committed, nonetheless, the VPD has a duty to *prevent* crime, and would be legally justified in speaking to the suspect matching the description reported by the citizen, and determine their identity. The street check may document the suspicious behaviours, clothing descriptions, time of day, among other factors.



Indeed, calls from citizens regarding suspicious activity are frequent. For example, in 2017, the VPD had 21,866 CFS that were specifically regarding suspicious circumstances, of which 91% of these were calls from concerned citizens regarding suspicious activity. It is a public expectation that the VPD respond and investigate these circumstances; the VPD is dedicated to high-quality service, which includes investigating all of these suspicious circumstances. Furthermore, the VPD is not solely a reactive organization. Towards proactively ensuring public safety, VPD officers regularly take initiative to investigate suspicious behaviours they view themselves.

An examination of VPD street check data reveals that VPD officers conducted 97,281 street checks between 2008 and 2017. Of these, approximately 8% were street checks that resulted from a community CFS (as depicted in Table 1).

Table 1. Street Check and Calls for Service

Incidents	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	Total
STREET CHECKS	9,358	8,987	12,376	9,879	9,704	11,412	11,011	9,645	8,587	6,322	97,281
COMMUNITY CFS THAT INITIATED STREET CHECKS	796	658	856	705	639	848	975	884	694	493	7,548
% of STREET CHECKS	8.5%	7.3%	6.9%	7.1%	6.6%	7.4%	8.9%	9.2%	8.1%	7.8%	7.8%

AT A GLANCE:

A CITIZEN CONTACTED THE VPD REGARDING ASSISTANCE MOVING ALONG A GROUP OF INDIVIDUALS THAT WERE OPENLY DRINKING ALCOHOL AND URINATING IN PUBLIC. THE VPD ATTENDED AND CONDUCTED A STREET CHECK OF SEVEN INDIVIDUALS (SIX WERE INDIGENOUS AND ONE WAS CAUCASIAN). NONE OF THESE INDIVIDUALS HAD WARRANTS OR CONDITIONS THAT WERE BEING BREACHED. ALTHOUGH THE INDIVIDUALS WERE DRINKING ALCOHOL IN PUBLIC, NO ENFORCEMENT ACTION WAS TAKEN.

Well-being Checks for Citizens

In keeping with both VPD's organizational commitment of compassion and a fundamental policing principle of ensuring safety, VPD officers play an important role in ensuring the well-being of citizens. Often, checking on the well-being involves those members of the community that are most vulnerable. For example, the number of overdoses and deaths associated with the on-going opioid crisis is staggering. To ensure public safety for all persons, VPD officers routinely interact with individuals with drug dependency issues to check on their well-being, ensure that they are able to care for themselves, and to make them aware of available overdose prevention and treatment services. Another example is when VPD officers conduct well-being checks during the winter months, when temperatures drop below freezing and vulnerable members of the community are at risk for exposure to the elements. VPD officers will regularly check on homeless individuals and enquire if they have had a hot meal and whether they would like assistance in finding accommodation off the streets. During these interactions, the officer will frequently document the well-being street check and follow up on the street check to ensure the person's condition has not deteriorated. Depending on the area where these well-being street checks are conducted, such as Vancouver's Downtown Eastside (DTES),



there is a possibility that specific segments of the community may be overrepresented, given the localized demographics.

Interactions with Persons with Mental Health Issues

For over 30 years, the VPD has been proactive regarding mental health, and has implemented programs and initiatives to improve outcomes relating to police interactions with persons living with mental health issues.⁶ Police officers regularly encounter persons living with mental health issues, including many who concurrently struggle with substance abuse, some who are not receiving necessary medical care and community support, and a number who may be in a state of crisis.

The VPD had seen a steady increase in the number of incidents where officers attend calls with persons living with mental health concerns, and in the majority of these incidents, there is no crime involved. In the last few years, however, there has been a leveling off of these incidents, which may be attributable to VPD's proactive initiatives to bring together different stakeholders and health authorities. Often, these calls represent quality of life issues for either the person living with mental health issues or the broader community. Moreover, a study of VPD victimization rates where a mental health factor is involved shows that persons living with mental health issues were 23 times more likely than the general population to be a victim of crime. More concerning is the fact that they were 15 times more likely to be a victim of violent crime.⁷ Given this data, preventative interactions with these individuals are important to reduce victimization and ensure safety.

VPD officers proactively work to facilitate care and mitigate risk by conducting well-being street checks, often with the goal of collaborating with health care partners to deliver proper community-based mental health support for those in need. The VPD is committed to pursuing access to care through health care providers, and proactive follow-up with supportive multi-disciplinary teams that focus on the well-being and recovery of the individual. Well-being street checks serve as a mechanism for VPD officers to improve quality of life for the individual and those in the community.

Helping with Housing: Homelessness

Findings show a steep increase in homelessness across Metro Vancouver, with 828 more people identified as homeless in 2017 compared to 2014, representing a 30% increase in homelessness.⁸ Within Vancouver in 2017, Indigenous individuals accounted for at least 21% of Vancouver's entire homeless population and 42.5% of Vancouver's unsheltered homeless.⁹

Dealing with homelessness requires partnerships between all levels of government, as well as police, non-profit and co-operative housing providers, community support services to build safe and inclusive neighbourhoods. VPD officers often interact with homeless individuals to assess well-being and to offer information on resources such as shelter locations. Towards this goal, in 2009, the VPD developed the role of a Homeless Outreach and Supportive Housing Coordinator. The Constable in this position conducts outreach work with the homeless and coordinates with mental health, addiction, housing serving sectors, and municipal and provincial governments. The Constable also acts as a resource for external agencies, as well as internal sections within the VPD. In working with homeless individuals, street checks may be conducted to ensure interactions and the outcomes of offered services



are noted, especially during extreme weather conditions. Furthermore, many homeless individuals struggle with other concurrent issues such as mental health and addiction issues;¹⁰ therefore, ensuring the well-being of these vulnerable individuals is important for public safety.

Of all street checks that the VPD conducted from 2008-2017, 23% were of individuals that are coded as “no fixed address” (NFA).^a A large majority (85%) of all NFA street checks are interactions with Indigenous Peoples and Caucasians. The ethnic breakdown of the 23% of NFA individuals street checked is as follows:

- 66% were Caucasian;
- 19% were Indigenous;
- 4% were Black;
- 2% were Asian;
- 1% were Hispanic;
- 1% Middle Eastern;
- 1% South Asian; and
- The remainder (7%) were of unknown ethnicity.

A Mechanism for Finding Missing Persons

Like all VPD investigative units, the VPD’s unit dedicated to missing individuals, the Missing Persons Unit (MPU), follows the same investigative process regardless of any demographic factor. The link between well-being street checks and positive outcomes for missing person cases exists. Specifically, VPD MPU investigations have found that well-being street checks have led to the location of missing persons, including those at high risk such as dementia patients or persons suffering from severe mental health issues. Often, citizens initiate a police report when they are concerned that their loved one is missing; however, relief comes when they learn that the VPD has had recent contact with that person documented in a street check.

FAST FACTS:

- Across 10 years (2008-2017), there were 3,988 street checks with Indigenous females.
- The majority of these women (53%) had been the subject of a missing persons report.

^a While an entry of NFA in PRIME-BC does not automatically mean that the person is homeless, it is the closest approximation the VPD can make from the available data about how many homeless people that are street checked.



Street Checks Help Solve Criminal Investigations

Information from street checks is regularly used, directly and indirectly, to solve crimes by placing a suspect at a certain location, to confirm or refute alibis, and to identify other individuals who have been associated to the subject in question. For instance, street checks may be used to assist in corroborating information from sources and provide information to obtain warrants.

Indeed, street checks have been used in investigations to help solve serious crimes. There are many examples of such cases, including that of an attempted murder that was solved because of a street check. In this case, the victim was shot in the head and ultimately lost an eye. He was able to provide a general description of the female who shot him and details about an ongoing disagreement that he had with another male. The male was identified and a search on PRIME-BC revealed a street check where that male was in the company of a female, who was determined to be a possible suspect. A cigarette butt was found at the crime scene and a DNA analysis was conducted revealing a female DNA profile. The continuing investigation focused on the female suspect and led to the lawful acquisition of a sample of her DNA, which produced a match to the DNA found at the crime scene. The street check was vital to her identification as a possible suspect, allowing for additional investigative techniques. As a result, the investigation was successful and the suspect was charged with attempted murder.

“Street checks...provide police with useful information about relationships between potential suspects that... have the potential to uncover complex relationship between criminal networks”

Cohen, et al. (2014)

How are Street Checks Different From Other Police-Citizen Interactions?

The continuum of lawful authorities for police to detain an individual(s) and obtain identifying information from them in relation to an investigation, which falls outside of a street check, include:

- **Investigative Detention:** A detention that is based on an officer's reasonable suspicion or articulable cause but falls short of reasonable and probable grounds for arrest. There must be a nexus between the individual detailed and a recent or ongoing offence that has been committed. An example may be a person walking on a deserted street at 3:00 am, carrying a backpack a block or two away from where a break and enter had just occurred. A situation such as this may provide grounds for detention, and potentially authority to conduct a pat down search for officer safety, if warranted, and would also justify the officer requesting the person provide some identifying information to the officer.¹¹
- **Statutory Authority:** Federal statutes such as the *Criminal Code* of Canada (CCC), as well as certain provincial statutes such as the British Columbia (B.C.) *Motor Vehicle Act* (MVA) in the case of driving activity, and certain municipal bylaws, provide police the authority to compel identification from a person when they have committed an



offence in relation to the statute or bylaw. For example, instances where a person is believed to have committed an offence under the CCC or the *Controlled Drugs and Substances Act* (CDSA) but is not arrested and is issued an Appearance Notice, would justify the officer requesting identifying information from the person; and

- **Reasonable and Probable Grounds to Arrest:** Reasonable and probable grounds are grounds that would lead an ordinary, prudent and cautious person to have a strong and honest belief about the situation at issue.¹² It is not sufficient for the police officer to subjectively believe that he/she has reasonable and probable grounds to make an arrest. Rather, it must also be shown that a reasonable person, standing in the shoes of the officer, would have believed that reasonable and probable grounds existed to make the arrest. However, the police need not go further and establish a *prima facie* case.¹³ When an officer has reasonable grounds to believe that a person has committed, is committing, or is about to commit an indictable offence, then s. 495 of the CCC provides authority for an arrest.

While a street check is not a detention, the police have legal authority to conduct street checks as they fall within the scope of the police duties under the B.C. *Police Act*, as well as the common law duties of police officers to preserve the peace and prevent and detect crime. Section 34(2) of the B.C. *Police Act* states that police must perform the duties and functions respecting the preservation of peace, the prevention of crime, and offences against the law. Therefore, police are lawfully authorized to stop and make inquiries of members of the public; however, if the citizen refuses to answer, the officer must allow the person to proceed unless the officer detains the individual for a lawful investigative purpose, or arrests the person.^{14,15} These types of stops and subsequent inquiries must not be arbitrary; they must be rooted in an officer's observations of what they reasonably believe is suspicious activity by that person, or used to gather pertinent intelligence about suspicious activity. The courts have recognized that "not every interaction between the police and members of the public, even for investigative purposes, constitutes a detention within the meaning of the Charter. Section 9 of the Charter does not require that police abstain from interacting with members of the public until they have specific grounds to connect the individual to the commission of a crime."¹⁶

Street checks are not random activities that exist outside of articulable cause justifying police contact with an individual. Likewise, street checks are not the indiscriminate collection of personal information for the purposes of creating a database on members of the public nor as a reason to simply check if an unknown person has a warrant outstanding for their arrest or is under some court ordered conditions.¹⁷ The difference between an arbitrary stop and a legitimate street check is a vital distinction recognized by VPD members. Within a free and democratic society, where bias-free policing and respect for an individual's Canadian Charter of Rights and Freedoms (Charter) rights are acknowledged, the absence of arbitrary detention is a societal expectation and legal requirement.



“...not every interaction between the police and members of the public, even for investigative purposes, constitutes a detention within the meaning of the Charter. Section 9 of the Charter does not require that police abstain from interacting with members of the public until they have specific grounds to connect the individual to the commission of a crime.”

R. v. Suberu, 2009

Rights of Citizens During Street Checks

VPD members are aware of citizens' rights during a street check. In some of these situations, citizens may believe that they must comply with the officer's requests. This type of psychological compulsion has been recognized in the Supreme Court of Canada, as stated in R. v. Grant (2009).¹⁸

“In those situations where the police may be uncertain whether their conduct is having a coercive effect on the individual, it is open to them to inform the subject in unambiguous terms that he or she is under no obligation to answer questions and is free to go.”¹⁹

“In cases where there is no physical restraint or legal obligation, it may not be clear whether a person has been detained.”^{20b}

If, during a street check, a citizen asks why they have been stopped, or the officer suspects through their own observations that a person may feel they are detained, then officers should provide an explanation for conducting the street check and advise the individual that they are not required to speak to or remain with the officer. This type of communication provides for transparency in police actions, helps prevent misunderstandings, and ensures police actions are lawful.

When conducting a street check under the above circumstances, absent any authority to detain, VPD officers obtain informed consent, as the person has the right to walk away and refuse to answer questions. “Absent statutory compulsion, everyone has the right to be silent in the face of police questioning, even if he or she is not detained.”²¹ This is a practice that commonly occurs in policing and officers understand their authorities.

^b See also R. v. Poole 2015 BCCA 464, where no physical or psychological detention occurred during the initial part of the interaction with the police



Documentation of Street Checks

In situations where interactions such as those outlined above occur, the police may, where warranted, enter the interaction in the PRIME-BC database. The purpose of entering information into a database is to document the interaction and information obtained from that person by a police officer. This may include details about individuals, vehicles, locations, dates, times, and the circumstances and justification for the contact by the police. As outlined in the example above, this information may be relevant to current or subsequent public safety investigations, as well as necessary for future officer safety and situational awareness. This information is lawfully gathered through the cooperation of the individual(s), or through their compliance with legislative requirements such as the MVA.

Training on Street Checks

Ensuring that VPD officers are well trained when dealing with the public and when conducting street checks is a departmental priority. VPD officers receive courses on lawful authorities as early as their initial recruit training, and officers continuously receive regular updates during their careers.

All VPD police officers undergo recruit training at the Justice Institute of British Columbia (JIBC) where they receive extensive instruction in police powers of detention/arrest, search and seizure, and relevant legislation, including the CCC and the Charter. All recruits are required to know their powers of arrest and detention, and are assessed with written examinations and by practical simulation scenarios. This type of training provides future frontline patrol members of the VPD with a solid foundation and understanding of their legal powers and responsibilities.

Recruit level and in-service training reinforces the importance of appropriate and lawful interactions with the public. Officers are trained to understand that effective interactions establish trusting relationships, facilitate the exchange of information, and ensure the safety of citizens. Members must know that every person has the right to be free from arbitrary detention as detailed in Section 9 of the Charter. It is also emphasized to members that without appropriate grounds, citizens are not obligated to answer questions, produce identification, or remain at a scene.

In addition, the VPD provides in-service training and internet resources pertaining to psychological detention. In 2017, as a part of annual legal update training, frontline VPD members were provided training specifically on street checks and arbitrary detention. In addition, the law relevant to street checks is included in the VPD's Legal Exam Study Package, and has often been subject to examination (e.g., in promotional processes).

Concerns Related to the Use of Street Checks

Albeit a valuable policing strategy, the use of street checks has been questioned by some members of the community in Canada. Specifically, concerns have been raised about the lawfulness of street checks, as well as suggestions that certain demographic groups are disproportionately street checked. For example, significant controversy has surrounded police street checks in Ontario, where some police agencies have received public criticism regarding their practices and lack of policy surrounding the "carding" (another term for street checks) of individuals. Many of these types of stops were alleged to be based on profiling on



the prohibited grounds for discrimination as set out in the *Ontario Human Rights Code*, specifically race. Public dissatisfaction surrounding this practice were related to the following themes:

- Arbitrary police stops;
- No reasons provided for the contact;
- Collection of irrelevant information; and
- Perceived discrimination.

A series of studies concluded that street checks in Ontario reflected racial profiling and biased policing.^{22,23} Similarly, a submission on carding and street checks submitted to Ontario's Ministry of Community Safety and Correctional Services (MCSCS) by Legal Aid Ontario in 2015 argued that police street checks disproportionately impacted persons from racialized communities (those that are non-Caucasian) and those in vulnerable groups.

As a result of the growing controversy surrounding carding practices, the Province of Ontario's MCSCS conducted an extensive review of the matter. As part of the review, MCSCS asked for community responses on a number of issues concerning street checks and police-public interactions. Based on the review, the Province of Ontario enacted Province of Ontario enacted in January 2017 Ontario Regulation 58/16, *Collection of Identifying Information in Certain Circumstances – Prohibition and Duties*. The legislation sets out what the government refers to as "clear and consistent rules" for voluntary police-public interactions.²⁴ Specifically, the legislation sets out guidelines for police officers with respect to stopping persons and attempting "to collect identifying information by asking the individual, in a face-to-face encounter...to identify himself or herself or to provide information for the purpose of identifying the individual and includes such an attempt to do so, whether or not identifying information is collected".²⁵

The regulations apply if an officer asks the person for identifying information or to see an identifying document while:

- Looking into suspicious activities;
- Gathering intelligence; and
- Investigating possible criminal activity.

The regulations do not apply if police ask for identifying information or to see an identifying document while:

- Conducting a traffic stop;
- Arresting or detaining someone;
- Executing a warrant; and
- Investigating a specific crime.

The legislation also stipulates, among other factors, that officers must inform citizens that they have a right not to speak to police or produce identification in cases other than arrest, detainment, or when a search warrant is executed. The rules do not apply to undercover operations. Moreover, the legislation establishes training, data management, and reporting requirements about the collection of identifying information.



According to the MCSCS Minister, "these new rules protect the rights of people who are not under investigation while also laying the foundation for more positive, trusting, and respectful relationships between police and the public."²⁶ The intent of the policy is to prevent police from collecting information on persons based on the way they look or where they live. Based on the guidelines set out in the provincial legislation, agencies across Ontario have adopted a new set of policies about how officers interact with the public and conduct street checks.

Currently, it is not clear whether "provincial legislation has reduced racial profiling and biased policing and if there are now fewer instances in which persons who are stopped by the police feel that they have been racially profiled and subjected to psychological detention."²⁷ This may be attributable, according to some researchers, to the failure of research studies to set a baseline of police activity against which the impact of changes in policy and legislation could be assessed.²⁸

Due to the ongoing controversy surrounding carding in Ontario, the Province of Ontario appointed Justice Michael Tulloch to review the Province's regulation on street checks. Justice Tulloch and his team are undertaking a full and independent review of Ontario Regulation 58/16; this review entails an examination of all relevant materials (e.g., training, policies, and procedures) and includes extensive public consultation processes. Justice Tulloch will be "reviewing the content of the Regulation and assessing whether police officers, chiefs of police, and police services boards are complying with it. More specifically, the Review will assess whether the Regulation reflects the provincial government's goal of ensuring that police-public relations are consistent, bias-free and done in a way that promotes public confidence and protects human rights".²⁹ By January 2019, Justice Tulloch will be making recommendations to the government about those laws and their implementation.

Concerns regarding street checks have been raised outside of Ontario as well. Specifically, in Edmonton, the issue of street checks came to the forefront after a media outlet requested information from the Edmonton Police Service (EPS) regarding their street check figures and found that more than 26,000 street checks were occurring per year between 2011 and 2014.³⁰ In 2016, the EPS conducted a review of their street check process and noted that there were some deficiencies in the information collected from street checks (e.g., they were being used to document interactions that may be captured in other police databases and not as street checks) and that there was not much direction as to what should be included. As a result of this review, in October of 2017, a procedure that details street checks was updated.³¹ The updated procedure outlines specific reasons why a street check is conducted and that within the street check, the reason for it being conducted must be articulated.³²

Also in 2017, a Freedom of Information (FOI) request by the Edmonton chapter of Black Lives Matter³³ revealed that Indigenous and Black persons were street checked disproportionately by the EPS.³⁴ In addition, Indigenous women were 10 times as likely to be street checked as Caucasian women.³⁵ The EPS responded that their street checks are not random and they are conducted in response to suspicious behaviours; however, in media coverage, the street checks were continually being described as random in nature. The Government of Alberta is not issuing any actual bans on street checks due to this distinction between a random and reactive check. Both the Government of Alberta and the EPS have stated that these checks are not random and consequently there is no necessity to prohibit them.



In response to the criticisms, the Edmonton Police Commission ordered an external review of the street checks. A research team led by Dr. Curt Griffiths conducted this review. Similarly, the Alberta Provincial Government engaged in community consultation in late 2017.³⁶ These consultations are part of a process to develop provincial guidelines over the street check process.

Regarding the issue of evidence of racial bias, in his review, Dr. Griffiths et al., stated that “[the disproportional street check figures] does not, in itself, indicate that the police racially profile Indigenous persons and visible minorities as there is no data available on the context in which they were stopped. Further analysis would be required, using data not available to the present study, to determine this.”³⁷

Regulating Street Checks: Are there Reductions in Proactive Policing in Canada?

The introduction of the guidelines in Ontario does, however, appear to have contributed to a significant reduction in the number of street checks conducted by some police services. According to a CBC news report in 2017, “police leaders [in Ontario] have stated that their officers are reluctant to conduct street checks due to the complexities surrounding the provincial regulations and legislation.”³⁸ It is estimated that the Ontario Provincial Police conducted less than 100 street checks in 2017 compared to approximately 40,000 in years prior.³⁹ The Ottawa Police Service recorded seven street checks between March and December of 2017 in contrast to approximately 45,000 street checks conducted between 2011 and 2014.⁴⁰ This outcome is commonly referred to as de-policing, “wherein police officers reduce their levels of proactive engagement with community residents”.⁴¹ It has been a concern that officers may react with de-policing in the face of allegations of racial profiling, amongst other factors (e.g. riots, civil suits).⁴²

Based on a review of the EPS, there is some evidence that de-policing is beginning to occur in Edmonton.⁴³ Specifically, “a number of officers in the focus groups and in the field observations indicated that they were significantly reducing, or in some cases eliminating, conducting street checks. This may have significant consequences for the safety and well-being of communities.” Similarly, officers in Ontario have argued that the provincial street check legislation has restricted their ability to conduct important proactive policing work and has had a negative impact on investigations. As explained by Chief Evans of Peel Regional Police, the legislation has restricted police whereby “the criminal is saying no one is going to stop me and I can carry [sic] my gun and my knife and that is a real problem in the community.”⁴⁴ Additionally, the legislation has had an adverse impact on investigations, “there is very little intelligence out there because the criminals are feeling very empowered.”

Importance of Perceptions of Procedural Justice

Evidence of racial discrimination and stereotyping has been documented in various areas of society, including labour markets,^{45,46} mortgage lending practices,^{47,48} healthcare settings,⁴⁹ and popular media.⁵⁰ Further, there is evidence that racially and ethnically diverse children may experience racial biases and racial profiling as early as high school or even elementary school, up to and including graduate school.^{51,52,53} Racial profiling is seen at every age, and even serving police officers themselves are not immune from racism, racial trauma, and racial profiling.^{54,55,56}



Psychological and Physical Impact of Profiling

Those who experience profiling personally suffer psychologically and, in some cases, even physically. Early experiences of apparent racial discrimination or racial profiling can have significant, long-lasting impacts and include outcomes such as school dropouts,⁵⁷ lower grades,⁵⁸ adolescent anger, anti-social behaviour,⁵⁹ and lower self-esteem.⁶⁰

Research has demonstrated a strong statistical relationship between racial/ethnic discrimination and mental health indicators in adults.^{61,62,63} More specifically, racial discrimination has been linked to anxiety,⁶⁴ depressive symptoms,^{65,66,67} acute and chronic stress,^{68,69,70} psychological distress,^{71,72,73} post-traumatic stress disorder symptoms,⁷⁴ lower well-being, happiness, and general life satisfaction.^{75,76,77,78}

Although the specific pathways through which racism can affect physical health remain unclear,⁷⁹ there is empirical evidence that racial/ethnic discrimination can also engender physical health issues.^{80,81} For instance, African American college students who reported experiences of racial/ethnic harassment were twice as likely to use tobacco products daily compared to their peers who didn't report harassment experiences⁸² and it is plausible their smoking habits were prompted at least in part by the minority stress they experienced.⁸³

The nexus between psychological and physical health issues is perhaps best illustrated by the fact that victims of persistent racial prejudice and self-reported "everyday discrimination" tend to be more prone to carotid plaque^{84,85} and hypertension⁸⁶ especially if they internalize their frustration and do not openly challenge their unfair treatment.⁸⁷ Even worse, mothers exposed to lifelong racial discrimination are more likely to give birth to very low birthweight infants,⁸⁸ even after controlling for prenatal care as well as sociodemographic, biomedical, and behavioural characteristics. In fact, even short-lived but acute ethnic discrimination appears to be sufficient to induce poorer birth outcomes.⁸⁹

Impact on Society

In terms of social outcomes, racial/ethnic discrimination can also lead to an increased risk of criminalization through the internalization of "deviant" or "troublemaker" personality traits,^{90,91} or greater hostility towards persons in positions of authority.⁹² Perceived or expected racial discrimination by police may reduce the incentives for certain teenagers to stay out of trouble.^{93,94} From a policing perspective, this perpetuates a vicious cycle where individuals who are profiled or feel profiled become more likely to "act out" or respond defiantly⁹⁵ thereby confirming in a self-fulfilling manner the suspicions of the very same people who profiled them. At an aggregate level, racial profiling is expected to have an ambiguous effect on crime⁹⁶ and may even contribute to *increase* it.^{97,98}

Impact on Public Trust and Confidence in Police

Public trust and confidence in the police are known to be strongly influenced by public perceptions and judgments around the impartiality of police officers when they apply or exercise their authority, a criteria commonly referred to as "procedural fairness"⁹⁹ or "procedural justice".¹⁰⁰ These constructs matter since public trust and confidence in the police are both closely related to the public's willingness to obey the law,^{101,102} cooperate with police,^{103,104,105} and support policies that give police more discretionary power.¹⁰⁶ In fact, past research has shown that procedural justice considerations remain important even for hardened criminals,^{107,108} when people face serious immediate security threats,¹⁰⁹ and when another group is the target of police profiling.^{110,111}



In a context where citizen evaluations of police as a whole¹¹² and individual officers specifically¹¹³ depend largely on the perceived legitimacy of police actions during routine encounters,^{114,115} the way street checks are conducted is apparently significant.¹¹⁶ In particular, any actual or perceived racial profiling is problematic because it creates perceptions of procedural injustice.¹¹⁷ This remains true even for individuals who do not experience racial profiling directly but vicariously.¹¹⁸

Even worse, there are signs that adverse experiences tend to deeply (and negatively) affect attitudes toward the police while positive contacts have a much tamer beneficial impact and are insufficient to rebuild trust and confidence in police once it is compromised.¹¹⁹ In a phone survey of 721 New York City residents conducted in January 2001, for example, 76% of respondents believed that racial profiling was a widespread practice at the New York Police Department, even though 61% also reported having a good experience with police in the past.¹²⁰

Training on Fair and Impartial Policing

Recently, the VPD has implemented a program of Fair and Impartial Policing (FIP) training, a full day workshop delivered to more than 600 frontline operational members. Developed in the United States, FIP was adopted and redesigned by the Provincial Government in response to the 2012 B.C. Missing Women’s Commission of Inquiry (MWCI). Specifically, the Inquiry recommended that police officers in B.C. undergo mandatory training concerning vulnerable community members.

The workshop illustrates how implicit biases may affect police perception and behaviour, and as a result negatively affect community members. The objective of the FIP workshop is to help police officers recognize “implicit-bias” and develop skills and tactics to reduce the influence of bias on police practice. There is specific focus given to the effect of bias on Indigenous and Black communities. A fundamental concept in the training is that all people can have biases that could influence actions and that policing based on stereotypes can be unsafe, ineffective, and importantly—unjust. Learning objectives in FIP training include the following:

1. Reflect on the lived experience of an Indigenous person who experienced racial profiling by a police officer and how it impacted them;
2. Understand biases are normal and that all people, even well-intentioned, have biases;
3. Explain why persons who are part of a vulnerable population are likely to be subject to implicit bias;
4. Explain how implicit bias played a role in investigations of missing women in the DTES of Vancouver (as described in the MWCI);
5. Reflect upon and articulate the impact biased policing has on community members;
6. Explain the importance of police legitimacy and the threats to it;
7. Describe some historical examples of threats to police legitimacy in Canada;



8. Explain how procedural justice produces police legitimacy and be able to articulate the major components of procedural justice;
9. Explain and demonstrate strategies that will help them be aware of personal biases; and
10. Explain and demonstrate strategies (i.e. FIP skills) for ensuring that their behaviour is bias free.

The VPD's Diverse Community Engagement Philosophy

The VPD acknowledges the concerns that have been raised regarding racial profiling and it is the VPD's unquestionable view that no policing practice be conducted in any discriminatory manner. The VPD realizes and respects the importance of the *B.C. Human Rights Code*, as well as the *Canadian Human Rights Act*, which prohibit discrimination against any person on grounds including race, place of origin, colour, religion, and sex. Rather, the VPD embraces Vancouver's blend of diverse cultural groups, ethnicities, and religions from all over the world and Canada's Indigenous communities. The VPD ensures active engagement with the culturally diverse communities it serves. A strategic goal in the current VPD Strategic Plan is to foster relationships, understanding, and trust with diverse communities.¹²¹ Accordingly, the VPD consistently participates in community engagement initiatives. These include participation in community events such as the Pulling Together Canoe Journey, the annual Pride Parade, the Chinese New Year Parade, the Vaisakhi parade, amongst well over 200 outreach events annually.

In addition, to bridge gaps between police and the community, the VPD has established several full-time community liaison positions. These include a full-time position each of a Sex Industry Liaison Officer, a Homeless Outreach and Supportive Housing Coordinator, a dedicated police officer at the Aboriginal Community Police Centre, a Musqueam Liaison Officer, an Indigenous Liaison Officer, and an Indigenous Liaison Protocol Officer. These positions are a vital component of the VPD's strategic mission to work with the community and have been received positively by the community. Further, the MWCI provided positive feedback on VPD's work carried out by liaison officers in these positions.¹²²

Stemming from long-term systemic issues resulting from colonization, racism, and the Residential School system, the VPD recognizes that Indigenous Peoples are overrepresented among survival sex workers.¹²³ To open lines of communication and foster increased engagement, the VPD implemented the "Sex Work Enforcement Guidelines" in January 2013¹²⁴ as a guiding document to establish a process by which the VPD will work with the sex industry community to open lines of communication and foster increased engagement. The Sex Work Enforcement Guidelines also assist frontline officers in understanding the VPD's philosophy and expectations regarding the investigation of crime in the sex industry.

The VPD values building relationships with those involved in the sex industry to increase the safety of the workers, reduce victimization and violence, and where appropriate (such as with youth) assist with exit strategies. In all situations, VPD officers will treat those in the sex industry with respect and dignity. These guidelines outline response strategies, and ensure a



consistent and respectful message when VPD officers deal with anyone involved in the sex industry.

In his MWCI report,¹²⁵ Commissioner Wally Oppal supported the VPD's Sex Enforcement Guidelines. Specifically, he commended the community engagement process taken in their development, while referring to guidelines as "a model of community policing at its best."¹²⁶ Further, in the recommendations, Commissioner Oppal suggested that all other police forces in B.C. consider implementing similar guidelines.¹²⁷

Police forces can create positions of community liaison officers tasked with bridging the gap between community members and the police. Identified police personnel can link with vulnerable communities to increase awareness about reporting crime, including missing persons, and reassure people ... they can access police services

W. Oppal (2012)

Initiatives and Activities Engaging Women and Girls

There are systemic issues that have resulted in disproportionate police interaction with Indigenous Peoples, and led to increased vulnerability of Indigenous females. For example, Indigenous women experience higher rates of violent victimization than non-Indigenous women do, with domestic violence being the most pervasive form of victimization experienced.^{128,129,130}

Indigenous women were also found to be significantly overrepresented as sex industry workers compared to non-Indigenous women.^{131,132} The literature has documented that sexual and physical violence is common for women in the sex trade. For example, the authors in one study (which focused specifically on the Vancouver sex trade) interviewed 101 women, 52 of whom were Indigenous.¹³³ The overwhelming majority (82%) of these women reported both a history of childhood sexual abuse by multiple perpetrators and either being sexually (78%) or physically assaulted (90%) while working in the sex industry. Given these alarming rates, the VPD has proactive programming and community events aimed specifically at engaging Indigenous women and girls to build awareness on violence against them, such as SisterWatch, as outlined in the following section.

SisterWatch

Women in Vancouver's DTES area are particularly vulnerable to violence, injury, and death. Crime statistics in the DTES have never truly reflected the danger facing the women who live there. Whether the cause is fear of reprisals or general distrust of authority, women have traditionally been reluctant to report crimes against themselves and others.



Following the tragic death of Ashley Machiskinic, the SisterWatch Project began in December 2010 with regular Town Hall meetings consisting of members of the DTES community and VPD members (including the Chief Constable, members of the VPD Executive/senior management, as well as frontline officers), who together form the SisterWatch Committee. The guiding principle of this committee is to provide a safe space for residents of the DTES to voice their concerns and to keep community members informed of police progress concerning investigations, as well as any advances in community safety.

In addition to the Town Hall meetings, the SisterWatch Project also established the SisterWatch tip line, a special telephone hotline established and staffed by civilian women trained to assist callers who are concerned about their safety. This tip line encourages members of the community to come forward with information regarding crimes of gender violence, the death of Ashley Machiskinic, or any other safety concerns. Furthermore, a SisterWatch Reward of \$10,000 was established for information that proves how and why Ms. Machiskinic fell to her death from a window of a hotel on Hastings Street on September 15, 2010. To date, no information has come forward.

In order to raise awareness for the SisterWatch Project, special events are held throughout the year to promote the ongoing activities and functions of the SisterWatch Committee and the SisterWatch tip line. As well as attending and hosting events promoting awareness, the SisterWatch Committee also participates in several community and cultural events.

Arising from a recommendation in the MWCI, an evaluation of SisterWatch was completed in 2015, which indicates that SisterWatch has had a positive impact on the VPD, the women and Indigenous organizations in the DTES, and their relationships with each other.¹³⁴ As stated in the independent evaluation, “Is it worth the work involved? There is clear evidence that SisterWatch is worth it.” Further, the enhanced relationships and developing trust has contributed to important investigations and judicially successful cases; notably, these cases would not have come to light without SisterWatch. As outlined in the evaluation, “The capacity of women’s advocates to connect with the VPD senior leadership has had a positive impact on the way in which conflict is addressed between those involved in the committee and therefore how conflict is resolved. This, in turn, has opened the door to collaboration and mutual support...”

[A Focus on Indigenous Youth](#)

The literature on the victimization of Canada’s Indigenous youth population is dark. Childhood sexual abuse against Indigenous youth has been found to be prevalent, according to some studies. On average, 25% to 50% of Indigenous women were victims of sexual abuse as children compared to 20% to 25% average within the non-Indigenous population.¹³⁵ The results of the 2014 General Social Survey revealed that more crimes that were violent in nature were committed against Indigenous youth than their older counterparts.¹³⁶

Further emphasizing the need for proactive measures, there is a correlation between childhood domestic victimization, and both subsequent victimization and criminal activity later in life.¹³⁷ There is an association between the severity of the abuse and the likelihood of the victim becoming involved in juvenile delinquency—this is particularly the case among males.¹³⁸ In light of these serious findings, and towards preventative programming, the VPD has many youth-oriented initiatives in place. For example, the VPD’s Indigenous Cadet



Program, established in 2007, continues to successfully employ Indigenous applicants per cohort, with the focus on promoting employment and career development opportunities for Indigenous Peoples within law enforcement agencies. The program runs annually from June until the end of August and successful applicants spend half of that time working with the VPD fleet services to gain valuable work experience. The other half is spent on "ride-alongs" with various sections of the VPD, to gain greater understanding and insight into the numerous functions of the police department. Applicants also participate in the annual Pulling Together Canoe Journey. The outcomes of the program are promising. For example, of the cadets that have completed the program, 38% have gone on to be hired by law enforcement agencies. The VPD has hired 35% of the cadets and 18% of them have become police officers.

Increasing Cultural Competency: VPD Training Initiatives

The VPD is sensitive to unique needs associated with particular communities. For example, the Indigenous Peoples of Canada include diverse groups of Peoples with distinct cultural and social characteristics. For police and other law enforcement personnel, understanding the unique history and culture of Indigenous Peoples is an important part of effective communication and interaction with the Indigenous Peoples, and communities they serve. The VPD ensures staff are educated with cultural competency training, described in the following sections.

Circle of Understanding

The Circle of Understanding serves as cultural competency training for all municipal police recruits. This training was designed to help increase knowledge and understanding of Indigenous culture, history and heritage, with an emphasis on the history of colonization in Canada and the impact of Residential Schools upon Indigenous Peoples. During the training, the film "The Spirit Has No Colour" is screened for recruits and participants hear stories from Residential School survivors to fully comprehend the extent of trauma and suffering endured. An Elder is often in attendance to impart wisdom and culture through singing and drumming, and the Indigenous Liaison Officer helps to lead a smudging ceremony. In addition, the VPD Indigenous Liaison and Musqueam Liaison Officers have lead several training sessions with various municipal police forces in order to increase cultural understanding and awareness of Indigenous topics within policing beyond the walls of the VPD.

Aboriginal and First Nations Awareness Course

A six-hour e-Learning course has been delivered since 2016 to all new VPD members hired from other police agencies. The Aboriginal and First Nations Awareness course provides basic knowledge of the history and geography of Indigenous Peoples. It is the foundation for understanding contemporary issues pertaining to Indigenous lands, cultures, and communities. This course has several learning outcomes:

1. An understanding of who Indigenous Peoples are and definitions of the terms that are commonly used to refer to Indigenous peoples in Canada;
2. Knowledge of the history, geography, and demographic characteristics of Indigenous Peoples;



3. Understanding how Indigenous Peoples perceive relationships with land;
4. Recollection of the history of Indigenous treaties;
5. Defining culture and its influence on the Indigenous way of life, communication, and points of view;
6. Recognition of the characteristics of the six Indigenous cultural regions in Canada;
7. Familiarity with the differences between Indigenous and traditional Western cultures; and
8. Understanding the impact of the various social and economic factors facing Indigenous communities across Canada today.

VPD Aboriginal Cultural Competency Training

Aboriginal Cultural Competency (ACC) training was designed to increase knowledge, enhance self-awareness, and strengthen the skills of those who work both directly and indirectly with Indigenous Peoples. The goal of the ACC training was to further develop individual competencies and promote positive partnerships. Participants learned about aspects of colonial history such as Residential Schools, a timeline of historical events, and contexts for understanding social disparities and inequities. Through interactive activities, participants examined culture, stereotyping, and the consequences and legacies of colonization. Participants were also introduced to tools for developing more effective communication and relationship building skills. Two Residential School survivors and Elders from the Indigenous community conducted this training, in 2015, for approximately 650 frontline members, volunteers, and civilian staff of the VPD.

Special Municipal Constable Program: Indigenous Peoples' Awareness Course

The Community Awareness: Indigenous Peoples' Awareness course has been a mandatory component of the Special Municipal Constable Program since 2014. Through the use of the video "The Spirit Has No Colour" and classroom discussion, learners become familiar with the impact of European contact on Indigenous culture, the role of law enforcement and its impact on Indigenous culture, and the steps law enforcement may take to build relationships. Learning outcomes of this course include:

1. Development of an awareness of the history of Indigenous Peoples, particularly in B.C.;
2. Familiarity with the role of police in the enforcement of the laws of Canada that today are deemed to have been damaging to Indigenous Peoples, destructive to their culture, language and spiritual values and practices, and based on the belief that Indigenous Peoples are culturally inferior;
3. Demonstration of an understanding of the consequences of generations of children being taken from their families and placed into the Residential Schools of this country,



systematically destroying family systems, and possible learning of family practices and parenting skills; and

4. The ability to demonstrate an understanding of the connection between drug and alcohol abuse, family disintegration, and the loss of cultural identity to the sexual, psychological, physical and other abuse that was common in Residential Schools.

Diversity and Inclusion in our Workforce

Ethnic Diversity

Through recruitment initiatives that place value on diversity, VPD employees represent a myriad of ethnicities. Almost 30% of VPD employees are visible minorities (see Table 2 below). This data includes VPD police officers, Community Safety Personnel, Jail Guards, VPD civilian employees, Special Constables, Traffic Authority members, and casual employees. Of note, these figures are derived upon self-disclosure or subjective assessment and deviations can be expected.

Table 2. Ethnicity of VPD Employees

Ethnicity	Females	Males	Total	Total %
BLACK	3	14	17	0.7%
ASIAN	144	251	395	17.3%
HISPANIC	5	15	20	0.9%
INDIGENOUS	13	19	32	1.4%
MIDDLE EASTERN	4	18	22	1.0%
SOUTH ASIAN	63	114	177	7.8%
Total Visible Minority	232	431	663	29.1%
Total Sworn & Civilian			2,277	100.0%

Language Diversity

One benefit of VPD's ethnic diversity is the various language skills that employees offer. These language skills translate to improved service to the community and provide employees with the ability to directly communicate with diverse communities. Language skills are beneficial during criminal investigations to ensure that suspects are able to communicate with police officers and understand their rights and reason for arrest. The VPD employs staff that speak over 50 languages.

Gender Diversity

In addition to ethnic and language diversity, the VPD places value on fair representation between genders. Currently, females make up almost 36% of VPD employees while 64% of all employees are males. This gender diversity is also represented in the composition of VPD frontline staff; 26% of VPD's police officers are females, while 74% are males.



Exploring the Concept of Disproportionality and Ethnicity

As outlined earlier, recently, there have been reports in the media that have concluded that the police in some Canadian cities disproportionately street check persons who are Indigenous or Black.¹³⁹ Some have concluded that street checks are therefore discriminatory; a violation of human, Charter, and privacy rights;¹⁴⁰ and these conclusions are often based on the argument that population ratios and street check ratios are not aligned. Data released by the VPD in a FOI request showed that in a 10-year period, the VPD conducted 97,281 street checks.^c Specifically, in 2017:

- The VPD conducted 6,322 street checks;
- 83% of these were of males and 14% females^d;
- 57% of the street checks were of Caucasians;
- 16% of the street checks were of Indigenous Peoples; and
- 5% of the street checks were of Black individuals.

Upon the release of this FOI data, the VPD received a Service or Policy complaint submitted to the OPCC by the UBCIC and the BCCLA. The complaint states that, based on the release, the “data create [sic] a strong suggestion that street checks are being conducted in a discriminatory manner”; this conclusion is based on the rationale that the proportion of ethnicities that are street checked, does not match their proportion in the population of Vancouver. Specifically, if Indigenous Peoples make up approximately 2% of the Vancouver population and 16% street checks as a ratio implies, the VPD are over-street checking Indigenous Peoples. Likewise, there were 5% of Black persons street checked in 2017; however, Black persons comprise 1% of Vancouver’s population. In 2017, 57% of Caucasians were street checked, and Caucasians make up 46% of Vancouver’s population.

There are several methodological issues and challenges stemming from the above interpretations and inferences that have been drawn. First, we must choose a proper comparison benchmark.¹⁴¹ In general, the relevant base is rarely the larger population of residents who live in the area. For example, the relevant base when analyzing *vehicle* stops along a certain stretch of highway is not the population who resides around it but the population of drivers who drive along that highway or, a better comparison, the population of all drivers who commit traffic infractions or violate traffic laws regardless of whether they were stopped by police or not.¹⁴²

In order to appropriately determine whether there are disparities between population subgroups in the aggregate street check data, that data must be compared against a meaningful benchmark, reflecting who is available or likely to be stopped by police¹⁴³ not merely who lives in the area or who *could* be checked if police checks were conducted completely capriciously. Ultimately, the goal is to appropriately capture each subgroup’s level of *exposure* so we can assess whether they are truly at greater *likelihood* of being checked by police, controlling for the circumstances that would lawfully justify police attention. If population subgroups are overrepresented in the police street check data, it does not validate that discretionary police decisions are driven by racial biases or other discriminatory factors.

^c This is the total number of street checks or interactions. This is not a reflection of distinct or unique individuals.

^d Gender was not recorded for the remainder.



Secondly, it is important to recognize that some population subgroups may be overrepresented in the police street check data because of factors that are unrelated to racial biases. For example, social factors might explain the disproportionate rate of police contacts. It is widely acknowledged that street checks and traffic stops by police are not random¹⁴⁴ and that they are deliberate police activities to advance public safety. As well, it is plausible that police attention could be “legitimately triggered” by the behaviour of the people who are street checked.¹⁴⁵ This is supported by empirical research which found that street youths are more likely to be stopped by police if they use drugs or alcohol and engage in delinquent behaviour, or sleep on the street, and not simply because of their ethnicity.^{146,147,148,}

Furthermore, an alarming and disturbing statistic is that across Canada, Indigenous Peoples are consistently overrepresented in homeless counts,¹⁴⁹ they are 10 times more likely to use a homeless shelter,¹⁵⁰ and are even more likely to be living on the street, unsheltered, or “absolutely homeless”.¹⁵¹ Sadly, within Metro Vancouver in 2017, Indigenous Peoples accounted for 34% of the entire homeless population and almost 37.5% of the unsheltered homeless.¹⁵² It would be unrealistic to expect that police contacts at an aggregate level would remain unaffected by all these troubling societal issues and risk factors.¹⁵³

Besides overt racism and racial prejudice, unconscious cognitive bias or stereotyping is an insidious and problematic pathway, because it is based on the illusory idea and false assumption that a correlation exists among separate members of society who share common physical or socio-economic characteristics. Officers who subconsciously adopt these stereotypes might tend to be generally more suspicious of certain subgroups^{154,155} or people who adopt certain behaviours and exhibit anti-social cues.^{156,157,158} Not all stereotyping is necessarily unlawful or based on legally protected ground such as ethnicity, race, or skin colour. However, stereotyping based on ethnicity, race, or skin colour leads to racial biases and contradicts basic principles of procedural justice and fairness.¹⁵⁹

This pathway of “differential treatment” is supported by academic research hinting, for example, that Black high school students in Toronto appeared more likely than their peers to self-report being stopped and searched by police¹⁶⁰ and Canadian youth who identified as Indigenous, Black, Middle Eastern or West Asian were more likely to self-report being questioned by police,¹⁶¹ even after controlling for various demographic, behavioural and other risk factors.^e

[Ethnic Disproportionality in VPD Data: Examining Victims and Offenders](#)

Patterns of disproportionality exist depending on the variable being examined. For example, as outlined, Indigenous Peoples are overrepresented in Vancouver’s homeless population. Similar patterns of ethnic disproportionality also exist when we examine data on ethnicity of offenders and victims.

Who are the Victims of Crime?

To demonstrate the concept of disproportionality in police data other than street checks, we examined ethnicity as it relates to victimization rates over the last ten years. Generally, the ethnicities of victims in three categories of offences have been consistent in the last ten years, specifically Violent Crime, Property Crime (break and enters, theft, theft of/from motor

^e Gold (2003) and Melchers (2003) correctly point out that, because it is virtually impossible to completely and accurately account for ALL possible risk factors or cues that would provide a lawful explanation for police stops, it is a logical leap to attribute ANY unexplained statistical discrepancy specifically to race.



vehicles, possession of stolen property, fraud, arson, mischief), and Total Crime (which includes violent, property, and all other crime).^f

Further, there is variation in terms of ethnicity and types of victimization, as outlined in Table 3, below. For example, on average, Indigenous Peoples represented 13.7% of Violent Crime victims, Black persons were victimized in 2.9% of Violent Crime and for comparison purposes, Caucasians represented 50.5% of Violent Crime victims. Therefore, ethnicity of victims, like ethnicity of street checked individuals, does not match population ratios (see Appendix A for full data on victimization and ethnicity from 2008 to 2017).

Table 3. Ethnicity of Victims (2008-2017)

Ethnicity	Violent Crime	Property Crime	Total Crime	Vancouver Population (Census 2016)
ASIAN	13.8%	17.2%	16.0%	38.9%
BLACK	2.9%	1.1%	1.6%	1.0%
CAUCASIAN	50.5%	44.8%	47.3%	46.1%
HISPANIC	3.2%	1.8%	2.2%	1.8%
INDIGENOUS	13.7%	2.0%	5.0%	2.2%
MIDDLE EASTERN	4.1%	2.5%	3.0%	1.9%
OTHER	0.4%	0.4%	0.4%	0.2%
SOUTH ASIAN	7.0%	4.9%	5.6%	6.0%
UNKNOWN	4.5%	25.4%	19.0%	-

Like ethnicity, disproportionality, also exists when we examine the gender of victims, as outlined in Table 4, below. The data illustrates that males, on average, are more often the victims of all types of crime (see Appendix B for full data on gender and victimization from 2008 to 2017).

Table 4. Gender of Victims (2008-2017)

Gender	Violent Crime	Property Crime	Total Crime
FEMALE	40.6%	44.3%	44.3%
MALE	59.3%	55.7%	55.6%
UNKNOWN	0.0%	0.0%	0.0%

Who are the Criminal Offenders?

As outlined in Table 5, when examining data over the last decade, Caucasians made up the greatest portion of offenders. Specifically, on average, 49.2% of violent offenders, and 56.4% of Property Crime offenders are Caucasian. On average, 16.3% of violent offenders and 10.9% of property offenders were Indigenous. Finally, 4.7% and 2.9% of Violent and Property Crime offenders were Black, correspondingly (see Appendix C for full data on ethnicity of offenders, across 10 years).

^f See https://www.statcan.gc.ca/eng/statistical-programs/instrument/3302_Q1_V2 for more information.



Table 5. Ethnicity of Offenders (2008-2017)

Ethnicity	Violent Crime	Property Crime	Total Crime	Vancouver Population (Census 2016)
ASIAN	9.9%	10.3%	9.4%	38.9%
BLACK	4.7%	2.9%	3.8%	1.0%
CAUCASIAN	49.2%	56.4%	53.8%	46.1%
HISPANIC	3.2%	2.0%	2.5%	1.8%
INDIGENOUS	16.3%	10.9%	14.3%	2.2%
MIDDLE EASTERN	3.6%	2.8%	3.3%	1.9%
OTHER	0.3%	0.3%	0.3%	0.2%
SOUTH ASIAN	6.5%	5.3%	5.9%	6.0%
UNKNOWN	6.2%	9.2%	6.7%	-

Regardless of crime category, males are more often offenders than females. For example, from 2008 to 2017, 22.9% of females committed Violent Crime, compared to 76.9% of males. Likewise, more males (71.3%) are offenders of Property Crime, compared to females (28.6%). This data illustrates that victim and offender data is inconsistent with population ratios (see Appendix D for full data on gender of offenders, across crime times and across 10 years).

Table 6. Gender of Offenders (2008-2017)

Gender	Violent Crime	Property Crime	Total Crime
FEMALE	22.9%	28.6%	23.4%
MALE	76.9%	71.3%	76.5%
UNKNOWN	0.1%	0.1%	0.1%

Indigenous Peoples in Correctional Services

Indigenous Peoples are significantly overrepresented in rates of incarceration. While Indigenous representation in the Canadian population is approximately 5%, Indigenous adults accounted for 28% of admission to provincial/territorial correctional services, with similar rates (27%) for federal correctional services in 2016/2017.¹⁶² The rate of Indigenous offenders in custody has been on the rise for over a decade. In 2006/2007, 21% of adults admitted to provincial/territorial correctional services, and 20% in federal corrections were Indigenous. Interestingly, according to data from Statistics Canada, 1,535 persons were accused of homicide Canada-wide between 2014 and 2016 inclusively and 32.6% (500) of this group were identified as Indigenous. In B.C. specifically, the proportion of Indigenous accused of homicide was 19% (33/174).¹⁶³

These trends for Indigenous adults are aligned with Indigenous youth. Indigenous youth account for approximately 8% of the Canadian youth population, yet accounted for 46% of admission to correctional services in 2016/2017.¹⁶⁴ These youth are overrepresented in custody (50%) and community admissions (42%). When comparing against gender, the differences are stark. For example, Indigenous females accounted for 60% of all female youth in custody, compared to 40% of non-Indigenous females. Many factors contribute to these alarming rates. As an example, as outlined by the Truth and Reconciliation Commission, the



overrepresentation of youth in the child welfare system may contribute to higher rates of Indigenous youth in custody.¹⁶⁵

These high custody rates have been linked to historical factors that have been acknowledged by the Supreme Court of Canada.¹⁶⁶ Specifically, in sentencing, factors related to Indigenous social history must be considered by the courts. These factors include poverty, substance abuse, victimization, among other factors. The intergenerational impacts of the Residential School system is also a key factor. The high rates of Indigenous Peoples in the criminal justice system is well-documented, and is reflected in police data as well.

MANY OF TODAY'S ABORIGINAL CHILDREN AND YOUTH ARE LIVING WITH THE LEGACY OF RESIDENTIAL SCHOOLS, AS THEY STRUGGLE TO DEAL WITH HIGH RATES OF ADDICTION, FETAL ALCOHOL SPECTRUM DISORDER, MENTAL HEALTH ISSUES, FAMILY VIOLENCE, THE INCARCERATION OF PARENTS, AND THE INTRUSION OF CHILD WELFARE AUTHORITIES. ALL OF THESE FACTORS PLACE THEM AT GREATER RISK OF INVOLVEMENT WITH CRIME. IN ADDITION, THE OVER-INCARCERATION OF ABORIGINAL ADULTS (ALSO TIED TO THE RESIDENTIAL SCHOOLS) HAS REPERCUSSIONS FOR THEIR CHILDREN.

TRUTH AND RECONCILIATION COMMISSION (2015)

Who is Being Street Checked and Where?

Prevention Strategies for Repeat Offenders

A solid body of criminological research has illustrated that much of crime is committed by repeat offenders. For example, Sherman found that less than 3% of the individuals in his sample of one year had produced over 60% of all arrests in that year.¹⁶⁷ Similar results have been found by others, and this forms the basis for a key goal of policing to deter repeat offenders. Moreover, a concept in crime analysis is that of the *Pareto Principle*, commonly referred to as the *80-20 Rule*. That is, the idea that 80% of outcomes are due to 20% of causes. This concept has been observed with repeat offenders; specifically, large portions of criminal incidents are committed by a small portion of offenders.¹⁶⁸

Given that repeat offenders often engage in criminal activity in repeat locations, it is essential that police continue to incorporate proactive policing in their crime prevention strategies. This includes the use of information from the community that may be gathered from street checks. Other relevant information may include understanding whom these criminals target and information such as locations and time of offences.



Since repeat offenders often commit crimes in the same areas they did before, it is a preventative strategy to engage those offenders if they are seen in areas where they commonly commit crimes. That is, police presence and police-public conversations may deter crime. Crime is often committed when the risk of being caught is lower than the reward, as outlined in deterrence theory.¹⁶⁹ Therefore, police interactions and presence would heighten criminals' risk of being caught, and thereby crime may be deterred. Moreover, police may document if a repeat offender is observed in an area where they are frequently offending in. This documentation often assists in future investigations (e.g., documented clothing that may be seen later on video footage).

Street Checking Repeat Offenders: VPD Data

An examination of the VPD data illustrates that many of the street checks VPD officers conduct are those of individuals who have been suspects in previous police criminal investigations (this includes individuals who were suspects, chargeable⁹, or charged in criminal investigation). Our classification of a suspect includes all Statistics Canada Uniform Crime Reporting (UCR) categories where a person may be coded as role type suspect or charged. The PRIME-BC municipal bylaw or violation ticket system was not queried for this examination. Rather, examples of offences encompassed in this data include assaults, sex offences, robbery, and break and enters.

Of all street checked individuals in 2017, 80% had *previously* been suspects in police criminal investigations by police departments in Metro Vancouver (i.e., they were a suspect before the VPD did the 2017 street check). More specifically, the VPD has conducted street checks on individuals who, on average, were suspects in 22 criminal police investigations (before the 2017 street check occurred). This lends support to the position that VPD officers base street checks on observed unusual, suspicious, or potentially criminal behaviour.

Quick Stats

- 6,322 street checks in 2017 of 4,130 individuals.
- Of those 4,130 individuals, 80% (3,306) were suspects in other police criminal investigations *before* the 2017 street check occurred.
- Of those 4,130 individuals, 66% had prior convictions by Crown Counsel in the criminal investigation, *before* the 2017 street check occurred.
- On average, each individual (of the 3,306) had been a suspect in 22 separate criminal investigations *before* the 2017 street check occurred, by police departments in Metro Vancouver.

⁹ A named subject for whom grounds exists to support the recommendation of a charge were criminal offences exist, but alternative measures are offered.



The ethnicity data of these 80% reveals that:

- 89% of Indigenous Peoples that were street checked in 2017 were suspects in previous criminal investigations (an average of 29 separate criminal investigations per person);
- 84% of Caucasians that were street checked in 2017 were suspects in previous criminal investigations (an average of 23 separate criminal investigations per person);
- 83% of Black persons that were street checked in 2017 were suspects in previous criminal investigations (an average of 26 separate criminal investigations per person);
- 82% of Middle Eastern persons that were street checked in 2017 were suspects in previous criminal investigations (an average of 16 separate criminal investigations per person);
- 81% of Hispanic persons that were street checked in 2017 were suspects in previous criminal investigations (an average of 13 separate criminal investigations per person);
- 81% of South Asians that were street checked in 2017 were suspects in previous criminal investigations (an average of 14 separate criminal investigations per person); and
- 74% of Asians that were street checked in 2017 were suspects in previous criminal investigations (an average of 14 separate criminal investigations per person).

Conviction data was also examined, as individuals are convicted through objective judicial proceedings. Of all the unique individuals street checked in 2017, 44% were convicted of at least one criminal offence, in a criminal incident that pre-dated the 2017 street check. Collectively, this data suggests that the VPD's use of street check is not random targeting, but based on a totality of suspicious circumstances and behaviours.

CASE STUDY

VPD patrol officers conducted a street check of a male they suspected was involved in property crime offences. During the street check, the officers noted the specific clothing worn by the individual. Two separate break and enters at two businesses occurred the day before and the day after the street check. Surveillance footage showed that the suspect wore the exact same clothing as the individual from the street check.

Detectives were able to identify the male as a suspect based on the clothing detail in the street check and laid charges of Break and Enter. The suspect was later convicted.



Locations of VPD Street Checks: Crime Hot Spots

An important facet in the detection and prevention of crime is that it is often concentrated in clusters of areas, often referred to as hotspots.^{170,171} One of the first studies to examine crime hotspots found that 50% of CFS were “dispatched to just over 3% of all addresses and street sections”.¹⁷² Similar findings have been reported in other cities, including Vancouver.¹⁷³ Therefore, proactive police strategies, which may include street checks, are often focused on certain areas.

VPD Crime Analysts work to identify crime hot spots. The analysis focuses on the geo-temporal distribution of crime incidents that are inconsistent with previous known patterns for the area and time of year. Other factors, such as modus operandi and repeat victimization precedents are considered in the analysis process to identify a discernable pattern, which then helps to narrow a list of chronic offenders that meet the criminogenic criteria and are viable suspects. Police are then watchful for these individuals entering the predefined area during the specific times and days that correspond to the offender’s criminal activity cycle.

Of note, there lies a distinction between identifying certain areas, as described above, versus identifying certain people based on ethnicities, or any demographic factor. The VPD identifies crime areas; certain areas may have ethnic clusters as well. For example, Vancouver’s DTES is a high-crime area that presents challenges for police and the community, due to its high levels of poverty, homelessness, drug use, mental health issues, amongst other issues. The DTES also has a larger proportion of Indigenous Peoples than the city as a whole.¹⁷⁴

Correlation between the Location of Street Checks and the Location of CFS

All CFS that the VPD responded to from 2008 to 2017 were mapped and displayed with density maps, a graphical representation to display where concentrations of CFS are located. Similarly, all VPD street checks from the ten years of data were mapped using identical criteria and shown where the highest density of street checks occur. While CFS and street checks occur everywhere in Vancouver, only the higher concentrations appear on the map ranging from frequent (green) to the highest frequency (red).



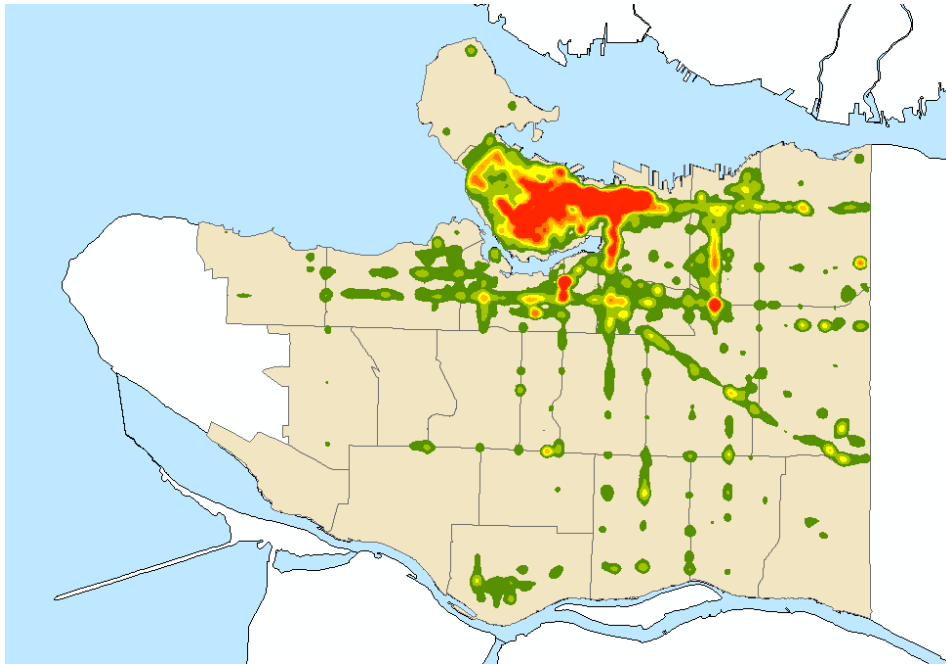


Figure 1. Density Map of VPD Calls for Service (2008-2017)

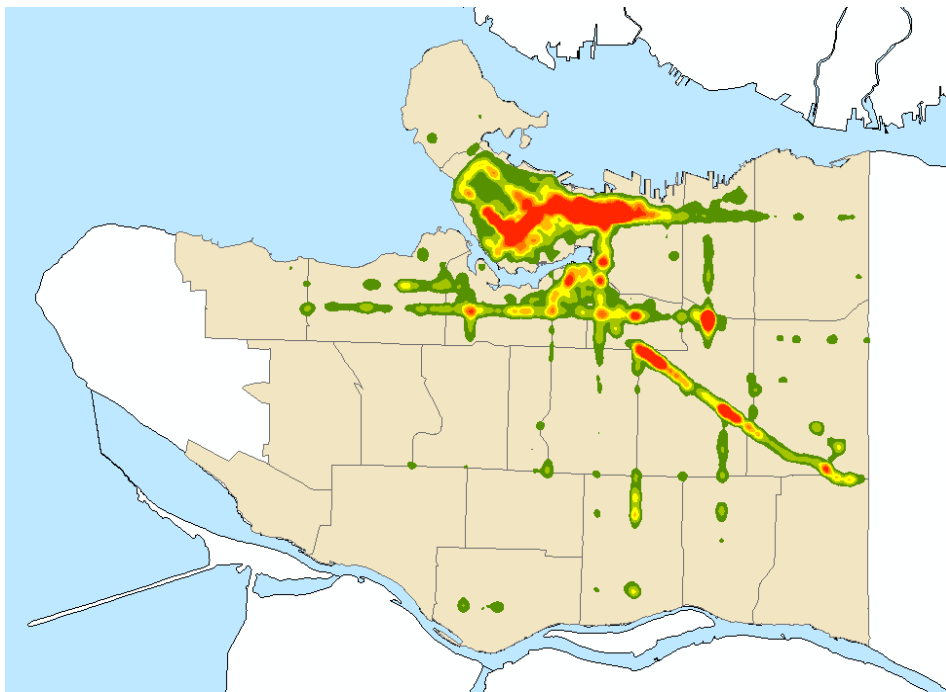


Figure 2. Density Map of VPD Street Checks (2008-2017)

A side-by-side visual comparison of the two density maps show a clear and similar pattern between CFS and street checks. To test this similarity and the relationship between the two density maps, a correlation analysis was conducted. A correlation coefficient (score) ranges from -1 to 1; a score closer to -1 means as one measure increases the other measure decreases—that is, an inverse relationship. On the contrary, a score closer to 1 means as one measure increases the other measure increases. A correlation coefficient closer to zero



suggests that there is no reciprocal pattern when one measure moves. Of note, correlations are used to describe data and show relationships; however, they are not used to indicate whether one measurement caused the other. That is, correlation does not imply causation.

The correlation analysis of the two density maps confirmed the visual similarity and showed a strong positive relationship ($r = 0.8746$) between the locations where street checks and CFS occur. That is, the areas with the most CFS were the areas with the most street checks.

Correlation between the Location of Street Checks and the Location of Violent Crime

To understand the types of crime that are associated with street checks, we examined serious offences. Specifically, incidents of Violent Crime (e.g., Assaults, Robbery, Sexual Offences, and Attempt Murder, etc.), for the 10 year period of 2008 to 2017, were plotted on the density map to assess their relation to the location of street checks.

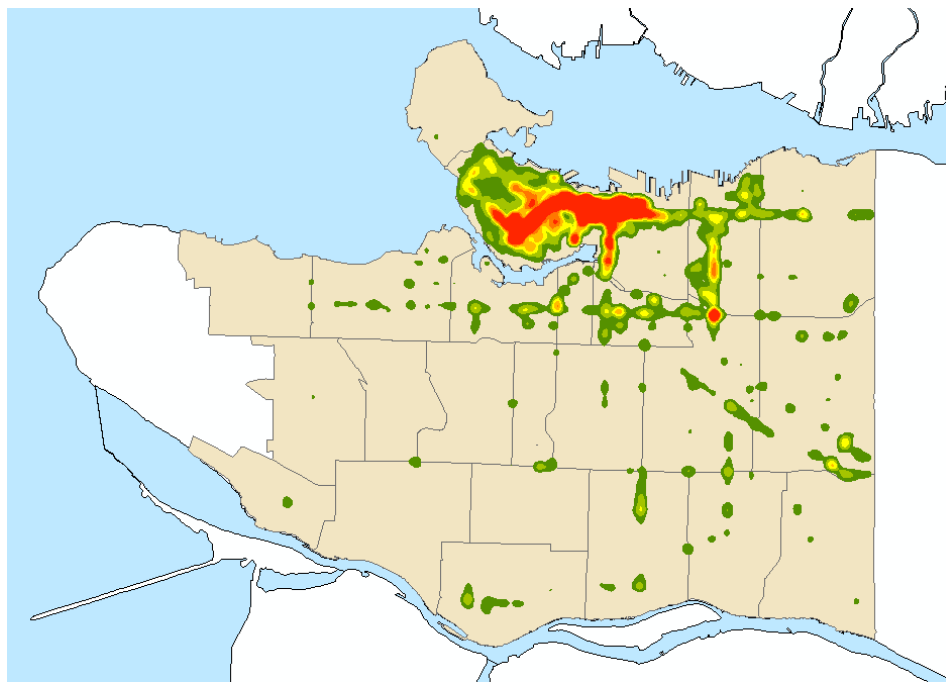


Figure 3. Density Map of Violent Crime (2008-2017)

Again, a visual comparison of the density maps illustrates that Violent Crime distribution appears similar to that of street checks. To test this visual, a correlation analysis confirmed the similarity and showed an even stronger positive relationship ($r = 0.9131$) between the locations where street checks and violence occur. That is, the areas with the most violence were the areas with the most street checks; this illustrates the VPD's deliberate non-random use of street checks in areas with serious crime.

The density maps and analyses illustrate that the high call areas and the areas with the most violence are where the police are the most proactive and conduct the most street checks. As supported by theory and research, proactive work is important to establish a visual deterrent as well as to gather sufficient information to identify suspects, if crimes in the area are later committed.

The VPD's crime prevention programs are developed in problem areas and the use of street checks is one tool to support these programs. The data illustrates that the VPD's use of street checks is not random, but a component of proactive enforcement efforts. That is, street checks are occurring in areas of Vancouver where workload for officers is the highest or in the areas that are the most violent. This supports the premise that when officers conduct street checks, they occur in areas of Vancouver that would warrant it.

Limitations of Data

There are certain methodological characteristics that may have influenced the interpretation of select research findings in this document. These constraints are important to understanding the strength of associated data.

Validity Issues in Data

Unfortunately, research efforts to separate the various drivers of racial disparity in police data are often spoiled by well-known data quality and data availability issues. First, not all street-level interactions are captured in the form of an official street check.¹⁷⁵ Even when a street check record is created in police databases, it does not always explicitly capture all the demographic, social, and professional information¹⁷⁶ related to the people involved; where and when the stop occurred; the specific reasons for the stop; what took place during the stop; why the action took place; how long the street check took; and what the ultimate outcome of the check was. As generally is the case with police data, it is collected for public safety reasons and may not specifically align with FOI or media requested information.

Designed with the goal of investigative and record keeping, the provincially mandated PRIME-BC system along with other police databases, were not intended for accurate data extraction for analysis, release, nor reporting. In alignment with the systems purpose, officers do not record data or write police reports with the objective of generating extractable and analyzable statistics. An illustration of this is presented (in a following section) on the limitations of VPD data on well-being street checks.

Data examined in this review are of statistics that are recorded, by a certain officer at that time. The same individual street checked at a different time may be represented as a different ethnicity. Therefore, the data represents the ethnicity that the officer perceived or entered at that time. When reviewing unique individuals/events in PRIME-BC, multiple ethnicities may be available for one person. Within the submitted data, variables like ethnicity, race, and skin colour are usually conflated¹⁷⁷ and are rarely validated or audited for reliability, completeness, or compliance.^{178,179}

Research Assumptions

In situations where no system link exists between two sets of data or the system has no indicators of a desired measure, analytical assumptions need to be made. For example, when determining how many citizens' CFS lead to a street check, assumptions were made based on a matching system as CFS and street checks are recorded in two separate databases. Specifically, matching of addresses, date, submitting officer(s), and other naming variables were used.



Duplications & Repeat Street Checks

Due to system errors, there are duplications in the data. The system does not identify when the same instance has been submitted multiple times. It is important to note that duplication may lead to inflation of data, and this should be considered in the interpretation of results. It is also important to note the distinction between street check interactions and individuals; for example, in 2017 there were 6,322 street check interactions, but 4,130 unique individuals. This is relevant because ethnicity data is reflected in interactions, and not individuals; as such, this is important to note in the interpretation of data.

The Issue of Street Checks in British Columbia

Provincial Police Services Division

Currently, the B.C. Ministry of Public Safety and Solicitor General does not have a policy or Provincial Standard governing the use of street checks. However, in response to recommendations from the MWCI, and taking into consideration the findings of other inquiries and review processes across Canada, B.C. is developing new policing standards to promote overall equality in the delivery of policing services throughout the province. To effectively develop these standards, the Province undertook a public consultation process to garner a deeper understanding regarding the public's views on equitable or unbiased policing.¹⁸⁰ Albeit the consultation was not intended directly for street checks, it is anticipated that one of the new standards will be regarding street checks.

The public consultation process involved an online questionnaire asking respondents about their level of agreement on a range of concepts and potential principles relating to unbiased policing. These concepts and potential principles were developed from an examination of related materials from other jurisdictions and from discussions with stakeholders and community organizations.

More than 200 British Columbians, from a balanced and diverse demographic, participated in the online questionnaire, providing their concerns, recommendations and general support for the concept and themes proposed for the new B.C. Provincial Policing Standards. Respondents could also offer comments and suggestions about the information presented and what they would like to see added. In addition, written submissions were received from interested organizations.

Out of the 231 questionnaires completed online, 179 respondents wrote additional, detailed comments on at least one question. Comments included constructive feedback, concerns, and recommendations for the development and implementation of *Provincial Policing Standards* to promote unbiased policing. Overall, most respondents supported the proposed concepts and themes that may be part of Principles for *Provincial Policing Standards* on the promotion of unbiased policing.

Aside from the originally proposed concepts and themes, an additional theme was examined as some stakeholders expressed an interest in standards for street checks. Over half of the participants (55%) strongly agreed or agreed that this theme is important for the B.C. *Provincial Policing Standards* to promote unbiased policing, but over a quarter of the participants (28%) strongly disagreed or disagreed. Although some respondents were against the police use of street checks, citing the potential for abuse of power among other concerns, "many supported police use of street checks, emphasizing their utility in ensuring



the safety of the community, preventing and solving crime, as a tool for finding or monitoring individuals, [and as] a key part of proactive policing.”¹⁸¹ In other words, respondent(s) stated, “victims of crimes expect that police will conduct street checks to prevent crimes and/or identify suspect(s).”¹⁸²

Moreover, there were some suggestions that comprehensive training and education would be necessary to prevent street checks from unfairly targeting specific groups of individuals. Additionally, to support police officers and protect British Columbians, many respondents suggested that there should be clear, fair, and consistent street check guidelines in place; there should be oversight to ensure compliance with these guidelines; and, that these guidelines should be made public. However, there were concerns that standardizing street checks would limit the capabilities of police officers to prevent crime and identify suspects.

“Many supported police use of street checks, emphasizing their utility in ensuring the safety of the community, preventing and solving crime, as a tool for finding or monitoring individuals...street checks are a key part of proactive policing... victims of crimes expect that police will conduct street checks to prevent crimes and/or identify suspect(s)”

A Collective Position

Police chiefs in British Columbia are represented by two associations, the first being the British Columbia Association of Municipal Chiefs of Police (BCAMCP) and the British Columbia Association of Chiefs of Police (BCACP). The BCAMCP represents the municipal police chiefs, whereas the BCACP represents the chiefs of police for both the Royal Canadian Mounted Police (RCMP) and municipal police agencies in B.C. The purpose of these associations is to promote uniformity in police practices and efficient practices in preventing/detecting crime, while ensuring high standard of ethics, integrity, and conduct.¹⁸³

The BCACP supports consistency in the delivery of lawful and bias-free policing strategies, including the use of street checks. The BCACP and BCAMCP agree that street checks are not random but done within the authorities provided by common law and the B.C. *Police Act*, originating either as proactive initiatives or from citizens’ CFS.

Future Directions

The VPD is committed to ensuring that our police practices and crime prevention strategies are applied judiciously and do not infringe on citizen rights. The VPD will continue to work on initiatives that support this commitment, as described below.

VPD Street Check Policy

The VPD has continued to improve its street check standards over the past two years, and has made modifications based on the changing landscape that has taken place across Canada. In April of this year, the Government of B.C. advised that they will also be developing provincial standards on street checks. It is expected that this provincial standard will help



provide a framework for street check policies for police in B.C. We will formalize our street check standards into policy and ensure that it is compliant with any future provincial standards.

Continued Education

In line with ensuring that VPD officers are conducting street checks appropriately, the VPD is committed to ongoing training initiatives for all frontline staff. The VPD has developed refresher sessions on street checks for all frontline officers. The lessons guide officers through the legal framework that members of the VPD may operate within when interacting with citizens. Officers are trained on their legal authorities and that street checks may not be based on prohibited grounds as set out in the B.C. *Human Rights Code*.

Publishing Data Annually

In an effort to continue to strengthen public trust, confidence and transparency, the VPD commits to releasing data on street checks annually.

Providing More Information

Communicating with the communities that the VPD serves is important for fostering trust and building positive relationships. With these considerations, the VPD plans to raise awareness of street checks through a new public education initiative. The VPD will provide information on what street checks are, and why and how they are used by police.

Expansion of the Indigenous Liaison Role

The VPD has recently developed a new Indigenous Liaison Protocol Officer position. This officer will be based out of the Vancouver Aboriginal Community Policing Centre and will work directly with the Indigenous community to develop both VPD and community programming, act as a resource for VPD members on Indigenous culture, as well as coordinate a VPD Indigenous Advisory Committee. In addition to these duties, the Indigenous Liaison Protocol Officer will be a dedicated point of contact for community members to raise any concerns they may have about street checks or if they feel they have been targeted because of their ethnicity.

Check Well-Being Reason Code

Currently, the VPD is working with PRIMECorp, the organization that manages PRIME-BC, to develop a “reason code” (category) that would be appropriate for instances where VPD officers are not investigating or preventing crime, but rather are interacting with citizens to ensure their health, safety, and well-being. These include instances when VPD officers provide assistance with housing, ensure that vulnerable individuals are not at risk during freezing cold temperatures, and other situations such as these. With the development of a specific reason code, the VPD will be able to quantify the frequency of well-being checks with more accuracy.



Conclusion

The VPD is dedicated to ensuring that the rights of citizens are respected. Therefore, VPD members will not stop, question or detain any person for a reason based on prohibited grounds of discrimination, or engage in “racial profiling”. The VPD does not support random or arbitrary stops of any individual in order to collect personal information. Nor does the VPD support random street checks. The VPD does not support any police action based on discriminatory profiling.

As illustrated clearly in the data, street checks have various functions including as a proactive crime reduction strategy, as well as responding to concerned citizens. This empirical review illustrated that VPD’s street checks are conducted in targeted hotspots—areas with the most violence, and areas where most calls from citizens are received. That is, street checks are conducted in deliberate areas, in line with our crime reduction strategies that target crime hotspots. Furthermore, the data revealed that the large majority of individuals that are street checked are those with known criminality.

The VPD utilizes a myriad of techniques that detect and prevent crime; this includes using strategies to deter those individuals who are known to be involved in criminal acts. The VPD is committed to making Vancouver a safe place for all. Ensuring safety includes taking care of those that are most vulnerable.

The VPD’s priority has been—and always will be—protecting *all* citizens of Vancouver.



Glossary

This list below of abbreviations/acronyms is compiled from terminology that is used throughout this report.

Glossary of Abbreviations/Acronyms	
ACC	Aboriginal Cultural Competency
BCACP	BC Association of Chiefs of Police
BCAMCP	BC Association of Municipal Chiefs of Police
BCCLA	BC Civil Liberties Association
CCC	Criminal Code of Canada
CDSA	Controlled Drugs and Substances Act
CFS	Calls for Service
Charter	Canadian Charter of Rights and Freedoms
DTES	Downtown Eastside
EPS	Edmonton Police Service
FIP	Fair and Impartial Policing
FOI	Freedom of Information
JIBC	Justice Institute of British Columbia
MCSCS	Ministry of Community Safety and Correctional Services (Ontario)
MPU	Missing Persons Unit
MVA	Motor Vehicle Act
MWCI	Missing Women Commission of Inquiry
NFA	No Fixed Address
OPCC	Office of the Police Complaint Commissioner
PRIME-BC	Police Records Information Management Environment-British Columbia
RCMP	Royal Canadian Mounted Police
UBCIC	Union of BC Indian Chiefs
UCR	Uniform Crime Reporting
VPD	Vancouver Police Department



Appendix A: Ethnicity and Victimization

Ethnicity of Victims of Violent Crime

Violent Crime x Ethnicity	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	Total	Van. Pop. ^h
ASIAN	14.8%	13.5%	14.1%	13.3%	13.6%	13.6%	13.9%	14.4%	13.3%	13.7%	13.8%	38.9%
BLACK	2.5%	2.5%	2.6%	3.4%	2.7%	2.8%	3.1%	3.1%	3.0%	3.4%	2.9%	1.0%
CAUCASIAN	53.8%	52.5%	50.9%	51.6%	51.0%	50.4%	48.7%	48.4%	48.8%	46.4%	50.5%	46.1%
HISPANIC	3.2%	3.6%	3.4%	2.9%	3.0%	3.3%	3.1%	2.9%	2.9%	3.4%	3.2%	1.8%
INDIGENOUS	11.8%	13.1%	13.8%	14.0%	14.8%	14.8%	14.5%	13.6%	13.8%	12.8%	13.7%	2.2%
MIDDLE EASTERN	3.9%	4.1%	3.6%	4.1%	3.6%	4.4%	4.2%	4.4%	4.4%	4.7%	4.1%	1.9%
OTHER	0.5%	0.4%	0.5%	0.3%	0.3%	0.4%	0.4%	0.6%	0.5%	0.7%	0.4%	0.2%
SOUTH ASIAN	6.1%	6.6%	7.2%	6.6%	6.8%	6.3%	6.8%	7.7%	7.8%	8.4%	7.0%	6.0%
UNKNOWN	3.5%	3.7%	4.0%	3.8%	4.1%	4.1%	5.3%	5.0%	5.5%	6.6%	4.5%	-

Ethnicity of Victims of Property Crime

Property Crime x Ethnicity	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	Total	Van. Pop.
ASIAN	17.1%	17.2%	18.1%	19.4%	18.0%	16.8%	16.7%	15.9%	17.1%	16.5%	17.2%	38.9%
BLACK	1.0%	0.9%	1.1%	1.1%	1.2%	1.1%	1.2%	1.2%	1.1%	1.4%	1.1%	1.0%
CAUCASIAN	47.5%	47.1%	46.3%	44.9%	46.4%	46.2%	45.1%	43.3%	41.8%	39.5%	44.8%	46.1%
HISPANIC	1.9%	1.8%	2.0%	1.9%	1.7%	1.9%	1.7%	1.8%	1.7%	1.7%	1.8%	1.8%
INDIGENOUS	1.8%	1.9%	1.9%	2.1%	2.1%	2.3%	1.8%	1.9%	1.9%	1.9%	2.0%	2.2%
MIDDLE EASTERN	2.3%	2.4%	2.4%	2.5%	2.5%	2.4%	2.3%	2.5%	2.6%	2.8%	2.5%	1.9%
OTHER	0.5%	0.5%	0.4%	0.3%	0.4%	0.4%	0.3%	0.3%	0.4%	0.4%	0.4%	0.2%
SOUTH ASIAN	4.7%	5.0%	5.1%	4.9%	4.7%	4.7%	4.9%	4.7%	4.8%	5.1%	4.9%	6.0%
UNKNOWN	23.2%	23.4%	22.8%	22.8%	23.1%	24.0%	25.8%	28.4%	28.6%	30.7%	25.4%	-

Ethnicity of Victims of Total Crime

Total Crime X Ethnicity	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	Total	Van. Pop.
ASIAN	16.1%	15.8%	16.4%	16.8%	16.4%	15.6%	15.9%	15.4%	16.2%	15.6%	16.0%	38.9%
BLACK	1.4%	1.4%	1.6%	1.8%	1.6%	1.6%	1.6%	1.6%	1.5%	1.8%	1.6%	1.0%
CAUCASIAN	50.1%	49.5%	48.8%	48.3%	48.9%	48.4%	46.7%	45.3%	44.0%	42.0%	47.3%	46.1%
HISPANIC	2.2%	2.3%	2.4%	2.3%	2.1%	2.2%	2.1%	2.0%	2.0%	2.1%	2.2%	1.8%
INDIGENOUS	4.3%	5.0%	5.2%	5.7%	5.5%	5.5%	4.9%	4.7%	4.5%	4.4%	5.0%	2.2%
MIDDLE EASTERN	2.8%	3.1%	3.0%	3.2%	2.9%	3.1%	2.8%	3.0%	3.1%	3.3%	3.0%	1.9%
OTHER	0.5%	0.4%	0.4%	0.3%	0.4%	0.4%	0.3%	0.3%	0.4%	0.4%	0.4%	0.2%
SOUTH ASIAN	5.4%	5.7%	5.9%	5.7%	5.4%	5.4%	5.5%	5.4%	5.5%	5.9%	5.6%	6.0%
UNKNOWN	17.1%	16.8%	16.3%	15.9%	16.7%	17.8%	20.1%	22.2%	22.8%	24.6%	19.0%	-

^h Please note that "Van. Pop." refers to Vancouver population based on 2016 Census data.



Appendix B: Gender and Victimization

Gender of Victims of Violent Crime

Violent Crime X Gender	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	Total
FEMALE	39.4%	38.8%	41.3%	39.9%	40.5%	41.6%	42.2%	41.6%	40.6%	41.0%	40.6%
MALE	60.6%	61.1%	58.6%	60.1%	59.4%	58.3%	57.8%	58.4%	59.4%	59.0%	59.3%
UNKNOWN	0.1%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%

Gender of Victims of Property Crime

Property Crime X Gender	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	Total
FEMALE	43.6%	44.6%	44.7%	45.0%	45.0%	46.1%	44.9%	43.9%	42.8%	42.9%	44.3%
MALE	56.4%	55.4%	55.3%	55.0%	55.0%	53.8%	55.1%	56.1%	57.1%	57.1%	55.7%
UNKNOWN	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%	0.1%	0.0%

Gender of Victims of Total Crime

Total Crime	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	Total
FEMALE	43.6%	44.2%	44.6%	44.6%	44.5%	45.8%	45.1%	44.3%	43.3%	43.5%	44.3%
MALE	56.4%	55.7%	55.3%	55.4%	55.5%	54.2%	54.8%	55.6%	56.6%	56.5%	55.6%
UNKNOWN	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%	0.1%	0.0%



Appendix C: Ethnicity of Offenders

Ethnicity of Violent Offenders

Violent Crime x Ethnicity	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	Total	Van. Pop.
ASIAN	9.3%	9.7%	9.9%	9.5%	10.4%	10.5%	9.6%	9.6%	9.9%	10.7%	9.9%	38.9%
BLACK	5.6%	5.1%	6.0%	7.0%	5.4%	3.6%	3.6%	4.1%	3.8%	4.1%	4.7%	1.0%
CAUCASIAN	49.2%	47.7%	48.9%	48.8%	45.9%	50.5%	50.6%	50.1%	51.3%	48.1%	49.2%	46.1%
HISPANIC	3.5%	3.8%	4.1%	4.2%	3.3%	2.8%	2.8%	2.6%	2.4%	3.1%	3.2%	1.8%
INDIGENOUS	20.1%	21.1%	19.1%	19.5%	18.8%	13.5%	13.3%	14.4%	12.6%	13.6%	16.3%	2.2%
MIDDLE EASTERN	3.6%	4.2%	3.4%	3.9%	4.0%	3.4%	3.3%	3.4%	3.4%	3.6%	3.6%	1.9%
OTHER	0.2%	0.2%	0.4%	0.3%	0.4%	0.3%	0.2%	0.2%	0.2%	0.4%	0.3%	0.2%
SOUTH ASIAN	6.9%	6.9%	6.9%	5.6%	7.0%	6.5%	6.3%	5.3%	7.2%	6.8%	6.5%	6.0%
UNKNOWN	1.6%	1.3%	1.2%	1.2%	4.8%	8.8%	10.2%	10.3%	9.3%	9.6%	6.2%	-

Ethnicity of Property Crime Offenders

Property Crime x Ethnicity	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	Total	Van. Pop.
ASIAN	8.7%	9.9%	11.3%	9.7%	11.1%	11.3%	9.0%	9.6%	10.9%	10.8%	10.3%	38.9%
BLACK	4.6%	3.8%	4.1%	3.8%	3.6%	2.4%	2.1%	2.7%	2.1%	2.7%	2.9%	1.0%
CAUCASIAN	58.7%	56.9%	58.0%	58.6%	53.9%	56.2%	57.8%	56.4%	55.6%	54.0%	56.4%	46.1%
HISPANIC	2.7%	2.4%	2.7%	3.0%	2.2%	1.9%	1.5%	1.7%	1.5%	1.8%	2.0%	1.8%
INDIGENOUS	15.9%	16.7%	15.1%	16.2%	14.1%	9.2%	8.6%	8.7%	8.2%	8.0%	10.9%	2.2%
MIDDLE EASTERN	2.7%	3.3%	2.9%	2.6%	3.3%	2.7%	2.7%	2.8%	2.5%	2.6%	2.8%	1.9%
OTHER	0.3%	0.3%	0.3%	0.4%	0.3%	0.3%	0.3%	0.3%	0.4%	0.5%	0.3%	0.2%
SOUTH ASIAN	4.3%	4.9%	4.1%	4.2%	5.1%	5.5%	5.0%	5.5%	6.0%	6.3%	5.3%	6.0%
UNKNOWN	2.1%	1.8%	1.5%	1.7%	6.4%	10.5%	12.9%	12.4%	12.9%	13.4%	9.2%	-

Ethnicity of Offenders for Total Crime

Total Crime x Ethnicity	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	Total	Van. Pop.
ASIAN	9.2%	9.4%	9.9%	8.8%	9.5%	10.0%	8.8%	8.8%	9.5%	9.7%	9.4%	38.9%
BLACK	5.0%	4.5%	4.9%	5.0%	4.3%	3.2%	2.9%	3.4%	2.9%	3.3%	3.8%	1.0%
CAUCASIAN	54.5%	52.7%	53.8%	53.0%	50.7%	53.5%	55.5%	54.9%	55.3%	53.3%	53.8%	46.1%
HISPANIC	3.0%	3.3%	3.4%	3.6%	2.8%	2.3%	2.0%	2.1%	1.7%	2.1%	2.5%	1.8%
INDIGENOUS	16.9%	18.1%	16.8%	18.5%	17.8%	13.2%	11.8%	11.9%	11.2%	11.4%	14.3%	2.2%
MIDDLE EASTERN	3.3%	3.8%	3.5%	3.5%	3.8%	3.2%	2.9%	3.0%	3.0%	2.9%	3.3%	1.9%
OTHER	0.3%	0.3%	0.4%	0.3%	0.3%	0.3%	0.3%	0.3%	0.3%	0.4%	0.3%	0.2%
SOUTH ASIAN	5.9%	6.4%	5.9%	5.9%	6.2%	6.1%	5.2%	5.5%	5.9%	6.2%	5.9%	6.0%
UNKNOWN	2.0%	1.5%	1.5%	1.6%	4.6%	8.1%	10.5%	10.1%	10.3%	10.6%	6.7%	-



Appendix D: Gender of Offenders

Gender of Violent Offenders

Violent Crime x Gender	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	Total
FEMALE	16.9%	16.2%	16.4%	16.3%	21.6%	27.5%	25.0%	28.4%	27.6%	28.1%	22.9%
MALE	83.1%	83.8%	83.6%	83.7%	78.3%	72.4%	74.6%	71.4%	72.1%	71.9%	76.9%
UNKNOWN	0.0%	0.0%	0.0%	0.0%	0.2%	0.1%	0.3%	0.2%	0.3%	0.0%	0.1%

Gender of Property Crime Offenders

Property Crime x Gender	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	Total
FEMALE	19.3%	22.5%	22.0%	21.1%	24.7%	31.9%	31.5%	32.0%	31.9%	32.3%	28.6%
MALE	80.7%	77.4%	78.0%	78.9%	75.2%	68.0%	68.3%	67.8%	67.9%	67.5%	71.3%
UNKNOWN	0.0%	0.0%	0.0%	0.0%	0.2%	0.1%	0.2%	0.2%	0.2%	0.1%	0.1%

Gender of Offenders for Total Crime

Total Crime x Gender	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	Total
FEMALE	17.1%	18.1%	17.5%	17.4%	20.1%	26.9%	26.8%	27.7%	27.3%	27.9%	23.4%
MALE	82.9%	81.9%	82.5%	82.6%	79.8%	73.0%	73.0%	72.1%	72.5%	72.0%	76.5%
UNKNOWN	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%	0.2%	0.1%	0.2%	0.1%	0.1%



Endnotes

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VANCOUVER POLICE DEPARTMENT

REPORT TO THE VANCOUVER POLICE BOARD

REPORT DATE: January 30, 2021
BOARD MEETING DATE: February 18, 2021
BOARD REPORT # 2102G01
Regular

TO: Vancouver Police Board
FROM: Drazen Manojlovic, Director, Planning, Research and Audit Section
SUBJECT: Street Check Audit Report

RECOMMENDATION:

THAT the Vancouver Police Board (VPB) receive this report for information.

SUMMARY:

In September of 2018, as part of its governance and oversight responsibilities, the VPB committed to auditing street checks and annually releasing street check data that is broken down by gender and ethnicity. On January 15, 2020, British Columbia (BC) Provincial Policing Standard (BCPPS) 6.2.1 *Police Stops* ('Standard') came into effect. The Standard also requires police departments in BC to conduct an annual audit of street checks. The data in this report will address these commitments. This report will also provide the results of the audit and clarify the law surrounding the practice of street checks, comment on the efficacy of street checks, and comment on calls to ban the practice of street checks.

The following is a high-level listing of the audit's findings. Important background, information, and context is in the main body of the report, and must be read to avoid any misinterpretations:

The Law Surrounding Street Checks (pages 6-8)

- In addition to BC, the following provincial governments have either regulated or provided guidance on the practice of street checks: Ontario; Saskatchewan; Nova Scotia; Quebec, and; Alberta (they are listed in chronological order of when each government provided direction).
- Police cannot conduct a street check that is random, arbitrary, biased, or based on identity factors such as (but not limited to) race or ethnicity.
- Police can conduct street checks when they are making enquiries into reasonable and legitimate public safety purposes such as (but not limited to) suspicious activity, crime prevention or intelligence gathering.
- Those who have stated that street checks are illegal, even when they are done free of any bias, are incorrect.

Audit Results (pages 8-12)

- The audit will report on all street check records that were submitted between January 15, 2020 and December 31, 2020.
- There were 261 street check records submitted. The number of street check records decreased by 94.3% when compared to the 4,544 records during the same date range in 2019. This is likely due to a combination of the public dialogue on street checks and the constraints placed upon the practice by the Standard.
- Typical of sweeping changes to any practice, that audit found that 186 of the records were 'interactions that were misclassified as a street check' (IMSC), while the remaining 75 records were an actual 'proactive street check'.
- The 186 IMSC records include interactions such as (but not limited to) traffic stops, calls for service, violation ticket investigations, and observations of chronic offenders that were never stopped. The VPD has initiated the process of correcting these 186 misclassified records.
- A proactive street check record needs to contain an articulated 'public safety purpose' and 90.7% (68 of the 75) had an articulated public safety reason for the street check.
- For the seven street checks that did not have a stated public safety purpose, the VPD has begun the process of contacting the officers to determine if there was a public safety purpose and, if there is not, then the identifying information in the record will be removed (as required by the Standard).
- Follow-up training material will be developed and disseminated to minimize the future misclassification of records as street checks.

Demographics of People in Street Check Records (pages 12-15)

- As stated above, 75 of the 261 records were proactive street checks, while 186 were IMSCs. More than one person can be part of a street check record, therefore there are more people associated with a record than there are records.
- In the interest of public transparency, this report includes the ethnic/racial breakdown of the 353 'person entries' associated with all 261 street check records (note – the parentheses beside each ethnicity/race listed below represents that group's portion of Vancouver's population based on the 2016 Census):

All Street Check Records	Total		Female		Male	
	Count	% of Total Entries	Count	% of Total Entries	Count	% of Total Entries
Ethnicity/Race (% of Van's Pop)						
Asian (38.9%)	31	8.8%	8	2.3%	23	6.5%
Black (1.0%)	21	5.9%	3	0.8%	18	5.1%
Caucasian (46.1%)	204	57.8%	37	10.5%	167	47.3%
Hispanic (1.8%)	3	0.8%	1	0.3%	2	0.6%
Indigenous (2.2%)	53	15.0%	14	4.0%	39	11.0%
Middle Eastern (1.9%)	6	1.7%	1	0.3%	5	1.4%
South Asian (6.0%)	24	6.8%	2	0.6%	22	6.2%
Unknown	11	3.1%	6	1.7%	5	1.4%
Total	353	100.0%	72	20.5%	281	79.5%

- The following table shows the ethnic/racial breakdown of the 87 person entries from the 75 proactive street check records:

Proactive Street Checks	Total		Female		Male	
	Count	Percentage	Count	Percentage	Count	Percentage
<i>Ethnicity/Race (% of Van's Pop)</i>						
Asian (38.9%)	7	8.0%	3	3.4%	4	4.6%
Black (1.0%)	2	2.3%	0	0.0%	2	2.3%
Caucasian (46.1%)	49	56.3%	8	9.2%	41	47.1%
Hispanic (1.8%)	1	1.1%	0	0.0%	1	1.1%
Indigenous (2.2%)	20	23.0%	8	9.2%	12	13.8%
Middle Eastern (1.9%)	1	1.1%	0	0.0%	1	1.1%
South Asian (6.0%)	7	8.0%	0	0.0%	7	8.0%
Total	87	100.0%	19	21.8%	68	78.2%

- Note that for Black people there were only two proactive street checks, while 20 of the street checks were of Indigenous people; however, 11 of the street checks of Indigenous people were a check of their well-being or safety.

Statistical Disproportionality (pages 15-17)

- There is ethnic/racial statistical disproportionality in data across the entire spectrum of the criminal justice system. For example, in 2020, there is ethnic/racial statistical disproportionality amongst victims of violent crime and the suspects of those violent crimes.
- Furthermore, also in 2020, when Crown Counsel approved charges against accused for any type of criminal offense, the results also ethnic/racial statistical disproportionality.
- Why are some ethnic/racial groups over-represented in criminal justice data? Statistical disproportionality amongst ethnicities/races in the data is symptomatic of broader, historical, socio-economic root causes that Canadian society has to address, in order for the disproportionality to be reduced or eliminated.

Suspect Histories of People in the Street Check Records (pages 17-18)

- Eighty-four percent of the people in the 261 records were a suspect in an average of 17.2 different criminal investigations prior to the record.
- Eighty-seven percent of the people in the 75 proactive street checks were a suspect in an average of 19.5 different criminal investigations prior to the street check.

Efficacy of Street Checks (pages 18-22)

- Street checks are a preventative practice with value to future investigations. Lawfully conducted street checks are a fundamental tool to proactive policing.
- Street checks are conducted because of a concern about a person's safety or because of a suspicious behavior that the officer observes, and often it is a matter of a few moments from the time of a suspicious behaviour then becomes an illegal act.

- In 2020, VPD officers came across 3,999 crimes before they were reported ('on-view'), which is an average of 11 on-view crimes per day, or one on-view crime every 2 hours and 12 minutes.
- Missing Person Unit investigators regularly review street checks as a first step to possibly locating a missing person. Street checks have also proven to be useful in other investigations, including developing networks between gang associates for organized crime files, and determining the locations of those armed and dangerous.
- The following table shows the trend in the Total Crime Severity Index (CSI) in the three years prior to Ontario's street check regulation (year-end 2013 to year-end 2016) and compares it to the three years since the regulation came into effect (year-end 2016 to year-end 2019). Note how all but one of the largest Ontario municipalities worsened in the last three years and the degree of worsening was not insignificant:

Total CSI

Largest Ontario Police Services vs. Canada & Vancouver

Geography	Index	2013-2016 % Change	2016-2019 % Change
Canada	CSI	4.5%	10.3%
Ontario	CSI	1.4%	13.9%
Ottawa	CSI	4.9%	12.0%
Peel Region	CSI	2.3%	1.0%
Halton Region	CSI	-2.3%	11.9%
Hamilton	CSI	-1.5%	9.4%
Durham Region	CSI	0.4%	11.1%
Waterloo Region	CSI	5.6%	20.8%
Toronto	CSI	1.1%	14.8%
York Region	CSI	6.0%	29.4%
London	CSI	-0.5%	7.4%
Niagara	CSI	-13.5%	30.5%
Vancouver	CSI	9.6%	-3.3%

Banning Street Checks (pages 22-25)

- Concerns over street check practices are based on the assertion that police are conducting them randomly, arbitrarily, or based on a bias that results in discriminatory actions. A street check conducted based on this motivation is unlawful.
- The VPD's policy on conducting street checks prohibits such unlawful street checks.
- Section 11 of the policy requires the officer to observe an action or behaviour that is reasonably seen as suspicious, or raises a concern for a person's well-being or safety.
- The Standard and the VPD policy are designed to ensure police are not stopping individuals because they are homeless, marginalized, based on their ethnicity, or that they 'don't belong in this neighbourhood', or many other factors.
- Done properly, street checks are lawful and police have the legal authority to conduct them because they fall squarely within the scope of police duties recognized in common law generally and Canadian jurisprudence, specifically; to preserve the peace, prevent crime, and protect life and property.

- Justice Michael Tulloch, Ontario Court of Appeal Judge, led a review of Ontario's regulation (*Independent Street Checks Review*) stated, "the police are generally free to ask questions of anyone on the street, regardless of whether an offence has been committed. However, the person being questioned does not have to answer and can proceed on their way". These types of stops and subsequent inquiries must not be arbitrary; they must be rooted in an officer's observations of what they reasonably believe is suspicious activity by that person, or used to gather pertinent intelligence about suspicious activity. As Justice Tulloch summarizes, "when a police officer, without bias or discrimination, asks an individual to provide information, and the person voluntarily provides information, then there is no question that the information was properly obtained."
- The concept of banning lawful street checks encroaches on the police's ability to engage in other types of voluntary interactions, such as police approaching the subject of a complaint that stems from a call for service.
- Consider that in the other provinces that have developed regulations or guidelines, none of them has banned the practice.

Implications of Banning Lawful Street Checks

- Police Obligation: Police officers would be hampered in fulfilling their oath of public office to find that interactions with citizens are banned. Street checks falls within police duties recognized in common law generally and Canadian jurisprudence specifically; to preserve the peace, prevent crime, and protect life and property.
- Limitations to Proactive Policing: Police officers regularly utilize a number of strategies to reduce crime by using prevention strategies. This proactive policing work may be impacted if voluntary interactions with citizens are prohibited. In other words, police officers may observe something suspicious, however they may stay in the police vehicle, drive by, and not investigate suspicious activity (e.g., de-policing).
- Citizen Calls for Service/Reputational Risk: Citizens expect the police to question suspicious or potentially criminal behaviour. In 2019, the VPD received over 19,000 calls for service from citizens about suspicious behaviour they observed (this equates to approximately 50 calls a day). If banned, police may not be able to respond to citizens who are calling the police because they observed suspicious activity. For example, the VPD received several 911 calls from fearful women who felt they were being followed by men. Other common calls from citizens include suspicious individuals looking through car windows, or parents at a park who observe a lone male talking to children.
- On-View Arrests: Incidents that begin as a street check, but upon further information, turn into arrests (e.g., police learn, upon voluntarily obtaining ID, that the individual has a warrant out for his/her arrest).
- Enquiring about a Person's Well-being or Safety: Police officers can approach someone to see if they need help or provide information to the person in order for them to get help; there is significant value to recording many of those interactions as it provides a record that the person was last seen at a date, time, and location, should they go missing or harm befalls them. Banning street checks for these reasons means the police officer cannot request the person's identifying information and no such record can be submitted.

Progress towards the Pyxis Recommendations (pages 25-26 and Appendix A)

- The VPD has met 21 of the 34 recommendations and is progressing towards the completion of the remaining 13; with an estimated completion time of the end of 2021 (details are in Appendix A on page 27).

POLICY:

Regulations and Procedures Manual (RPM) 1.6.53 *Conducting and Documenting Street Checks (and Police Stops)* – see Appendix B on page 34.

BACKGROUND:

In September of 2018, as part of its governance and oversight responsibilities, the VPB committed to auditing street checks and annually releasing street check data that is broken down by gender and ethnicity. On January 15, 2020, the Standard came into effect along with RPM 1.6.53 *Conducting and Documenting Street Checks (and Police Stops)* ('VPD policy'). The Standard requires police departments in BC to conduct an annual audit of street checks that addresses the following:

- (a) whether the scoring is appropriate to the circumstances of the interaction;
- (b) whether the reasons for the interaction and the request for identifying information have been articulated sufficiently;
- (c) whether the inclusion of identifying information in the record is justifiable;
- (d) provide direction to the officer if the interaction is not consistent with the RPM; and
- (e) ensure that any identifying information is removed if either the initial collection or ongoing retention of the record is not justifiable.

The data in this report will address these commitments. In addition, the VPB accepted all 34 recommendations from the Pyxis Consulting Group's independent review of street checks (Pyxis' review was released in February 2020) and this report will update the progress on those recommendations. Also, this report will also clarify the law surrounding the practice of street checks, comment on the efficacy of street checks, and comment on calls to ban the practice of street checks.

DISCUSSION:

The Law Surrounding Street Checks

In Canada, policies related to street check and police stops are found at the federal, provincial and municipal levels. In addition to BC, the provincial governments of Ontario, Saskatchewan, Nova Scotia, Quebec, and Alberta have provincial regulations, policies, directives, or guidelines that provide direction to police agencies.

Ontario

Ontario's regulation *Collection of Identifying Information in Certain Circumstances—Prohibition and Duties* came into effect on January 1, 2017. The regulation applies to situations where officers ask members of the public to identify themselves when the officers are looking into suspicious activities, gathering intelligence, or investigating general criminal activity in the community. The regulation does not apply to circumstances where the officer is authorized by law to obtain the identifying information. Similar to the BCPPS, police officers must have a reason to collect the identifying information, which cannot be based on race or arbitrary in nature. As well, officers must, before they collect the identifying information, inform the person why they are requesting the information and that the person is not required to provide the information. Ontario's regulation also adds in the requirement that officers provide the individual with a receipt that provides a record of the attempt to collect identifying information.

Saskatchewan

In June 2018, the Saskatchewan Police Commission (SPC) released their *Contact Interviews with the Public* policy. The SPC policy does not define police stops or street checks however, it does define contact interviews. For the purposes of the SPC policy, a contact interview is defined as “contact with the public initiated by a member of a police service with intention of gathering information not related to a specific known incident of offence” and “the information being sought must be more than general information common to the community.” The policy does not apply to a number of listed situations including where contact is initiated pursuant to a specific statutory authority or investigative detention. As with the BC Standard, the SPC policy requires that contact interviews may only be conducted in a manner that respects and protects the rights of the public under the *Canadian Charter of Rights and Freedoms*, the *Saskatchewan Human Rights Code*, the *Canadian Human Rights Act*, and similar federal and provincial human rights legislation. As well, contact interviews may not be conducted by members of a police service in a random or arbitrary basis, or based solely on listed identity factors.

Similar to the BCPPS, the SPC policy stipulates that contact interviews are appropriately conducted by police only where the subject’s behaviour or the circumstances of the contact cause the police concern as to the subject’s purpose or for the subject’s safety. The SPC policy also provides information on how to conduct a contact interview. The policy states, “members may approach a person and initiate a conversation; however, the decision whether to stop and engage in a conversations with the members must be made by the person freely and on a voluntary basis.”

Nova Scotia

In October 2019, the Nova Scotia Attorney General issued a “moratorium” on street checks of pedestrians and vehicle passengers because of two reports: the Wortley Report and a legal opinion provided by former judge Michael MacDonald. Under the moratorium, a street check is defined as “an interaction between police and a person for the purpose of collecting and recording identifying information for general intelligence purposes.” The moratorium does not allow for street checks of pedestrians or passengers in motor vehicles and makes it clear that no activity by the police can be conducted on the basis of discrimination, including race. As well, under the moratorium, police officers can talk to individuals as part of their duties; however, the individuals are not obligated to share their identifying information unless the demand or request is authorized by law. The directive still allows police to conduct motor vehicle stops to ensure compliance with license, registration and insurance; enforcement of Criminal Code statutes or sobriety checks; inquiries related to suspicious activity or specific offences; investigative detention or arrest; and warrant enforcement.

Quebec

In August 2020, the Quebec Ministry of Public Security released their *Guide to Police Practices—Police Stops*. The guide provides definitions of police interaction and police stop. A police interaction is “an exchange between a police officer and a person with aim in particular of dialoguing or informing within the framework of community or social activities.” A police stop is an “attempt by a police officer to identify him [a person] and collect other information.” The definition continues further, “a police stop is not a police interaction or form of detention” and “must be based on a set of observable facts or information which provides the police with a reason for intervening with the person within the framework of the police mission”. As with the BCPPS, the guide requires that any police intervention be carried out with respect for individual rights and freedoms of the person(s) concerned and cannot be based on listed identity factors. The guide

also has similar requirements as the BC Standards in regards to member actions during a police stop. These actions include informing the person of the reason for the stop, that they are not obliged to answer any questions nor identify themselves and that they are free to leave.

Alberta

In November 2020, the Justice and Solicitor General published *Provincial Guidelines for the Collection of Personal Information from a Member of the Public*. While not defining police stops or street checks, the guidelines define the collection of personal information as “a collection, recording and retention of personal information voluntarily provided by a member of the public obtained as a result of a non-detention, non-arrest interaction with a police officer.” Similar to the BCPPS, the guidelines prohibit random and arbitrary police interactions with the public that lead to the collection, recording, and retention of personal information that do not have a clear policing purpose. Such interactions are permitted for crime prevention activities, gathering information for the purpose of criminal intelligence related to individuals known or reasonably suspected to be engaged in illegal activities, inquiring into criminal offenses that have been or might be committed, or inquiring into suspicious activities for the purpose of detecting illegal activities.

Summary

When one reviews the various types of direction on street checks issued by the above listed provincial governments, several common themes emerge:

- Police cannot conduct a street check that is random, arbitrary, biased, or based solely on identity factors such as (but not limited to) race or ethnicity;
- Police can conduct street checks when they are making enquiries into reasonable and legitimate public safety purposes such as (but not limited to) suspicious activity, crime prevention or intelligence gathering;
- If police do conduct a street check for these aforementioned purposes, it must conform with existing laws, provincial standards/directives/guidelines, and departmental policies; and
- The street checks are voluntary and citizens are not required to participate.

In short, a street check is lawful when conducted under the above conditions, and any publicly released statements proclaiming street checks as illegal are incorrect.

Audit Results

Street checks are defined as any voluntary interaction between a police officer and a person that is more than a casual conversation and which impedes the person’s movement. The audit will report on all street check records that were submitted between January 15, 2020, and December 31, 2020. The January 15th date is important because that is the date that the Standard and the VPD policy came into effect. The Standard and the VPD policy resulted in a paradigm shift in street check practices.

Street Check Frequency

From January 15 to December 31, 2020, there were 261 street check records submitted. The number of street check records decreased by 94.3% when compared to the 4,544 street check

records during the same date range in 2019. This is likely due to a combination of the public dialogue on street checks and the constraints placed upon the practice by the Standard.

The following table shows how the 261 street check records were distributed across the VPD's four Patrol Districts:

District	Count	Percentage
1	62	23.8%
2	66	25.3%
3	84	32.2%
4	48	18.4%
Burnaby	1	0.4%
Grand Total	261	100.0%

Types of Interactions with People Entered as a Street Check

During the course of conducting the audit, it became apparent that, typical of any sweeping change to a practice, there were misclassifications of interactions that resulted in the interactions being entered as a street check record (versus other types of police reports). When one examines the issue surrounding street checks in Canada, a consistent criticism of street checks is that they are conducted when the officer is not investigating a specific incident or crime, a person is not committing an offense, and that the person is not doing anything wrong. Police have stated that street checks occur when officers observe people behaving in a manner that reasonably raises a public safety concern (i.e., that the suspicious behaviour is a precursor to an illegal activity or there is a concern over the well-being of the person).

The common elements in both of these divergent views is that the officer is acting proactively in stopping the person (as opposed to investigating a specific crime or responding to a call for service) AND the person was not engaged in an illegal activity at the moment of the stop. (If the person was engaging in an illegal activity, then the stop would not be a street check as it would be a 'lawful authority' stop, where the officer has the authority to stop the person and demand the person identify themselves).

With the above explanation in mind, 75 of the 261 (29%) street check records were 'proactive street checks', which means that the remaining 186 records (or 71%) were 'interactions misclassified as a street check' (IMSC). In the interest of enhancing transparency around the discussion of street checks, this portion of the report will expand upon and explain the various types of IMSCs and proactive street checks.

Interactions Misclassified as a Street Check (IMSC)

As previously mentioned, 186 of the 261 street check records were IMSCs and they occurred in the Patrol Districts as follows:

District	Count	Percentage
1	46	24.7%
2	48	25.8%
3	53	28.5%

4	39	21.0%
Total	186	100.0%

The IMSCs were categorized as:

- Violation ticket investigations (i.e., municipal, provincial, federal ticket violations)
- Responding to a call for service
- Conducting a traffic stop
- General Occurrence reports (instances where an officer observed the behaviour of a known chronic offender but does not actually stop them – the record is useful for criminal intelligence purposes about the date, time, and location of the known offender's whereabouts)
- On-view criminal incidents (interactions where an officer observes actions that are criminal and the officer's powers extend beyond those associated with a proactive street check)

The following shows how the 186 IMSCs were broken down by the above categories:

IMSC Categories	Count	Percentage
Violation ticket investigation	56	30.1%
Call for service	43	23.1%
Traffic stop	36	19.4%
General Occurrence report	35	18.8%
On-view criminal incident	16	8.6%
Total	186	100.0%

The VPD has initiated the process of correcting these 186 misclassified records. Follow-up training material will be developed and disseminated to minimize the future misclassification of such interactions as street checks.

Proactive Street Checks

As previously mentioned, 75 of the 261 street check records were proactive, and it is these types of street checks that are associated with the concern about street checks. The following table shows the breakdown of proactive street check records by Patrol District:

District	Count	Percentage
1	16	21.3%
2	18	24.0%
3	31	41.3%
4	9	12.0%
Burnaby	1	1.3%
Total	75	100.0%

In order for an officer to conduct a proactive street check, they must have a 'public safety purpose' for doing so. Essentially, the concept of a public safety purpose means that the officer, based on the totality of the circumstances present, has a reasonable concern that there is the potential for an illegal activity or has a concern about the safety of a person.

The audit categorized these public safety purposes as follows:

- Checking the well-being a person
- Prevention of property crime
- Prevention of violent crime
- Suspicious behaviour indicative of criminal activity
- Missing persons
- Activity of known chronic offenders or around known problem premises

A well-being street check can include the documentation of an interaction with a young person who is known to be at risk or an interaction with a homeless person during a cold weather advisory. The purpose of these interactions is to assist the person in need and the documentation is to aid in investigations should any harm befall these vulnerable persons. Additionally, when police encounter a person who has been reported missing repeatedly, a street check can allow for timely investigations, reducing the danger to the person.

Prevention of criminal behaviour street checks occur when there is precursor activity to crime but the actions are not criminal in and of themselves. For example, officers may engage in a street check if they observe a person peering with flashlights into closed stores at night. While this action may not be illegal, in and of itself, but it can be a precursor to criminal behaviour and there is an expectation from the public that police would investigate this behaviour when observed. In fact, it is likely that such activity would result in a call for service if observed by a member of the public. In the case of the aforementioned example, documenting this interaction provides investigative value if a break and enter is reported to that business or in the area.

Similarly, there are also incidents where there is suspicious behaviour indicative of some potential criminal activity in general (whether it be violent crime, property crime, drug offences, etc.). For example, an officer engaged in a street check of individuals who engaged in evasive behaviour upon seeing police. After seeing police behind him in traffic, the driver of the vehicle stopped and all the occupants ran and hid behind a staircase around the back of a house. This is another situation where the public expectation is that the officer would attempt to investigate why these people engaged in the suspicious activity of fleeing and hiding upon seeing police.

Officers may also document the whereabouts and those in the company of prolific known offenders and gang members, as well activity around problem premises. Due to the public safety concerns surrounding prolific offenders and gang members, officers may wish to speak with these individuals to aid with ongoing investigations into their criminal activity. With these street checks, officers are aware of the individual's gang history or offending history prior to engaging in a street check. The same holds true for street checks related to problem premises. A problem premise is a location that is known for significant levels of criminal activity, such as drug trafficking, and as such, poses a risk to public safety.

The table below shows the breakdown of the articulated public safety reasons for proactive street checks.

Public Safety Purposes	Count	Percentage
Known offenders or problem premises	23	30.7%
Property crime	19	25.3%
Well-being checks	17	22.7%
Suspicious behaviour	8	10.7%

Missing person	1	1.3%
No public safety purpose provided	7	9.3%
Total	75	100.0%

Note: there are 68 of 75 proactive street checks listed above. The remaining seven are explained in the next section of the report.

Audit Requirements

When it comes to conducting the audit, perhaps the most important part of the Standard's requirements is to assess if a proactive street check record contains an articulated public safety purpose. The need for the officer to have a public safety purpose is important because such a requirement prevents an officer from relying on a 'hunch' or instinct that may be subject to any implicit bias the officer may have.

Of the 75 proactive street checks, 68 (90.7%) articulated the public safety reason for the street check. The remaining seven street checks did not have an articulated public safety purpose. This is not to suggest that the officer did not have a public safety purpose at the time, rather they did not provide it in the record. The VPD has begun process of contacting the individual officers who submitted these seven street checks to determine if a public safety purpose can be articulated, and if one can't be the, as per the Standard's requirement, the person's identifying information will be removed from the record.

As for the other 68 proactive street check records that did have an articulated public safety purpose, the continued storage of the information in those records is necessary and justifiable. It is important to note that the VPD now only stores street check records for two years and they are purged permanently (unless the street check is a necessary record as part of an investigation and therefore potentially subject to disclosure).

Demographics of People in Street Check Records

There are 353 'person entries' of people associated to the 261 street check records entered from January 15, 2020 to December 31, 2020. There are more person entries than street check records, as more than one person can be associated to a record. As previously explained, 75 of the 261 records were proactive street checks, while 186 were IMSCs; however, in the further interest of public transparency, this section of the report will include the demographics of the 353 person entries associated with all 261 records.

Barring the person disclosing their ethnicity or race during the stop or street check, the recording of a person's ethnicity or race is based on a subjective, visual assessment by the officer. Such assessments can obviously be incorrect, and if the officer is not certain then they typically do not enter anything about ethnicity or race.

Within the 261 records, there will be entries of people who had no contact with police and were not present at the time, such as the registered owners of vehicles or people who were wanted on a warrant and police could not locate them. These person entries also include all people related to the street check record, including the people who were actually checked, along with complainants who made a call for service (as another example). The gender and ethnicity breakdowns of all 353 person entries in the 261 street check records is shown in the table on the following page (note – the parentheses beside each ethnicity or racial group listed below represents that group's portion of Vancouver's population based on the 2016 Census):

All Street Check Records	Total		Female		Male	
	Count	% of Total Entries	Count	% of Total Entries	Count	% of Total Entries
Ethnicity/Race (% of Van's Pop)						
Asian (38.9%)	31	8.8%	8	2.3%	23	6.5%
Black (1.0%)	21	5.9%	3	0.8%	18	5.1%
Caucasian (46.1%)	204	57.8%	37	10.5%	167	47.3%
Hispanic (1.8%)	3	0.8%	1	0.3%	2	0.6%
Indigenous (2.2%)	53	15.0%	14	4.0%	39	11.0%
Middle Eastern (1.9%)	6	1.7%	1	0.3%	5	1.4%
South Asian (6.0%)	24	6.8%	2	0.6%	22	6.2%
Unknown	11	3.1%	6	1.7%	5	1.4%
Total	353	100.0%	72	20.5%	281	79.5%

Focusing on the proactive street checks, the following table shows the ethnic breakdown of the 87 entries of people from the 75 proactive street check records. This table represents the ethnic breakdown of the types of street checks that occurred where the officer was not responding to a call or investigating an incident, and the person checked was not committing an illegal act at the time of the check:

Proactive Street Checks	Total		Female		Male	
	Count	Percentage	Count	Percentage	Count	Percentage
Ethnicity/Race (% of Van's Pop)						
Asian (38.9%)	7	8.0%	3	3.4%	4	4.6%
Black (1.0%)	2	2.3%	0	0.0%	2	2.3%
Caucasian (46.1%)	49	56.3%	8	9.2%	41	47.1%
Hispanic (1.8%)	1	1.1%	0	0.0%	1	1.1%
Indigenous (2.2%)	20	23.0%	8	9.2%	12	13.8%
Middle Eastern (1.9%)	1	1.1%	0	0.0%	1	1.1%
South Asian (6.0%)	7	8.0%	0	0.0%	7	8.0%
Total	87	100.0%	19	21.8%	68	78.2%

Note that for Black people there only two such street checks; however, 20 of the street checks were of Indigenous people. Now it is useful to see what the public safety reasons were for these proactive street checks (see below table):

	Check Wellbeing		Known Offender/ Problem Premise		Property Crime		Missing Person		Suspicious Behaviour *		Not Articulated		Total Ethnic Types
	Count	Percentage	Count	Percentage	Count	Percentage	Count	Percentage	Count	Percentage	Count	Percentage	
Asian	1	14.3%	5	71.4%	1	14.3%	0	0.0%	0	0.0%	0	0.0%	7 (8.0%)
Black	0	0.0%	1	50.0%	1	50.0%	0	0.0%	0	0.0%	0	0.0%	2 (2.3%)
Caucasian	11	22.4%	15	30.6%	12	24.5%	0	0.0%	6	12.2%	5	10.2%	49 (56.3%)
Hispanic	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	100.0%	0	0.0%	1 (1.1%)

Indigenous	11	55.0%	2	10.0%	5	25.0%	1	5.0%	0	0.0%	1	5.0%	20 (23.0%)
Middle Eastern	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	100.0%	1 (1.1%)
South Asian	0	0.0%	5	71.4%	1	14.3%	0	0.0%	0	0.0%	1	14.3%	7 (8.0%)
Total Public Safety Purposes	23	26.4%	28	32.2%	20	23.0%	1	1.1%	7	8.0%	8	9.2%	87 (100%)

The most notable statistical disproportionality in the above table is that Indigenous people made up 23% (20 of 87) of all proactive street checks; however, 55% (11 of 20) were the officer checking the person's well-being or safety. In fact, there were a total of 23 proactive street checks that were about the person's well-being and 11 of them were of Indigenous people. Below are some examples of these well-being checks (occurring in 2020):

- On April 9th, officers observed a vehicle that was registered to a violent sex offender against sex trade workers. The officers observed two occupants, one of whom was a female. Police determined to stop the vehicle to ensure all occupants' safety and a traffic stop was conducted. The Indigenous female passenger requested to leave partly through the process of the traffic stop, which was allowed. The driver, who was the violent sex offender, claimed he had just arrived in Vancouver from a community in the Fraser Valley and was leaving immediately. The driver was released and he left. Police then spoke with the passenger who stated she had not been harmed by the driver, but also stated he was "really weird." Street check created for intelligence purposes and to document the driver's return to Vancouver.
- On July 17th, officers observed a male laying on the ground on the east side of Granville St. The male appeared unconscious and slumped over and he was checked for this reason. He was surrounded by two bikes and other belongings. As the officers approached him, a drug pipe was observed in his right hand. After several announcements, the male woke up. He admitted to have smoked fentanyl. He claimed the bikes were his and unknown friends, and he stated that he intended on taking a bus out of the area.
- On July 18th, the VPD's Youth Car (Yankee 10) observed five known high-risk female youths, in the company of two male youths, as they exited the Skytrain Station at Commercial and Broadway. One of the females asked for a gift card for some food and the officer provided her and another of the females a \$10 Tim Horton's gift card. One of those two females asked the officer if they were going to visit her later at her group home. All the females are high risk, but appeared sober and well. One of the females has a 9:00 pm curfew, which she was not currently breaching.
- On October 2nd, a patrol supervisor observed a male stumbling on the sidewalk in the 1300 block of Franklin Street. The supervisor approached him to check on his welfare and the male stated he was looking for discarded cigarettes. The male was a youth who is a chronically reported as missing from a group home in Surrey; however, on this date he was NOT reported as missing. The male youth was sober, appeared in good health, and was cooperative. He provided the cell number for the group home and he spoke with staff over Bluetooth on the supervisor's phone. The male youth stated he ate at the shelter, was in good health, did not want to come home and requested he be picked up at his father's house at 3:00 pm that day. Staff stated they were satisfied with the conversation and that no further action of police was requested or required. The male youth proceeded

on his way and the street check was created to document his whereabouts due to the frequency of the missing person reports of the youth.

Below is the one street check of an Indigenous person for the concern of a missing person:

- On June 25th, an officer was on an unrelated call and observed a male standing in front of the shelter eating food. The officer asked how he was and if he was still at the group home on E Pender Street. The male said he was doing well and still living there. No other interaction and the male departed shortly thereafter. A street check was submitted as the male is a chronic missing and police are frequently called to check on him, most recently on June 20th, June 21st, and June 23rd.

To summarize this section of the report:

- There were only 75 proactive street checks of 87 people;
- Only two of the street checks were of Black people, while 20 were of Indigenous people; and
- Eleven of the 20 street checks of Indigenous people stemmed from a concern of the person's well-being or safety.

Statistical Disproportionality

The complainants of the 2018 Service or Policy Complaint pointed to the statistical disproportionality as evidence of a discriminatory policing practice. An important question is, “are these population groups overrepresented in the data because police enacted discriminatory practices based on prejudice or are there other mechanisms that could explain the observed data?” One could also ask, “why some ethnic or racial groups are over-represented in criminal justice data?”

For example, an alarming and disturbing statistic is that across Canada, Indigenous Peoples are consistently overrepresented in homeless counts, they are 10 times more likely to use a homeless shelter, and are even more likely to be living on the street, unsheltered, or “absolutely homeless.” Sadly, within Metro Vancouver in 2017, Indigenous Peoples accounted for 34% of the entire homeless population and almost 37.5% of the unsheltered homeless. It would be unrealistic to expect that police contacts at an aggregate level would remain unaffected by all these troubling societal issues and risk factors

For another example, consider when crime is reported to police, which is the beginning of involvement in the criminal justice system. In 2020, there were 5,761 violent crimes reported to the VPD. Violent crimes almost always have a victim or witness who could describe the perpetrator, as opposed to a property crime where in most cases there is no perpetrator seen. The following table shows the ethnic breakdown of suspects and victims of violent crimes in 2020:

2020 Violent Crimes		
Ethnicity	Suspects	Victims
Asian (38.9%)	8%	12%
Black (1.0%)	6%	3%
Caucasian (46.1%)	47%	47%
Hispanic (1.8%)	4%	3%

Indigenous (2.2%)	22%	12%
Middle Eastern (1.9%)	4%	5%
Other	0%	1%
South Asian (6.0%)	6%	11%
Unknown	2%	6%

Later in the criminal justice process, after the police have investigated, charges are brought to Crown Counsel. In BC, police can only recommend a charge and it is only Crown Counsel who can lay a charge (under what is arguably the highest charge approval threshold for any province or territory in Canada). On the following page are those results broken down by ethnicity for all criminal offenses in 2020 that Crown Counsel approved a charge:

2020 All Criminal Offenses with Approved Charge		
Ethnicity	Persons Charged	Percent
Asian (38.9%)	275	6%
Black (1.0%)	284	6%
Caucasian (46.1%)	2,714	57%
Hispanic (1.8%)	131	3%
Indigenous (2.2%)	969	20%
Middle Eastern (1.9%)	163	3%
Other	11	0%
South Asian (6.0%)	202	4%
Unknown	42	1%
Total	4,791	

Towards the end of the criminal justice process comes sentencing. According to Statistics Canada's publication *Adult and youth correctional statistics in Canada, 2018/2019*, released on December 21, 2020 (page 5):

"In 2018/2019, Indigenous adults accounted for 31% of admissions to provincial/territorial custody and 29% of admissions to federal custody, while representing approximately 4.5% of the Canadian adult population. These proportions were virtually unchanged from the previous year."

Of course, it is judges who sentence convicted persons to incarceration, and there is ethnic statistical disproportionality in sentences involving incarceration (at least for Indigenous convicted persons) despite that fact that, as the publication writes, "the Gladue sentencing principle seeks to recognize and address the overrepresentation of Indigenous persons in custody. Section 718.2 of the Criminal Code, as well as the Supreme Court of Canada in *R v. Gladue* (1999), instructs judges that sentences should consider all available sanctions other than imprisonment with particular attention to and recognition of the adverse background of Indigenous offenders in historical context" (also on page 5 of the above publication).

It is reasonable to offer the perspective that the disproportionality in the data is symptomatic of much broader, historical, socio-economic factors that contribute to, if not cause, ethnic or racial

statistical disproportionality in data across the entire criminal justice system. It is an issue that Canadian society has to address in order for the disproportionality to be reduced or eliminated.

Suspect Histories of People in the Street Check Records

As previously mentioned, the complainants of previous Service or Policy Complaints about street checks suggested that the ethnic or racial disproportionality was indicative of discriminatory policing practice. The VPD understands this perspective and hears the concerns about any possibly biased policing. Nonetheless, the VPD has stated that street checks are a result of the suspicious behaviours of people that they observe. Is there any data that would support the VPD's statement?

In the VPD's Service or Policy Complaint report of September 2018, it was shown how, over a 10-year period, the locations of street checks was highly correlated with the locations of where violent crime was reported, and with the locations of where calls from service come from. Street checks were not occurring randomly or arbitrarily across Vancouver, rather they were occurring in the parts of the city that are the most violent and busiest in terms of calls to the police.

With regard to the suspicious behavior of people who were street checked, 84% percent of the people in those 261 records were a suspect in an average of 17.2 different criminal investigations before the record (see the following table):

Suspect Histories: All 261 Street Check Records

Ethnicity	Average
Asian	12.0
Black	20.0
Caucasian	17.0
Hispanic	3.0
Indigenous	24.3
Middle Eastern	20.0
South Asian	13.3
Unknown	8.2
Average of all People	17.2

The VPD further examined the suspect history of the people who were part of 75 proactive street checks and 87% percent of the people were a suspect in an average of 19.5 different criminal investigations prior to the check.

Suspect Histories: 75 Proactive Street Checks

Ethnicity	Average
Asian	10.0
Black	5.5
Caucasian	25.0
Hispanic	7.0
Indigenous	14.6
Middle Eastern	5.0

South Asian	12.0
Average of all People	19.5

To summarize, the purpose of this portion of the report is to provide data to support the VPD's position that street checks are mostly conducted when people are behaving suspiciously (with the other reason being a check on the person's well-being or safety). The suspect history of the people checked suggests that they are well known to police and are not misidentified by police based on a biased or discriminatory factor.

Efficacy of Street Checks

The Prevention Component of Street Checks

Some have questioned the value of street checks and this section will comment on the efficacy of the practice. The difficulty in assessing the efficacy is that, in its essence, street checks are a preventative practice, and how does one measure the effectiveness of prevention? Using a previous example, it is not illegal to shine a flashlight into the window of a closed business and at a time when there few other people on the street; however, it is reasonable that such an action would be considered suspicious. Society expects police to look into these types of behaviours, and in fact, it is a legal duty for an officer to prevent crime and do so in lawful manner.

One should consider how a street check could occur. An officer is patrolling and sees something that is suspicious to them (such as the example described above) and they conduct a street check. That action may prevent a crime at that moment and at that location, or it could delay or displace the crime, or a crime was never going to occur. Now imagine the officer coming across the situation just a few moments later, where the behavior is no longer suspicious and actually is a crime in progress that the officer sees before it is reported. That is how close the line between a suspicious behaviour that warrants a street check is to that of a crime that results in arrest, search, and Charter warnings.

The above may seem far-fetched but consider that in 2020 VPD officers came across 3,999 crimes before they were reported (the term the VPD uses to describe this is 'on-view'). That is an average of 11 on-view crimes per day, or one on-view crime every 2 hours and 12 minutes. The most frequent on-view crime was a weapons offense – 534 in 2020 – or 1.5 per day. There were 744 types of theft (combination of theft from a motor vehicle, other theft, and shoplifting) which occurred twice per day, and there were 182 common assaults and 155 assaults with a weapon or that caused bodily harm. How many of those would have been prevented if the officer arrived moments before they did and could only conduct a street check?

The Investigative Component of Street Checks

Missing Person Unit investigators regularly review street checks as a first step to possibly locating a missing person. Street checks have also proven to be useful in other investigations, including developing networks between gang associates for organized crime files, and determining the locations of those armed and dangerous.

For example, from September 19 to October 9, 2018, a series of six armed robberies of convenience stores occurred in various areas of Vancouver. These robberies were committed by a lone suspect who used intimidation and violence during these robberies. With a firearm in hand,

the suspect threatened to shoot these innocent victims if they did not cooperate. In one particular instance, the suspect went even further and struck the victim in the face multiple times with the firearm, resulting in the victim being transported and treated in hospital. These robberies terrorized businesses within Vancouver, and the VPD's Major Crime Section made it a priority to identify and stop this violent offender.

Investigators worked to secure evidence, conduct multiple interviews, and locate video. Through the investigation, an image of the suspect was captured prior to one of the robberies. This image was distributed to local police agencies and two police officers from a neighboring jurisdiction identified the suspect.

A VPD detective learned that a check of the suspect had been conducted around the time of the robberies. In that street check, he was in the company of his girlfriend in the west lane of the 2200 block of Main Street. Based on the location of the robberies, and armed with the location and other info gathered from the street check, the Detective visited the City Centre Motel – located one block away from the street check. It was learned the suspect had checked into the City Centre Motel under an alias, and had been staying there up until the final robbery. The detective retrieved the CCTV from the Motel, which provided additional evidence for four of the six robberies.

During the robberies, the suspect used gloves, hoodies, balaclavas, and masks to conceal his identity. The street check led to information on the suspect's location and allowed the detective to secure footage related to robberies #2-#5. During these robberies, the suspect was observed on the CCTV leaving and returning to the City Centre Motel, wearing the robbery clothing.

The information from the street check led the detective to the Motel in a timely manner and the ability to locate this crucial CCTV, which would not have been possible without the linked street check. It was this information that allowed for the additional charges. Given this evidence, the detective was confident in the suspect identification. As a result, the detective secured resources to monitor the suspect's activities. Later, the suspect and an accomplice were observed committing two residential Break and Enters in Maple Ridge and Vancouver. The suspect was subsequently arrested for these offences. In relation to the armed robbery series, the suspect was arrested and charged with the following offences (this file is currently before the courts):

- Robbery with a Firearm x6
- Pointing a Firearm x6
- Disguise with Intent x6
- Uttering Threats x4
- Numerous Breach of Conditions

There are other examples of how street checks have solved crimes because of the value in police being able to place a person at a given point in time and location, and given the suspicious behaviour the person exhibits. To support this fact, please recall the information and data provided earlier:

- That the location of street checks is highly correlated to where the most calls for service come from and where the most violent crimes are reported; and
- The typical person who was proactively street checked in 2020 was a suspect in an average of 19.5 different criminal investigations across greater Vancouver prior to the street check.

Ontario's Crime Trends

How many more crimes will there be because of the decrease in street checks or, as some have called for, a ban on street checks? That is an answer to a question that will challenge Canada's best criminologists; however, it may be useful to examine what has happened in Ontario when their regulation, which places great restrictions on street checks, took effect at the beginning of 2017.

The table on the following page shows the trend in the Total Crime Severity Index (CSI) in the three years prior to Ontario's regulation (year-end 2013 to year-end 2016) and compares it to the three years since the regulation came into effect (year-end 2016 to year-end 2019). It shows the trends for Canada, Ontario, the 10 largest municipalities in Ontario, and Vancouver. Note how all but one of the Ontario municipalities worsened in the last three years and the degree of worsening was not insignificant:

Total CSI

Largest Ontario Police Services vs. Canada & Vancouver

Geography	Index	2013-2016 % Change	2016-2019 % Change
Canada	CSI	4.5%	10.3%
Ontario	CSI	1.4%	13.9%
Ottawa	CSI	4.9%	12.0%
Peel Region	CSI	2.3%	1.0%
Halton Region	CSI	-2.3%	11.9%
Hamilton	CSI	-1.5%	9.4%
Durham Region	CSI	0.4%	11.1%
Waterloo Region	CSI	5.6%	20.8%
Toronto	CSI	1.1%	14.8%
York Region	CSI	6.0%	29.4%
London	CSI	-0.5%	7.4%
Niagara	CSI	-13.5%	30.5%
Vancouver	CSI	9.6%	-3.3%

The following table presents the same type of data for the Violent CSI:

Violent CSI

Largest Ontario Police Services vs. Canada & Vancouver

Geography	Index	2013-2016 % Change	2016-2019 % Change
Canada	VCSI	3.9%	16.6%
Ontario	VCSI	4.3%	15.9%
Ottawa	VCSI	13.1%	8.7%
Peel Region	VCSI	0.7%	23.3%

Halton Region	VCSI	14.4%	19.7%
Hamilton	VCSI	12.1%	8.6%
Durham Region	VCSI	-3.4%	8.0%
Waterloo Region	VCSI	3.2%	46.8%
Toronto	VCSI	4.9%	2.9%
York Region	VCSI	5.3%	42.1%
London	VCSI	2.4%	6.7%
Niagara	VCSI	-22.3%	49.5%
Vancouver	VCSI	-11.5%	-1.5%

Because there are fewer violent crimes as opposed to non-violent crimes, the variances can be more extreme, as seen in Peel Region, Durham Region, York Region, and Niagara Region. Only three of the large Ontario municipalities experienced an improvement. This final table shows the same type of data but for Non-violent CSI and, again, only one large Ontario municipality experienced an improvement:

Non-violent CSI

Largest Ontario Police Services vs. Canada & Vancouver

Geography	Index	2013-2016 % Change	2016-2019 % Change
Canada	NVCSI	4.8%	7.8%
Ontario	NVCSI	0.1%	12.9%
Ottawa	NVCSI	1.3%	13.7%
Peel Region	NVCSI	3.1%	-9.4%
Halton Region	NVCSI	-6.8%	9.5%
Hamilton	NVCSI	-7.2%	9.8%
Durham Region	NVCSI	2.5%	12.6%
Waterloo Region	NVCSI	6.5%	11.6%
Toronto	NVCSI	-1.7%	25.1%
York Region	NVCSI	6.2%	24.7%
London	NVCSI	-1.4%	7.6%
Niagara	NVCSI	-11.0%	25.6%
Vancouver	NVCSI	17.7%	-3.8%

This is not to suggest that the controls placed on street check practices in Ontario are the cause of this stark reversal in crime trends in Ontario. Assessing what is the primary driver of crime changes is a deeply complex undertaking. Nonetheless, there are anecdotes of gang members, captured on lawfully obtained surveillance, advising other gang members to bring their guns because the police are not checking anymore. It is only reasonable to ask if the change in street check practices in Ontario did play some more than marginal role in Ontario's reversal of crime trend fortunes.

Ultimately, Canadian society determines the appropriate balance between being secure and enhancing public safety, and living in a free and democratic society that is not unduly hindered by the state. This point leads into the discussion on potentially banning street checks in Vancouver.

Banning Street Checks

There have been calls to ban the practice of street checks and some have questioned the need to permit their continued use given that there were only 75 proactive street checks in 2020. To do so raises questions that conflate two distinct but overlapping concepts: the motivation of an officer to conduct a street check versus the legal authorities that apply to a street check along with other types of voluntary interactions. Any call to ban street checks needs to fully understand these two concepts.

Motivation of an Officer to Conduct a Street Check

As previously discussed, concern over street check practices are based on the assertion that police are conducting them randomly, arbitrarily, or based on a bias that results in discriminatory actions. A street check conducted based on this motivation is unlawful. The Standard and the VPD policy was developed to prevent such unlawful motivations. The VPD's policy prohibits such unlawful motivations in the following ways:

- The Policy Statement states, "In the furtherance of their lawful duties, members are expected to interact with the public. Members must nonetheless ensure that those interactions are consistent with the *Canadian Charter of Rights and Freedoms* (sections 7, 9, 10 and 15) and the values that they reflect, including the right to be free from arbitrary arrest and detention; to move freely in society subject only to reasonable restrictions imposed by law; and to equal protection and benefit of the law, without discrimination."
- Section 1 states, "The decision to conduct a Street Check or a police stop shall not be based on Identity Factors". This means that an officer cannot stop people only because of an identity factor, such as ethnicity.
- Section 2 states. "The decision to conduct a Street Check or a police stop shall not be based solely on that person sharing an Identity Factor with a person being sought by the police". The practical effect of this is that police need other information to stop a person who they are looking for besides a lone Identity Factor. In other words, if police are looking for a person with a specific ethnicity, they need more descriptors about other identity factors and/or other features such as height, size, clothing, scars, hair, facial hair, etc., in order to avoid stopping all people who share the ethnicity.
- Section 3 states, "Arbitrary or random Street Checks or police stops, which may or may not include a request for or the collection or recording of a person's identifying information shall not be conducted".

The Standard and the VPD policy recognize that police may want to initiate a street check and possibly record personal identifying information. To do so lawfully the officer, before approaching the person, must be aware that their motivation is lawful (as explained in the points listed above) AND the officer must have a public safety purpose (as per section 11(a)):

- “Members may request that a person voluntarily provide identifying information provided that the member reasonably believes the interaction, and any information requested, serves a specific public safety purpose or objective”.

As previously discussed, section 11 of the policy may be the most important part of the Standard’s requirements, and of the policy, because it forces the officer to not rely on hunches/instinct that may be subject to any potential implicit bias the officer may have. Practically speaking, the officer needs to observe an action or behaviour that is reasonably seen to be suspicious or raises a concern for a person’s well-being or safety.

As such, what the Standard and the VPD policy are designed to accomplish is that people cannot be stopped because they are homeless, marginalized, based on their ethnicity, or that they ‘don’t belong in this neighbourhood’, or many other factors. Such motivations of an officer are banned by the Standard and the policy.

Legal Authorities of Street Checks and other types of Voluntary Interactions

Any consideration of banning street checks that are lawfully conducted should consider the following legal principles:

- Police have the legal authority to conduct street checks because they fall squarely within the scope of police duties recognized in common law generally and Canadian jurisprudence specifically; to preserve the peace, prevent crime, and protect life and property. Concurrent with police common law duties, their codification can be found throughout Canadian legislation at the federal, provincial, and municipal level - notably, the *BC Police Act*.
- Section 34(2) of the *BC Police Act* states that police must perform the duties and functions respecting the preservation of peace, the prevention of crime, and offences against the law. Therefore, police are lawfully authorized to stop and make inquiries of members of the public; however, if the citizen declines to answer, the officer must allow the person to proceed unless the officer detains the individual for a lawful investigative purpose, or arrests the person.
- As stated by Ontario Court of Appeal Justice Michael Tulloch, in the *Independent Street Checks Review* he led in Ontario, “the police are generally free to ask questions of anyone on the street, regardless of whether an offence has been committed. However, the person being questioned does not have to answer and can proceed on their way”. These types of stops and subsequent inquiries must not be arbitrary; they must be rooted in an officer’s observations of what they reasonably believe is suspicious activity by that person, or used to gather pertinent intelligence about suspicious activity. As his Honour concisely summarizes, “when a police officer, without bias or discrimination, asks an individual to provide information, and the person voluntarily provides information, then there is no question that the information was properly obtained.”

With the above in mind, the question must be asked of what is the goal of banning lawfully conducted street checks? The Standard and VPD policy has placed tremendous restraints on how they are to be conducted and the result has been a plummeting in street check numbers – as such, the reason cannot be because the practice is still overly used.

Is it because street check data still shows ethnic disproportionality? This report explains how such disproportionality is present in all aspects of the criminal justice system – ranging from what victims of violent crime report to police about their assailants, to who Crown Counsel approves charges on, to who judges sentence to incarceration. It is logical that such statistical disproportionality exists in police data as it does exist in these other streams in the justice system.

Furthermore, of the 87 people checked in the 75 proactive street checks, only two were Black, and 11 of the 20 checks of Indigenous people were for their safety. It is a fair argument to make that to whatever extent discrimination played a part in previous street check practices, the arrival of the Standard and VPD policy has had the practical effect of virtually eliminating street checks in Vancouver. One may ask that, if that is the case, then what is the harm in banning the practice completely – even the lawful ones? To answer this question one needs to consider the Standard.

The Standard categorizes police interactions with people into one of four types:

- 1) Where the police have the grounds to arrest;
- 2) Where the police have the grounds for an investigative detention (typically as part of a criminal investigation);
- 3) Where the police have the authority to stop a person and demand they identify themselves (municipal, provincial, or federal violation), or in some circumstances, demand they produce identification (i.e., while operating a motor vehicle); and
- 4) Voluntary interactions where an offence has not been committed, but the police have a legitimate responsibility to begin an interaction that the person is not required to participate in.

Street checks are a type of voluntary interaction. In a street check, the person was not found committing an offense, but the police observe a suspicious behaviour or have a concern about the person's safety. As explained earlier in this section, police wishing to conduct a street check can do so provided it is lawful and complies with policy.

However, there are many other types of day-to-day interactions that police do not initiate and where the circumstances dictate that the person's involvement is voluntary. For example, consider a call for service where the subject of the complaint has not committed an offense or the officer does not have the grounds to arrest, conduct an investigative detention, or conduct a lawful authority stop.

In September of 2020, there was a spate of calls for service in the Mount Pleasant neighbourhood of Vancouver, where women were approached by a male in a vehicle or followed on foot. Without referring to the details of any specific incident, it is likely that the male did not commit an offense at that moment – yet the behaviour is clearly suspicious to the women that reported it. A police officer can respond to the call and approach the male, and absent any grounds for arrest, detention, or lawful authority, the male's participation is voluntary. He would not have to stick around or answer any questions. The officer has no authority in that case – no different from a street check that the officer initiated – and the officer would rely on their training and experience to engage with the male.

Thus, when there is a call to ban lawful street checks a serious concern is that such a ban now legally touches on all types of voluntary interactions – including the response to the call for service described above. This is because the street check and the call for service share the same important element that no offense has been committed (yet), and if a ban were to occur, then the officer could not even approach the subject of the complaint.

To summarize:

- Street checks that are based on a bias, prejudice, or discrimination are unlawful street checks and they are prohibited by VPD policy;
- Lawfully conducted street checks are permitted, provided they comply with policy, and are used as part of an officer's legal duties to preserve the peace and prevent crime; and
- The concept of banning lawful street checks encroaches on the police's ability to engage in other types of voluntary interactions, such as police approaching the subject of a complaint that stems from a call for service.

Implications of Banning Lawful Street Checks

- Police Obligation: Police officers would be hampered in fulfilling their oath of public office to find that interactions with citizens are banned. Street checks falls within police duties recognized in common law generally and Canadian jurisprudence specifically; to preserve the peace, prevent crime, and protect life and property.
- Limitations to Proactive Policing: Police officers regularly utilize a number of strategies to reduce crime by using prevention strategies. This proactive policing work may be impacted if voluntary interactions with citizens are prohibited. In other words, police officers may observe something suspicious, however they may stay in the police vehicle, drive by, and not investigate suspicious activity (e.g., de-policing).
- Citizen Calls for Service/Reputational Risk: Citizens expect the police to question suspicious or potentially criminal behaviour. In 2019, the VPD received over 19,000 calls for service from citizens about suspicious behaviour they observed (this equates to approximately 50 calls a day). If banned, police may not be able to respond to citizens who are calling the police because they observed suspicious activity. For example, the VPD received several 911 calls from fearful women who felt they were being followed by men. Other common calls from citizens include suspicious individuals looking through car windows, or parents at a park who observe a lone male talking to children.
- On-View Arrests: Incidents that begin as a street check, but upon further information, turn into arrests (e.g., police learn, upon voluntarily obtaining ID, that the individual has a warrant out for his/her arrest).
- Enquiring about a Person's Well-being or Safety: Police officers can approach someone to see if they need help or provide information to the person in order for them to get help; there is significant value to recording many of those interactions as it provides a record that the person was last seen at a date, time, and location, should they go missing or harm befalls them. Banning street checks for these reasons means the police officer cannot request the person's identifying information and no such record can be submitted.

Finally consider that in the other provinces that have developed regulations or guidelines, none of them has banned the practice.

Progress towards the Pyxis Recommendations

Upon receiving a VPD report regarding street checks, in response to a Service or Policy Complaint filed by the Union of British Columbia Indian Chiefs and British Columbia Civil Liberties

Association, the VPB ordered an independent review ('Review') at its meeting of September 26, 2018. The VPD welcomed the Review and accepted its findings and 34 recommendations. This report outlines the Review's recommendations as well as the VPD's progress towards the recommendations.

The Review's 34 recommendations are classified into these three categories:

1. Policy and procedures;
2. Training and education for VPD officers; and,
3. Public education and community outreach.

The VPD has met 21 of the 34 recommendations and is working towards the remaining 13 (details are in Appendix B on page 27). Some of the recommendations require on-going commitments, such as enhancing public awareness, while others were hampered by the pandemic. The VPD has the goal of completing the remaining recommendations by the end of 2021.

CONCLUSION:

This report is provided to the VPB for information and is a requirement of the VPB and the Standard. The data within the report also complies with the VPB's commitment to annually releasing street check data. In addition to BC, there are five other provinces that regulate or provide guidance on street checks and all of them permit the practice provided they are conducted lawfully. The VPD's policy prohibits any street check, or any other type of police stop, if they are conducted for biased or discriminatory reasons.

Calls to ban street checks would only ban lawful street checks and could have the unintended consequence of limiting officer's response to calls for service where an offense has not yet been committed.

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Submitting Executive Member:

DCC Howard Chow Date: February 8, 2021

APPENDIX A

#	External Report Recommendation	VPD Response/Action	Status
Policy and Procedures			
1	<p>If not already underway, develop a clear street check policy on the practice, use, storage, access, and retention of street check information that takes into consideration the issues and recommendations raised in this report as well as the findings and recommendations made by the Honourable Justice Tulloch in Ontario (2018) and by Scot Wortley (2019) in his report on street checks in Halifax.</p>	<p>Policy on street checks has been developed and approved and it is compliant with BCPPS Police Stops.</p> <p>The VPD policy covers the practice, use, and storage of street checks. Street checks are retained for two years unless they are part of an investigation and would be subject to disclosure.</p> <p>In essence, this recommendation has been met as a result of the policy.</p>	Met through policy
2	<p>Ensure VPD street check policy and procedures articulate:</p> <ul style="list-style-type: none"> • When officers should and should not conduct street checks and outlines the situations in which they should be conducted. • Police officers should never arbitrarily or randomly stop, question, and search or request identifying information from a civilian. • The need for articulation of stops or street checks. • Who can access street check information, including processes for how citizens can access their own street check records. 	<p>The approved policy addresses the first three bullets of this recommendation.</p> <p>Regarding the fourth bullet, citizens may FOI that information.</p> <p>Essentially, this recommendation has been met as a result of the policy.</p>	Met through policy
3	<p>Ensure the primary focus of a street check policy is on the development of strategies and practices that enhance transparency, accountability, and trust in police.</p>	<p>This recommendation has been met by the VPD policy being compliant with the standard.</p>	Met through policy
4	<p>Conduct regular assessments of the integrity of street check data.</p>	<p>This is an integral part of the audit process.</p>	Met

5	Designate the PR&A to incorporate the suggestions laid out in this report to inform the proposed audit process and methodology.	Completed.	Met
6	Request PR&A to draft a more comprehensive street check screen for consideration by PRIME Corp.	The audit showed that the PRIME screen check screen is not really relevant. The audit team read all street check records and the audit team was able to customize categories for the public safety reasons that officers need to have before a street check. The VPD has no issue with providing this to PRIME Corp, but the audit categories may not be beneficial to other police in BC.	In progress
7	Ensure the new screen captures essential information such as date, time, location, and reason for check. Also, redesign the “reason for check” field to assure validity while ensuring usefulness for tracking (Note: this recommendation is repeated by using different language).	This information is captured.	Met
8	Designate the PR&A and the policy writing team to redesign the “Reason for Check” field to assure validity and descriptive accuracy of each category while also ensuring categories are appropriate and useful for tracking and audit on an ongoing basis.	This was accomplished in the audit.	Met
9	Explore ways in which information contained in street checks can be tagged, coded, and routed to improve ‘searchability’ for officers and analysts.	The VPD agrees and will work towards improving searchability for officers and analysts; however, searches by name are available by officers and analysts.	Met
10	Ensure senior patrol members, supervisors, and managers receive the training and support needed to effectively guide and coach junior members’ development of sound proactive policing and street check skills.	This recommendation has been met as a result of in-person briefings to operational teams, supplemented by the policy being sent via Power DMS (the VPD’s accountability tool	Met

		that tracks member awareness), and an on-line course developed by the Training section.	
11	Ensure supervisors review street checks completed by their officers for quality and adherence to policy, and arrange for remedial training for officers who do not comply with standards set.	Rather than decentralizing this function to supervisory level, the VPD supports centralizing this goal through annual audit. This will ensure standardization, quality control, and consistency of street checks.	Met with comment
12	Involve supervisors and managers in the development and implementation of a review process that holds members accountable for meeting street check policy and processes.	See above	Met with comment
13	Clearly define and integrate supervisor, manager, and Quality Control Section responsibilities for monitoring and ensuring the quality of street checks.	See above	Met with comment
14	Continue to ensure that street checks are not used as a performance measure. Incorporate this concept into the street check policy.	The VPD has removed the metric of street checks from internal statistical reports. Furthermore, conducting street checks was never a factor in individual performance appraisals.	Met
15	<p>Ensure the Audit Unit of PR&A:</p> <ul style="list-style-type: none"> • Works with policy drafters to develop the proper metrics to be collected for an annual audit of compliance with that policy. • Conducts an annual audit of a representative random sample of cases one year after approval and dissemination of the new VPD Street Check policy. • Completes these audits in the second quarter of each calendar year and reports to the Vancouver Police Board in the Q2 Board Report. • Offers regular report-outs to the community. 	Completed as a result of the audit report.	Met

16	Develop a policy on well-being checks that considers community input, is communicated to the communities, and clearly distinguishes well-being checks from street checks.	The Standard, which was developed with significant community input, includes well-being checks as a type of street check. Audits of street checks will emphasize the identification of street checks that were well-being checks versus other reasons for street checks (e.g., suspicion behaviour, etc.).	Met through policy
Training and Education for VPD Officers			
17	Advocate for the Justice Institute of British Columbia (JIBC) to conduct street check training after recruits have foundational understanding of the policing environment, the legal frameworks, and police roles and responsibilities.	The VPD agrees. The VPD has initiated discussion with JIBC through the BCACMP.	In progress
18	Develop a training program to ensure members stop and interact with people for valid reasons and that officers are able to articulate the reasons for the stop. The VPD should ensure that its officers clearly articulate the reasons for stops.	This has been accomplished through the policy and training.	Met
19	Review the course content in the VPD “mini-academy” for new recruits and in-service training courses to ensure that content incorporates a focus on competencies to build and enhance police legitimacy, human rights and trauma-informed approaches, procedural justice, cultural competency as it relates to acknowledging and seeking to understand and consider the perspectives of persons police are interacting with, and police accountability.	The VPD agrees and will examine enhancing all pre-deployment training. Of note, as a result of the VPD mini-academy, which is training that is provided to new recruits in addition to their JIBC training, VPD recruits receive the highest level of training of any officers in BC. VPD receive five additional weeks than recruits from other police agencies in BC.	In progress
20	Incorporate into training considerations of how police power, authority, and privilege can impact people’s perceptions and interactions with police.	See above.	In progress
21	Ensure that officers, including field training officers, are trained in the principles of procedural justice policing	See above.	In progress

	and develop a protocol to assess the extent to which this approach is used by officers in encounters with citizens.		
22	Provide training for supervisors to assist them in training and coaching members to conduct quality street checks.	<p>This is the responsibility of the Training section for consistency and subject matter expertise. However, supervisors will be provided street check training and, again, rather than decentralizing this function to supervisory level, it will be met through the Training Section.</p> <p>In terms of the adoption of the new policy, all frontline officers have been trained.</p>	Met with comment
Public Education and Community Outreach			
23	Approach public education about street checks as an opportunity that has benefits for the public and the VPD.	The VPD agrees and Public Affairs will develop a communication plan.	Met and on-going
24	Develop and implement a plan to educate and inform community members about the use of street checks and the role of this strategy in contributing to crime prevention and public safety and security.	The VPD agrees.	In progress
25	Where possible, share select cases of positive outcomes from street checks that have been sufficiently vetted to ensure privacy and confidentiality is not compromised.	The VPD agrees.	In progress
26	If not already underway, in collaboration with community stakeholders and all levels of the VPD, including patrol officers, initiate a dialogue on street checks processes and practices to develop a shared understanding of the value of street checks as an integral component of community safety and security.	The VPD agrees and this will be a component of the communication plan.	In progress
27	Incorporate the extensive VPD partnerships with communities in the city into a comprehensive community policing	The VPD has extensive community partnerships and community consultation will	In progress

	plan. This plan would set out how collaborative partnerships with agencies and community organizations can be established, enhanced, and sustained by members at all levels and across all areas of responsibility in the VPD.	be an important part of refreshing the VPD's Strategic Plan for 2022. The spirit of this recommendation can be met during this process.	
28	Include objectives and metrics to be used in assessing outcomes in the community policing plan. Identify the resources the VPD would require to successfully implement and evaluate the plan.	This concept is met by the VPD's Annual Strategic Business Plans.	Met
29	If they have not already done so, the VPD should employ meaningful consultation process with the communities in Vancouver and with the VPD membership to develop a cohesive community policing plan.	See comments for Recommendation #27.	In progress
30	Clearly articulate the role and objectives of street checks as an integral component of a community policing plan.	See comments for Recommendation #27.	In progress
31	Explore ways to enhance patrol officers' proactive interactions with communities.	The VPD agrees completely with the value of proactive interactions with communities by frontline officers. Although it's recognized that patrol officers proactive interaction with communities is dependent on available discretionary time, steps have been taken to attempt to increase the available proactive time for frontline officers.	In progress
32	Consider establishing a Street Check Advisory Committee modelled along the lines of the VPD Indigenous Advisory Committee to facilitate communication and provide an avenue for feedback on street check issues.	The VPD recommends a SC advisory committee be considered after the initial annual audits have been conducted. It may be possible that the street check advisory committee's objectives may be assumed by the Indigenous Advisory Committee.	In progress

33	Develop strategies to address the perceptions and concerns raised by community members about police street check stops.	This recommendation will be addressed as part of the public education plan, referenced below.	In progress
34	Communicate the street check policy to the community as part of a public education plan.	The VPD Public Affairs section has prepared messaging and information for the public about the VPD's policy on conducting and documenting street checks, and they will partner with other sections to further present information to the public on how street checks contribute to crime prevention and community safety.	In progress

APPENDIX B

1.6 Incident Investigations

1.6.53 Conducting and Documenting Street Checks (and Police Stops)

(Effective: 2020.01.15)

POLICY

A Street Check is not appropriate when members are operating with lawful authority to detain or arrest. When members are operating without lawful authority to detain or arrest, this policy provides direction to members with regards to the completion of a Street Check.

In the furtherance of their lawful duties, members are expected to interact with the public. Members must nonetheless ensure that those interactions are consistent with the *Canadian Charter of Rights and Freedoms* (sections 7, 9, 10 and 15) and the values that they reflect, including the right to be free from arbitrary arrest and detention; to move freely in society subject only to reasonable restrictions imposed by law; and to equal protection and benefit of the law, without discrimination.

In British Columbia (BC) and across Canada there has been attention on the police practice of Street Checks. The changes to the practice of Street Checks are part of broader efforts by the BC Police Services to promote unbiased policing. One of those efforts is the issuance of an interim [BC Provincial Policing Standard \(BCPPS\) on Police Stops](#), which includes the practice of Street Checks.

The procedures about Street Checks, contained herein, provide direction to members that is compliant with the BCPPS on Police Stops; however, it is important to specify that sections 1, 2, 3, and 10 of the procedure provides direction to members when they are conducting a police stop with lawful authority.

Definitions

Street Check: any voluntary interaction between a police officer and a person that is more than a casual conversation and which impedes the person's movement. A Street Check may include a request for identifying information depending on the circumstances.

Psychological Detention: a situation where, in the absence of a direction or demand from a police officer, a person reasonably believes that they are not free to leave.

Identity Factors: any information which, alone or in combination with other information, can be used to identify a person. Identity Factors include but are not limited to: economic or social status, race, colour, ancestry, place of origin, religion, marital status, family status, physical or mental disability, sex, sexual orientation, gender identity or expression, or age.

Detention Authorities

The scope of lawful authorities for police to detain a person, which fall outside of a Street Check and which may permit a request or demand for identifying information from a person include:

Investigative Detention: A brief detention based on a police officer's reasonable suspicion, in all of the circumstances, that a person is connected to a recent and particular crime for which the detention is necessary.

Reasonable Grounds to Arrest: Grounds that would lead an ordinary, prudent and cautious person to have a strong and honest belief about the situation at issue. When a police officer has reasonable grounds to believe that a person has committed, is committing, or is about to commit an indictable offence, then Section 495 of the *Criminal Code* provides authority for an arrest.

Statutory Authority: Federal statutes such as the *Criminal Code* as well as certain provincial statutes such as the *Motor Vehicle Act* in the case of driving activity, and certain municipal bylaws, provide police the authority to compel identification from a person pursuant to the applicable statute or when the person is or has committed an offence in relation to the statute or bylaw.

PROCEDURE

In compliance with the BCPPS, the following provisions shall govern VPD members:

Member Responsibilities

When conducting a Street Check or a police stop where there is lawful authority

1. The decision to conduct a Street Check or a police stop shall not be based on Identity Factors.
2. The decision to conduct a Street Check or a police stop shall not be based solely on that person sharing an Identity Factor with a person being sought by the police.
3. Arbitrary or random Street Checks or police stops, which may or may not include a request for or the collection or recording of a person's identifying information shall not be conducted.

When conducting a Street Check

4. If a detention, arrest, or application of a statutory authority is appropriate, a Street Check should not be conducted.
5. Members must take steps to ensure that the interaction with the person is voluntary, including but not limited to advising the person they are:
 - a. not required to provide any identifying information;
 - b. not required to answer any questions; and
 - c. free to walk away at any time.
6. In fulfilling their obligations under 5 (above), members should be mindful of the possibility that the person may feel psychologically detained due to factors such as:
 - a. the circumstances that gave rise to the interaction;
 - b. the nature of the member's conduct; and
 - c. the particular characteristics of the person, including but not limited to:
 - i. Indigenous;
 - ii. homelessness;
 - iii. racialized;
 - iv. age;
 - v. physical stature;
 - vi. minority status; and
 - vii. level of sophistication in the context of the person's ability to understand their rights.

7. Where a member concludes that a person is psychologically detained the member should conclude the Street Check and allow the person to proceed.
8. Where the member asks the person for identifying information, the member shall inform the person of the public safety purpose or objective for the Street Check.
9. After a person's refusal to cooperate with a Street Check, a member may only take subsequent law enforcement action in circumstances where that subsequent law enforcement action is completely unrelated to the initial request made in the Street Check.

Authority to collect identifying information during a police stop with lawful authority:

10. Members are not permitted to request or demand, collect, or record a person's identifying information without a justifiable reason. A member's request or demand for a person's identifying information in relation to a lawful detention, arrest, statutory authority or other existing legal authority is considered a justifiable reason and without limitation, examples are:
 - a. as permitted or required by City of Vancouver, municipal, provincial or federal legislation or regulations;
 - b. a traffic stop, consistent with statutory and common law;
 - c. an arrest;
 - d. an attempt to execute a warrant against the person; or
 - e. an investigation of an offence, or reasonable grounds to believe that an offence has occurred or is about to occur, or an imminent public safety threat.

Requesting identifying information during a Street Check

11. Members may request that a person voluntarily provide identifying information provided that:
 - a. the member reasonably believes the interaction, and any information requested, serves a specific public safety purpose or objective, including:
 - i. assisting in locating a missing person;
 - ii. an objectively reasonable concern for a person's immediate safety;
 - iii. assisting a person in distress to refer them to health, substance use, mental health or other support services; or
 - iv. as part of the response to a call for service;
 - b. the member informs the person of the reason or purpose for the interaction; and
 - c. the member takes steps to ensure the information is provided voluntarily, including but not limited to advising the person that they are not required to answer any questions and are free to leave.

Documenting a Street Check

12. A Street Check report should not be used to document any incident for which a General Occurrence Report would normally be submitted (PRIME-BC policy section 2.4).
13. When a member conducts a Street Check, for which identifying information was requested, the member shall document the following in a PRIME Street Check report:
 - a. the public safety purpose or objective of the Street Check in sufficient detail to articulate the reason for the interaction;
 - b. identifying information collected or provided; and
 - c. factual information and/or observations from the Street Check.

Vancouver Police Mental Health Strategy

**A comprehensive approach for a proportional police response
to persons living with mental illness**

Prepared by:

Superintendent Daryl Wiebe

July 8, 2016



VANCOUVER POLICE DEPARTMENT
Beyond the Call

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Executive Summary

The Vancouver Police Department (VPD) has been proactive over the past 30 years regarding incidents involving mental health, implementing a number of programs and initiatives to improve outcomes relating to police interactions with persons living with mental illness. In 1978, the VPD implemented 'Car 87,' an integrated response model partnering a police officer with a mental health professional. That program continues today, and has served as a model for many other police agencies to copy. It has been further augmented with other initiatives to focus on youth and chronic offenders, and more specialized mental health programs.

Over the past five years, the VPD has publicly reported on the dramatic increase in the incidence of police interactions with persons living with mental illness (see Appendix – A). There has also been a number of high-profile incidences of violent crime associated with an apparent mental health factor, highlighting gaps in the continuum of care and in the system generally. That is not to say that mental illness is a causal factor in violent crime. Rather, persons living with mental illness are more likely to be a victim of crime, rather than the perpetrator. These drivers have led to the VPD enhancing its service delivery and actively participating in broader multi-disciplinary teams, with health care providers, to deliver proper community-based mental health support for those in need.

While these initiatives have all proven valuable in terms of client needs and reduced police interaction, and can each be supported as effective through evidence-based research, a broader *Mental Health Strategy* will serve as an overarching approach for the VPD. It is intended to account for the significant impact that can result from persons living with mental illness coming into contact with the police, and set forth a framework on how the VPD models its interaction with this segment of the population. In addition, it is important to acknowledge that most mental-health-related calls to the police involve persons with concurrent disorders – a mental illness and substance abuse problems.

This *Mental Health Strategy* is framed around the core values of the VPD, and the principles of justification, proportionality and intrusiveness. It is designed to provide clear and concise information about the VPD's position and intent, and to serve as a framework to support operational deployment, organizational partnerships, education and training initiatives, and a commitment to the community relative to its interactions with persons living with mental illness.

Finally, this *Mental Health Strategy* was not developed in isolation. The VPD has consulted with partners in the mental health community, in an effort to include their perspectives on this jointly-shared social challenge. Input was received from numerous stakeholders and partner organizations, including Vancouver Coastal Health, the Canadian Mental Health Association, the City of Vancouver, and mental health professionals from St. Paul's Hospital, Vancouver General Hospital, and UBC Psychiatry. In addition, a consultation session with the Persons with Lived Experience Committee, Mayor's Task Force on Mental Health and Addiction resulted in meaningful feedback from this affected population.

VPD Approach

The VPD has long-acknowledged that mental health, mental illness, and the associated patient care are all the primary responsibility of health care providers. Further, there are numerous other social factors that influence the behaviour of persons living with mental illness, and the likelihood of success with their care plan. These factors include access to housing, poverty, education, substance use and misuse, etc.

In the traditional sense, the VPD is focused on public safety and law enforcement. Its mission is to be “Canada’s leader in innovative policing, maintaining public safety, upholding the rule of law and preventing crime.”¹ However, the very nature of police work is challenging, with police officers frequently confronted by traumatized individuals or traumatizing circumstances. As such, the VPD is committed to:

1. The best training to better understand mental illness and to effectively respond to incidents where a person living with mental illness is in a state of crisis and in need of care;
2. Providing support to police officers who may themselves be experiencing loss, trauma or violence, through mentoring, peer support, or therapy from a mental health professional; and,
3. Systematically reducing stigma within the Department, and serving as a role model for the community where persons living with mental illness are accepted as individuals within society and not subject to differential treatment.

Police officers regularly come into contact with persons living with mental illness, including a majority who concurrently struggle with substance abuse, some who are not receiving necessary medical care and community support, and a small number who may be in a state of crisis. Given these inevitable interactions, the VPD has proactively worked to provide care and mitigate risk by collaborating upstream with health care partners in an effort to get these vulnerable persons the support they require.

The overarching objective for the VPD is client-focused and recovery based, meaning that the individuals themselves often need support, housing, and medical services, and do not usually require more traditional enforcement measures associated to a police department. This objective aligns with the strategic direction of Vancouver Coastal Health which focuses on patient-centered care.²

The VPD is intent on diverting persons living with mental illness away from the criminal justice system when the circumstances of the criminal activity are minor in nature, have little immediate impact on the community at large, and are grounded in the individual’s mental illness. This approach aligns with the Diversion Framework set forth by the Canadian Mental Health Association.³ As a part of that broader

¹ Vancouver Police Department (2011). *2012-2016 Strategic Plan – Vancouver Police Department*. Found at <http://vancouver.ca/police/assets/pdf/vpd-strategic-plan-2012-2016.pdf>

² Vancouver Coastal Health (2015). *2015/16 – 2016/17 Service Plan*. Found at http://www.vch.ca/media/Service%20Plan_2015_2016_FINAL_October_2015.pdf

³ Hall, N and Weaver, P (2008). *A Framework for Diversion of Persons with a mental Disorder in BC*. Canadian Mental Health Association BC Division. Found at <http://www.cmha.bc.ca/files/DiversionFramework.pdf>

commitment, the VPD has reassigned existing personnel away from other areas of policing, in order to address this growing responsibility to public safety in our community. Further, the VPD has collaborated with many stakeholders in health care, health research, and government to develop client-focused solutions that reduce the incidence and lessen the impact of interactions with the police. However, these collaborative solutions must include sufficient capacity within health care to respond to a high-needs population and expanded community services to serve chronic patients effectively, while respecting the rights of persons living with mental illness and de-escalating conflict to ensure that use of force is the last line of defence.

Access to Care versus Criminalization

Through all of the research and reports coordinated by the VPD, it is apparent that the majority of people who are living with mental illness and who come into negative contact with the police require some form of access to care or community support. In some instances, the seriousness of the incident and the need to maintain public safety will require a criminal investigation and potential criminal sanctions. However, in many instances the actions of the individual are minor, or of a nuisance nature, and driven by a state of crisis attributable to mental illness.

In all such cases, the VPD is committed to pursuing access to care through health care providers, and proactive follow-up with supportive multi-disciplinary teams that focus on the well-being and recovery of the individual. By working with the health care system, and ensuring individuals receive the requisite care for their illness, recidivism and future negative police contacts should diminish dramatically.

Partnering with Stakeholders

The VPD has long-recognized that great things can be accomplished through effective partnerships with the community, government, and the private sector. In spite of the fact that mental health and wellness, and addictions treatment, are the responsibility of the Ministry of Health (and the Ministry of Children and Family Development in cases where youth are involved), the very nature of the increasing incidence of police involvement with persons living with mental illness precipitates the VPD driving change to improve the quality of care for this vulnerable group.

The VPD will continue to partner with mental health stakeholders and effect change in the system. It is imperative, however, that all partners in this continuum provide sufficient resources to meet the demand for service. Where a person receives insufficient services or support, they will ultimately fall back on the VPD as the last line of help, and this can create risk for the individual, the community, and the VPD.

Three key mental health partnerships that have grown over the past few years have been with Vancouver Coastal Health (VCH), Providence Health Care (PHC), and the City of Vancouver.

Vancouver Coastal Health and Project LINK

Following the release of the 2010 report *Beyond Lost in Transition*, the VPD and VCH formalized a long-standing partnership with *Project Link*, committing to work together to improve the quality of life of persons living with mental illness and/or problematic substance use and addiction. Both agencies' leaders and respective Board chairs signed a letter of understanding, committing to take a patient-centred approach to the problem, committing to work together for collaborative solutions, improving how they respond to and interact with the mentally ill, improving policies and procedures, and providing the most expedient and appropriate care for the individuals involved.

A working group was formed from this agreement, including representatives from PHC, and the three organizations continue to work to address gaps in the system and support proper care for the clients.

Accomplishments include:

- Embedding police officers within Assertive Community Treatment (ACT) teams
- Expanding ACT from three teams to five, to support a larger clientele base
- Developing an information sharing agreement and formalized discharge agreements between the police and health, enabling the exchange of critical client information between the two organizations to facilitate proper care for each individual client
- Improved communication with the VPD Chronic Offenders Unit to deliver a coordinated response that ensures the most prolific offenders who are living with a mental illness receive the mental health support they require
- Improved collaboration with the mental health programs provided through the Downtown Community Court
- Improved reporting within the VPD to account for incidents involving a 'mental health factor,' and forming part of a broader early warning system to identify clients at risk
- Improved linkage with St. Paul's Hospital/Providence Health Care, particularly when dealing with ACT clients who come into contact with health care professionals from different hospitals

At the senior leadership level, the Executive and Boards of both the VPD and VCH meet annually to set priorities for the working group for the coming year. Collectively, both agencies identify achievable targets to pursue program change and advancement, all in the interests of the client. By working collaboratively, sharing vital information, and leveraging their partnership, change has taken place, and clients are often receiving better care when needed the most.

Mayor's Task Force on Mental Health and Addictions

The Mayor's Task Force on Mental Health and Addictions was formed in 2013, and designed to support the efforts of VCH, PHC, and the VPD to further their recommendations to the Province following the release of the *Mental Health Crisis* report. The mandate of the Task Force is to:

...help the City, Vancouver Coastal Health, the Vancouver Police Department and other related sectors, including Housing and Justice, to identify high priority, feasible actions that will address the continuum of needs of SAMI

[Seriously Addicted and Mentally Ill] residents. The Task Force will be modelled after the best practice of the Four Pillars Coalition, recognizing the need to mobilize and involve key stakeholders and community.⁴

The Task Force is led by the Mayor and membership is comprised of representatives from health, justice, social development, housing, academia, non-governmental organizations, urban Aboriginal groups, and people with lived experience. This multi-sectoral approach has provided significant input and support to VCH and the VPD, and in September 2014, the Task Force released a comprehensive report that identifies actions to enhance the system of care for persons living with mental illness. Six action areas were identified, containing 23 priority action items to enhance access to quality and effective support services. The six key action areas are:

1. Work better together and address service gaps, utilizing a collective impact methodology and data-sharing model;
2. Convene a peer-informed leadership system to examine best practices relating to health care, housing and community support;
3. Create a greater awareness of mental health and addiction, whereby de-stigmatization will increase access to services, improve chances of recovery, and improve a sense of inclusion and belonging;
4. Develop better support systems for youth transitioning out of care;
5. Focus on wellness for Aboriginal peoples;
6. Enhance addictions knowledge by supporting training and integrating addictions specialists into the existing medical system.⁵

The VPD is a key partner in this initiative, and is specifically committed to enhancing the education and training of all police members, collaborating with the Province of BC and the Justice Institute of BC to develop appropriate training, and working with people with lived experience to further de-stigmatize mental illness.

⁴ City of Vancouver (2013). *Mayor's Task Force on Mental health and Addictions – Terms of Reference*. Found at <http://vancouver.ca/files/cov/Mayors-Task-Force-on-Mental-Health-and-Addictions-Terms-of-references.pdf>

⁵ City of Vancouver (2014). *Caring for All: Priority Actions to Address Mental Health and Addictions*. Found at <http://vancouver.ca/files/cov/mayors-task-force-mental-health-addictions-priority-actions.pdf>

Policy

The Vancouver Police Department is committed to a culture in which persons living with a mental illness and/or substance use will be treated with respect and compassion. Further, the rights of these individuals are equally as important as the rights of others, and the VPD will ensure that procedural justice principles are adhered to. Recognizing that persons' interactions with systems and institutions can create trauma on its own, it is imperative that the underlying mental health issues be addressed, while minimizing the criminalization of the individual.

To accomplish this objective, the VPD is committed to reducing the stigma associated with mental illness within the organization, and delivering robust education and training that focuses on de-escalation strategies and the peaceful resolution of potentially volatile situations without the need to use force. The importance of well-being and the sanctity of life are emphasized and any use of force must also be considered in this context, and not just on whether it is justified or lawful. In addition, the VPD is ultimately seeking to achieve positive outcomes for individuals in crisis, and is committed to working collaboratively with partner agencies to achieve this objective.

Definitions

Access and Assessment Centre (AAC): A single point-of-entry site for adults, into the mental health and substance use system, and located on the Vancouver General Hospital campus. It is a 'designated facility' as described below and staffed 24 hours a day, seven days a week. The AAC began operations in February 2016, and provides a range of services for urgent and non-emergent referrals, crisis line, intake clinicians, outreach, and community psychiatric services.

ACT: Assertive Community Treatment (ACT) is a full-service mental health program, led by VCH, which provides higher intensity and greater frequency support for more challenging mental health and/or substance use clients, where traditional mental health services have been unsuccessful. The VPD is a partner in this program, with police officers embedded into the ACT teams.

AOT: The Assertive Outreach Team (AOT) is a unique mental health program, delivered in partnership with VCH, which provides short-term transitional support for more challenging mental health and/or substance use clients, as they transition from hospital or corrections to primary care service providers.

Apprehension: A term used to describe the involuntarily detention of a person by police under the *Mental Health Act* (MHA), for the purpose of transporting the person to a designated medical facility to be seen by a physician. It is not a form of 'arrest' and there is no criminal implication for the person.

CNT: The Crisis Negotiation Team (CNT) is a key component of the VPD's emergency response mandate. Specially trained members, primarily assigned to front line patrol teams, provide an immediate response capability to conduct on-scene negotiations during any significant crisis event involving the VPD.

Car 87: A mental health crisis response car that partners a VPD constable with a registered nurse or a registered psychiatric nurse to provide on-site assessments and intervention for people with psychiatric problems. The nurse and the police officer work as a team in assessing, managing, and deciding the most appropriate action, which may include referrals for community-based mental health follow-up or emergency intervention.

Concurrent Disorder: A term used to refer to co-occurring mental health and substance use problems. This is also sometimes referred to as 'dual diagnoses'; however, this latter term is also often limited to mean a mental illness combined with an intellectual disability.

Crisis: An emergency situation that creates an immediate threat to the physical, emotional, and mental health of an individual. A person may experience crisis during times of stress, in response to real or perceived threats, and/or a loss of control. Symptoms may include emotional reactions such as fear, anger, or excessive giddiness; psychological impairments such as inability to focus, confusion, nightmares, and potentially even psychosis; physical reactions like vomiting/stomach issues, headaches, dizziness, excessive tiredness, or insomnia; and/or behavioural reactions including the trigger of a 'fight or flight' response. Any individual can experience a crisis reaction when normal coping mechanisms are ineffective, regardless of previous history of mental illness.

De-escalate: A communication tactic intended to instill calm into an otherwise dynamic or volatile situation, thereby reducing the necessity or intensity of force to resolve a confrontation.

Designated Facility: A provincial mental health facility, psychiatric unit, or observation unit designated by the Minister of Health, under the MHA. In Vancouver, this includes Vancouver General Hospital, St. Paul's Hospital, UBC Health Sciences Centre Hospital, BC Women's Hospital and Health Centre, BC Children's Hospital, Mount St. Joseph's Hospital, and G.F. Strong Centre.

Elopee: A person on unauthorized leave from a designated facility. A police officer has the authority to apprehend the elopee and return the elopee to the designated facility, provided the elopee has been away from the facility for less than 48 hours. If the elopee has been absent for more than 48 hours, the director of the facility must issue a Form 21 Director's Warrant for the police to have the authority to apprehend the elopee and return the elopee to the designated facility.

Form 4 Medical Certificate: A certificate completed by a physician and issued under Section 22 of the MHA for involuntary admission to a designated facility. Two Form 4 Medical Certificates must be issued by the physician in order to hold a person for more than 48 hours.

Form 21 Director's Warrant: An apprehension warrant issued under Section 39 or 41 of the MHA for a person recalled from a doctor-approved leave from a designated facility, or a person who has eloped from a designated facility.

MHA: The *Mental Health Act* is Provincial legislation that ensures '... the treatment of the mentally disordered who need protection and care...' The MHA provides authority, criteria, and procedures for the involuntary admission and treatment of patients, and contains protections to ensure that these provisions are applied in an appropriate and lawful manner.

MHES: Mental Health Emergency Services is a program operated by VCH, and is designed to deliver community-based interventions during mental health emergencies, relieving the pressures that are often placed on police and area hospitals. MHES staff partner with VPD members to form Car 87.

MHU: The Mental Health Unit is a VPD unit within the Youth Services Section that coordinates the supervision and deployment of police officers for ACT and AOT. The MHU is focused on a collaborative approach to addressing mental health and/or substance use in the community.

Mental Disorder: A term used in the MHA, but not defined within the Act. It is described as, 'a disorder of the mind that requires treatment and seriously impairs the person's ability to react appropriately to the person's environment, or to associate with others.'

PHC: Providence Health Care is the organization that operates St. Paul's Hospital and Mt. St. Joseph's Hospital in the City of Vancouver. PHC is a separate legal entity from Vancouver Coastal Health Authority (VCH) and provides many services in partnership with VCH across the mental health and substance misuse continuum of care.

Section 28: The section within the MHA that provides the authority for police officers to apprehend a person and take them to a physician for examination if the person is acting in a manner that is likely to endanger themselves or others, and apparently has a mental disorder.

SPH: St. Paul's Hospital

VCH: The Vancouver Coastal Health Authority is one of the five regional health authorities providing direct and contracted health services in BC. The region that VCH is responsible for includes Vancouver, Richmond, North Vancouver, West Vancouver, the Sea-to-Sky Highway, the Sunshine Coast, Bella Bella, Bella Coola, and the surrounding areas.

VGH: Vancouver General Hospital

Procedures

VPD members will often come into contact with individuals who are living with a mental illness. In some instances, those individuals may be in a state of crisis and pose a risk to themselves, the responding police officers, and/or the general public.

Section 28 of the MHA provides that;

A police officer or constable may apprehend and immediately take a person to a physician for examination if satisfied from personal observations, or information received, that the person:

- a) is acting in a manner likely to endanger that person's own safety or the safety of others, and*
- b) is apparently a person with a mental disorder.⁶*

This section of the MHA allows for considerable police discretion, as it provides the police officer with the authority to apprehend. However, with the wording '*may apprehend*,' the police officer has the ability to pursue a number of other courses of action, depending on the circumstances involved.

History has shown that police interactions with persons living with mental illness, and who are in crisis, sometimes have the potential for violence. Occasionally, the mere presence of the police can elevate the tenor of the interactions and complicate communication further. These interactions frequently require a police officer to make difficult judgement decisions about an individual's mental state and his/her intentions. They require specialized communication skills and techniques geared to resolving each situation, while minimizing the instance of physical harm to the individual, the public, and the police.

To that end, the goal in every interaction is de-escalation. Police officers are expected to recognize behaviour that is characteristic of mental illness or a crisis, and the VPD is committed to ensuring that all of its members are trained in this skill. Through effective de-escalation techniques, the safety of all involved in the interaction is the paramount priority, and should guide the resolution of each unique situation as safely as possible.

Initial Patrol Response

Police officers are regularly called to incidents that involve persons living with mental illness. However, only a trained mental health professional can diagnose mental illness and even they can have difficulty with such diagnoses. VPD members are not expected to diagnose mental illness, but they are expected to recognize behaviours that are indicative of a person affected by mental illness or in a crisis. In addition, there is the added complexity of assessing risk when the circumstances of an incident suggest the potential for violence or danger.

⁶ Mental Health Act [RSBC 1996] Chapter 288. Found at: http://www.bclaws.ca/civix/document/id/complete/statreg/96288_01

Risk assessment is a critical skill in police work. When interacting with individuals affected by mental illness or crisis, VPD members shall continually assess risk throughout their interactions with the individual involved. That risk may be to the individual, to the responding VPD members, and/or to the general public. However, most persons living with mental illness, or who may be in crisis, are not dangerous. These individuals may only present 'dangerous behaviour' under certain circumstances or conditions, which may be controllable during their interactions with the police. It is a combination of the observed behaviours of the individual and the perceived risk to those involved that will guide the course of action taken by the police.

When responding to an incident involving a person exhibiting behaviours attributed to mental illness, or in a mental health crisis, VPD members should consider all of the following strategies to manage the situation, for the safety of all involved:

- Evaluate the nature of the incident and determine the necessity for police intervention;
- If police intervention is necessary, determine the best method to communicate with the individual involved, including consideration for the existence of a language barrier;
- Evaluate the need to involve other police officers for cover and inform a supervisor when an expanded response is required;
- Evaluate the need for specialized resources, mental health professionals, and/or the assistance of those with specialized training in crisis intervention;
- Consider engaging the assistance of a family member or caregiver of the affected individual, who can often provide insight and perspective on the behaviour, and may be able to serve as an advocate or possess the authority to involuntarily commit the individual; and,
- If it becomes necessary to apprehend the individual under the MHA or to take them into custody as a part of a criminal investigation, develop and communicate a plan that considers the most effective options to safely resolve the incident.

However, it is important to note that many of these incidents occur suddenly, and can be exceptionally dynamic and evolve quickly. This landscape frequently requires police officers to respond immediately, interact with a person with very limited background information, draw on their own life experience and training, and take actions in an uncontrolled environment that are in the best interests of public safety, and for the protection of both the individual and the police officers involved.

When working towards an appropriate resolution to a call involving a person exhibiting behaviours attributed to symptoms of a mental illness, or in a mental health crisis, VPD members will consider the totality of the circumstances involved, including the behaviour of the individual and the proportionality of the response. Following are acceptable resolutions or dispositions that may be appropriate:

- *Non-engagement*: When a member determines that police engagement in the first instance will result in undue safety concerns for the individual, the public and/or the members involved, it may be acceptable to not engage with the individual at all. In such instances:
 - Members will notify a supervisor and the supervisor shall attend the scene;

- The supervisor shall consult with the Duty Officer in all instances where a decision is made to not engage with the individual;
- The individual shall not be left alone, and another suitable support person should be in place and willing to assist the individual; and,
- A police report will be submitted that clearly identifies the circumstances of the event, reasons for the police to not engage with the individual, the identity of the individual who took responsibility to provide care to the individual, and follow-up strategies and referrals identified to ensure the individual receives the support they require.
- *Disengagement:* When continued contact with the individual will result in undue safety concerns for the individual, the public and/or the members involved, it may be acceptable to disengage from further police action. In such instances:
 - Members will notify a supervisor and the supervisor shall attend the scene;
 - A plan will be developed, under the direction of the supervisor, to make contact with the individual at a different time, or under different circumstances; and,
 - A police report will be submitted that clearly identifies the circumstances of the event, actions taken by the police, reasons for the dis-engagement, and follow-up plan and referrals identified to ensure that the individual receives the support they require.
- *Delaying Custody:* When a member determines that taking a person into custody under the present circumstances may result in undue risk to the individual, the public, and/or the members involved, it may be appropriate to delay custody. In such cases, members will notify a supervisor and develop a plan, in consultation with health care practitioners and/or a family member or caregiver, to determine a safer time and method to take the person into custody.
- *Director's Warrant:* When the individual involved is named in a Form 21 Director's Warrant, members will apprehend the individual and arrange transportation to the hospital or designated facility identified in the warrant.
- *Apprehension:* When the circumstances are present to meet the requirements of Section 28 of the MHA and a Criminal Code arrest is not required, members will apprehend the individual and arrange transportation to a hospital or designated facility for examination by a physician.
- *Arrest:* When there are reasonable grounds to believe that the individual has committed a serious criminal offence, members will proceed under the lawful authority of the Criminal Code, affect an arrest, and ensure subsequent examination by a physician in the Vancouver Jail to assess and refer to mental health support.

The VPD will not engage in the practice of *voluntary transports* (solely at the request of an individual). If an individual does not meet the criteria for an apprehension, members will not provide transportation to a hospital in a police vehicle. The responsibility rests with the individual to get himself/herself to the hospital, and the VPD will limit their involvement to assisting the individual with other methods of transportation (EHS, family member, mental health professional, etc.).

Crisis Negotiation Team

The VPD Crisis Negotiation Team (CNT) is an important asset to assist Patrol members with critical incidents, usually involving persons living with mental illness and in crisis, and their role is one of

advanced crisis de-escalation and negotiation. The team is comprised of 24 members and one full time coordinator (team leader). All but the coordinator have primary duties elsewhere in the VPD, with the majority working in Patrol.

CNT members are all experienced police officers who are readily available to assist front line policing, where the vast majority of all contacts with persons living with mental illness occur. These members regularly engage with suicidal individuals, including persons actively attempting to jump off bridges and structures, as well as with armed and barricaded persons threatening harm to themselves or others.

All CNT members complete an 80-hour basic VPD Crisis Negotiation course, modelled after a course offered at the Canadian Police College (CPC). This local program incorporates elements of the CPC national course, the FBI negotiator training program, and the UK National Negotiator Course. The VPD course emphasizes scenario-based learning, specifically designed to reflect and reinforce the concepts taught throughout the program.

CNT members are required to complete a 40-hour refresher course once every five years, offered at the CPC. In addition, there are six mandatory CNT training days throughout the year. These facilitated sessions include incident reviews, discussions on training, deployment issues, and presentations on local and relevant topics. In addition to the mandatory training days, CNT members participate in a number of multi-agency training scenarios throughout the year. A unique element to the VPD CNT program is the existence of a full-time coordinator. The consolidation of training, selection, team leadership, performance management, and academic research has allowed the VPD to develop the program to meet the unique challenges faced in Vancouver.

Supervision

Patrol supervisors have a significant role in the initial police response to persons living with mental illness who are in crisis. While they are seldom the first members to come into contact with these individuals, they will frequently become aware of their members doing so. When members come into contact with a person living with mental illness and who is in crisis, and a robust police response is required, the sergeant shall:

- Take control of the call and advise the responding members and Dispatch that they are monitoring the incident;
- Determine the need to attend at the incident, and particularly if the matter becomes protracted;
- Ensure sufficient Patrol resources are in place to effectively contain the scene;
- Ensure an ambulance is readily available;
- Determine the need for additional resources at the scene, including the assistance of mental health professionals;
- Monitor the interactions between the responding members and the individual, and continually assess the circumstances, the behaviour of the individual, and the proportionality of the police response, to ensure the needs of the individual are best served to get them help;
- Ensure proper reporting is completed at the conclusion of the incident;

- Notify the Duty Officer of all incidents in which the individual is injured as a result of police actions, regardless of the seriousness of the injury.

Specialized Mental Health Response

While many individuals first come into contact with the VPD through the initial Patrol response, the VPD has additional members working in specialized assignments to provide a targeted response to support individuals with the greatest risk, due to mental health and addiction concerns. The Mental Health Unit and the Police Community Response Unit are staffed with specially trained police members who focus their work to support persons living with mental illness. These members work in partnership with health care practitioners who specialize in mental health.

There are ten police officers and a civilian analyst, under the supervision of a sergeant, and reporting to the Inspector in charge of the Youth Services Section. The three key functional components of the VPD's mental health response are Car 87, ACT teams, and AOT.

Car 87

The Mental Health Emergency Services 'Car 87' is a joint VPD/MHES program that was created in 1978. Car 87 partners a mental health nurse with a police officer to respond to individuals experiencing a mental health crisis. The program provides referrals, follow-up, and emergency intervention as dictated by the circumstances of each event. The program also receives referrals for clients experiencing a mental health crisis from elsewhere within the VPD, through VCH programs, and from the community.

Crisis intervention through Car 87 typically provides a mental health assessment for clients without a previously documented mental health background. They also receive Form 21 Director's Warrants from community mental health and assist in locating clients for apprehension and for transport to a designated facility. In addition, Car 87 provides support to front line Patrol members and assists the Crisis Negotiation Team with mental health backgrounds when required. The complete team includes psychiatric nurses, a clinical supervisor, support staff, and VPD members. Four full-time police officers, work a four-day shift rotation, covering almost 21 hours every day. The day shift works from 0700 to 1815 hours and the afternoon shift is from 1600 to 0345 hours.

Assertive Community Treatment Teams

Assertive Community Treatment teams, managed by VCH, provide a full-service mental health program to their clients. The first 'full fidelity' ACT team in Vancouver was created in January 2012. The goal of ACT is to provide higher intensity and greater frequency support for severe mental health and/or substance use clients where traditional services have been unsuccessful. It delivers an evidence-based model of care and provides a client-centered recovery-oriented service delivery model in an effort to reduce emergency psychiatric hospital admissions. Services are not brokered to individual agencies. Rather, all service needs for the client are met by the team.

The primary objective of ACT is to prepare the client for a successful transfer to a step-down community service. ACT clients are typically pre-contemplative in their substance use, experience severe functional challenges related to community living, and have an extensive history of police involvement and high

use of health services. Clients demonstrate high-risk behaviour and long-standing complex mental health issues.

ACT teams are comprised of 10 to 12 professionals focused on the well-being of a limited number of clients. Each team, with a maximum caseload of 80 clients, includes psychiatrists, social workers, nurses, vocational counsellors, occupational therapists, recreational therapists, and peer counsellors, among others. A unique feature to the five Vancouver ACT teams, although not a requirement under the British Columbia ACT Standards, is that police members are embedded in the teams. Two full-time VPD members work with the Vancouver teams, on a four-day shift rotation that provides police support seven days a week, between 0700 and 1815 hours.

Assertive Outreach Team

The Assertive Outreach Team is a VPD mental health program, created in March 2014 as an outcome of the SAMI 120-day action plan,⁷ and designed to assist a small cohort of the community that cannot be supported by ACT. This team also involves a partnership with VCH, providing short-term transitional support, from hospital or detention to a primary care service provider. The program addresses the needs of clients with moderate to severe substance use and/or mental health issues while addressing the gap in the continuum of care, while they transition from the health or criminal justice systems back into the community. The goal of AOT is to reduce the incidences of violence and self-harm, prevent further deterioration in the quality of life of the individual, and reduce re-engagement with the criminal justice system while bridging services, through a practice of intensive case management.

AOT functions to connect individuals to their primary-care provider over a one- to two-month transitional period, using a creative and collaborative problem-solving approach. Clients are also typically pre-contemplative in their substance use, experience functional challenges related to community living, and have a history of police involvement and complex mental health issues. The team consists of psychiatrists, nurses, clinical supervisors, and the police.

AOT is more police-intensive than ACT, allowing the team to readily assess risk, proactively locate individuals in risk-laden environments, and provide input and support for future services. Referrals are received directly through recent police interactions, from health services and the criminal justice system, and through an in-house 'Early Warning System' that identifies individuals with increasing mental illness related police interactions.

AOT has an average caseload of 40 clients. Four full-time police officers work a four-day shift rotation, covering 16 hours every day. The day shift works from 0700 to 1815 hours and the afternoon shift is from 1200 to 2315 hours.

⁷ BC Ministry of Health Report (2013), *Improving Health Services for Individuals with Severe Addiction and Mental Illness*. Found at <http://www.health.gov.bc.ca/library/publications/year/2013/improving-severe-addiction-and-mental-illness-services.pdf>

Education and Training

The VPD is committed to a robust education and training regimen in order to prepare its members for the inevitable interactions with persons living with mental illness. In 2002, the VPD developed an in-house *Crisis Intervention Training* (CIT) program, based on the *Memphis Model*⁸ for crisis intervention, and ensured that all front line personnel working in Patrol received this course. At the time, it was the only course of its kind available in BC and focused on understanding mental illness, how mental illness can affect behaviour, understanding crises, and included a component of input from people with lived mental health experience.

In 2011, the Province of BC developed a Crisis Intervention and De-escalation Training (CID) course, modelled after the VPD CIT and designed for all police officers in BC. This course effectively replaced the CIT program delivered within the VPD, and provides the most current information available today for all front line VPD personnel. The triennial recertification requirement commenced in 2014, further entrenching the practice of de-escalation and delivering up-to-date information relative to mental health and substance use.

In addition to the mandated training, the VPD provides further education and training to members assigned to specialized positions where there is a greater likelihood of contact with persons living with mental illness, and in particular to members assigned to the MHU, Car 87, CNT, and others whose work may increase their chances of interacting with this community. These additional courses include, but are not limited to:

- Province of BC CID triennial requalification
- Road to Mental Readiness (R2MR)
- Specialized use-of-force training simulations, including randomized de-escalation scenarios, and delivered to uniformed personnel annually as a part of cycle training
- Mental Health First Aid
- Historical Clinical Risk Management (HCR-20) Violence Risk Assessment
- VPD Crisis Negotiation Course
- Canadian Police College Crisis Negotiation course
- Province of BC Standardized Use-of-force Instructor's Course (SUFIC) training and certification, including specialized de-escalation training
- VPD Conducted Energy Weapon operator training, including specialized de-escalation training

Two reports were released in Ontario in 2014 in relation to a number of separate incidents where the police were involved in lethal use-of-force situations with individuals in a mental health crisis. A coroner's inquest into the death of three Torontonians, colloquially known as the *JKE Inquest*, provided 74 recommendations for change to the Toronto Police Service (TPS), the Toronto Police College, the Ontario Police College, and the Province of Ontario, relative to police interactions with persons living

⁸ CIT International. *Memphis Model*. Found at <http://www.citinternational.org/training-overview/163-memphis-model.html>

with mental illness.⁹ In addition, TPS Chief Bill Blair ordered an independent review into his department's interactions with persons in a mental health crisis, and this review was conducted by the Honourable Frank Iacobucci, a former Justice of the Supreme Court of Canada. He made a further 84 recommendations for change in his report *Police Encounters with People in Crisis*.¹⁰

Forty (25%) of the 154 combined recommendations were related to police officer training. The VPD conducted a review of both Ontario reports, and applied a local lens to the recommendations. The VPD is well-positioned relative to the Ontario recommendations, with the VPD satisfying 147 of them at the time of the report.¹¹ The key deliverable from that review is an expansion on specialized training for VPD members, and particularly for those members who are more likely to come into contact with persons living with mental illness. In addition, the VPD made adjustments to the recruiting process, specifically recognizing applicants' experiences relative to dealing with people living with a mental illness. This life experience is valuable in the department's quest to hire the highest calibre applicants, and that life experience may come from either professional or personal experiences.

Crisis Intervention and De-escalation

CID training was developed by the Province to ensure that a consistent approach and content is delivered to police officers in BC. CID training is one of the provincially-approved training programs that fulfil the provincial standard on dealing with persons living with mental illness. It is mandatory training for all front line personnel, including supervisors, all police recruits, and all specialized assignment personnel, who are more likely to come into contact with persons living with mental illness. In addition to the training course, there is a triennial recertification requirement, ensuring that all members receive a refresher program and any new information on a regular basis.¹²

The VPD has fully trained all of its front line personnel, and all new recruits graduating from the police academy receive CID training in the academy. The first recertification process started in 2015, and the VPD is now monitoring compliance for those scheduled to complete the recertification, ensuring that this updated training is completed when required.

In addition to the initial CID training and triennial recertification, the VPD delivers practical scenario-based training to operational members through quarterly cycle training days, administered at the Tactical Training Centre. The scenarios involve a full spectrum of police interactions with the public, with actors filling the role of the involved subjects. Many of these scenarios are designed to incorporate

⁹ Eden, D. (2014). Verdict of Coroner's Jury into the death of Reyal Jardine-Douglas, Sylvia Klibingaitis, and Michael Eligon. Found at: <http://www.mcscs.jus.gov.on.ca/stellent/groups/public/@mcscs/@www/@com/documents/webasset/ec167854.pdf>

¹⁰ Iacobucci, F. (2014). *Police Encounters with People in Crisis*. Toronto Police Service. Found at: https://www.torontopolice.on.ca/publications/files/reports/police_encounters_with_people_in_crisis_2014.pdf

¹¹ Vancouver Police Department (2015). *Review of Ontario-based findings from the Iacobucci Review into Police Use-of-force, and the JKE Coroner's Inquest*. A report to the Vancouver Police Board found at: <http://vancouver.ca/police/policeboard/agenda/2015/0716/1507V01-Use-of-Force-and-Mentally-Ill.pdf>

¹² British Columbia Provincial Policing Standards (2015). *Crisis Intervention and De-escalation Training*. Found at <http://www2.gov.bc.ca/assets/gov/law-crime-and-justice/criminal-justice/police/standards/provincial-policing-standards.pdf>

de-escalation techniques, applied in a practical setting. The scenarios are designed to put CID theory into practice, with realistic scenario-based exercises where the successful resolution of the scenario is based on de-escalation and without any use of force by the police officer. In addition, the VPD has drawn on practical experiences learned from police officers in the field, both in Vancouver and elsewhere, and developed training scenarios around these real-life experiences.

De-stigmatization

The stigma attached to mental illness and substance use is often viewed as the biggest barrier to effective change and support for those living with mental illness. The VPD is committed to reducing the stigma of mental illness, and has taken proactive steps, through education and training, to break down these barriers.

The original CIT program introduced the concept of education from people with lived experience, and their inclusion in the design and delivery of the material made significant inroads toward personalizing the issues associated to mental illness. De-stigmatization remains a core focus of the newly mandated CID program. The VPD has further addressed the issues of stigma with the 2015 launch of the *Road to Mental Readiness* (R2MR) program. R2MR is focused on the mental well-being of police officers themselves, and addresses workplace stressors, post-traumatic stress disorder, and peer support. Finally, unfettered access to mental health services for police officers, should they need it, has further served to de-stigmatize mental illness. Opening the minds of police officers to the reality of mental illness in a demanding profession has helped de-stigmatize mental health in the workplace, and generally within the broader community at large.

Further, the VPD had amended its police information check policies and adopted new processes relative to the release of information. Today, an individual's mental-health-related contacts with the police will not be routinely disclosed as a part of that person's request for a police information check. The Department recognizes that these health-related contacts should not stigmatize an individual, and do not define an individual who may be living with mental illness, and the VPD has no role in sharing that information with prospective employers or community/volunteer associations.

TEMPO

In 2010, a learning framework to assist police during their interactions with persons with mental illness was developed by the Mental Health Commission of Canada (MHCC). In 2014, this *TEMPO* framework was revisited and validated by the MHCC, and received national support from the Canadian Association of Chiefs of Police.

TEMPO is not a training tool per se, but an umbrella approach that police organizations can use as a framework to assess their own progress in training, to identify gaps in their existing learning programs, and to use as an aspirational document to create appropriate new learning programs. It is intended to assist

police agencies to make a positive difference and contribute to public safety in regard to police interactions with persons with a mental illness.¹³

The *TEMPO* framework provides a multi-level structure for police training, specific to dealing with persons living with mental illness. Each of the five levels serves to guide the curriculum for specialized training, taking into account different variables for the individual police officers. These variables include length of service and experience dealing with the mentally ill, specialized assignments that may put an officer into contact more frequently with the mentally ill, expert-level training, and specialized curricula to incorporate into use-of-force training.

The VPD is committed to being a leader in policing, and ensuring that its members receive the best training available relative to crisis intervention and de-escalation. To that end, the VPD continues to work with the MHCC and other stakeholders and mental health professional to ensure that the *TEMPO* framework can translate directly to the various types of specialized training that members of the VPD receive.

¹³ Coleman, T. and Cotton, D. (2014). *TEMPO: Police Interactions – A report towards improving between police and people living with mental health problems*. Mental Health Commission of Canada. Found at: <http://www.mentalhealthcommission.ca/English/system/files/private/document/TEMPO%20Police%20Interactions%20082014.pdf>

Conclusion

The *VPD Mental Health Strategy* details the strategic position of the Department, relative to the significant impact that can result from VPD members coming into contact with persons living with mental illness. It is framed around the core values of the VPD and its principles of justification, proportionality, and intrusiveness.

The *Strategy* was developed with valuable input from community stakeholders and mental health professionals, and is designed to provide clear and concise information about the VPD's approach when interacting with persons living with mental illness. It will serve as a framework to support operational deployment, organizational partnerships, training initiatives, and a broader commitment to the community.

Acknowledgements

The VPD has long-recognized that policy and practice cannot be developed in isolation. Extensive consultation was conducted with police resources, subject-matter experts, and the mental health community, in an effort to develop a meaningful policy position that fulfils the objectives of the police department, while recognizing the broader role policing plays in the community at large.

This report was reviewed in draft form by the individuals listed below, who were selected for their diverse perspectives, areas of expertise, and broad representation of academic, government, health, and legal organizations.

The reviewers assessed the objectivity and quality of the report. Their submissions, which will remain confidential, were considered in full by the VPD, and many of their suggestions were incorporated into the report. They were not asked to endorse the strategy, nor did they see the final draft of the report before its release. Responsibility for the final content rests entirely with the author and the VPD.

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MaryClare Zak – Managing Director of Social Policy, City of Vancouver

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Appendix – A: Historical Context

Background

In the late 1970s, the VPD identified a unique demand placed on its members from a segment of the community who were living with mental illness, and frequently coming into contact with the police. In response to this demand, the VPD launched *Car 87* in 1978, a partnership involving a police officer with a mental health professional, whose mandate was to assist those individuals when they came into contact with VPD members, and to build a level of expertise when dealing with such individuals.

Over the years that followed, *Car 87* has been a consistent part of a proactive response in this area, and as demand increased, the VPD increased the number of members assigned to this duty to better service the demand. Presently, there are four police officers assigned to *Car 87*.

In spite of this commitment, demand continued to increase. Persons living with mental illness were coming into contact with the police more frequently, were victimized within the community, and were often involved in criminal behaviour and violent crime. In many cases, these actions were a direct result of their mental illness.

The VPD has always maintained that mental health is primarily the responsibility of health authorities; however, given the nexus to a significant portion of the police workload, the VPD recognized that a multi-agency collaborative response was necessary and pursued an influential role with government and the community to foster change. In 2007, the VPD conducted research into the true picture of mental illness on the workload facing the department, and that led to the first of three reports that identified gaps in service for the mentally ill, and the impact it was having on the police and others in the broader community.

Lost in Transition

In January 2008, the VPD published a report entitled *“Lost in Transition: How a Lack of Capacity in the Mental Health System is Failing Vancouver’s Mentally Ill and Draining Police Resources.”* This report highlights significant gaps in the health care system, and details the overall impact felt by the VPD when dealing with persons living with mental illness who are in crisis.

Lost in Transition provides an analysis of the calls for service where VPD members come into contact with persons living with mental illness. Further, it serves to identify the significant factors that contribute to the frequency of these incidents, and the potential consequences for a mentally ill person who comes into contact with police. Finally, it provides the VPD perspective on capacity gaps in the

mental health system, and how the system is failing persons living with mental illness.¹⁴ This report served as an official position of both the VPD and the Vancouver Police Board. The report garnered significant interest, locally, nationally, and internationally, was a catalyst for improved services, and resulted in an award to the VPD from the BC Schizophrenia Society.

Lost in Transition provided a series of recommendations for health care improvements:

- A mental health care facility that can accommodate moderate to long-term stays for individuals who are chronically mentally ill;
- What has been termed an “Urgent Response Centre” by Vancouver Coastal Health, where individuals can be assessed and triaged according to their needs;
- Increased services for people who are dually diagnosed;
- A continued increase in supportive housing in Vancouver;
- For St. Paul’s Hospital and Vancouver General Hospital to speed up the admission process for police who have arrested an individual under the provisions of the *Mental Health Act* (by negating the need for the emergency physician to initially examine the patient, for example) in the absence of an “Urgent Response Centre,” as detailed above;
- Enhanced ability to gather data on all calls for service that are mental-health-related to facilitate further research on this matter, and to establish benchmarks to track change; and,
- A system, much like PRIME, that has readily accessible details of an individual’s mental health history and addresses privacy concerns, for British Columbia mental health service providers.

Beyond Lost in Transition

In September 2010, the VPD drafted an update report entitled “*Policing Vancouver’s Mentally Ill: The Disturbing Truth – Beyond Lost in Transition.*” This report follows up on the findings of *Lost in Transition*, reaffirms that the police are society’s de facto 24/7 mental health workers, and although some system change occurred over the preceding two years, little had changed from the perspective of the ‘street cop.’¹⁵

This report continued to serve as an official position of both the VPD and the Vancouver Police Board, and provided an updated list of recommendations for health care improvements:

- That the Ministry of Health and Vancouver Coastal Health establish an “Urgent Response Centre,” where individuals can be assessed and triaged according to their needs;
- That the Ministry of Health and Vancouver Coastal Health establish an “Assertive Community Treatment” team model with sufficient capacity to address community based treatment needs, with police as a part of an integrated team;

¹⁴ Wilson-Bates, F. (2008). *Lost in Transition: How a Lack of Capacity in the Mental Health System is Failing Vancouver’s Mentally Ill and Draining Police Resources*. Vancouver Police Department.

¹⁵ Thompson, S. (2010). *Policing Vancouver’s Mentally Ill: The Disturbing Truth – Beyond Lost in Transition*. Vancouver Police Department.

- That Vancouver Coastal Health, St. Paul’s Hospital, Vancouver General Hospital, and the police establish formalized standing bodies with appropriate terms of reference to resolve police-/health-related incidents, and address systemic issues affecting all;
- That Vancouver Coastal Health, St. Paul’s Hospital, Vancouver General Hospital, and the police establish an information-sharing and feedback mechanism so that attending emergency room and psychiatric unit and ward physicians are advised in a timely manner of suicides, suicide attempts, and other critical incidents involving their patients;
- That St. Paul’s Hospital and Vancouver General Hospital speed up the admission process for police who have apprehended an individual under the provisions of the *Mental Health Act* (by negating the need for the emergency physician to initially examine the patient, for example) in the absence of an “Urgent Response Centre,” as detailed above; and,
- That the Ministry of Health makes legislative changes to the *Mental Health Act* to facilitate a speedier health system response and reduce police wait times at hospitals.

Collaboration between the VPD and VCH became more structured following the release of *Beyond Lost in Transition*, and is best highlighted with the 2011 creation of ‘Project LINK,’ a formal partnership between the Boards of the VPD and VCH. Each Board oversees staff responsible for change, and collectively they govern the development of strategies to address all of the recommendations in this report. The overarching objective was to shift from a crisis response model to one that better addresses the existing issues and circumstances related to persons living with mental illness, and prevents individual crises from occurring in the first place.

Vancouver’s Mental Health Crisis

In September 2013, the VPD released an updated report on what it described as Vancouver’s mental health crisis. This report, prepared in collaboration with Vancouver Coastal Health, builds on the two ‘*Lost in Transition*’ reports, acknowledges some of the change with earlier recommendations, and highlights improved collaboration between the VPD, VCH, and Providence Health Care (PHC).¹⁶ Noting an increasing trend where persons living with mental illness were involved in violent and random assaults on innocent persons, the VPD put forward five recommendations to address this problem:

- Add 300 long-term and secure mental health treatment beds;
- More staff and services at BC Housing sites to support tenants with psychiatric issues and a reduced proportion of this type of tenant;
- More significant support through ACT teams for psychiatric patients living in the community, including those residing in market housing;
- An enhanced form of urgent care (crisis centre) that can ensure consistent and expert care of individuals in crisis situations, located at a Vancouver hospital; and,
- The creation of joint VPD-VCH Assertive Outreach Teams for mentally ill persons who do not yet qualify for ACT teams.

¹⁶ Vancouver Police Department (2013). *Vancouver’s Mental Health Crisis: An Update Report*. Found at <http://vancouver.ca/police/assets/pdf/reports-policies/mental-health-crisis.pdf>

Scope of the Problem

Research conducted for *Lost in Transition* shows that the incidence of MHA apprehensions rose by 490% between 1999 (360 incidents) and 2007 (1,743 incidents). The research supported the hypothesis that 31% of all calls-for-service involved at least one individual who was living with mental illness and that illness was a factor in the police involvement in the incident.¹⁷

Since that time, improved measurement tools to track the *mental health factor* associated to police calls has allowed the VPD to further refine this data, and have a clearer picture on the scope of the problem. Between 2012 and 2013, the VPD experienced an 18% increase in MHA apprehensions.

In addition, health care has provided alarming hospital usage data. For example, in 2009/10, SPH had 63,987 visits to their Emergency Department; this included 5,659 visits (9%) for mental health and/or substance abuse reasons. These visits were made by 3,755 individual patients, for an average of 1.51 visits per patient for mental health and/or substance abuse reasons. Gradual increases have been seen every year, and in the most recent year 2014/15, there were 83,364 visits to the Emergency Department – a 30% increase over five years. This figure included 11,035 visits (13%) for mental health and/or substance abuse – a 95% increase. This was comprised of 6,409 individual patients, for an increase of 71% and an increased average of 1.72 visits per patient. VGH has reported similar increases, with a 30% increase in Emergency Department visits for mental health and/or substance use reasons.

Violence and the Mentally Ill

It is important to note that persons living with mental illness are not typically violent. It is only a small subset of this population who demonstrate a propensity towards violent behaviour, generally those with psychosis, often caused by schizophrenia or a related illness.

However, persons living with mental illness are significantly more likely to be a victim of crime. A study of VPD victimization rates where a mental health factor is involved shows that persons living with mental illness are 23 times more likely than the general population to be a victim of crime. More concerning is the fact that they are 15 times more likely to be a victim of violent crime.

For example, in 2013, VPD members were dispatched to 125,785 calls-for-service, and 106,019 resulted in a general occurrence report being written. There were 15,254 calls (15%) involving a person living with mental illness as a suspect or a victim, and where an individual's mental health played a factor in the incident. Of those calls, 1,573 (11%) were for a violent crime (e.g. robbery, assault, sexual assault, etc.). These trends continued over the following two years. In 2014, 14% (15,413) of the 114,677 dispatched calls with a General Occurrence (GO) report written involved a mental health factor, and 9% (1,336) of those were for a violent crime. In 2015, 13% (14,760) of the 118,042 dispatched calls with a GO report written involved a mental health factor, and 7% (1,067) of those were for a violent crime. While violent crime is generally on a downward trend, there is a consistent mental health factor associated to the violent crime that is reported.

¹⁷ Wilson-Bates, F. (2008). *Lost in Transition: How a Lack of Capacity in the Mental Health System is Failing Vancouver's Mentally Ill and Draining Police Resources*. Vancouver Police Department.

Substance Use and the Mentally Ill

It is also important to note that the majority of people living with a mental illness do not generally come into contact with the police. However, the majority of those that do are generally suffering from a concurrent disorder, i.e., they are mentally ill and also engage in substance use and abuse.

Drug induced psychosis is prevalent in cases involving violence or threats of violence and persons living with mental illness. While the police track a *mental health factor* for all calls-for-service, hospitals track substance use in all patients coming into the Emergency Department. Between 2009 and 2014, VGH and SPH collectively reported a 114% increase in the instances of substance misuse with presenting patients.

Data from SPH shows that the drivers of this increase include a 378% increase in amphetamine-induced psychosis and a 300% increase in marijuana-induced psychosis over the last five years. This is attributable to the increased availability and affordability of crystal meth on the street, and an increase in the toxicity of marijuana in recent years.

Drug-induced psychosis creates a unique challenge for police members. While a significant investment has been made in training front line personnel to respond to individuals in a mental health crisis, the complicating factor of a drug-induced psychosis creates additional risk and uncertainty for all involved.

Police Interactions with Persons Living with Mental Illness

The VPD has seen a steady increase in the number of incidents where their members interact with persons living with mental illness. In the majority of these incidents, there is no crime involved. Rather, these calls represent quality of life issues for either the person living with mental illness or the broader community.

In 2012, the VPD made 3,315 apprehensions under the MHA, a 33% increase over the preceding year. Notably, those apprehensions involved 2,313 unique individuals, meaning 1,002 incidents that year involved a person who was apprehended multiple times in the year. In 2013, the number of MHA apprehensions rose by 19%, to 3,928, and in 2014, it increased a further 13%, to 4,426. There were 2,913 unique individuals apprehended in 2014, meaning that 1,513 incidents involved an individual who had already been apprehended by the VPD that year.

In 2015, the VPD experienced a levelling off of the number of Section 28 apprehensions, rising only 1% over the previous year. However, there is an overall increase of 6% in the total number of MHA apprehensions (4,713) due to a notable increase in Form 4 and Form 21 Director's Warrants. This increase in the number of warrants is a positive trend, indicating that clients are receiving more comprehensive attention from health care to meet their unique needs. There is also an overall increase in the number of calls for service involving a mental health factor, regardless of whether an apprehension under the MHA occurs or not.

Appendix – B:

VPD Policies and Procedures

Section 1.6.24(i) - Apprehensions under the *Mental Health Act*

(Effective: 2016.01.19)

POLICY

Apprehensions under Section 28 of the MHA should occur primarily when a member comes into contact with a person who meets the criteria for apprehension under Section 28 of the *Act* and the person has not committed a criminal offence. There may, however, be occasions where members use their discretion to apprehend a person under the MHA where the offence is minor and non-violent in nature.

Members are advised that it is not appropriate to apprehend a person under Section 28 of the *Mental Health Act* (MHA) when the person has committed a serious or violent offence as there are specific NCRMD (Not Criminally Responsible by Reason of Mental Disorder) provisions within the Criminal Code that address this type of situation. ([See training bulletin](#))

PROCEDURE

1. When members come into contact with a person who meets the criteria for apprehension under Section 28 MHA, members shall apprehend the person and ensure that the person is taken to a physician for examination.
2. When a person attempts suicide or is about to attempt suicide, such person shall be apprehended under Section 28 of the MHA and taken to a physician for examination. The member shall accompany the patient to the hospital and provide the hospital staff with a full and detailed report as outlined in subsection 4.
3. Members shall maintain control of the apprehended person until the hospital has assumed responsibility of the person and admitted the person into care.
4. The British Columbia Ambulance Service (BCAS) will normally transport persons apprehended under Section 28 of the MHA. The apprehending member shall:
 - a. Consult with the Ambulance Attendant to determine the most appropriate hospital emergency ward for the person;
 - b. Immediately prepare a G.O. report after the person has been admitted into hospital. Obtain the hospital's fax number and the name of the appropriate contact person (e.g. Mental Health nurse);
 - c. After completing the G.O. report, contact the Information Management Section. Provide the Reviewer with the incident number, the fax number of the hospital, and the name of the hospital contact person. The Reviewer will process the electronic report, make a hard copy and fax the required report to the hospital; and
 - d. Notify the hospital staff when further police action is contemplated.

Persons on Unauthorized Leave from Hospital

5. In the case of patients who have eloped from provincial mental health facilities (Vancouver General Hospital, St. Paul's, UBC, Riverview are the main ones) the following applies:
 - a. If a patient is suspected of having eloped, a query will be made through CPIC. If there is nothing on file, further inquiries may be made directly to the hospital where the person is believed to be a patient on unauthorized leave. If no authority to apprehend can be located, consideration should be given to proceeding under Section 28 MHA;
 - b. If information is received from a provincial mental health facility authority (nurse, doctor, etc.), that a patient detained under the MHA has eloped, then members may:
 - i. if a form 21 Director's warrant has been issued, apprehend and return the patient to the facility (Refer to RPM Section [1.6.24\(ii\): Transportation to Hospital](#)); or
 - ii. where no warrant exists, the patient may be apprehended under Section 41(6) of the MHA, providing the apprehension takes place within 48 hours of the time the patient eloped.
 - c. When members assist in the transport of a patient on unauthorized leave to hospital, they shall advise staff at the hospital of the circumstances so that the hospital is aware that a Medical Certificate is in effect for the patient. A Medical Certificate provides the hospital with authority to prevent the patient from leaving the facility. The hospital then assumes responsibility for the patient.
 - d. Members are reminded that when hospital authorities require assistance of police to keep the peace, members shall provide assistance as appropriate, RPM Section [1.6.19: Hospital Emergency Calls](#).

Section 1.6.24(ii) - Transportation of Persons Apprehended under the *Mental Health Act*

(Effective: 2015.12.29)

POLICY

The police have the authority to apprehend and convey patients to hospital in certain circumstances under the British Columbia *Mental Health Act* (MHA). It is preferable to have the BC Ambulance Service (BCAS) transport the patient when available as mental health is foremost a medical issue; however, there are instances where it is appropriate for members to apply their discretion and convey the patient to a hospital or designated mental health facility in a police vehicle to eliminate waiting time for BCAS.

The decision to transport a person apprehended under the MHA in a police vehicle is a discretionary one for the apprehending members.

Before choosing the option to transport a person apprehended under the MHA in a police vehicle, members must weigh the convenience of doing so with both officer safety considerations and the needs of the apprehended individual. Members should consider that the person, no matter how cooperative at roadside, may become uncooperative after being placed in a police vehicle.

In making an assessment whether to transport an apprehended person in a police vehicle, members should establish that the following criteria exist:

- i. The person is not suffering from any physical, non-mental-health-related medical condition and/or distress that would require that they be seen by BCAS prior to hospital admission;
- ii. There are no significant hygiene or biohazard concerns; and
- iii. There are no apparent officer safety concerns.

All decisions to transport a person apprehended under the MHA in a police vehicle must be documented (including how the person met the above criteria) in the accompanying General Occurrence (GO) report.

The following procedure outlines the options that members have for transporting persons apprehended under the MHA.

PROCEDURE

BC Emergency Health Services

1. When a person has been apprehended under the MHA, it may be in the best interest of the patient to be transported by BCAS, for medical or other reasons. If BCAS requests that a police officer accompany them, a member shall do so.
2. If BCAS refuses to transport a person who has been apprehended under the MHA, members shall call a Supervisor.
3. The Supervisor shall:
 - a. Contact a BCAS Supervisor;
 - b. Advise the BCAS Supervisor that the patient is a person apprehended under the MHA and therefore transportation by the BCAS is more appropriate and is in the best medical interests of the patient; and
 - c. In the event BCAS continues to refuse to transport, the patrol supervisor may consider the transportation alternatives below, and follow up with the Youth Services Section Mental Health Unit for further assistance in resolving the matter.

Transport by Police Car

4. If members determine that it would be appropriate to transport a person whom they have apprehended under the MHA in a police car (not equipped with a partition), the following will apply:
 - a. Members shall notify their supervisor of the intended transport;
 - b. The apprehended person must be handcuffed and searched prior to being placed in the police car, and the police car must be searched by members before and after the transport;
 - c. The person must be placed in the rear passenger-side seat of the police car, with the seatbelt securely fastened;
 - d. The apprehended person must be accompanied by at least one member of the same gender;
 - e. Mileage, and start- and end-times must be provided by the transporting members to dispatch over the radio and the details logged in CAD remarks;
 - f. The destination hospital or designated facility must be contacted via phone by the assigned members to advise that the apprehended person is en route; and
 - g. Police vehicles with firearms stored in the interior vehicle gun rack shall not be used to transport patients. Members deploying with carbine or beanbag shall have apprehended patients transported by ambulance, or in a different police vehicle that is not carrying firearms such as carbine or beanbag.
5. If, at any time during the transport, the members' original assessment changes, whereby the transport in the police car is no longer appropriate (e.g. emergent medical issues, a significant change in the apprehended person's behaviour), they may discontinue the transport and call for BCAS.

Transport by Police Wagon

6. Children and youth under 19 years of age shall not be transported in a police wagon.
7. Police wagons should only be used for transporting persons apprehended under the *Mental Health Act* in exceptional circumstances (e.g., where the patient presents a biohazard concern, or is combative and the wait time for BCAS can make the situation more volatile or be detrimental to the patient).
8. Supervisory approval must be granted prior to transporting via wagon.

9. The assigned members must contact the destination hospital or facility by phone prior to transport, accompany the wagon while en route, and assume custody of the apprehended person upon arrival.
10. The apprehended person shall be placed alone in a compartment and must be transported directly to the destination hospital or facility.

Transport Destinations

11. Members transporting persons apprehended under the MHA should convey them to the nearest Metro Vancouver hospital or to BC Children's Hospital if the person is 16 years of age or under.
12. If feasible, members transporting individuals for whom a Form 21 Director's Warrant or a Form 4 Medical Certificate has been issued should convey them to the originating facility from where the document was issued. If the facility lies outside of the above mentioned geographical area, members should instead transport the apprehended person to the nearest hospital or designated facility, from where further transport will be arranged internally.

Vancouver's Mental Health Crisis: An Update Report

September 13, 2013



VANCOUVER POLICE DEPARTMENT
Beyond the Call

Executive Summary

Over the last decade, mental health related police incidents have steadily increased. In 2007, due to a concern over a spike in suicides and other crisis situations, the VPD conducted a study to determine the extent of the problem. This resulting report is known as *Lost in Transition: How a Lack of Capacity in the Mental Health System is Failing Vancouver's Mentally Ill and Draining Police Resources*. While some progress was initially made, the problem only worsened and in 2010 *Beyond Lost in Transition* was released with five additional recommendations. To date, a large number of these recommendations have been addressed, but several remain outstanding.

Since *Beyond Lost in Transition* was released, the VPD, Vancouver Coastal Health (VCH), and Providence Health Care (PHC) authorities began working in cooperation to improve the quality of life for those suffering from mental illness and to increase public safety. However, further progress cannot be made without additional resources in the health system for the mentally ill.

Recently there has been a worrisome increasing trend in persons exhibiting signs and symptoms of mental illness. Within the past three years, the emergency department at St. Paul's Hospital has seen a 43% increase in individuals with severe mental illness and/or addiction. Similarly, the VPD has experienced a significant increase in the number of section 28 *Mental Health Act* apprehensions. Between 2010 and 2012, section 28 apprehensions have increased by 16%. It is expected that this trend will worsen in 2013 as year-to-date apprehensions have increased by 23%. Furthermore, mental illness is believed to contribute to 21% of incidents handled by VPD officers and 25% of the total time spent on calls where a report is written. Accordingly, the VPD continues to assign more resources to deal with this problem. In the 1990s the VPD only had 1.5 full-time employees assigned to deal with those suffering from mental illness and addiction. However, in 2013, this has increased to more than 17 full-time employees.

In addition to these staggering figures, there have been numerous violent crimes involving mentally ill persons. Since January 2012, the VPD has identified 96 serious incidents ranging from suicides to random violent attacks inflicted upon innocent members of the public. The frequency of these incidents has increased with more than 36 violent incidents occurring in 2013. These incidents include elderly women being stomped in the head, multiple stabbings, and assaults on children as young as three years old. One incident involved an innocent man

being eviscerated in front of a movie theatre. More recently, two innocent bystanders narrowly avoided being killed in a shooting, with one victim being grazed in the head. While the media have only connected a few of the incidents in terms of involving mentally ill suspects, the trend is alarming, and currently poses the greatest risk of an unprovoked attack on citizens living low-risk lifestyles in Vancouver. Furthermore, many perpetrators of the violence are also a danger to themselves and suffer in terms of quality of life. Arrest and prosecution is not the optimal solution for their underlying psychiatric problems.

VPD data indicates that mentally ill persons are at a much greater risk of becoming victims of crime than the general public. An examination of the victimization rates of persons who have been apprehended under the *Mental Health Act* in 2012 has shown that this group is more than 15 times more likely to be the victim of crime when compared to the general public. When specifically looking at instances of violent crime, persons suffering from mental illness are 23 times more likely to be victims than the general public.

In order to reverse this trend, the VPD has five recommendations which will have a large and immediate impact on the mental health system:

- 1) *Add 300 long-term and secure mental health treatment beds.*
- 2) *More staffing at BC Housing sites to support tenants with psychiatric issues and a reduced proportion of this type of tenant.*
- 3) *More significant support through ACT teams for psychiatric patients living in the community, including those residing in market housing.*
- 4) *An enhanced form of urgent care (crisis centre) that can ensure consistent and expert care of individuals in crisis situations, located at a Vancouver hospital.*
- 5) *The creation of joint VPD-VCH Assertive Outreach Teams for mentally ill persons who do not yet qualify for ACT teams.*

Recommendations one through four have been endorsed by the VPD, the Vancouver Coastal Health Authority (VCH), and the City of Vancouver (COV). Without these changes and

additional resources, it can be expected that the situation in Vancouver will only continue to deteriorate, placing more people at risk and further decreasing the quality of life for those who suffer from mental illness.

The VPD is too often responding to emergency calls involving persons experiencing a mental health crisis. Often, the behaviour is criminal which results in the arrest and prosecution of mentally ill offenders. All stakeholders must shift from responding to the crisis to preventing the crisis from occurring in the first place.

Vancouver Police Background in Mental Health

During the first three quarters of 2007, VPD officers began to note an increase in the number of calls for service which involved mentally ill persons. The majority of these calls consisted of what are generally considered public disorder (such as aggressive panhandling, minor property damage, and disturbing behaviour). There were also significant incidents involving violence and a number of suicides. As a response, the VPD Executive assigned then Constable Fiona Wilson-Bates to conduct a study on the prevalence of mental illness in calls attended by the VPD, and to make recommendations as to whether anything could be done to limit the harm to both the public and to those who are mentally ill. This ground-breaking study (later described by *The Vancouver Sun* as the most powerful report to ever come out of the VPD) was titled *Lost in Transition: How a Lack of Capacity in the Mental Health System is Failing Vancouver's Mentally Ill and Draining Police Resources*.

For 16 days in September 2007, patrol officers noted if they believed mental health issues were a factor in the calls they attended. The results of the study indicated that, of the 1,154 calls attended, officers believed 31% involved someone suffering from mental illness. There was variation between Patrol Districts, with the highest percentage of calls in the Downtown East Side. It was estimated that handling these calls required the equivalent of 90 full-time patrol officers over the course of the year. This figure did not include any associated court time or follow-up work conducted by specialty units.

Lost in Transition also identified dangerous service gaps which resulted in tragic outcomes, as in the case of Corey O'Brien. Corey was a talented young man from a good home with a

promising future, but following the onset of schizophrenia he fell onto a path which would ultimately lead to his suicide after numerous contacts with both police and the medical system. As a result of these findings, *Lost in Transition* made the following seven recommendations:

- 1) A mental health care facility that can accommodate moderate to long-term stays for individuals who are chronically mentally ill.
- 2) The creation of what has been termed an “Urgent Response Centre” where individuals can be assessed and triaged according to their needs along with additional resources to support this facility.
- 3) Increased services for people who are dually diagnosed.
- 4) A continued increase in supportive housing.
- 5) For St. Paul’s Hospital and Vancouver General Hospital to speed up the admission process for police who have arrested an individual under the provisions of the *Mental Health Act* (by negating the need for the emergency physician to initially examine the patient, for example).
- 6) Enhanced ability to gather data on all calls for service that are mental health related to facilitate further research on this matter and to establish benchmarks to track changes for police in British Columbia.
- 7) A system, much like PRIME, that has readily accessible details of an individual’s mental health history and addresses privacy concerns, for British Columbia mental health service providers.

Lost in Transition was released in early 2008 and garnered extraordinary local and national media attention and brought additional light to the issues facing the mentally ill in Vancouver. VPD Executive members met with several provincial cabinet ministers, senior VCH staff, and community stakeholders to brief them on the results of the research and seek their support. Within two weeks of the report’s release, the Provincial Government announced the opening of the Burnaby Centre for Mental Health and Addiction (BCMHA), a 100-bed facility offering care to

“dual diagnosed” mentally ill and addicted persons. This facility was opened on July 1 of the same year and quickly had a waitlist of more than 300 people. In 2010, the facility was expanded to contain 40 pre-treatment and 40 post-treatment beds to aid in transitioning people into and out of treatment.

Progress was also made with regard to supportive housing. The COV and the Provincial Government were able to secure funding for approximately 2,850 housing units. Additionally, the Federal Government funded a three-year program (“At Home/Chez-Soi”) to provide 300 housing units for homeless persons struggling with mental health issues. The rationale was that treatment of addiction and mental health issues will be more successful if patients have access to proper housing.

Despite these initial successes, the momentum for change slowed over time and, as such, in early 2010 the VPD began working on a follow-up mental health report. This follow-up report by Inspector Scott Thompson, referred to as *Beyond Lost in Transition*, found that the resources available to properly deal with those who suffer from mental illness were still woefully inadequate. The lack of capacity and resources in the mental health system, combined with a lack of collaboration between the police and health care providers, were seen to be the key barriers to ensuring that mentally ill individuals receive adequate care. Accordingly, the need for collaboration was seen as so important that it was formalized in the VPD’s *2012-2016 Strategic Plan*, with mental health agencies being specifically identified as key stakeholder agencies in the community. Ultimately, *Beyond Lost in Transition* made five new recommendations:

- 1) That the Ministry of Health and VCH establish an Assertive Community Treatment (ACT)¹ team model with sufficient capacity to address community based treatment needs in Vancouver and implement a model similar to the one that exists in Victoria, BC where the Victoria Police Department are part of an integrated team.
- 2) That Vancouver Coastal Health, St. Paul’s Hospital, Vancouver General Hospital and the police establish formalized standing bodies with appropriate terms of reference with police, emergency room, and psychiatric units as well as psychiatric ward medical staff

¹ An ACT team provides care to those who suffer from significant mental illness and substance use disorder and is comprised of various resources including but not limited to medical practitioners, addiction counsellors, and now police to provide an increased level of service.

and management with a mandate to monitor, identify, de-brief and resolve critical incidents and other police/health related incidents as well as systemic issues.

- 3) That Vancouver Coastal Health, St. Paul's Hospital, Vancouver General Hospital establish an information sharing and feedback mechanism so attending Emergency Room and psychiatric unit and ward physicians are advised in a timely manner of suicides, suicide attempts, and other critical incidents involving their patients.
- 4) That the Ministry of Health make legislative changes in the Mental Health Act to facilitate a speedier health system response and reduce police wait times at the hospitals.
- 5) That the Coroner review and consider calling an inquest in all suicide cases where an individual received psychiatric and/or mental health treatment within a 30 day period before their death. (The VPD recognizes that this is a contentious recommendation; however, the inquest is not designed to find fault but rather to determine if improvements can be made to systems in order to prevent future tragedies).

This report, while contentious at first, eventually led the way to a healthy and productive working relationship between the VPD and both VCH and PHC, at both the staff and Board levels. As such, significant progress was made on many of the recommendations from both reports. Appendix A details the progress made on each *Lost in Transition* and *Beyond Lost in Transition* recommendation.

Current Mental Health Initiatives

Both the VPD and VCH recognize that providing care for the mentally ill requires coordination between multiple agencies. Therefore, programs such as Assertive Community Treatment (ACT) and Car 87 are utilized. Furthermore, the VPD is participating with VCH in a number of studies designed to examine common factors between mentally ill individuals who have had numerous police contacts and have been previously apprehended under s. 28 of the *Mental Health Act*. Of note, VPD resources dedicated to addressing issues related to mental illness have increased dramatically. In the 1990s the VPD only had 1.5 full-time employees assigned to deal with those suffering from mental illness and addiction. However, in 2013, this has increased to more than 17 full-time employees.

Car 87

The Car 87 program has been in existence for almost 30 years. Car 87 is a partnership between the VPD and VCH that began in 1984 and was formalized in 1987. If patrol members attend an incident which involves an individual experiencing a mental health crisis, they can call Car 87 which is deployed with one VPD officer and one registered nurse or psychiatric nurse. These resources are able to provide initial care and assessments of individuals having a mental health crisis and can begin to arrange for follow-up care. However, due to the ever increasing number of calls for service involving people experiencing psychiatric emergencies, this service on its own is generally not able to provide extended follow-up beyond initial treatment and referrals. The VPD currently has four full-time officers assigned to Car 87.

Downtown Community Court

The VPD has been a partner of the Downtown Community Court (DCC) since its creation in 2008. The goal of the DCC is to reduce crime and increase public safety by addressing the root causes of criminality, mental health, and substance abuse. Cases are dealt with in a quick and coordinated manner and the ensuing dispositions focus on treatment and rehabilitation. This is enabled by the fact that the DCC only sentences people who are willing to plead guilty and abide by the conditions set out by the court.

Unfortunately, a large number of Vancouver's chronic offenders suffer from mental illness and substance abuse issues. As such, the VPD's Chronic Offender Unit (COU) works closely with both the DCC and a large number of the severely mentally ill in Vancouver. One member of the COU is assigned to work directly with the DCC. Through their work with the DCC, the COU is able to liaise with various partners, including Provincial Crown, to ensure that once sentenced, mentally ill and addicted chronic offenders are able to obtain treatment, which reduces the likelihood of repeat offences.

Project Link

After the release of *Beyond Lost in Transition*, and as a result of discussions between the Vancouver Police Board and the Vancouver Coastal health Board, it became clear that a closer working relationship was required in order to increase public safety and increase the quality of life for those suffering from severe mental illnesses. A letter of understanding was reached between the Vancouver Police Board and the Vancouver Coastal Health Board which underscored the goals of this collaborative relationship. The goals of the partnership fall into

two categories. The first category is *health service, police service, and criminal justice system outcomes*:

- Reduction in non-urgent Emergency Department visits for previously high users with mental health and problematic substance use issues.
- Optimal length of stay in acute care beds.
- Effective and appropriate use of all emergency services such as the BC Ambulance Service, Vancouver Fire and Rescue Service, Saferide, Mental Health Emergency Services, Withdrawal Management, the Vancouver Jail, and hospital Emergency Departments.
- An increase in client access to appropriate community health care through an expansion of service hours.
- An increase in the number of clients engaged and retained in treatment.
- Reduction in the volume of police calls for [mental health] related service.
- Reduction in street and community disorder related to the target population.
- Reduction in the number of mutual clients in the court system.
- Reduction in the number of arrests and incarcerations.
- Reduction in the number of incidents where these vulnerable clients are victimized.

The second category relates to *changes in partnered service delivery*:

- Reduction in the wait times for police in Emergency Departments...to 56 minutes with outlier wait times not to exceed two hours except under exigent circumstances.
- Establishment of formalized standing bodies with appropriate terms of reference with St. Paul's Hospital and Vancouver General Hospital with a mandate to monitor, identify, de-brief and resolve critical incidents, other police/health related incidents as well as systemic issues relating to police wait times and missing hospital patients.
- Development of community based case management model(s) with capacity to address treatment needs in Vancouver while linking the practices of health and policing through the appropriate participation of police officers in access to care.

All of the aforementioned goals are meant to lead to an overall outcome of “improved quality of life for those suffering from mental illness and/or problematic substance use and addiction.” This letter of understanding resulted in a formalized working group called *Project Link*. Shortly after the letter of understanding was signed, PHC was invited to join the committee. *Project Link*

meets regularly and is co-chaired by senior VPD and VCH staff and is the key method of sharing information between the VPD, VCH, and PHC. In addition to regular *Project Link* meetings, starting in 2011, the Vancouver Police Board and Vancouver Coastal Health Board began holding yearly joint board meetings.

In addition to *Project Link*, the VPD participates in a number of committees and working groups that relate to issues surrounding the mentally ill population in Vancouver. Below is a list of the various committees and working groups that the VPD participates in:

- Hospital Wait Time Committee
- BC Alliance on Mental Health and Addiction
- St. Paul's Hospital ED External Review Committee and two working groups which flowed from this committee
- Ministry of Transportation and Infrastructure Committee on Suicide Prevention
- Downtown Community Court Mental Health Committee
- Vancouver General Hospital ED and Psychiatry Patient Flow Committee
- St. Paul's Hospital ED and Psychiatry Patient Flow Committee
- Lower Mainland Mental Health – Police Liaison Committee

Assertive Community Treatment (ACT) Teams

In 2012, the VPD became a member of Vancouver's first ACT team, an interdisciplinary team designed specifically to treat chronic and severely mentally ill individuals who also suffer from addiction and substance abuse issues. An ACT team is comprised of various service providers including psychiatrists, nurses, addiction counsellors, and now the police. The inclusion of police officers in ACT teams was inspired locally by the Victoria Integrated Community Outreach Team (VICOT). It was realized that the police have a significant role to play in the care of the mentally ill in Vancouver due to the fact that officers tend to have daily contact with those who are chronically mentally ill. While VPD officers are by no means mental health practitioners, they are able to observe changes in an individual's baseline state and are often the first point of contact for persons in crisis.

The VPD's role on the ACT team is to assist in the flow of communication to other service providers for ACT clients, as well as to provide assistance when required during field visits to clients. Additionally, the VPD provides police and justice based collateral information and identifies and refers clients who are decompensating, becoming increasingly difficult to manage

in the community, or entering into crisis. For example, a VPD officer on an ACT team may advise a nurse that it is not safe to visit a client alone at a specific building and will accompany that nurse. Moreover, an officer may be contacted by a doctor if a patient has missed numerous appointments. In this case, the officer will be able to check police records and can share whether a patient is currently in police custody and can arrange for treatment.

Currently, there are three ACT teams, with one of two full-time ACT Liaison Officers responsible to all three teams on a daily basis. By all accounts, ACT has been a success: recent analysis of a study cohort of 32 clients revealed a 50% reduction in negative police contacts when compared to one year prior to intake. This study cohort of ACT clients has also had a 23% reduction in victimization and 70% reduction in non-urgent emergency department visits. At present, the ACT teams are almost at full capacity. Given the noted success in reducing negative police contacts and increasing quality of life for the mentally ill, both the VPD and VCH are exploring funding options to expand the program to create additional needed capacity.

Mental Health Unit

In October 2012, the VPD formalized the Mental Health Unit with the mandate to work with VCH and lead the Department's efforts on dealing with the mentally ill in Vancouver. This unit consists of four full-time employees: one sergeant, two constables, and one analyst.

The sergeant in charge of this unit takes the primary liaison role with various key partners who deal with Vancouver's mentally ill population and is involved in many of the various committees and working groups that the VPD participates in. The two constables are assigned to the ACT teams and the analyst provides support in identifying potential ACT clients and monitoring various measures and benchmarks as they relate to targets set through *Project Link* and other committees.

Mental Health Care Team

Care teams in medical settings are groups of people, medical practitioners or not, who have an important role in patient treatment. With regard to VPD inclusion, the most important part of this designation is that all persons on a care team are able to share information regarding a patient without breaching patient confidentiality.

As of 2012, the VPD officers who were embedded in ACT teams were considered part of the care team. In 2013, VCH, PHC, and the VPD agreed that the VPD and the Criminal Justice System are part of the continuum of care for mutual clients who suffer from severe and persistent mental illness and substance abuse disorder. It is agreed by all partners that the police should be considered part of the care team, even for patients who are not being treated by an ACT team. This is an important step forward in achieving the goals of *Project Link*. Much like in the ACT teams, this allows officers who have daily contact with mentally ill persons and recognize their baseline behaviour to discuss treatment with health care practitioners. An example of how this designation (for all VPD officers) aids in the care of mentally ill persons is as follows.

During a shift, an officer may come across a mentally ill individual who is well known to them; however, on this given day the individual appears much more agitated than usual and is darting through traffic in an attempt to hurt himself. When approached by the officer, it is clear that this behaviour is the result of hallucinations. Using the powers granted under s. 28 of the *Mental Health Act*, the officer will apprehend this person and take them to a local hospital. When at the hospital, it appears that this person has not had any previous mental health interventions and thus the doctor is likely not aware of what is a “normal” state for this patient. Prior to being designated a part of the care team, the officer would not have had any legal right to information regarding the patient. Once they have explained the incident to the doctor, the officer’s role in this incident will have ended without the officer knowing when the patient would be released or if the instance was the result of deterioration in mental health that can be expected to continue or due to the use of illicit drugs.

As a member of the care team, doctors are able to share information regarding the patient’s release and their treatment with VPD officers. For example, if a patient is released on medication, the doctors will inform officers that it can be expected that the patient’s condition should improve within the next few days. The benefit to overall patient care is that the officer will likely continue to see this person on a daily basis whereas the doctor may only see the patient once every month or perhaps even less. If this information sharing does not occur, the patient may continue to attempt self-harm or harm others prior to being seen again under a s. 28 apprehension. Not only does this cause a public safety risk, it is also a very inefficient use of public resources as these apprehensions tend to be much more resource intensive than a follow-up appointment with a psychiatrist.

Furthermore, police will be able to obtain information on the person's medical history which greatly increases public and officer safety. In the event of a barricaded suspect, the police will be able to speak to the suspect's psychiatrist or obtain their medical information through resources in Car 87 to determine the best course of action to defuse the situation. This is especially important as some routine police actions (such as the use of flashlights in a certain manner and certain words or names) could act as triggers and may inadvertently agitate a barricaded person who is going through a psychotic episode.

Homeless Outreach Coordinator

With the recognition that the homeless population is inherently at a higher risk of becoming victims of crime due to their vulnerable situation, the VPD has a homeless outreach coordinator who provides assistance to the homeless population. To add to the inherent risk of being homeless, a large number of Vancouver's homeless are placed at further risk as some are also mentally ill and/or drug addicted. The homeless outreach coordinator provides assistance ranging from assistance in filling out BC Housing forms to providing necessities such as blankets and aiding in finding shelter space in times of extreme weather. In addition, this officer also refers those suffering from addiction and mental health issues to service providers to assist them in finding treatment.

Sex Trade Liaison Officer

Survival sex trade workers are arguably one of the most at risk populations in Vancouver due to challenges such as homelessness, mental illness, or addiction. The VPD's sex trade liaison officer stays in contact with Vancouver's sex trade workers and the various outreach organizations which provide support to this group. Much like the homeless outreach coordinator, the sex trade liaison officer directs sex trade workers to various outreach centres and organizations (such as the WISH drop-in centre society) and aids them in gaining access to resources to treat underlying addiction and mental health issues.

Participation on External Reviews

In February 2012, a mentally ill man stabbed an innocent bystander in the chest at a Vancouver coffee shop. This case raised numerous questions since the day prior he had been in both police custody and subsequently cared for by a local Vancouver hospital. Incidentally, the VPD raised concerns about the appropriateness of the hospital release. As a result, the VPD was

invited to participate in this review as it was recognized that the police have a large role in dealing with those who are severely mentally ill.

The external review team, working closely with St. Paul's Hospital, the VPD, VCH, and PHC, made 22 recommendations for improvements to the processes in treating mentally ill patients in the hopes of avoiding a similar incident in the future. Many of these recommendations pointed to the need for additional capacity in various areas of treatment. Specifically, additional acute care and observation beds were called for as well as an expansion of the ACT teams. The review also called for increased information sharing between health care partners and the police due to the frequency of incidents involving the severely mentally ill. St. Paul's Hospital and PHC accepted all 22 recommendations and four working groups were established to research, review, and implement these recommendations.

Mental Health Studies

The VPD, PHC, and VCH have considerable amounts of data regarding the apprehension and treatment of mentally ill persons; however, this data is stored on different systems, which limits general access to the other agencies' information systems. In order to more efficiently use public resources, both the VPD and VCH have begun to enlist the assistance of local universities to examine the data and look for ways to improve the processes being used by both agencies. One such study that is being considered by the UBC School of Law's International Centre for Criminal Law Reform will examine the application of s. 28 apprehensions. This study is planned to commence in the fall of 2013.

A second study is currently being planned to examine the effects of "Welfare Wednesday" on hospital admissions and will suggest potential changes to staffing and processes to minimize the effect of patient surges.

Crisis Intervention and De-Escalation Training

Beginning in 2002, the VPD started training its officers on how to handle situations involving persons undergoing a mental health crisis. The goal of this training was to give officers the tools to de-escalate a situation which has the potential to turn violent or result in a suicide. In 2010, the VPD made this training mandatory for all patrol officers. Two years later in 2012, as per recommendations from the Braidwood Inquiry, training on mental health crisis and de-escalation

became mandatory across BC. To date, more than 650 frontline VPD officers have received this new mandatory training.

Crisis Negotiation Program

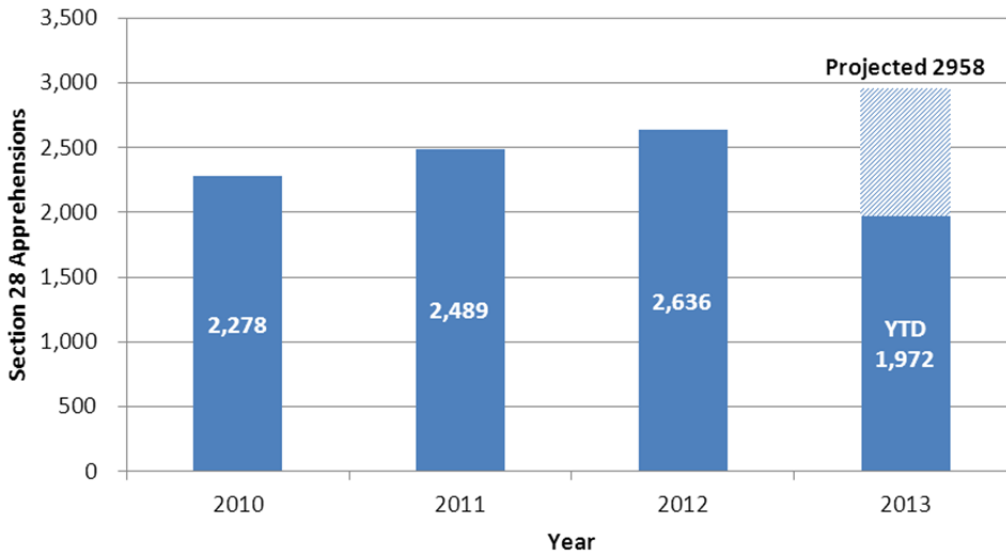
The VPD trains a number of highly skilled negotiators through the Crisis Negotiation Program. This program consists of 21 officers, one full-time negotiator/program coordinator and 20 part-time negotiators who are deployed elsewhere in the VPD but are available during their shifts or are on-call. There are six additional support staff members who handle the equipment and technical requirements for the negotiators. Training for this program consists of an intense two week course followed by a one week recertification course every three years. Additionally, there are six team training days per year.

These highly trained officers are called to situations when patrol officers require additional expertise and assistance. This includes calls such as suicidal persons, barricaded suspects, and emotionally distraught people in crisis. On average, VPD crisis negotiators attend approximately 200 calls per year.

Trends in Mental Health Related Calls and Incidents

Mental health related calls consume considerable police resources in both the volume of these calls as well as the length of time that officers must spend at an incident in the event that the mentally ill person is being apprehended under the *Mental Health Act*. When the *Mental Health Act* is being utilized, considerable health care resources are also being utilized as these patients must be examined by physicians and admitted through the emergency department at local hospitals. Disturbingly, the number of police incidents requiring *Mental Health Act* apprehensions has risen considerably over the past few years. As seen in Figure 1 on the following page, the number of *Mental Health Act* s. 28 apprehensions increased by 9.3% in 2011 and 5.9% in 2012. In 2013, the year-to-date apprehensions have increased by 23%. This is a continuing trend that has become worse over the past decade.

Figure 1 - Section 28 Apprehensions by Year



Following a s. 28 apprehension, doctors can involuntarily commit a patient to a designated facility under s. 22 of the *Mental Health Act* by issuing a Form 4 Medical Certificate when they feel that the patient "... requires care, supervision and control in or through a designated facility to prevent the person's or patient's substantial mental or physical deterioration or for the protection of the person or patient or the protection of others, and...cannot suitably be admitted as a voluntary patient."

Once the patient has been certified and stabilized, they are discharged back into the community where they are monitored and further treated by community based mental health teams or their general practitioner. In the event that the patient decompensates and is at risk of deterioration, they are recalled back to the designated facility through the application of a Director's Warrant under s. 39 *Mental Health Act*, also known as a Form 21 under the *Mental Health Act*. Section 39 reads: "subject to the regulations, the director of a designated facility who recalls a patient under subsection (2), or to which a patient is recalled under subsection (2) as a result of a transfer under s. 35, may issue a warrant in the prescribed form for the patient's apprehension and transportation to the designated facility to which the patient is recalled."

In 2012, there were 3,043 apprehensions (this includes s. 28 apprehensions as well as Form 4 and Form 21 apprehensions) under the *Mental Health Act*. This accounted for more than 21,000 police hours spent on-scene to deal with the incident. These trends are generally

consistent with observations at local hospitals. From 2009 to 2012, St. Paul's Hospital has reported a 43% increase in the number of patients attending their emergency department who suffer from mental illness and/or addiction.

Incidents which result in *Mental Health Act* apprehensions comprise a small number of total police contacts which result from or have mental illness as a significant contributing factor. In November 2012, the VPD began using a PRIME template to systematically track whether mental illness was a contributing factor in incidents attended by police officers. Since then, responding officers have indicated that they believe mental health related issues directly contributed to at least 21% of all incidents attended.

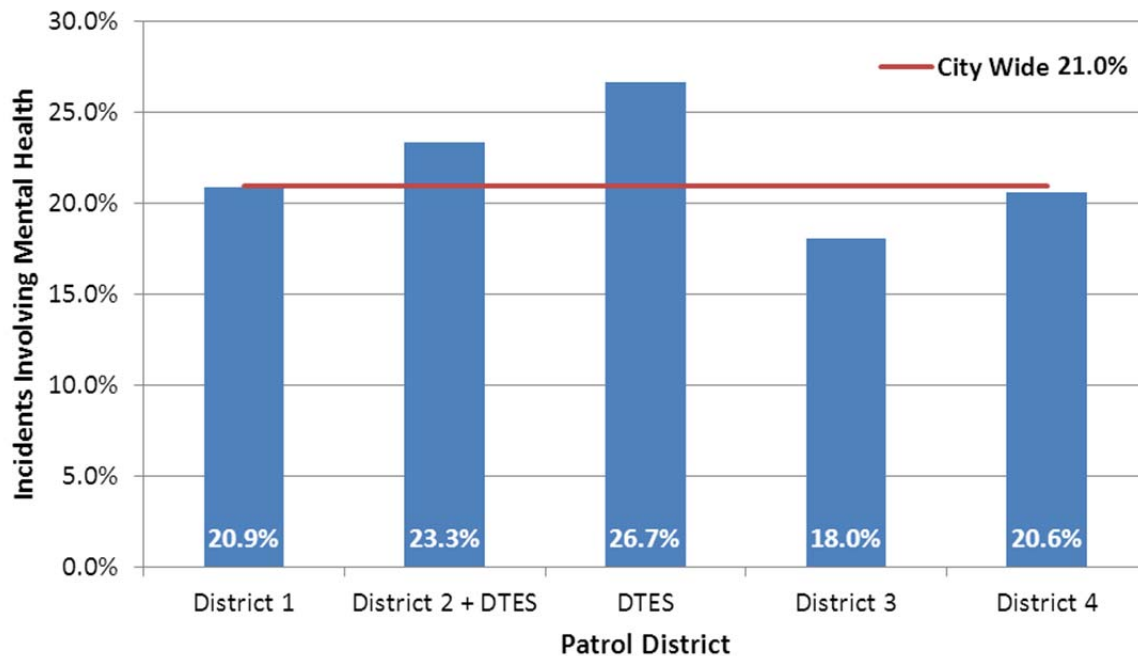
It should be noted that the proportion of incidents where officers believe mental illness to be a factor is lower than noted in the initial *Lost in Transition* study in 2008. However, this is the result of significantly different methodology, not a decrease in incidents involving the mentally ill, especially in the face of the dramatic increases noted in *Mental Health Act* apprehensions and self-reporting from local Vancouver hospitals. The *Lost in Transition* study only collected data over a 16-day period and the overall compliance rate was unknown. The lack of a systematic and reliable method to collect such data was identified in *Lost in Transition* and was reflected in the recommendations, resulting in the current process. The figures being collected since November 2012 have a policy compliance rate of over 99% and provide a more accurate depiction of the extent of police incidents involving mental illness in Vancouver.

The following graph (Figure 2) shows the proportion of mental health related incidents in each Patrol District as well as the city-wide average as indicated by the red line. Vancouver is divided into four Patrol Districts, each responsible for a specified geographical area:

- District 1 – North-West (Downtown Core and West End)
- District 2 – North-East (East Vancouver, north of Broadway – includes the Downtown East Side)
- District 3 – South-East (East Vancouver, south of Broadway)
- District 4 – South-West (West Side of Vancouver up to UBC Endowment Lands)

As can be seen below, mental illness is a contributing factor in 26.7% of incidents in the Downtown East Side. This is well above the city average of 21.0%

Figure 2 - Incidents Involving Mental Illness by District



Impact on Public Safety and Quality of Life

Currently, there are insufficient mental health resources to adequately treat the number of mentally ill persons in Vancouver. The impacts of an overburdened mental health system affect all residents of BC, both those suffering from severe mental illness and those who do not. In recent history there have also been an alarming number of significant – often violent – events involving persons suffering from mental illness. This should come as no surprise given the dramatic increase in s. 28 apprehensions in the last decade; this increase is a leading edge indicator of the number of people in Vancouver with serious mental illnesses. With such a dramatic increase, the percentage of serious, violent incidents can also be expected to have increased, consistent with the current pattern observed.

A number of studies have noted that there is an increased likelihood of violence associated to certain types of severe mental illnesses, such as schizophrenia and bipolar disorder. In 1990, Swanson et al. noted a higher rate of violence for persons suffering from mental illness

compared to those who were not suffering from any mental illness.² Furthermore, it was discovered that multiple diagnoses compound the likelihood of violence. Those who were not diagnosed saw a 2.05% likelihood of committing a violent act within one year, while those with one to three diagnosed mental illnesses saw a likelihood ranging from 6.81% to 22.36%.

An Australian study conducted between 2007 and 2011 also examined the impact of mental disorders and offending rates in a group of patients suffering from psychotic mental illnesses over a ten year period.³ It was found that those who suffered from mental disorders, and were classified as psychotic, had offending rates 3.5 times higher than a general community sample. When looking specifically at violent offences, this rate increased to 4.5 times higher than the general sample. It was also found that people with psychosis were more likely to have contact with the police, and there was a greater instance of police attendance for family violence. Furthermore, when patients who also suffered from substance abuse issues were examined, it was found that almost 50% committed an offence and roughly 20% committed a violent offence.

Since January 2012, the VPD has identified 96 serious incidents ranging from suicides to random violent attacks inflicted upon innocent members of the public. The frequency of these incidents has increased with more than 36 violent incidents occurring in 2013. In one 15-month period, 26 innocent victims were attacked and injured – some very seriously – in 11 separate incidents. The following are synopses of some of the most serious of these incidents.

Recent Critical Incidents

December, 2012

One late December 2012 morning, a mentally ill man ran up to an elderly woman and without provocation kicked her once in the head. After she fell, he proceeded to repeatedly stomp and kick her in the head and face. He ran away from the scene where he encountered another elderly woman and assaulted her. Again, this unprovoked assault resulted in the woman being stomped and kicked in the head and face once she was knocked to the ground. A third assault occurred in a similar manner, where another elderly woman was punched in the head and while

² Swanson J.W., Holzer C.E., Ganju V.K., Jono R.T. (1990). Violence and psychiatric disorder in the community: evidence from the epidemiologic catchment area surveys. *Hospital and Community Psychiatry*. 41(7), 761-770.

³ Short T., Thomas S.D.M., Luebbbers S., Mullen P.E., and Ogloff J.R.P.. Brief research report 5a: Criminal offending and victimisation in severe mental illness. Retrieved from: <http://www.med.monash.edu.au/psych/research/centres/cfbs/download/5a.pdf>

on the ground was kicked and stomped in the head. After the third assault, the suspect kicked in the window of a car after threatening the occupants (stating that he had a gun). The glass from the window got into the eye of one of the occupants. Shortly after, the suspect was arrested by the VPD.

The suspect had one documented PRIME entry in BC prior to this incident. Two days prior to this incident, he called for an ambulance due to a schizophrenic episode and was transported to hospital voluntarily but was released shortly afterwards.

January, 2013

One afternoon in early 2013, Vancouver Fire and Rescue Services responded to a fire alarm at a Vancouver high rise. Upon arrival they noticed that several standpipes used by firefighters were opened and that a large amount of water was flowing through the building. When they reached the floor where the fire alarm was pulled, they found the suspect standing with a fire extinguisher. He stated that he put out a fire and was ensuring that the building was safe. The VPD was then called to investigate the scene as a mischief; however, the suspect had already fled. He was later found in the laundry room of a different building in a disturbed mental state and was aggressive with police.

The total damage to the building was in the hundreds of thousands of dollars. Prior to this event, the suspect had one documented PRIME entry for a fare evasion.

January, 2013

One evening in early 2013, the suspect smoked marijuana in his suite in a West End apartment while on prescription medication. He assaulted his first victim in his suite. During this attack she sustained life altering injuries. The suspect went on to assault two neighbors by stabbing and slashing them with a knife. One of these victims received a slash to the throat. He then attacked three more victims with a hammer in the lobby of the building. The suspect used the hammer once more to attack the seventh and final victim in the victim's suite. While being arrested, the suspect assaulted a VPD member.

The suspect is a foreign national with no PRIME history other than three traffic citations issued towards the end of 2011; however, he had been admitted to and discharged from hospital for suicidal ideation within days of this incident.

February, 2013

One late evening in February 2013, the suspect was walking in Downtown Vancouver and encountered his first victim. Without any provocation the suspect stabbed the man in the neck with a folding knife. He walked away from the scene of the stabbing and encountered his second victim who was walking his dog. The suspect approached the victim from behind and without warning stabbed him in the back and then a second time in the stomach. The injury to the victim's stomach was so significant it resulted in internal organs being visible to responding officers and the victim immediately went into surgery upon arrival at the hospital. Once again, the suspect proceeded to walk away from the scene. Further down the road, the suspect encountered yet another victim and, again without provocation, attacked her by attempting to stab her in the face. The final victim was able to defend herself; however, she received a large cut to her hand. At this point the suspect dropped the knife and proceeded to walk along the street where he arrested by the VPD shortly after.

At the time of the attacks, the suspect had 47 PRIME entries including ten *Mental Health Act* related calls.

March, 2013

The victim, a 30-year-old woman, was paying for cigarettes at the counter of a convenience store. The suspect suddenly attacked the victim from behind with a knife, stabbing her in the neck causing a near-fatal injury. The attack was so violent that the blade of the knife broke off inside the victim. He was tackled by another patron and held until police arrived at the scene. The victim required emergency surgery but survived the attack. The entire incident was captured on the store's CCTV system and shows the sudden unprovoked savagery of the attack.

The suspect is a diagnosed schizophrenic who was collecting disability payments due to his mental illness. In December 2012, the suspect completed a sentence for a 2008 aggravated assault. However, upon the end of his sentence, treatment for his mental illness ended and he ceased taking his medication. Prior to his 2008 conviction, he had one previous PRIME entry.

March, 2013

The victim was a three-year-old child at a Vancouver library amongst a group of children being read stories. The suspect approached the child, who was seated in the children's area, and

struck the child in the face with a book, knocking her off her chair. He then proceeded to threaten the young woman who was reading to the children, stating, "I'm going to kill you...I can just strangle you right now." After making these threats, he finally left upon being confronted by numerous others within the library. When arrested he admitted to the assault and it was evident he suffered from significant mental health issues.

The suspect has 24 documented incidents in PRIME and it was noted that his aggression level increased as threats began turning into assaults.

May, 2013

The victim was standing on the sidewalk when the suspect approached him and began speaking incoherently. At this point the suspect, without warning or provocation, assaulted the victim by repeatedly punching and kicking him in the head. The victim was not able to defend himself. Witnesses were able to pull the suspect off the victim.

The suspect was noted to have more than 260 documented police contacts at the time of the incident. In 21 instances, he was noted to have suffered from a severe mental illness with no offence committed.

May, 2013

As a mother and her five-year-old daughter were walking down the street one early evening in May 2013, the suspect approached them. Without provocation the suspect began yelling and swearing at the five-year-old then suddenly grabbed the child by the hair. The suspect proceeded to drag and swing the child around the sidewalk by her hair. The mother was able to free her daughter and used her own body to protect her from a further attack. At this point the suspect pushed both victims to the ground and kicked the mother multiple times. The mother was left with serious swelling, bruising, and abrasions to her face.

Upon arrest, the suspect told officers that more children would be hurt as a result of her actions. In the year and a half prior to this assault, the suspect had 25 documented police incidents with seven resulting in s. 28 apprehensions.

July, 2013

The suspect exited his car and approached two males leaving a comedy show. He pulled out a handgun and aimed at their heads, firing twice. One victim narrowly escaped death as he was grazed in the head by the bullet; the second victim was missed entirely. The suspect then shot himself in the head and shortly after passed away in hospital.

According to preliminary information, the suspect has a family history of schizophrenia. The family claims to have asked for his committal to a treatment facility only to have been refused three times in the previous month. Earlier that day it appears that the suspect visited his psychiatrist who concluded that his condition and outlook was improving. The suspect had 28 PRIME entries with one documented *Mental Health Act* apprehension

July, 2013

Members of the VPD were approached by a member of the public who informed them that a woman had just given birth to a child in a park. As members approached the woman, they observed her holding a newborn while giving birth to a second child. She was gripping both babies by their heads and necks and told police to leave and to not touch her or her babies when they attempted to get her medical attention. The woman attempted to walk away from the police and other emergency personnel. The members feared for the well-being of the children and apprehended her under s. 28 of the *Mental Health Act*. It was a chaotic scene in which the woman was clearly in a psychotic state and police officers had to struggle with her to save the children. In the course of doing so they became covered with her various bodily fluids. When the children were taken to the hospital it was noted that they sustained injuries by being gripped so tightly on their heads.

The woman had ten previous negative PRIME entries with two resulting in *Mental Health Act* apprehensions.

Increased Victimization

Those suffering from mental illnesses are not simply perpetrators of violence upon unsuspecting victims. Due to their mental illness, and in many cases substance abuse or addiction issues, they themselves are often placed into an increased state of vulnerability.

VPD data indicates that mentally ill persons are at a much greater risk of becoming victims of crime than the general public. An examination of the victimization rates of persons who have been apprehended under the *Mental Health Act* in 2012 has shown that this group is 15.2 times as likely to be the victim of crime in that same year. These same individuals are 13.5 times as likely to be victims of property crime and are 23.2 times more likely to be victims of violent crime. This represents a significant quality of life issue that cannot be ignored.

This finding is consistent with academic literature which notes that people who suffer from mental illness are more likely to be victims of crime due to their vulnerable nature and the associated problems such as drug addiction and living in more crime prone areas.

In the United Kingdom, Walsh et al. (2003)⁴ found that 16% of outpatients with psychosis reported being violently victimized within the previous year. By comparison, the British Crime Survey revealed that inner cities at that time had an annual contact crime victimization rate of 7.1%.

In North Carolina, Hiday et al. (2002)⁵ found that 9.9% of involuntarily admitted patients with severe mental illness reported suffering violent victimization within one year after being released from hospital. By comparison, the national violent victimization rate reported by the U.S. Bureau of Justice Statistics at that time was 3.1%.

A third study in Chicago, Teplin et al. (2005)⁶ found that 25.3% of patients with several mental illnesses living in the community were victims of a violent crime within a one-year period. By comparison, the violent victimization rate measured by the U.S. National Crime Victimization Survey was 2.8%.

Teplin et al. also noted that, “symptoms associated with severe mental illness, such as impaired reality testing, disorganized thought process, impulsivity, and poor planning and problem solving, can compromise one’s ability to perceive risks and protect oneself.”

⁴ Walsh, E. et al. (2003). Prevalence of Violent Victimization in Severe Mental Illness. *British Journal of Psychiatry*, 183, 233-238.

⁵ Hiday, V.A. et al. (2002). Impact of Outpatient Commitment on Victimization of People with Severe Mental Illness. *American Journal of Psychiatry*, 159, 1403-1411.

⁶ Teplin, L.A. et al. (2005). Crime Victimization in Adults With Severe Mental Illness. *Archives of General Psychiatry*, 62(8), 911-921.

Current Critical Issues

Despite the fact some progress has been made in improving mental health care since the initial *Lost in Transition* report was released, there are still considerable service gaps. This is evident in the ever increasing number of apprehensions under the *Mental Health Act* and serious incidents involving grievous bodily harm, both to mentally ill persons as a result of their own actions, and to innocent parties who have been victimized by unprovoked attacks. The following are the main issues which require immediate attention and are expected to have the largest impact on public safety and the quality of life for those who are severely mentally ill.

System Capacity

Within Vancouver, there are insufficient resources to treat those with significant mental health issues. This extends from a lack of acute care beds in hospital emergency departments to tertiary care beds for those who are chronically mentally ill and are not able to function without supervised medical care.

Intake and Acute care Beds

When patients suffer a psychiatric emergency, they are usually brought to a hospital's emergency department and placed in a secure area of the hospital for observation. These beds are usually separated from the emergency department in order to aid in calming those in an agitated state. However, at St. Paul's Hospital, which due to the proximity to the Downtown Eastside sees the majority (60%) of the psychiatric emergencies in Vancouver, there are only four observation beds. When these beds are at capacity, patients experiencing a psychiatric emergency are left in the emergency department. St. Paul's Hospital has an additional 13 beds in its Psychiatric Assessment Unit which are generally reserved for acute care with patient stays averaging three to four days; however, these beds are often used for overflow when the observation beds are all in use.

A dedicated crisis centre facility would aid in the treatment of those suffering from psychiatric emergencies. A psychiatric specialist would be the initial contact point, rather than an emergency physician who may not have the expertise to diagnose mental illnesses. It should be noted that it would be best if this facility was attached to an existing medical facility as the resources available in a major hospital would assist in the assessment and care of mental

patients. Furthermore, it is not uncommon that patients undergoing a psychiatric emergency are also suffering from medical emergencies.

This facility would also aid in reducing the number of critical incidents within hospitals as patients would be seen more quickly and would not be placed in a busy emergency department. This would avoid situations where patients with medical emergencies inadvertently agitate someone who has already demonstrated behaviour which poses a risk to themselves or others.

Tertiary and Long-Term Care

Tertiary care beds are generally used for patients who cannot be treated or cannot function in the community in their current state. Patients requiring tertiary care will usually be those suffering from multiple mental illnesses, drug addiction, or substance abuse issues. For example, tertiary beds are used when standard prescription medications are not functioning as expected and the patient requires observation to determine the most appropriate prescription and dosage. Ultimately, patients that require tertiary care are also likely to require long-term care.

When still open, the facility at Riverview was home to a large number of tertiary care beds. Currently, the BCMHA and Willow Pavilion at Vancouver General Hospital are the only local facilities with a significant number of tertiary care beds. Smaller facilities such as Venture, Trout Lake Tertiary, and UBC have a small number of tertiary care beds on-site. The BCMHA has 100 treatment beds with 40 pre-treatment and 40 post-treatment beds. Much like the BCMHA, the Willow Pavilion is also at capacity. It is estimated that there is demand for approximately 300 tertiary care beds in Vancouver. This is far fewer than the maximum number of beds at Riverview at its peak capacity, but is estimated to be sufficient for the most seriously mentally ill. While many individuals suffering from serious mental health issues were never in Riverview (i.e. they weren't deinstitutionalized), they were indirectly affected by this trend in that they likely would have been institutionalized in earlier decades. The increase in serious, violent offences committed by the mentally ill can be partially attributed to the reduction of secure care beds, as these are the same dangerous individuals who would have been institutionalized and would not have posed a risk to the public or themselves.

The objective moving forward must be to ensure that there are sufficient secure beds, but not to “over-institutionalize” those who do not require secure care. It is believed that 300 additional beds would meet this goal.

Resources in Supportive Housing

Beginning in 2010, the federally funded *At Home/Chez-Soi* project began housing persons who were homeless and mentally ill, and in many cases also suffering from addiction and substance abuse issues. This was one of five study groups to determine the best manner to treat the homeless and severely mentally ill. The study that was run out of the Bosman Hotel, at 1060 Howe Street, is known as the congregate treatment model. Congregate treatment consists of housing and treating a large number of mentally ill individuals at the same location. As this was a treatment program, the premises contained on site medical care in the form of a nurse, a psychiatrist, and a pharmacy.

In March 2013, three years of federal funding for housing at the Bosman ceased, and the results of the congregate housing model have been mixed. Some mental health professionals have criticized the concentration of persons suffering from the same type of mental illness at the residences. For example, when multiple patients suffering from paranoid delusions are housed in the same building it creates a situation where a calm environment is difficult to achieve, thereby making treatment difficult and exacerbating the illness.

The other study groups consisted of Coast ICM (an intensive case management model); Raincity ACT (known as a scatter site model as clients are housed together in relatively small numbers in a market housing environment); a control group which received no additional support other than what was present in the current health care system; and a fifth group that refused to receive any treatment at all.

Currently, the COV and the Province of BC are increasing the amount of subsidized housing units for those suffering from mental illness. However, these buildings do not have on-site medical staff and as of late there has been a marked increase in crime and disturbances in the area surrounding two of these buildings. Learning from the experience at the Bosman, these facilities should be staffed with mental health practitioners who are able to provide psychiatric treatment.

ACT Team Capacity

The ACT teams have seen great success in reducing the number of negative police contacts thereby increasing public safety and improving the quality of life for those suffering from a mental illness. Moreover, the teams have received support and praise from various stakeholders and mental health professionals. Currently, two of the three Vancouver teams are at capacity and one is at half capacity. It is estimated that there is demand for up to seven more teams within Vancouver alone, which would bring the total to ten teams.

The greatest challenge facing all partner agencies participating in ACT is a lack of resources to provide the staff required for more teams, as the cost for each team is approximately \$2 million per year. However, these teams are a very efficient use of public funds as these teams reduce the amount of additional resources (such as police, health care, and the criminal justice system) which are required to deal with mental health emergencies and public safety issues, including criminal actions.

Pre-ACT Team Intervention

When mentally ill persons come into contact with the VPD, the initial contact point to proactively assist them in obtaining mental health treatment will come in the form of Car 87 resources. These resources are able to set up initial meetings with local community mental health teams. However, due to the high workload, this partnership of a nurse and police officer is unable to provide follow-up assistance.

Aside from contact with patrol members in the event of *Mental Health Act* apprehensions, the second contact point for treatment will generally be when a person has deteriorated to the point where they will qualify to be an ACT team client. By this time, the client will have usually demonstrated that they suffer from a severe mental illness and will have developed significant addiction or substance abuse issues. At this point, ACT is a reactive strategy for those who are at the last stage before they require long-term care in a secure facility.

Between these two contact points mentally ill persons have mental health services available. While the current services work for a large number of those suffering from mental illnesses, there is still a sizeable population which will continue to deteriorate and become ACT clients or require long-term care in a secure facility. This group will likely be contacted by community

health teams but will prove difficult to deal with. These individuals will likely stop taking medication and their condition will worsen. When community health teams come to their homes, they will likely not answer their door or phone, or they will be verbally abusive. After three failed attempts at communication, community health teams will close these files as their ability to treat these patients is limited by their resources and training. For example, if a patient is verbally or physically abusive, these teams do not have the training and equipment to ensure their own safety.

A partnership of a nurse and police officer would allow medical staff to treat patients who may react aggressively if they cease taking their medication and do not have routine monitoring. As this partnership would include a medical professional, it would also be possible to administer medication in the event the patient has lost or thrown away their current dosage.

This gap in services presents an opportunity to be proactive in responding to public safety and quality of life issues as opposed to being reactive, which is in line with Sir Robert Peel's first principle of policing, which is the main goal of police is to prevent crime and disorder.

Recommendations

Upon consultation with stakeholders, the VPD has five recommendations, which, if implemented, will aid in increasing public safety and improving the quality of life for those suffering from mental illness.

- 1) Add 300 long-term and secure mental health treatment beds.*

It is currently estimated that there are approximately 300 mentally ill persons who pose a serious threat to themselves or others and require long-term care in a secure facility.

- 2) More staffing at BC Housing sites to support tenants with psychiatric issues and a reduced proportion of this type of tenant.*

While progress is being made in reducing the level of street homelessness in Vancouver, the sites in which a large number of mentally ill are housed do not have adequate on-site psychiatric support. This lack of support is further compounded by housing patients with similar mental

health issues in the same building. As a result, these tenants' mental health issues are not improving and in some circumstances are actually deteriorating further. Initial estimates put the yearly cost at \$400,000 per site.

- 3) *More significant support through ACT teams for psychiatric patients living in the community, including those residing in market housing.*

The success of the ACT teams has been noted by the VPD, VCH, and the external review team which conducted the 2012 review into mental health issues at the emergency department at St. Paul's Hospital. Internal VPD data shows that an ACT study cohort of 32 clients have had a 50% reduction in negative police contacts when compared to their police history prior to joining the team. Moreover, VCH has noted a 70% reduction in non-urgent emergency department visits. The cost per team is approximately \$2 million per year.

- 4) *An enhanced form of urgent care (crisis centre) that can ensure consistent and expert care of individuals in crisis situations, located at a Vancouver hospital.*

This facility would serve as the primary intake for persons suffering psychiatric emergencies and would be built to primarily serve this function. Hospital emergency departments are primarily designed to deal with medical emergencies and do not function well when providing emergency psychiatric treatment. It should be noted that this facility would need to be attached to a medical facility as all patients still require medical clearance and it is not uncommon for patients to also experience concurrent medical issues.

- 5) *The creation of joint VPD-VCH Assertive Outreach Teams for mentally ill persons who do not yet qualify for ACT teams.*

The creation of a treatment model which partners one police officer with one nurse will allow for a large number of patients to be seen within a day and will limit the number of mentally ill persons whose condition continues to worsen to the point they become an ACT client. In addition to improving the quality of life for these mentally ill persons, public safety will also be improved as it is not uncommon for ACT clients to be involved in violent incidents prior to referral to an ACT team.

Conclusion

In the late 1990s, Vancouver's Downtown Eastside faced a public health crisis due to a spike in HIV/AIDS infections and drug overdoses. Effective collaboration between different levels of government and health authorities resulted in steady progress and has saved hundreds of lives.

The current situation regarding untreated, severely mentally ill people is on par with, if not more serious than, what Vancouver faced over a decade ago. The “public health crisis” is now a “mental health crisis”. Many seriously mentally ill people are receiving inadequate care, sometimes with tragic consequences, and have a low quality of life. Furthermore, the number of unprovoked, violent attacks by mentally ill persons on innocent members of the public is alarming.

The VPD is responding to too many emergency calls involving persons experiencing a mental health crisis. Often, the behaviour is criminal which results in the arrest and prosecution of mentally ill offenders. While the VPD and health service providers are doing as much as they can with the resources available, these current resources are not enough to reverse the troubling trend that has been continuing for more than a decade. Stakeholders and service providers must shift from responding to the crisis to preventing the crisis from occurring in the first place.

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Appendix A

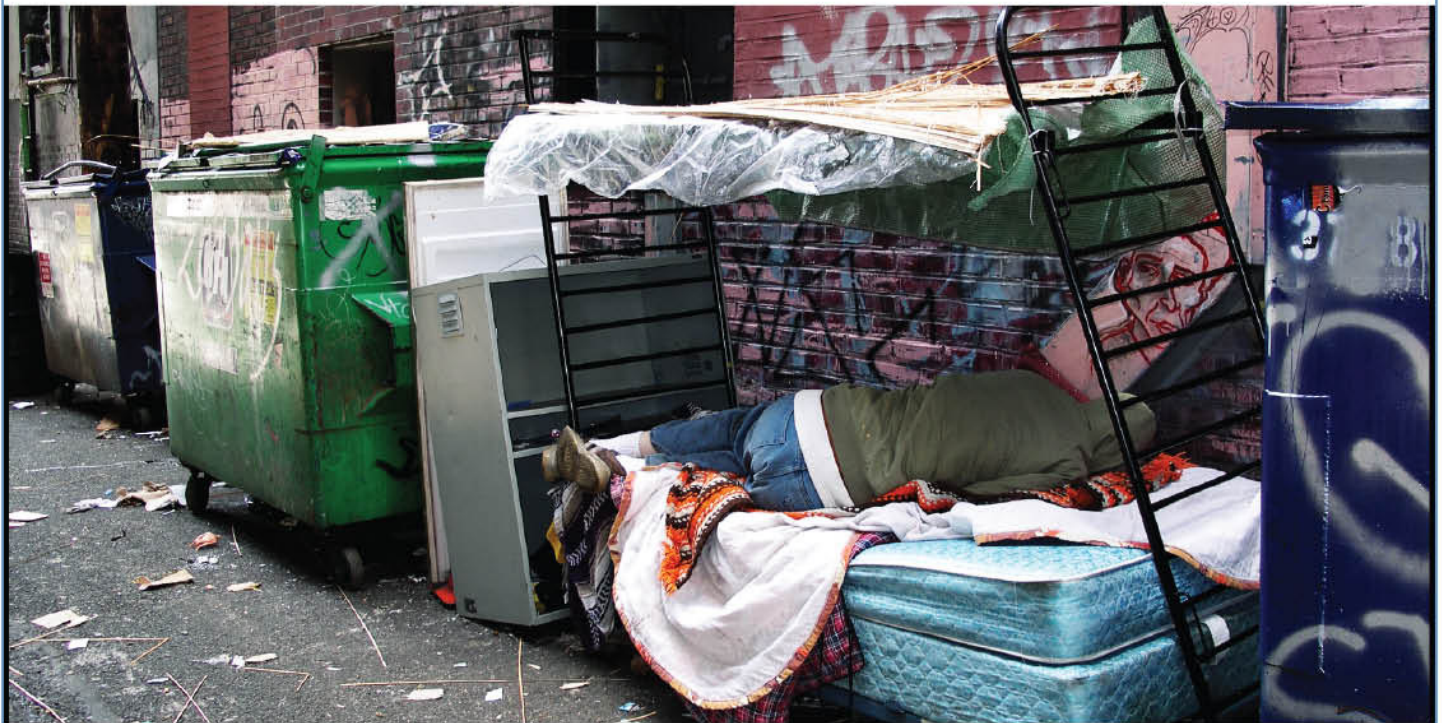
Lost in Transition Recommendations	
Recommendation	Status
A mental health care facility that can accommodate moderate to long term stays for individuals who are chronically mentally ill.	Little progress has been made. Demand for services still greatly outnumbers the capacity.
The creation of what has been termed an “Urgent Response Centre” where individuals can be assessed and triaged according to their needs along with additional resources to support this facility.	This facility has not yet been created.
Increased services for people who are dually diagnosed.	Progress has been made in the form of the Burnaby Centre for Mental Health and Addiction; however, there is still much greater demand than capacity.
A continued increase in supportive housing.	While supportive housing is being created, these buildings require on-site medical staff.
For St. Paul’s Hospital and Vancouver General Hospital to speed up the admission process for police who have arrested an individual under the provisions of the <i>Mental Health Act</i> (by negating the need for the emergency physician to initially examine the patient, for example).	Continual progress is being made through the continued efforts of local health authorities and hospital administrators.
Enhanced ability to gather data on all calls for service that are mental health related to facilitate further research on this matter and to establish benchmarks to track changes for police in British Columbia.	Data is gathered and analysed on a regular basis. This information is reported at <i>Project Link</i> meetings.
A system, much like PRIME, that has readily accessible details of an individual’s mental health history and addresses privacy concerns, for British Columbia mental health service providers.	Progress is being made on this recommendation.

Beyond Lost in Transition Recommendations	
Recommendation	Status
That the ministry of Health and Vancouver Coastal Health establish an Assertive Community Treatment (ACT) team model with sufficient capacity to address community based treatment needs in Vancouver and implement a model similar to the one that exists in Victoria, BC where the Victoria Police Department are part of an integrated team.	ACT teams have been implemented with police participation and they have been very successful. However, there is a need for additional ACT teams as demand greatly outnumbers the current capacity.

<p>That Vancouver Coastal Health, St. Paul's Hospital, Vancouver General Hospital and the police establish formalized standing bodies with appropriate terms of reference with police, emergency room, and psychiatric units as well as psychiatric ward medical staff and management with a mandate to monitor, identify, debrief and resolve critical incidents and other police/health related incidents as well as systemic issues.</p>	<p>This has been completed and regular meetings occur.</p>
<p>That Vancouver Coastal Health, St. Paul's Hospital, Vancouver General Hospital establish an information sharing and feedback mechanism so attending Emergency Room and psychiatric unit and ward physicians are advised in a timely manner of suicides, suicide attempts, and other critical incidents involving their patients.</p>	<p>Progress has been made with continual improvements occurring.</p>
<p>That the Ministry of Health make legislative changes in the Mental Health Act to facilitate a speedier health system response and reduce police wait times at the hospitals.</p>	<p>Discussions have occurred; however, in order to implement this recommendation, legislative changes are required.</p>
<p>That the Coroner review and consider calling an inquest in all suicide cases where an individual received psychiatric and/or mental health treatment within a 30 day period before their death. (The VPD recognizes that this is a contentious recommendation; however, the inquest is not designed to find fault but rather to find if improvements can be made to systems in order to prevent future tragedies).</p>	<p>Little progress has been made towards completing this recommendation; however, an external review has occurred in one case where a patient attempted to murder a bystander.</p>

PROJECT LOCKSTEP

A UNITED EFFORT TO SAVE LIVES IN THE DOWNTOWN EASTSIDE



FEBRUARY 4, 2009



VANCOUVER POLICE DEPARTMENT
Beyond the Call

ACKNOWLEDGEMENTS

This report has benefitted greatly from the contributions of numerous individuals. Mayor Gregor Robertson and the members of the Vancouver Police Board, the staff of the City of Vancouver's Social Planning Department in particular must be thanked for sharing their insight into the problems experienced by those living in the Downtown Eastside, providing historical documents outlining the City's efforts to improve the quality of life in the area, and reviewing several versions of this report. In addition, thanks must be given to Vancouver Councillors George Chow and Kerry Jang, Vancouver City Manager Penny Ballem, General Manager of Community Services Group David McLellan, former Manager of Community Services Group Jacquie Forbes-Roberts and Director of the Schizophrenia Program at the University of BC Dr. William McEwan and to Ministers Rich Coleman and John van Dongen and their staff. Thanks are also due to all those within the Vancouver Police Department (VPD) and the Province of British Columbia who supported this endeavour. However, it should be said that the opinions expressed within this report reflect the views of the VPD and do not necessarily reflect the views of any other agency or individuals within.

REPORT HIGHLIGHTS

- ❖ The lives of many of the people residing in Vancouver’s Downtown Eastside (DTES) are negatively affected by mental health issues, illicit and licit substance abuse, drug trafficking, alcoholism, physical health issues like HIV and Hepatitis C infections, substandard and insufficient housing, illegitimate businesses, crime and public disorder, an entrenched survival sex trade, and a historical reduction in police presence. There is a disproportionately high number of aboriginal people affected. These problems, crime and public disorder in particular, harm surrounding Vancouver neighbourhoods, the metro region, and the Province of BC.
- ❖ There have been major efforts to improve the DTES. There have also been deliberate and unintended policies and changes that have played significant roles in the continuation and/or worsening of the problems that are concentrated in the area.
- ❖ Typically, social, medical, police, and other services in the area have been delivered using a discipline-based approach where agencies focus on their own area of mandate and expertise.
- ❖ A change to an integrated client-based service delivery model will utilize existing agency resources more effectively.
- ❖ Interventions need to target those most in need of help and those people “living on the edge” who are in danger of a serious downturn without intervention.
- ❖ An improvement in the DTES requires that the most marginalized and vulnerable people get the assistance they require. This is a necessary condition for other neighbourhood improvement initiatives to succeed.
- ❖ This study proposes a leadership model in the form of a high level Steering Committee comprised of senior City and Provincial stakeholders. The Steering Committee would employ a “Director for the Most Vulnerable” who has the authority to:
 - establish intervention strategies,
 - provide meaningful direction,
 - hold service agencies accountable, and
 - coordinate information sharing and cooperation.

- ❖ The Director would report back to the Steering Committee regarding successes and failures both in terms of increasing collaboration as well as the specific strategies used.
- ❖ Success should be measured on the basis of outcomes rather than activity. Baseline metrics should be established and improvements should be quantifiable and focused on improving the lives of the most vulnerable.
- ❖ The Steering Committee should facilitate an information sharing process between agencies, including the Vancouver Police Department, to identify those individuals who are most in need and then work to improve the lives of those individuals by reducing or removing the barriers to success.
- ❖ Collaboration between public, private and philanthropic service providers is essential. By utilizing existing agency resources more collaboratively, the need for increasing funding can potentially be reduced. This proposal emphasizes that existing resources should be realigned into an integrated and collaborative model with central control.
- ❖ With appropriate prioritization and action, the lives of the vulnerable in the DTES can be improved and a positive “ripple effect” can be achieved in surrounding communities, and the rest of the Province through the reduction of crime, public disorder and improvements in the health crisis.

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EXECUTIVE SUMMARY

The Downtown Eastside (DTES) of Vancouver, once a thriving business district in the heart of the City, is a historic neighbourhood that is home to over 16,000 residents. Unfortunately, a serious public health and public order crisis has overwhelmed the lives of a significant number of people who live in the DTES. The deleterious effects of the high incidence of mental illness, drug addiction, disease, crime, homelessness and poverty have devastated the most vulnerable people in the community. In addition to seriously eroding the lives of the vulnerable individuals, these issues also have a substantial negative impact on all residents and stakeholders in the community. This ongoing crisis, which is well known across Canada and throughout the world, requires immediate action.

Many of those struggling to survive in the DTES suffer from mental illness, drug and alcohol addiction, or in many cases from both. These individuals often fail to find and maintain employment, and thus most live below the poverty line. Often these people become involved in criminal activity, underground economies, or the sex trade as a means to survive and support their addictions. Affordable housing is often found in squalid rooms, run by unscrupulous landlords, surrounded by criminals or is simply unavailable, leaving a growing number of individuals homeless. Health officials have declared that the DTES is in a state of crisis. High risk sex and drug activities combined with deplorable living conditions have led to rates of infection for HIV, Hepatitis C, tuberculosis and syphilis that are higher than many third-world countries.

In recent years a number of policing, social and health initiatives have attempted to address this crisis. However, despite these efforts, the levels of crime, social disorder, drug addiction and disease remain high, and the quality of life for many in the DTES continues to be poor. Efforts by all levels of government and the community to respond to the crisis facing the people in the DTES have been significant but have not added up to the robust response required to realize significant positive change. Certainly, the communities of Strathcona, Gastown and Chinatown have been willing and active participants in efforts to improve the DTES, particularly because they have been so highly affected by the disorder in the area. A number of initiatives within public health, housing, policing and criminal justice reform are underway and still need to be evaluated as to their impact on the DTES. Other current or proposed initiatives, such as the redevelopment of the Woodward's building, an increase in

market housing in the DTES, the location of a new police headquarters on Main Street, and an increase in businesses locating in the adjacent industrial areas may be instrumental in bringing economic vitality to the area. However, for these initiatives to be successful, it is vital that the most vulnerable people are given the assistance they need in order to move forward in their lives. In addition, for significant long term solutions to be achieved, both for the people and the community as a whole, there must be cooperation and collaboration among key stakeholders. It is important that collaboration occur at the local, regional, and provincial levels because the consequences of leaving the people to fend for themselves have implications for everyone in the province, if not the country. Involvement by all these stakeholders from the community and outwards improves the chances of making and sustaining change. Further, while many plans have called for increased collaboration, there has been a lack of effective administrative oversight and there is currently no established body with a specific mandate to improve life in the DTES. This discussion paper is a call for action by all stakeholders to discuss and bring forward resources and creativity in solving the problems faced by the people in the DTES.

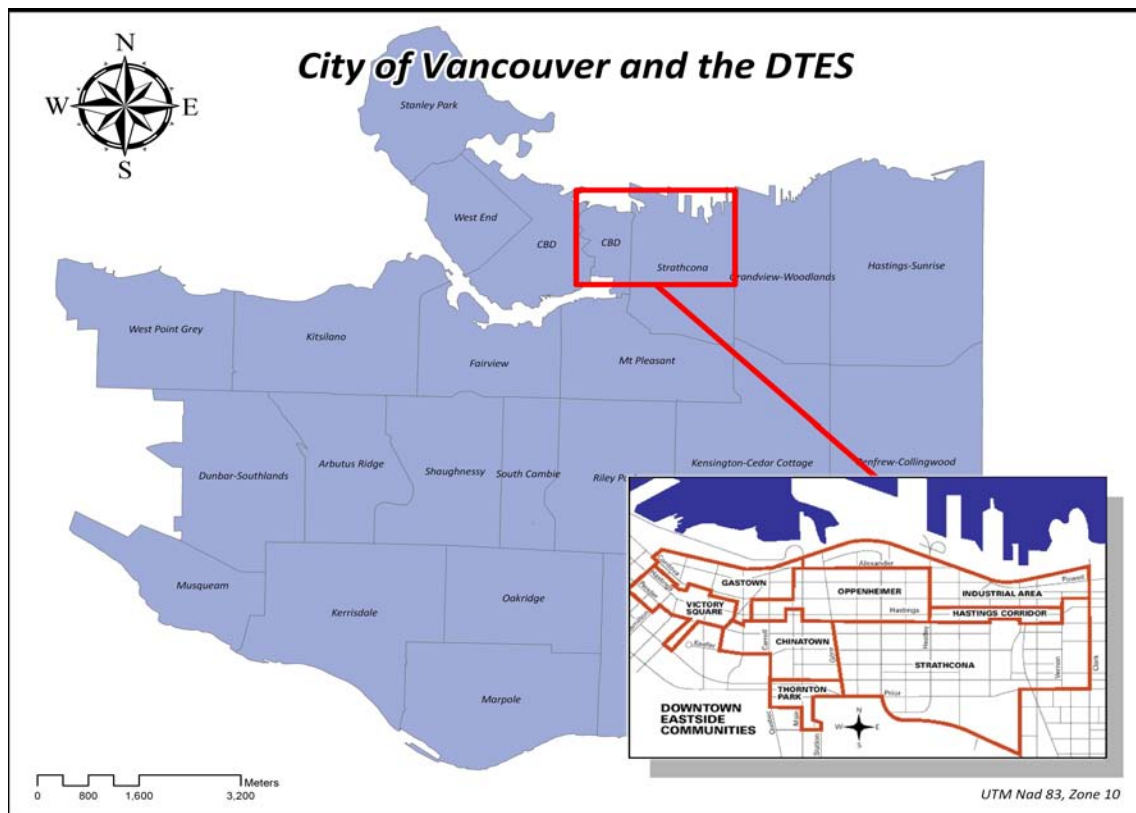
The DTES is in crisis and a mandated, coordinated approach is required to effect change and improve the lives of the people in the community. Reducing the number of people who face significant challenges in their lives by using a client centered approach will create an environment where other initiatives in the DTES will have the best chance of success. This discussion paper recommends that a steering committee of top-level decision makers be formed with representatives from the regional governments as well as the provincial and federal government. The steering committee should hire a Director who is tasked with creating a team of senior practitioners from the various service agencies to address the needs of the most vulnerable individuals in the DTES. The steering committee and its staff would need to operate under agreed upon guiding principles, ensure their actions contribute towards the evolving common vision for the area, design a coordinated plan of action, ensure accountability from government and private support agencies, establish goals, prioritize actions and develop timelines for change. In taking coordinated action, it is imperative that the decision makers involved in the steering committee have the authority and resources available to bring about meaningful change in the lives of those in the DTES.

INTRODUCTION

The Downtown Eastside (DTES) of Vancouver is the oldest neighbourhood in Vancouver and has many positive attributes, including strong community spirit in particular. However, like most neighbourhoods, the community has also identified improvements that are needed and desired. Unfortunately, the DTES has had to grapple with some serious problems that have been difficult to resolve despite efforts by a wide range of people, agencies and governments.

Originally a thriving business district in the heart of downtown, the shift of legitimate businesses to Granville Street in the mid-1900s significantly hurt the DTES. A confluence of factors related to both the people in the area and the economic turns affecting business have led to the gradual degradation of the DTES. Though some areas within the DTES have seen some success with the implementation of various initiatives in raising the quality of life for the residents, these successes have been more difficult to achieve for others.

Figure 1 - Map of the City of Vancouver and the DTES



The technical geographical boundaries of the DTES are Cambie Street to the west, Clark Drive to the east, the waterfront to the North, and Venables/Prior Street to the south. This area encompasses eight distinct areas: Chinatown, Gastown, Oppenheimer, Strathcona, Thornton Park, Victory Square, the Hastings Corridor and a light industrial area to the north. However, a much smaller segment of these eight areas is referred to when considering the problems facing this community. Tragically, the small area of the DTES around Main Street and East Hastings Street is well known across Canada and throughout the world for its drug market, high rate of mental illness, poverty, sex trade and homelessness. Within this area is a significant population of marginalized people. The issues facing these most vulnerable people and the need to improve their quality of life are the focus of this report.

In the past, several efforts to improve the situation in the DTES have been made by the various levels of government and non-profit organizations. These efforts have been successful in a number of communities, such as the new developments in Chinatown and Gastown. Success has been seen in a number of areas, including preserving the heritage of these neighbourhoods.

Vancouver enjoys a beautiful sea-and-mountain setting and some increasingly ugly problems. The Downtown Eastside, a scene of battered and boarded-up buildings, is the most concentrated pocket of poverty and crime in Canada. Despite police crackdowns, an open drug bazaar still thrives on its street corners. Its back alleys, doorways and parks are home to a ragged, swelling tribe of homeless men, women and children.

*-The Mean Streets of Arcadia
November 18, 2004
The Economist*

This desire for improvement and change continues both at the community and government/agency level. Interest in dealing with the issues in the DTES is high and it is recognized that many initiatives are currently underway to contribute to the revitalization of the area. Continuing to build and develop an environment that encourages inter-agency collaboration will ensure that existing plans and efforts have the greatest likelihood of making an impact on the interrelated issues that exist in this community. However, there are many obstacles and barriers to revitalization to overcome. While collaboration is a key component of success, a necessary condition of moving forward with current and future initiatives is to address the needs of the most vulnerable people in the DTES by giving

them the tools and assistance required to improve their lives.

STATEMENT OF INTENT

This report is a working document and as such is not intended as a final statement about either the problems in the DTES or the method by which a solution can be found. Instead, this report is intended to facilitate discussion and build toward consensus on how to collectively improve the lives of the most vulnerable people in the DTES community. As they are often both the cause of and the victim to the problems found in the DTES, improvements in their lives will translate to a healthier community as a whole. While this report outlines an example of how it may be possible to move forward in achieving success, it is hoped that further discussion will bring forward suggestions for improvement of this example and/or new ways to move forward in a collaborative fashion.

EARLY HISTORY OF THE DOWNTOWN EASTSIDE

The DTES community overall has changed dramatically over the last century. In the late 1800s, the DTES was the economic hub of Vancouver, and the area between Cambie and Carrall streets formed the main commercial center.¹ The Chinese community began to settle in the Pender

Street area and the whole of the DTES was a mixture of residential neighbourhoods and commercial premises that were concentrated along Hastings Street. However, after the Hotel Vancouver was built in 1887, development of the downtown area began to slowly shift west towards the Granville Street area. Although the construction of Woodward's on Hastings Street in 1904 brought thousands of people to the eastside until the 1970s, most large scale commercial businesses continued to relocate towards Granville Street.

The Depression in the 1930s hit the DTES very hard. It brought a large number of people to Vancouver seeking work, and most ended up taking refuge in the affordable rooming houses of the DTES. Many of the residents were men who were poor due to the lack of employment opportunities, or suffered from various illnesses, alcoholism being the most prevalent.² The area further deteriorated because of the demise of North Shore Ferries, the removal of the Japanese population from the DTES during World War II, and the closure of streetcar routes through the area.³ Despite the issues in the DTES, Hastings Street continued to enjoy substantial popularity with shoppers. Yet, McRae et al. noted⁴ that the area suffered continual decline throughout the

1940s and 1950s, primarily because of a lack of service development to address the issues facing the transient/migratory men who dominated the area. To help address this issue, many hotels converted their rooms into single room occupancy (SRO) units. These affordable accommodations often attracted resource workers, mostly from the fishing and forestry industries, to the area to spend their disposable income. The location was also convenient to rail yards and ports allowing for increased employment for those resource workers. Though the area was known for its beer parlours and the availability of alcohol, the DTES was considered to be relatively stable and healthy by police working in the DTES at the time.⁵

By the mid-1960s, the City of Vancouver had recognized that there were significant problems in the DTES. The City identified the problems as being related to the high proportion of single, often older, men who were unemployed due to a lack of skills, training and opportunity, as well as suffering from health problems, poverty, homelessness and chronic drunkenness.⁶ A report on the area by a Sub-Committee to the Special Joint Committee on Skid-Road Problems stated:

The phenomenon of Skid Road is unique in the plethora of health and welfare problems facing the city of Vancouver since the area known as

Skid Road is relatively small and well defined and the human problems there are peculiar to the district.⁷

Moreover, W. Graham, the Director of the City of Vancouver Planning Department in 1965, noted that “a police ‘paddy wagon’ cruises the area waiting for something to happen - it usually doesn’t have to wait for long”.⁸ At the time of Graham’s report, a large proportion of arrests for violent crimes and for alcohol-related disorder for the City of Vancouver occurred in the DTES. Clearly, the bustling downtown core of Vancouver had changed dramatically for the worse.

By the early 1970s, the Gastown and Chinatown areas surrounding the DTES were designated as historical sites.⁹ While beneficial for the areas protected, the DTES was hurt unintentionally as legitimate



businesses moved away from the DTES into the historical areas. This left a void that was subsequently filled by pawnshops and adult novelty stores.¹⁰ By the 1980s, the DTES neighbourhood, Strathcona in particular, had almost fully transitioned from a vibrant, though tough, community into an area that was sick and in dire need

Case Study 1: Bill

Bill faces a number of challenges in his daily life. He is mentally ill, diagnosed with schizophrenia and bi-polar disorder. He has a physical disability which limits his functioning and he is also addicted to drugs. He is also a chronic offender; he has had 279 documented contacts with police, and he has been charged 171 times. These factors have made it difficult for Bill to have appropriate housing and care. A coordinated approach to his treatment would assist him in getting access to appropriate treatment for his mental illnesses, his drug addiction and care for his physical disability. If those challenges are managed, he may have an easier time finding suitable housing as well.

of attention. In the 1980s and 1990s, the community was devastated by the introduction of crack cocaine and the increasing deinstitutionalization of the mentally ill exacerbated the problems in the DTES. In addition, the burgeoning drug market in the 1980s discouraged legitimate businesses from remaining in the area and enabled illegitimate businesses to thrive.

These events created a tipping point, pushing the DTES further into despair. The high numbers of single, resource based/blue collar workers, the availability of drugs, the prevalence of mental illness, the concentration of private low-income SROs, and the concentration of services contributed to an over-representation of residents with serious mental health and addiction problems living in substandard conditions. Some have suggested that this was a de facto containment policy whereby all of these problems in the Vancouver region were concentrated in this small area.

The historical context to the DTES has contributed to its current state, in both positive and negative ways. However, for a significant proportion of the population, several critical issues have been difficult to resolve satisfactorily and for many of these people, the issues have become a matter of life and death.

CRITICAL ISSUES

There are several critical issues being dealt with by the most vulnerable people in the DTES. Some concerns are more focused at the individual level, like high rates of drug addiction and mental illness, while other problems are experienced by the entire community, such as the housing crisis and high levels of crime. More importantly, the

people who are dealing with these issues may be dealing with one or several of these problems at once. Though estimates of how many people could be considered most in need, it has been suggested that as many as 2,000 individuals are dealing with any or all of these most critical of issues at any given time. Given that these same individuals typically have more than one issue to address, it follows that multiple agencies are dealing with these same people. Moreover, many of these issues are inter-related and thus a collaborative and integrated approach is necessary to move forward in improving the standard of living for these individuals, and by extension, the community in which they live. Many who are not directly involved in these problems choose to live in the DTES because of the more affordable housing, yet, they are highly affected by the disorder and the poor standard of living.

Mental illness, drug addiction, the health crisis, poverty, housing problems including homelessness, illegitimate businesses, high rates of crime and public disorder, the thriving sex trade, the reduction of police presence and the disproportionate impact of all of these problems on aboriginal people are the most pervasive issues facing the DTES. Of all the problems in the DTES, these present the biggest challenges in



terms of resolution and subsequent improvement.

MENTAL ILLNESS

According to reports written in the 1960s by the City of Vancouver, mental illness and substance use have been prevalent problems since the early 1900s. The transient population and the high levels of unemployment have been linked to alcoholism and health problems for those living in the DTES.¹¹ Treatment for those who were suffering from mental illness and substance use issues has changed quite dramatically in the last sixty years. The biggest influencing factor on the incidence of mental illness in the community has been the deinstitutionalization of the mentally ill that began in the early 1980s. This public policy shift occurred concurrently in many countries around the world and was expected to improve the quality of life for those diagnosed with a

mental illness. In British Columbia, this policy resulted in a province wide reduction of treatment beds at Riverview Psychiatric Hospital from approximately 4,600 at its peak in 1951 to only 1,000 by the early 1990s.¹²

A Vancouver Police Department (VPD) report, *Lost in Transition*,¹³ noted that while the deinstitutionalization was a positive change for many people suffering from mental illness, a small proportion suffered greatly from its effects. As intended, this move into the community was beneficial and improved quality of life for those who did not require the level of supervision given by hospitals. However, for those who required more intensive care and community support, the services were often not available, leading to numerous problems. The lack of, and high demand for, community resources to adequately

care for and supply treatment for mentally ill individuals has been identified as a primary reason for the difficulties in adjusting to life in the community:

It seems the reduction in beds at Riverview and the lack of support services in the community to replace those lost are significant contributing factors to the current crisis. Those individuals with serious mental illness, and frequently with addictions, create considerable demands for police services, and destabilize communities.¹⁴

This group is often homeless or living in dangerous substandard accommodations due to poverty and an inability to work. Because they are a vulnerable population, they are often taken advantage of by unscrupulous landlords or preyed upon by drug dealers. Exposure to drugs in the DTES has been particularly problematic for this group of individuals and has led to a high number of people having to deal with both mental illness and drug addiction.

People in the Downtown Eastside and elsewhere who can't cope will be cared for in safe and secure facilities until they are well. They will not be abandoned or consigned to a life of despair and destitution on the streets.

*-Speech from the Throne
The Honourable Steven L. Point,
Lieutenant-Governor
at the Opening of the Fourth Session,
Thirty-Eighth Parliament of the Province
of British Columbia
February 12, 2008*

Due to the prevalence of mental illness and addiction, social service resources are more commonly found in the DTES than elsewhere in Vancouver and this helps to explain, at least in part, why so many individuals with mental illness frequent the area. Wilson-Bates found that the prevalence of social services and the fact that the DTES provides most of the affordable housing in the region for very

low income individuals attracts those who are dealing with mental illness.¹⁵

DRUG ADDICTION

It has been well documented that the DTES is home to a large-scale open-air drug market. The availability of drugs in the DTES and the “predatory” nature of the drug dealers have led to a co-occurrence of mental illness problems and drug addiction in the area.¹⁶ Because of this, over half the police interactions in the DTES involve individuals who are mentally ill, addicted to drugs or both.¹⁷

Though the DTES was associated with alcoholism for much of its history, the 1970s saw an increase in the use of heroin and the 1980s saw a rise in the use of Talwin and Ritalin. In particular, the DTES was particularly negatively affected by the rise in injection drug use in the 1980s and



further by the introduction of cheap and ubiquitous crack cocaine in the 1990s. Crack cocaine has become the drug of choice in the area; it is now more prevalent than heroin and other forms of cocaine.¹⁸

During the mid-1990s, there was a call for a change in the response to drug addiction. In particular, it was felt that the health system was better placed than the criminal justice system to handle, and stop, the overdoses that were arising from drug addiction to heroin. Moreover, by 1992 there was a significant reduction in the number of drug offence charges that were prosecuted in the federal courts as well as a reduction in the average sentence length for those who were convicted. During that time, drug addiction was often dealt with through enforcement by police action as the health system organized itself to deal more specifically with the drug problem.

In 2001, the City of Vancouver adopted a new policy approach to reduce illicit drug use. The *Four Pillars* approach, as it is known, takes a more holistic view of drug addiction and incorporates prevention, treatment, enforcement and harm reduction in its attempt to address the use of drugs in the community. The approach was meant to highlight each of these areas as being equally important in addressing

drug use. In particular, this approach focuses on partnerships between agencies to address facets of each of the four pillars as well as (and most importantly) between all four pillars. The formation of partnerships to assist in the prevention of

Case Study 2: Angie

Angie is new to the DTES. She has been a ward of the state for a number of years and was considered an at risk youth. She is now addicted to rock cocaine and works in the survival sex trade. She has had numerous dealings with police, but currently is in a grey area because she is still viewed as a child by the Province but is considered an adult by the criminal justice system. Working with Angie to manage her drug addiction may assist her in getting out of the survival sex trade, away from police and the criminal justice system and ultimately back to her home community.

substance use was further endorsed in a 2005 report by the City of Vancouver.¹⁹

Many initiatives have been put in place related to each of the four pillars. Initiatives such as the Drug Court, Downtown Community Court, Insite, Onsite, expansion of detoxification centers and treatment options have all been developed. However, in spite of these efforts, drug use has continued to be a large problem for many people in the DTES

and this has contributed in large part to the health crisis that they also are facing.

HEALTH CRISIS

The health issues of the DTES are not new. In 1997, a public health emergency was declared for the Downtown Eastside by the chief medical officer and that crisis has continued to grow ever since.²⁰ By far the most influential factor in the health crisis is the high level of intravenous drug use (IDU). A 2001 report stated that there were approximately 4,700 intravenous drug users in the DTES.²¹ According to the Canadian Community Epidemiology Network on Drug Use, drug induced deaths in the DTES were more than seven times higher than for any other area of Vancouver in 2005.²² After a peak in both 1993 and 1998 in illicit drug induced deaths, the number of overdose deaths has decreased dramatically, but are still higher for Vancouver than for the rest of the province.²³

Intravenous drug users also experienced a corresponding dramatic increase in the rate of infection for HIV and of other contagious diseases. Christensen and Cler-Cunningham note that the pervasive level of HIV/AIDS and Hepatitis C are at the heart of the health crisis.²⁴ For example, between 1994 and 1999, IDU was the predominant mode of HIV transmission in BC.²⁵ This has changed, however, and since

2000, men who have sex with men have been the predominant mode of transmission and IDU has fallen into second position. In 1997, the rate of HIV infection in Vancouver was 0.59 per 1,000 while the rest of the province was 0.06 per 1,000.²⁶ Some improvements have been made here, as the HIV infection rate in 2005 had dropped to 0.33 per 1,000 in Vancouver and remained the same across the province.²⁷

Historically, HIV infection rates have been much higher for aboriginal women than other groups in the DTES; as a result, aboriginal women have been more likely to die from HIV/AIDS than other segments of the female population.²⁸ Furthermore, in 1997, the infection rate for Hepatitis C was 343 per 100,000 in Vancouver, almost six times the national rate, with an estimated 70% of cases contracting the disease through IDU.²⁹ As of 2005, the Hepatitis C infection rate had dropped significantly to 88.9 per 100,000 in Vancouver and 66.5 per 100,000 in BC as a whole. While both HIV and Hepatitis C infection rates have improved in the last decade, they are still higher for Vancouver than they are for the rest of the province. These decreases may be related to the drop in the number of intravenous drug users overall, with use of heroin in particular decreasing, and an increase in crack smoking.³⁰ Outbreaks of

tuberculosis and syphilis are also disproportionately higher for the DTES than for the rest of the province.³¹

Case Study 3: Jeff

Jeff is originally from the East Coast, and slowly moved across Canada. He has several non-returnable warrants stemming from his time in other areas. He is addicted to cocaine and has entered recovery programs several times. Jeff has turned to committing petty crimes to support his addiction and thus has had several contacts with police. He has expressed a desire to return home as he believes he will die if he remains in the DTES. Collaboration between Income Assistance and Health to work on his drug addiction and need to commit crime to support his habit may assist Jeff in getting back to his home community a healthier and happier person.

POVERTY

The DTES is often described as “Canada’s poorest postal code” (V6A). While there are a few small, rural towns with lower average income levels than those observed in the DTES, this area is indisputably the poorest neighbourhood of any large urban centre in Canada. It is estimated that more than 50% of the population rely on income assistance. Benoit and Carroll cite a City of Vancouver report from 1998 stating that 75% of the population in the DTES live “at the edge of poverty, with an annual

income only one-third that of other Vancouver residents".³²

This is not a new problem for the DTES; a 1971 report by the City of Vancouver notes that at the time of the survey 86% of residents were unemployed and 57% were unemployed for at least the last year. Furthermore, they found that 30% of the population was living on a pension. A 2008 study found that 51% of those living in social housing and 12% of those in SROs were on a federal pension, while 25% of those living in social housing and 60% of those living in SROs were on social assistance.³³ For both groups, average monthly income was just over \$1,000 with almost 40% of their income typically going to rent payments.³⁴

For many in the DTES, earning an income is made more complicated by the challenges of having mental health issues, drug addiction, or developmental problems such as Fetal Alcohol Syndrome (FAS). Furthermore, a number of individuals in the DTES suffer from physical disabilities (such as missing limbs) or injuries that make physical labour impossible. Adding to the difficulties in finding employment, many have a low level of education, and few skills.

The low income issues faced by those in the DTES continue to be pervasive and the disparity between the income level of the residents of the DTES and the rest of Vancouver has grown. Specifically, the City of Vancouver noted in 2001 that while the median and average incomes of Vancouver residents were increasing, there was a decrease in the incomes of DTES residents (though this is not true for some of the neighbourhoods in the DTES, such as Gastown, which have seen a dramatic increase in income level).³⁵

HOUSING/HOMELESSNESS

Since the 1950s there has been a gradual concentration of low income singles in the SRO units that are found in the DTES. As a result, affordable and safe housing has long been a problem for the area. Historically, the demand for housing in the DTES also increased because of a concurrent reduction in affordable housing in other



areas of the region, including Kitsilano, Yaletown, North Vancouver and New Westminster and Fairview Slopes.³⁶ Though there were more affordable options available in the DTES compared to the rest of the Vancouver area, many of the housing options in the DTES were, and continue to be, dangerous and unhealthy. Rooming houses were noted to be providing the bulk of the housing options in the DTES by the 1970s.³⁷ Today, because of the low income of most of the residents, SRO housing can cost up to 65% of a person's income from social assistance.³⁸ Yet, the housing is typically a small single room, with a lack of security, privacy and few amenities. In addition, insect infestations (e.g., cockroaches and bed bugs) are not uncommon.

The City of Vancouver has taken several steps to improve the quality of low-income housing in the DTES and to address the growing issue of homelessness. Most of these plans and initiatives have been based on homeless counts from 2000. However, the number of homeless, though difficult to estimate, has increased both in the DTES and in the region as a whole at least in part due to changes in welfare policies, increased urban migration and the deinstitutionalization of the mentally ill. As such, it is more difficult for successes to be seen in eliminating homelessness.

Nonetheless, there have been significant changes to the housing stock available in the DTES and in the surrounding areas that have greatly influenced the area.

Specifically, since the 1970s, more than 5,000 non-market housing units have been built and the province is currently updating 17 hotels in the area to be run by non-profit operators in order to increase the low income housing stock. At the same time, the affordable housing resources have decreased in the surrounding areas, making the DTES one of few options for low income families.

Given the level of crime often found in SROs and lower income areas, the VPD has also been concerned with the quality of low-income housing in the DTES. To ensure that marginalized people are not being victimized, the VPD has conducted several undercover operations that targeted

My problem is cockroaches. The housing part, it's not adequate. There's a lot of slumlords out there, running these hotels and they don't put money into them and they just rent them as they are, and we have to try to fix them up when we move into them. [B]ut we can't live that way. We've been there for months and the cockroaches have been there. There's a lot of germs.

*-DTES Aboriginal Woman
cited in Benoit & Carroll (2001)*

predatory landlords to ensure that SRO's are a safe place for people to live. These buildings house people who are addicted to substances or are suffering from a mental illness or are attempting to recover from abusing drugs/alcohol.

Hotels were targeted because of intelligence that there was criminal activity occurring, or to assess the level of compliance with bylaw and licensing regulations. The landlords that were charged as a result of these projects typically cashed an individual's social assistance cheque and gave them approximately half of the money back; the landlord then rented the room out to someone else, leaving the individual homeless and with little money. More than 35 charges involving 26 people resulted from these projects demonstrating that owners and landlords were often willing to turn a blind eye to drug dealing on or near their property and, in some cases, used drug dealing to increase their own profits.³⁹

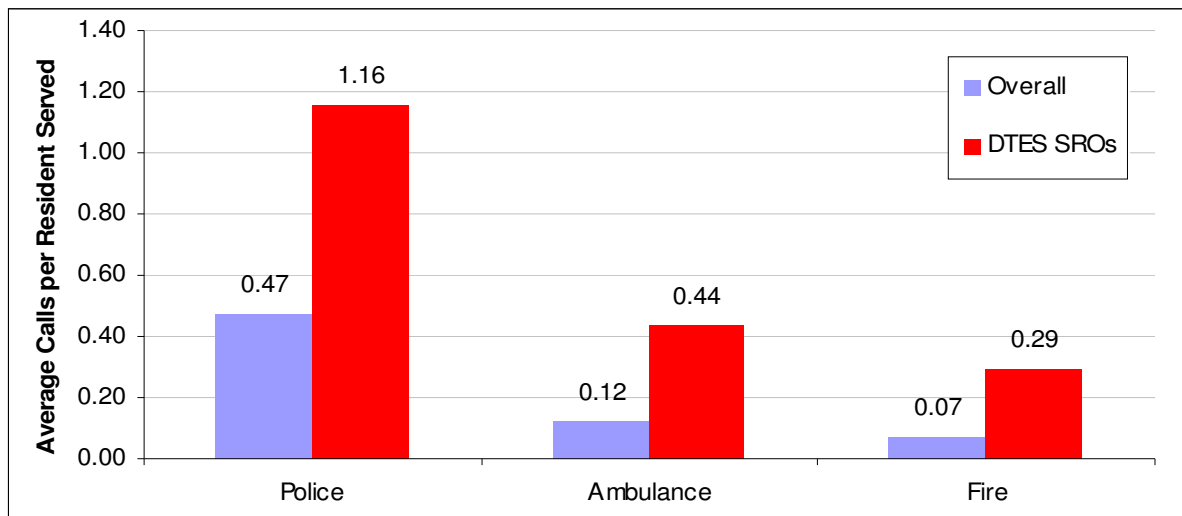
Considering the rates of mental illness and substance addiction and the difficulties those suffering from these problems have with finding and maintaining steady employment, it is not surprising that so many in the DTES live in abhorrent conditions. A 2008 report prepared for the

City of Vancouver states that many who are mentally ill have difficulties obtaining adequate housing, and the lower cost options for housing are often in poor repair, neglected and/or dangerous, leaving many with little choice but to live on the streets.⁴⁰ Furthermore, this group of individuals utilizes the services of police, fire and health significantly more often than the remainder of the population, putting a strain on emergency resources.⁴¹

A 2007 report, prepared as part of the Vancouver Agreement, analyzed 54 SRO hotels in the DTES. An inspection of 3,100 rooms that was part of the study revealed that 80 percent of the buildings had bed bugs and 77 percent had rodents and/or cockroaches.⁴² In addition, this report documented the higher utilization of emergency services at these 54 SROs, (see Figure 2).

Recognizing the importance of having well managed SROs, the VPD in October 2008 partnered with the Provincial Government and the non-profit operators of 17 government-owned SROs in a project called Partners in Action. The program aims to ensure that SRO residents receive the safe, secure, and supportive housing that they deserve. To reach this goal, the project relies on increased communication between all three parties. The VPD assigns

Figure 2 - Utilization of Emergency Services at 54 SROs in the DTES



specific beat officers to work with the SROs to build a strong working relationship with staff. As a result of this cooperation, the VPD expects that the potential crime rate at these SROs will improve, thereby providing tenants with a safe environment that is free of predatory individuals.

ILLEGITIMATE BUSINESSES

The high poverty rate in the DTES has meant that legitimate businesses have a small consumer base to draw from, resulting in small profits (if any) and a negative perception of the neighbourhood that inhibits shopping in the area by other Vancouver residents.⁴³ The closure of Woodward's in 1993 was a serious economic hit for the DTES community.⁴⁴ By 2001, the storefront vacancy rate along Hastings Street between Main and Cambie

streets was 43%.⁴⁵ The Vancouver Agreement⁴⁶ noted that significant investments by other businesses or developers have been few. This decline in business in the DTES accelerated in large part with the closure of Woodward's and has continued ever since.

Though legitimate businesses have been decreasing since the Woodward's closure, illegitimate businesses have thrived. Beginning in the late 1980s, the use of crack cocaine impacted the levels of crime and illegitimate businesses. Users often turned to theft to support their addiction, selling the stolen products to second hand stores and pawnshops.⁴⁷ The 1990s brought an increase in the accessibility of gambling to the area, with many corner store owners placing video lottery terminals in their

After the 1993 closure of the Woodward's department store on this stretch – generally pegged as the beginning of the end for the Downtown Eastside – the entire block emptied, leaving behind a mess of boarded-up buildings and vacant storefronts.

*-The Eastside is Banking on Them
October 25, 2007
Maclean's*

businesses. It has been difficult for businesses remaining in the DTES to operate unless “they support, or at least do not interfere with, the illicit trade in property, drugs and prostitution”.⁴⁸

Business improvement associations (BIAs) in the DTES area are concerned enough about the security and crime levels around their businesses that they have put a substantial portion of their funds towards private security in order to reduce the disorder affecting their businesses. The VPD has also worked towards reducing illegitimate businesses and has carried out a number of undercover projects, named Raven, Lucille, Haven and Bodega, to identify and close down businesses that were supporting and involved in crime:

Business licenses were revoked and the some 47 pawn and second hand stores in the DTES were reduced to just over a dozen. Some public houses also lost their licenses, or even voluntarily shut down after being unable to sustain operating

costs once they were forced to operate legitimately.⁴⁹

Though there has been a significant decrease in the number of pawnshops in the area, an underground market for stolen goods has continued to thrive. As well, there has been an increase in the value of metals and recyclable goods that has resulted in many scavenging for these products on the street and in garbage bins in order to earn an income. Also, a rise in the value of metals has led to an increase in break & enters, mischief, and thefts in order to obtain metals to sell.

CRIME/PUBLIC DISORDER

The DTES is, unfortunately, infamous and has gained world-wide notoriety for its high crime rates. In the 1960s, 34% of all homicides and aggravated assaults, 10% of all rapes, 33% of all robberies and 66% of all “state of intoxication in a public place” arrests for the City of Vancouver occurred in the DTES (see Figure 1 for map of area included).⁵⁰ This picture has changed little, with much of the crime in Vancouver occurring in the DTES.

In particular, the DTES has a pervasive problem with violent crime. As of October 2008, the DTES accounted for 34.5% of reported serious assaults and 22.6% of robberies in the City of Vancouver (VPD

data, see Figure 3). This is particularly concerning given that many of the victims are more at risk because they are sick or elderly.

By the 1990s, there were increasing numbers of “chronic” offenders, individuals committing repeated offences primarily as a method of funding their drug addiction. A recent report by the VPD showed that Vancouver has an extensive problem with chronic offenders, particularly in the DTES (Figure 4), that appears to be unique among larger cities in the world.⁵¹

Though property crime has decreased in all areas of Vancouver since the late 1990s, the reduction of break and enters (B&Es) in the DTES has not been as significant as that in the rest of the city. The high number of

chronic offenders living in this area may explain, in part, the lack of reduction in Break and Enter occurrences in the DTES. This high rate of crime deters businesses from developing in the area and encourages legitimate businesses to leave.

The “Broken Windows” theory supports the view that the lack of social integration, the high number of vacant storefronts, the large-scale open-air drug market, and public disorder that continues to occur in the DTES creates an environment that emboldens criminal activity in the area.⁵² However, it should be noted that order is not only provided by the police. Ordinary citizens are also valuable assets to maintain law and order in their neighbourhoods. Jane Jacobs⁵³, a noted researcher on urban areas, states that informal social controls provided by the

Figure 3 - Crime in the DTES as a % of Total Crime in Vancouver 01/08 to 10/08

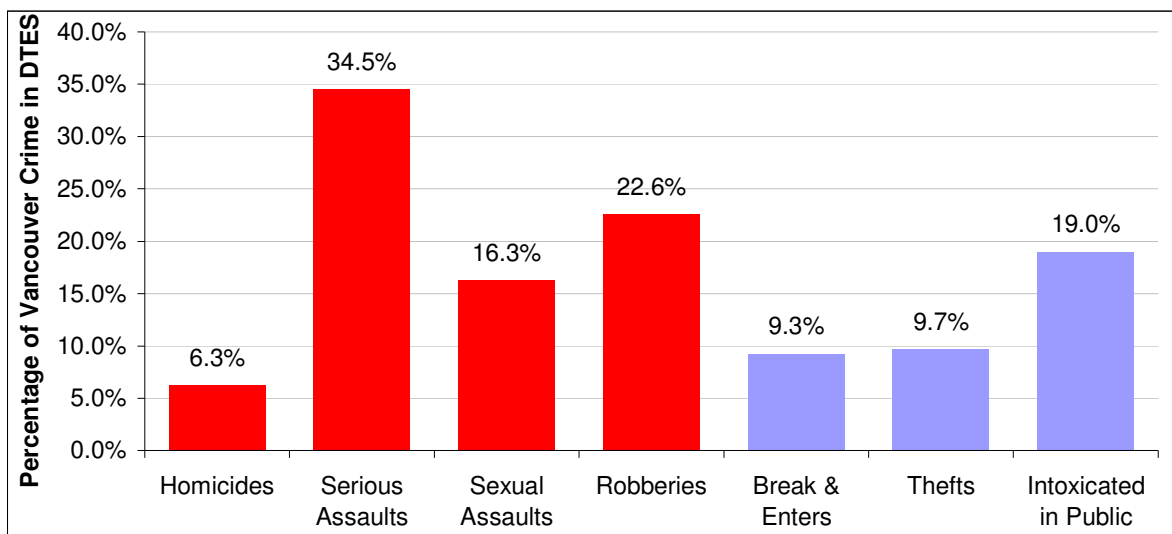
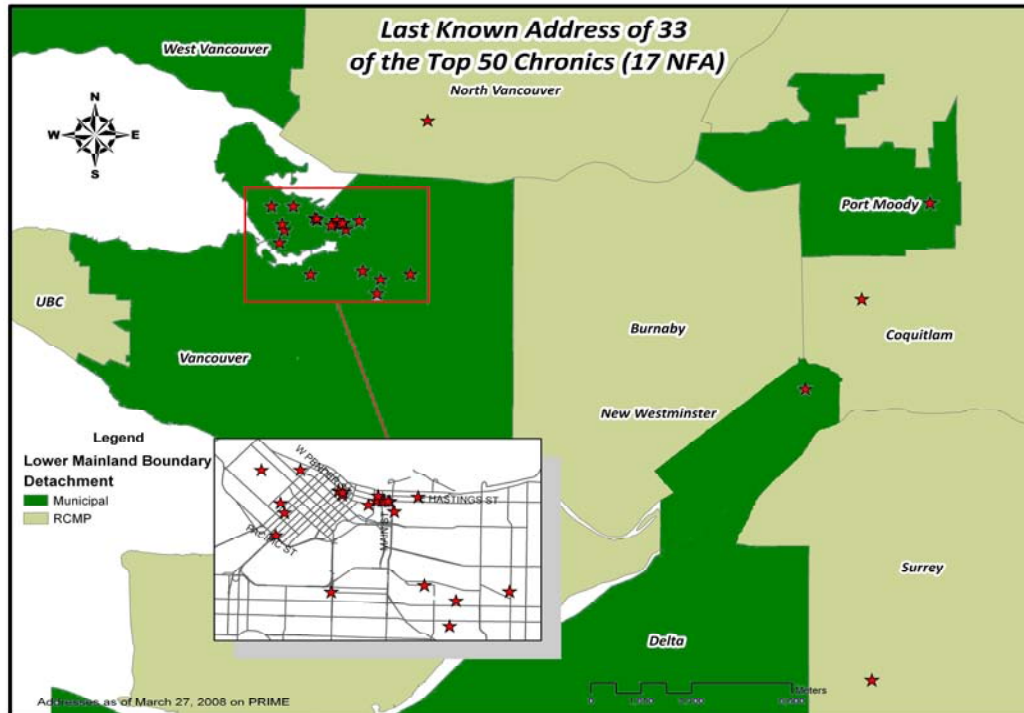


Figure 4 - Last Known Address of the Top 50 Chronic Offenders (17 have No Fixed Address)



people of the area are important and integral to the safety of an area. Increased police presence may lead to an increased civilian presence on the streets of the DTES, leading to greater feelings of security, safety, and increased use and “guardianship”, thereby reducing crime.

The extensive nature of the crime problem in the DTES can be demonstrated by the high levels of fear felt by those living, working or visiting the area. Tourism websites warn travellers to avoid the area, while the level of crime serves as a serious deterrent for businesses to develop.⁵⁴

SEX TRADE

The DTES has been the main area for prostitution and the sex trade since the late 1800s.⁵⁵ In fact, one of Canada’s first red-light districts could be found in parts of Chinatown in the early 1900s.⁵⁶ The size of the sex trade in the DTES grew in the mid-1980s when sex trade workers from Mount Pleasant relocated to the area due to police and community pressure and the subsequent creation of a special police task force. As well, an injunction forced sex trade workers from the West End of Vancouver. Together, the impact was that the DTES became the main location for the survival sex trade in Vancouver.

Current estimates suggest that there are between 1,000⁵⁷ and 1,500⁵⁸ sex trade workers in Vancouver and most work in the DTES. Many work on the streets though estimates of how many are difficult to establish. Primarily, these workers are women⁵⁹ and between 75%⁶⁰ and 80%⁶¹ of them are regular drug users. Up to 50% of workers are involved in the sex trade in order to support a drug addiction.⁶² This high level of drug use among sex trade workers has been a major driver in the high rates of HIV/AIDS and Hepatitis C infections in the DTES.⁶³

Aboriginal women are disproportionately represented as sex trade workers,⁶⁴ with estimates as high as 70%.⁶⁵ Benoit and Carroll note that the average sex trade worker is 26 years of age, has three or



more children and is lacking even a high school diploma.⁶⁶ Christensen and Cler-Cunningham found that more than half (62%) of the sex trade workers they interviewed had never completed high school.⁶⁷

Perhaps most concerning for sex trade workers is the exceptionally high rate of violence they experience. They are particularly vulnerable to attacks from predatory customers, but also from pimps, boyfriends, or violence occurring during drug-related incidents.⁶⁸ In the 1970s and 1980s, a STW occasionally went missing without explanation at a rate of about one every two years (some were located many years later), but between 1995 and 2001, the numbers of sex trade workers from the DTES going missing increased sharply and it eventually became clear they were likely the victims of a serial killer who was able to dispose of their bodies. In 2002, Robert Pickton was charged with the murders of 26 of the “Missing Women”. (He was also charged with the murder of a 27th unidentified “Jane Doe,” but the trial judge stayed the charge for technical reasons.) Pickton stands convicted in six of these deaths, with 20 murder counts still outstanding. Pickton is also the suspect in the deaths of six other Missing Women whose DNA was found on his property, but there is currently not enough evidence to

support charges. In other words, Pickton is convicted, charged, or suspected in the deaths of 33 women. Notably, Pickton claimed he had killed 49 women to an undercover police officer shortly after his arrest.

The Pivot Legal Society reports that most of the sex trade workers in the DTES earn between \$5-20 for a date, resulting in a need to work more frequently to cover living expenses and in workers accepting clients that they would otherwise refuse. The low income reported by the Pivot Legal Society is also consistent with that seen by the VPD's Vice Squad. Up to two-thirds of women working in the DTES have reported being the victims of physical or sexual assault while they were working, yet few report the victimization to the police for fear of both criminal prosecution and investigation by social assistance.⁶⁹

Many sex trade workers find it difficult to find appropriate housing as landlords refuse to rent to them and social assistance is inadequate to cover their needs, particularly when children are involved. In addition, many sex workers have complex medical needs, with multiple diagnoses for mental illness and physical health problems. Lastly, exiting from the sex trade is difficult as many workers have an addiction and/or a criminal record

which inhibits many legitimate businesses from hiring them, resulting in many workers remaining in the sex trade as a matter of necessity. The lives of DTES sex trade workers are difficult, to say the least, and are often tragically short, as a result of the effects of drugs, diseases such as HIV/AIDS, and violence.

REDUCTION OF POLICE PRESENCE

Since its inception in the late 1800s, the Vancouver Police Department has been a part of the DTES community in the Main and Hastings area. The building at 312/324 Main Street was built in 1953-1954 to house a growing police department. The location of the police building meant that there was a high level of police presence in the Main and Hastings area simply because of the number of police officers who were coming and going from headquarters (HQ) as part of their regular duties. In 1994, HQ moved from 312 Main Street to 2120 Cambie Street with the Patrol Division subsequently moving its base to the new facility. As a result, the number of patrol officers that routinely passed through the DTES en route to HQ has been reduced from more than 200 per day in 1994 to 20-25 per day currently. In addition, resource pressures and various policy decisions by management at the time of the move ultimately led to a reduction in the number of beat officers in the area. Though 312

Main Street is still an integral part of a patrol officer's duties in terms of report writing and the various support units that are housed there, police presence throughout the day has been reduced significantly in the DTES.

Recognizing the impact of the reduction in police presence in the DTES, the VPD has attempted to mitigate the effects of this shift of police presence by adding specialized teams to patrol the DTES. What began as the Citywide Enforcement Team (CET) pilot project in April 2003 has turned into a permanent, though relatively small (approximately 56 Police Constables, four Sergeants and two Staff Sergeants with nine to twelve officers patrolling at any given time), group of dedicated officers who patrol the Downtown Eastside, mostly on foot. This team was re-named the Beat Enforcement Team [BET] in 2006. The positive response from members of the DTES community and from residents of the City of Vancouver in general,⁷⁰ particularly in terms of the increases in perceived safety while in the DTES, has suggested that enhanced police presence in the DTES would be beneficial for the community. As well, given that a major deterrent to business development in the DTES is the fear of crime, increased police presence may also assist in encouraging more legitimate business to the area.

IMPACT ON ABORIGINAL POPULATION

As has been noted, the issues facing the DTES disproportionately affect the aboriginal community, who make up a significant proportion of the population of the DTES.⁷¹ The disproportionate impact on this population is particularly concerning and Benoit and Carroll note that up to 80% of aboriginal children in the DTES live in poverty. Dobell Advisory Services Inc and DCF Consulting Ltd note that aboriginals constitute 34% of the homeless population in Vancouver and most live in the DTES. Aboriginal women make up the majority of sex trade workers.⁷² Many are infected with HIV/AIDS and in fact have been displaced from their communities due to a lack of acceptance regarding the diagnosis.⁷³

Aboriginal women are at a higher risk of health consequences than others in the DTES due to "gender inequities in relationships"⁷⁴ and the fact that they are frequently involved in the sex trade. Benoit and Carroll note that "teenage births are 13 times higher in the DTES than in the general Vancouver Region... [and aboriginal women] ... are more likely than men to share needles, to be 'second on the needle', and to associate condom use or non-use with the important distinctions between work and relational sex".⁷⁵ However, it is important to note that the

health crisis facing the DTES affects the whole community, not only those of aboriginal descent.

CONVERGENCE

The unique challenges experienced by the DTES have been exacerbated by the concurrence of multiple problems. The rise in the use of crack cocaine in the early 1990s, the policy of deinstitutionalizing the mentally ill, the reduction of police presence in the 1990s, the closure of low income housing elsewhere, the de facto containment policy, the HIV epidemic, and the Federal Crown's lack of capacity to prosecute "minor" drug charges, all came together. Though any one of these factors would have impacted the DTES, the synchronicity of these events reinforced the negative impacts of each. These have been felt by some individuals more than others, and have highly affected the quality of life for those living in the DTES.

These changes in the area have made the DTES an efficient, though self-defeating, system where a synergistic underground economy fuels drug use and criminal behaviour and provides little incentive or encouragement for people to leave and improve their lives. Furthermore, for those seeking to escape, the consequences of the challenges facing them in the DTES (e.g., a criminal record, access to programs to

maintain treatment progress) can act as snares, pulling them back into the DTES, despite their attempts to leave.

DE FACTO CONCENTRATION

The problems of the DTES are large, both in number and in scale. The compounding of each issue has resulted in a neighbourhood in Vancouver with a significant number of people needing help. There has been a de facto concentration of the problems in the area because of various policies by both the public and private sector which directly or indirectly have led to a vicious cycle where people are forced to go to the DTES to access affordable housing or services. The accessibility and availability of lower income housing in the DTES has been a major draw to the area. However, the lack of affordable housing elsewhere has also pushed people into the area. As well, the

The DTES is an international embarrassment and has been for decades. Despite hundreds of studies, dozens of plans and the best efforts of thousands of people, the situation there remains horrible. It attracts people with addiction and mental-health problems from across the province and country, making it a cesspool that exacerbates the troubles of those living there.

*-Gary Mason, The Globe & Mail
October 23, 2008*

accessibility of drugs is indisputably a major reason that people end up in the DTES. Arguments have been made for accessibility to services and thus a preponderance of services has been established in the DTES. However, the presence of many services and lower income housing being predominantly located in one area has meant that people are drawn to the DTES and, in fact, add to the problems experienced by those living in the neighbourhood.

The historic concentration of problems for those in the DTES has meant that making the area a base for most services and low income housing has been logical since, certainly, services need to be accessible to those who require them, and there is no question that there is a need for services in the DTES. However, encouraging these services and affordable housing to locate predominantly in the DTES, and, the lack of the service and housing availability in other areas of Greater Vancouver and the province, has meant that individuals have to move to the DTES in order to access the services and affordable housing that they need. Once there, these individuals become effectively trapped in the DTES, as the scarce supply of these services and housing outside of this area act as a barrier that prevents the individual from being able to return to their home community.

If I go back [to Vancouver], I'm going to end up back in the downtown eastside and I'm going to kill myself. Maybe not physically, like, myself, but with the drug habit I will.

-Marc Sweet, ConAir offender returned to Winnipeg, media interview

In addition, the DTES has many conditions which facilitate criminal activities. Socio-economic issues and crime are inextricably linked and thus actions by the police and the criminal justice system are highly relevant to both the current state of the problems in the DTES as well as the improvement of it. Dandurand, Griffiths, Chin and Chan have noted that the police primarily took a reactive stance towards the DTES and the problems therein; however, this has changed with the development and continuation of the BET initiative to increase proactive policing in the area.⁷⁶

Furthermore, the concentration of a large number of people in a small geographic location has accelerated the spread of disease (such as HIV and Hepatitis C). Several researchers point out that, historically, disease has spread more virulently in poor communities because of the combined effects of close quarters and weakened immune systems due to

malnutrition.⁷⁷ This outcome forces individuals to accept services in an area where they are exposed to the numerous negative circumstances that exist in the DTES, perpetuating an already tragic situation and decreasing the likelihood for individuals to successfully deal with their addictions and other challenges. The next step is to tease apart which services are needed in the DTES because of gaps in services and which ones are not in order to help people live healthier lives.

PREVIOUS PLANS

The need to improve the quality of life in the DTES has been a longstanding policy objective for the City of Vancouver. City of Vancouver plans with goals of effecting change in this area can be found as early as the 1965 report entitled *Skid Road: A Plan for Action*, and the 1971 report *Downtown East Side: Social Planning/Community Development*. However, much continues to be done in response to the deterioration of the area.

In July 1998, Vancouver City Council formalized its commitment to provide guidance and planning for the DTES, Chinatown, Gastown, Strathcona and Victory Square.⁷⁸ The goals proposed by Council involved improving conditions at the street level, reducing crime, improving access to housing, reducing drug addiction,

and helping members of the community find allies. To guide efforts aimed at achieving these goals, Vancouver City Council adopted the following principles:⁷⁹

- Build from within and involve those who already live and work in the area;
- Preserve and enhance the sense of community felt by residents of the DTES and in surrounding communities;
- Listen to those most affected;
- Improve the livability and safety of the DTES for everyone; and
- Develop and implement a well understood plan that delivers results.

In the past seven years, the City of Vancouver has prepared numerous plans and undertaken several initiatives that address key issues and strive to improve conditions in the DTES. Overall, these plans largely focus on homelessness and housing, drug addiction, heritage and culture, and livability and the public realm.

The need for the three levels of government to work together to address the prevailing issues in the DTES has been well documented in many of the contemporary plans. To create a forum for this needed cooperation, the Vancouver Agreement was established between the

Government of Canada, the British Columbia Provincial Government, and the City of Vancouver in March of 2000. This agreement aimed to coordinate the efforts of all three levels of government. While the scope of this agreement covered the entire city, not just the DTES, several of its initiatives and programs specifically focussed on this community. The Vancouver Agreement is currently set to expire in March 2010. Despite the intent to bring about change through this agreement and the perception of its success by some, the DTES continues to be beset by the same issues.

THE NEED FOR CHANGE

Previous plans and initiatives, though extensive, have often been seen by some as “the” solution for the people of the



DTES. However, these previous plans have been perhaps too diverse in their goals by trying to address all issues present at once. As well, minor or lesser successes have unfortunately been overlooked because the overall initiative did not accomplish all of its goals.

It cannot be ignored, however, that despite these plans and the best efforts of government and private sector agencies to improve the DTES, the situation in this area has remained serious. The ability to significantly improve the quality of life in the DTES is limited by the number, scale, and interrelation of the current problems. Further exacerbating the problem is the fact that most of these issues have developed and grown in the community over several decades. As a result, many of these problems are now deeply entrenched. The multifaceted nature of the problems facing the DTES means that any solution, or improvement, to the situation must also, out of necessity, be multifaceted as well.

Though there has been widespread agreement regarding the need for collaborative action, coordinating and initiating change has been challenging. Political will and competing interests have made cooperative action more difficult to achieve. A lack of effective administrative

oversight or clear path of implementation has also been problematic. Despite agreement about the need for a coordinated effort to improve the lives of those in the DTES, a lack of consensus about the “solution”, multifaceted though it may be, has meant that there is no clear direction about how to move forward.

In addition to problems becoming entrenched, failing to improve the DTES creates an environment where the existing issues can multiply. Consider 24-year-old ‘Ann’, whose name has been changed to protect her privacy. Ann’s story began as a suburban Vancouver teenager who recreationally used drugs. At the age of 19, Ann gave birth to a young daughter. Within one year, Ann’s recreational drug use had grown into a full-scale addiction to hard drugs. At 20 years of age, Ann found herself living in an SRO in the DTES. In addition to battling a drug addiction, Ann also had to struggle with mental illness. On several occasions Ann was arrested by police, as she was believed to be an immediate threat to herself. Unfortunately, Ann’s dual diagnosis of a mental illness and drug addiction is not uncommon. The Canadian Mental Health Association found that over 50% of people with a mental illness have a dual diagnosis.⁸⁰ The reality that there is a disproportionately large population in the

DTES with a dual diagnosis was also noted in the VPD’s *Lost in Transition* report.⁸¹

Ann’s need to support her drug addiction led her to enter the sex trade. Tragically, Ann learned that she had contracted Hepatitis C. In addition to having health issues, Ann had several problems with the police. Even though she is just 24 years of age, police records show that Ann has already had 100 documented interactions with the police, including being charged 31 times. Currently, Ann lives in the DTES, is a sex trade worker, and has an unmanaged mental illness. Despite being exposed to a myriad of health, social and justice services in the DTES, Ann’s life has continued to decline. Unfortunately, the likelihood that Ann will be able to improve her future is limited by the reality that there is no integrated framework to deal with the concurrent issues that have resulted in her current dismal circumstances.

‘Cheryl’, whose name has also been changed to protect her privacy, also highlights the interrelated problems that currently prevail in the DTES. Cheryl is a 39-year-old Aboriginal female from Northern BC. Cheryl is the mother of five children, all of whom reside in her home community. In the spring of 2008, Cheryl came to the DTES to visit family. Being

exposed to a large open-air drug market led Cheryl to experiment with hard drugs. Unfortunately, Cheryl soon found herself addicted. Predatory drug bosses quickly recognized that Cheryl was addicted but was financially unable to support her addiction. As a result, these drug bosses soon paid Cheryl a small amount of drugs in exchange for conducting their open-air drug trafficking.

In June of 2008, Cheryl was arrested by police for trafficking. Cheryl was charged with trafficking and was released from jail. Cheryl was again exploited by drug bosses in the DTES because of her drug addiction. This led to Cheryl being arrested again for trafficking in September. Cheryl was released from jail, but now finds herself facing several serious drug charges. While Cheryl recognizes that her time in the DTES has badly harmed her and her family, Cheryl states that she cannot simply leave and return to her five children. When asked why, Cheryl cites a list of reasons including not wanting to potentially expose the children to her drug use, the need to remain in Vancouver to deal with her criminal charges, and being financially unable to pay for a return trip to her home community. Like Ann, the current environment and the lack of an integrated system to deal with multiple complex issues in the DTES have combined to trap

Cheryl in the area and quickly erode her quality of life.

These individual cases highlight the gaps in a system that fails to assist people with integrated and comprehensive treatment and recovery services. Instead the system focuses on dealing with the symptoms of the problem (e.g., mental and physical health, substance addiction, conflicts with the law) instead of dealing with the overarching issues facing the community (e.g., access to housing, employment, treatment services). The more extreme and tragic outcomes amongst these individual cases can include death by chronic illness, drug overdose, homicide, or suicide. Not everyone falls prey to these outcomes but the problems faced by these individuals and others are common in the DTES.



The situation in the DTES has reached critical status, requiring immediate action that is over and above all that is being done now. Without greater action, the issues in the DTES will further entrench themselves in the community and the people will continue to suffer. While it has been difficult to achieve a meaningful level of change in the DTES, the number of agreements and plans that have been developed, and the successes that have been seen, for the area indicate that there is a broad-based desire and the ability amongst different government and non-government agencies to make a positive impact on the lives of those that live and work in this community. The best chance for the success of these initiatives is to assist those who are most in need of help. This is a necessary condition of moving forward with other bigger picture initiatives. By starting with this high need group of people, the focus remains on improving the quality of life for those in the DTES.

ACHIEVING CHANGE

Despite all of the efforts that have occurred and the broad-based desire to see an improvement in this community, there is still no established body or forum with a specific mandate of ensuring that the lives of the most vulnerable in the DTES are improved. As a result, the issues facing the

vulnerable people of the DTES have become further entrenched, have had the opportunity to build, and the community continues to have a poor standard of living. This compounding of problems has led to a situation in which the problem is greater than the sum of its parts. The negative synergy in the DTES requires numerous interventions to disrupt the cycle of problems.

The multi-faceted and complex nature of the issues in the DTES requires a high level of inter-agency collaboration. In this unique environment, problems that were commonly held to be the responsibility of a single agency or small group of agencies cannot be impacted in a meaningful way without a significantly increased level of collaboration. The recommendations herein are based on the best and most effective pieces of the Vancouver Agreement and Project Civil City. Although this report proposes a particular governance structure, it is recognized that other models may be worthy of consideration (see Appendix B).

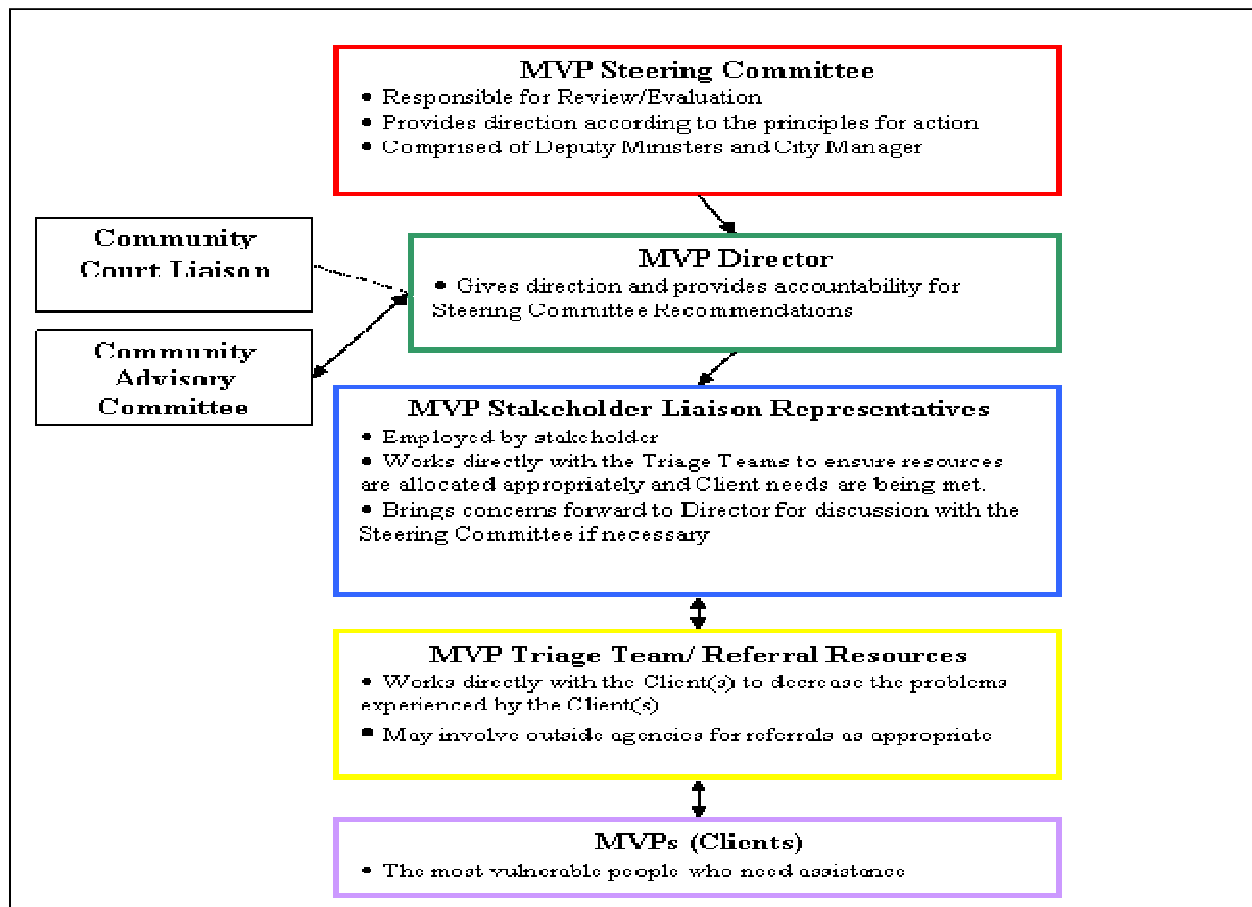
Given that the decisions of the other areas of the region and the province are highly relevant to the DTES, it is important that members of regional and provincial governments in particular are included on any initiatives to better make decisions

that benefit the people. This report recommends a client-centred approach where agencies and governments work together to support the most vulnerable.

To do this, a multi-level governance structure is proposed. This model suggests a process where funds and resources are funnelled or seconded to the initiative in order to devote them to improving the quality of life in the DTES. First, a most vulnerable population (MVP) steering committee made up of provincial and municipal government decision makers

(i.e., Deputy Ministers and City Managers for the region) of the relevant stakeholders (e.g., Health, Income Assistance) is needed for oversight and evaluation. Using the agreed upon principles for direction, they will provide recommendations where necessary to facilitate collaboration by the stakeholders (see Figure 5). As well, this committee may wish to consider what other governance structure would be best suited for the initiative. In particular, exploration of a public corporation model may be worthwhile.

Figure 5 - Organizational Chart of the Most Vulnerable Population (MVP) Initiative



An MVP Director will ensure implementation of the steering committee's recommendations to improve accountability. Knowing the importance of a passionate and committed individual in pushing things forward in a horizontal management structure such as the one proposed here, the Director will need to be a major driver in motivating and coordinating other stakeholders. As well, the Director will facilitate a team of stakeholder liaison representatives. The Director will assist them with a) collaboration between services and b) in problem solving issues that arise in managing the problems faced by the MVPs and those directly working with them.

The Representatives will remain employed by their home agency but will work together to implement protocol, resource and funding needs, priorities and vision for the initiative at both the agency and group levels. In addition, the representatives will also work with "triage" teams who work directly with the MVPs (the clients) to ensure that the teams have the resources necessary to assist their clients. The Triage teams, working with the client, will assess needs and assist that client in accessing services that are needed (e.g., housing, income assistance, treatment), either directly through the representative agencies or through referrals to other

appropriate agencies in the community. They will also report back to the Representatives to ensure that resources are being allocated appropriately at the client level.

Lastly, because of the local, regional and provincial consequences to making change in the DTES, the Director and Representatives will work with a Community Advisory Committee, made up of individuals from the Strathcona, Chinatown and Gastown neighbourhoods. These communities have already been very active in revitalization efforts and should be involved in any plans that would affect them as well. Also, there would be contact with the Liaison from the Community Court. These advisory groups would be used to facilitate community support and to address any concerns that arise in the community as a whole.

INFORMATION SHARING

One of the critical components of building a collaborative initiative is that of information sharing. To work with a client on his or her problem(s), it is far more effective for all relevant agencies/services to be working together. Moreover, addressing one issue may facilitate the effectiveness of another intervention; thus combining efforts and resources is as

beneficial to the service providers as it is to their clients.

In consideration of the collaborative initiatives proposed in this study, the *Freedom of Information and Protection of Privacy Act* (FIPPA) provides for four defined relationships pursuant to which personal information can be shared between agencies and services. First, if a client consents to the sharing of personal information between named agencies for a specified purpose, then the information can be shared according to that consent agreement. Second, information can be shared without consent if a public body determines that compelling circumstances exist that affect the health or safety of others. Though this process may apply for some of the most vulnerable people in the DTES, it is not considered to be an option that encourages personal accountability nor a positive relationship between the person and the service providing agencies. Third, personal information can be shared with consent under the protocol of a research trial or process. While a research project may provide valuable data to assist this initiative, anonymized research data alone is unlikely to meet the needs of this initiative for long term change. Lastly, public bodies, as defined by *FIPPA* (such as provincial government and municipal agencies), may share personal information



if the information is necessary for the delivery of a common or integrated program or activity [section 33.2(d), *FIPPA*].

In the program suggested here, it is argued that while clients can enter into the process in a number of ways, the most straightforward approach would be for clients to consent to the information being shared between agencies. Under this model, potential clients (i.e., the most vulnerable people identified by each agency using suitable criteria) would be referred to the integrated program and would voluntarily grant informed consent to the sharing of their personal information. The program itself would need to be developed in terms of protocol and procedure, but it could work similarly to a diversion program where the client foregoes the “traditional” route in favour

of this integrated, needs-based program. Clients would be free to enter the program from a referral by any participating agency or through self-selection. Once the client has consented, agencies would be free to share between them the information the client allowed and collaborative efforts could be made to coordinate their care. One program that has been proposed within the VPD is a “recovery car”. This car would involve a police officer and an addictions specialist (doctor/nurse) who would be available to attend police calls where a vulnerable victim/witness/other person was in contact with the police and in immediate need/ready at the time to go into recovery. This would require information sharing between the medical specialist as well as the police. This method would avoid many of the

legislative challenges and give clients full control over their own situation. Consideration will need to be given to a) the length of time the consent is valid for (unless revoked by the client, which can occur at any time), and b) what would be done with the file after the client has completed or withdrawn from the program.

As well, consideration will need to be given to those who are unable to give informed consent (e.g., those lacking the capacity to understand to what they are consenting). For these individuals, it may be beneficial to consider facilitating information sharing under Section 33.2(d) of the *FIPPA* or under the considerations for public health or safety. Moreover, where public bodies taking part in this proposed initiative are able to demonstrate a shared mandate resulting in a common or integrated program or activity, consent to share personal information is not required. Importantly, section 33.2(d) may only be relied upon for information sharing between public bodies, and requires that the program is not simply sharing information but rather that the information needs are integral to the running of the program. Regardless of the method chosen, ultimately, this process of information sharing is a requirement of a collaborative, client-centered approach and a key component of providing care to



those who are the most vulnerable in the DTES.

GUIDING PRINCIPLES

In order to achieve this vision of assisting the most vulnerable people in the DTES, the stakeholders must coordinate their efforts so that strategies complement each other and work towards common goals. Success should be measured not by activity but by outcomes. Specifically, the stakeholders should be working towards an

increase in the overall quality of life for the community as well as concrete improvement in the lives of the most vulnerable people.

To help in the formulation of these strategies to improve the lives of those in the DTES, guiding principles should be agreed upon, such as:

- Improve the lives of the people (sex trade workers, those with addictions and/or mental health problems, the homeless, the chronically sick, and the chronic offenders) who live in the DTES, and prevent more people from drifting into a life of despair.
- Information sharing is vital between agencies to facilitate collaboration
 - Agencies must be prepared to share information on their client base in order to achieve greater coordination of efforts and to record successes and failures.
- Strategies developed must support:
 - Lowering of crime rates
 - Diversity in terms of people, incomes, businesses, housing, recreational opportunities and so on in the DTES
 - Preservation and enhancement of the heritage and cultural legacy of the neighbourhoods
 - Ensuring that health, social service, and economic supports needed by low-income communities are provided (including expansion, development, or relocation of key health and social services needed

<i>Some of the Advocates for the DTES:</i>	
Government	Private Sector
City of Vancouver	Downtown Eastside Residents Association
Business Improvement Areas	Downtown Eastside Women's Centre
Licenses & Inspections	Family Services of Greater Vancouver
Planning Department	First United Church
Social Planning Department	Franciscan Sisters Benevolent Society
Vancouver Fire & Rescue Services	Pivot Legal Society
Vancouver Police Department	Prostitution Alternatives Counseling and Education
Provincial Ministries & Agencies	Salvation Army
BC Ambulance Service	St. James Community Service Society
Liquor Control & Licensing Branch	Union Gospel Mission
Ministry of Children & Family Development	United We Can
Ministry of Community Services	Urban Native Youth Association
Vancouver Coastal Health Authority	Vancouver Area Network of Drug Users
Federal Departments & Agencies	Vancouver Economic Development Commission
Public Health Agency of Canada	Vancouver Foundation
Western Economic Diversification	WISH Drop-In Centre Society

while avoiding undue concentration of them in the DTES)

- Continuation of the Four Pillars approach on prevention, harm reduction, treatment and enforcement
 - Improving conditions on the street to provide amenities, safety and livability for all (e.g., street and lane cleaning, capital improvements on streets)
 - Business and employment development in the area
 - The availability of retail goods and services needed by all sectors of the community, including low-income residents
 - Access to civic facilities and services (e.g., parks, community centres, library, childcare) needed by all community residents is available
 - The City of Vancouver's housing policy of 1-for-1 replacement of SROs to ensure that lower income individuals are not displaced from the area
 - Involve all sectors of the community in planning and revitalization
 - Encourage tolerance and mutual respect in the diverse elements of the community
 - Affordable new market housing for moderate income households
 - Diffusion of services wherever possible to other areas of the region.
- Public and private agencies must be credited for their successes, and be

held accountable for performance inconsistent with the common goals for the DTES

These principles have been derived from the goals that have already been stated with regard to helping those living in the DTES, ensuring continuity in efforts to improve the DTES. However, the steering committee will need to add to this list with any other principles deemed necessary for the achievement of the common vision for the people of the DTES.

FRAMEWORK FOR MOVING FORWARD

The history of the DTES demonstrates that effecting substantial change in this community is a daunting challenge. When establishing a plan to move forward, it is useful to examine the past planning efforts to learn from what has succeeded and what has failed. One of the major challenges of past coordinated efforts was the attempt to simultaneously achieve a large number of goals without a concrete long term vision for the DTES. In addition, though agreement regarding the problem has been more easily attained, consensus regarding the strategies to solve it has been more difficult to find. More successful outcomes were seen when efforts were focused on a single or a very small number of outcomes that were

tangible. As a result, it is recommended that a phased approach be used.

Because of the far reaching consequences and potential for a “ripple effect”, it is recommended that the initiative first focus on the people who are most in need of assistance in the DTES. The most vulnerable people in the DTES often have concurrent problems and needs that require a coordinated approach (e.g., homeless and drug addicted and HIV positive). The group of people that are most in need should be identified through collaboration and information sharing between the relevant agencies (e.g., Health, Criminal Justice, Income Assistance). Once this group has been identified, a coordinated and proactive approach to service delivery can be undertaken.

This approach will ensure that these individuals receive the services that they require and will maximize the efficient use of existing resources as well as facilitate the development of new ones. The current approach to helping those in the DTES has primarily been agencies working in relative isolation from other agencies with similar goals. Establishing an integrated service delivery model for the most marginalized individuals ensures a people-centered approach that focuses on improving the

living conditions at the street level. Taking this action as the first step will increase the likelihood of other plans being successful, such as the economic revitalization of the area. By focusing first on improving the lives of those that are most in need, it is believed that positive momentum for change can be established and ultimately the community will follow, resulting in the development of a healthy and vibrant community.

After this initial phase, additional initiatives can be undertaken in the DTES focusing on the continuation and improvement of current revitalization initiatives (e.g., economic revitalization). Phase Two would continue to encourage collaboration between agencies, but would work at the community level rather than at the individual level. For example, the VPD is currently examining its facility needs. While the VPD could consider a multitude of potential sites across the city to be a base for its operations, the reduced crime and increased perception of public safety associated with such a facility suggest that the positive impact on the city would be maximized by having it located in the DTES. Initial estimates indicate that a public safety facility could increase the police presence in the area equivalent to adding up to 23 officers 24 hours a day, seven days a week. This increased

uniformed presence would have a positive impact on the detection of street level criminal activity, the reduction of street disorder, and the apprehension of criminals.

Previous efforts have been limited in success because of the challenges created by those who are high need as they are both the cause and victims of the circumstances found in the DTES. Resolution of their problems, and the prevention of new individuals from taking their place, will result in greater success in attempts to revitalize the DTES.

Moving forward with the initiative will require feedback regarding this proposal from Vancouver City Council. In particular, approval should be sought for the next steps that need to be taken to bring this project to fruition. Those steps include consulting with the public for feedback and comment, including agencies, residents of the DTES, and businesses so as to best evaluate the present situation and assess needs of the people in the area. Further, it will be necessary to request a commitment from the three levels of government to help fund the steering committee as well as the initiatives developed to improve lives of those in the DTES.

Once a group of top-level multi-government decision makers has been formed, the steering committee will need to systematically address the following tasks to ensure that change is achieved:

- Identify key issues and stakeholders;
- Reach agreement on strategies;
- Prioritize the actions that will be taken;
- Establish timelines for action;
- Determine the metrics that can be used to quantify progress; and
- Make decisions and take action.

COMMON VISION

While it is agreed that many of the people in the DTES are facing a large number of problems, and that the problems seem to be getting worse, discussion about what the DTES should look like if plans to improve quality of life were successful is important. For an initiative to assist those who are most in need to succeed, concurrent development of a broader scale vision is necessary. Though the committee will need to have a vision or mandate, this vision should be in line with the discussions already underway in the community. For example, a neighbourhood made up of people who are physically and mentally healthy, who can afford suitable housing, who are not forced to be a part of the

survival sex trade, who have diverse income levels and who are not exposed to drug traffickers and public drug use, and where people feel safe from violence and crime and businesses thrive would be a concrete vision for the Committee to work towards.

This report emphasizes that the vision should focus first on the lives of those who are the most vulnerable. At a macro level, the vision outlined above would be appropriate. However, it is important to also consider the micro level and to formulate a vision for how best to assist the most vulnerable in the DTES.

Whatever the decision about the vision, it is important that any plan for the DTES fully delineates how to achieve the ultimate vision for the community in tangible terms that can be seen and/or measured in some way. This vision, at its best and most useful, would have short and long term goals related to Phase One and Two of the initiative. Because of the urgency of the situation in the area, the timeline for the vision should focus on short term goals, such as the direction for the DTES in the next three to five years. The vision for the DTES, and the timeline for its fruition, will assist the committee in identifying areas of need, prioritizing strategies, and measuring success. Without

an end vision or goal, determining the best course of action will be fragmented and ineffective.

KEY ISSUES AND STAKEHOLDERS

When trying to determine how to best improve the quality of life for the people in the DTES, it is useful to first consider the key challenges that exist as well as the key stakeholders that can be engaged to facilitate change. A framework for potential collaboration can be obtained by constructing an issues-stakeholders matrix (see Figure 6).

Using a matrix to simultaneously consider the issues and stakeholders encourages the use of a collaborative approach. As a result, multiple organizations can demonstrate their role in bringing about change for the most vulnerable in the DTES. Adopting a coordinated approach amongst stakeholders is essential in achieving change in the DTES, as the most vulnerable people have problems that have become entrenched and are often found in combination. The matrix framework requires being progressive when considering the potential organizations that can be utilized to bring about change. As an example, the issue of criminal behaviour was historically often believed to be the sole responsibility of the police

Figure 6 - Issues-Stakeholders Matrix

		Stakeholders						
		VPD	City of Vancouver	Health	Justice	Other Provincial	Other Federal	Private and Non-Profit Sector
Challenges	Criminal Behaviour							
	Mental Illness							
	Alcohol and Drug Addiction							
	Street Disorder Involvement							
	Homelessness							
	Survival Sex Trade							
	Public Health Issues E.g. HIV/AIDS							

and the courts. However, the need to work with other partners is important due to the recognition that people involved in crime often have underlying issues of mental illness, homelessness, and drug addiction. As a result, strategies to reduce people’s involvement in crime in the DTES have grown to include a wide range of stakeholders, many of whom were previously given little attention.

Creating an environment that encourages inter-agency collaboration can have significant positive impacts for the most vulnerable, even in areas where organizations may initially believe that they have a limited ability to be part of a solution. For example, the VPD and the City of Vancouver have recently been involved with the StreetoHome Foundation. This non-profit organization seeks to end homelessness in the City of Vancouver. Seeing an opportunity for collaboration and partnership, the parties involved in

StreetoHome recognized that police data could be used in conjunction with other data sources to identify the hardest to house individuals currently living in the City of Vancouver. This initiative is a great example of collaboration; multiple levels of government, private sector and non-profit agencies are all working together on this complex issue. It is hoped that this initiative will be able to achieve its goal of ending homelessness in Vancouver by 2015.

COOPERATIVE STRATEGIES

To address key issues facing the most vulnerable, relevant stakeholders should develop cooperative strategies that address the root causes of the problems. This will assist in reducing the potential for a “vacuum” effect to take place where the most in need people are continually replaced with new individuals.

The process of strategy development can begin by gathering together the existing

plans and strategies of each key stakeholder. This approach utilizes the work that has been done to date and leverages the expertise as well as the resources of each stakeholder. Collaboration between the stakeholders will allow information and ideas to be brought together; strategies can be progressively filled into the matrix by the relevant subject matter experts. An example of some of the current strategies being used at the community or individual level can be found in Appendix A. It should be noted that this matrix is by no means complete; it will take collaboration by all key stakeholders to effectively fill in this matrix (or one similar) and begin to develop collaborative person-centered strategies.

Once the existing information has been brought together, top-level decision makers will be in a position to formulate a common strategy or set of strategies to deal with each issue. It is important to note that simply populating the matrix with existing plans and strategies without ensuring that there is a forum for cooperation will not ensure success. The issue of how to address each problem facing the people of the DTES is a fundamental one and consensus here is critical to the success of the initiative. Failing to encourage greater cooperation

between stakeholders would only be an exercise in data aggregation. To ensure that the quality of life of the most vulnerable people is significantly improved, the steering committee will need to emphasize discussion and collaboration with regard to strategies to be used for the people of the DTES.

PRIORITIZE ACTIONS

With large projects, it is important to prioritize tasks and strategies. The urgent nature of the situation facing the people in the DTES requires immediate triaging in order to establish the extent of the current problems in the community and in individual lives. The number of people to be included in the initiative would need to be determined but a group of 2,500 people would provide an appropriate sample that could be followed to determine the success of strategies that are deployed. This should be the first task the stakeholders take on in order to ensure that resources are devoted to the most vulnerable people and the most prevalent issues affecting people in the DTES.

Because of the potential for a “ripple” effect to facilitate intervention in problems other than the targeted one, it is necessary to consider the consequences, both intended and unintended, of any strategy. Prioritization within the client’s



care should consider the level of need (i.e., how serious is the problem relative to others), the accessibility and availability of resources to effectively intervene in the problem, and the consequences of intervening with a given problem before another one. Appropriate ordering of the care strategies will increase the effectiveness of the interventions and strategies that are utilized. In addition, gaps in service delivery should become apparent and thus resources can be allocated towards developing services to fill those gaps. This should further assist the most vulnerable population in the DTES.

TIMELINES

As part of the action plan that the steering committee designs, it will be necessary to

develop timelines for each component. For the first phase of focused care to the most vulnerable people, the timeline for implementation will likely need to be within one to two years. Overall however, the process of determining timelines will help the steering committee to ensure that the identified goals for the community and the most vulnerable people are reached. Also, having agreed upon timelines will help guide stakeholders in their allocation of resources. In addition to helping guide year-over-year resource allocations, the establishment of common goals, strategies and timeline for the stakeholders will also enable each organization to consider how their non-reoccurring projects may be leveraged to improve the quality of life in the DTES. This is particularly true of identified service gaps where new services are developed and are the most resource intensive.

METRICS

In striving to reach a common goal or vision, it is important for the initiative to be able to quantify its successes and its areas for continued improvement. Global measures of the situation are needed, where assessments are made at the community level. Establishing “before” and “after” measures will allow direct comparisons of how the situation progresses over a given period of time.

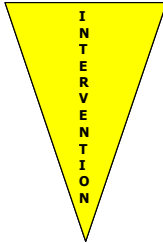
Using the measures at multiple time points (e.g., at the start, six months, one year, two years, etc.) rather than simply at the beginning and the end of a project is more realistic for any project with the people of the DTES due to the pervasive and multifaceted nature of the challenges in the area. The steering committee will need to carefully select parameters suited to the end goals and the strategies that are developed. As well, more in-depth research on the population of vulnerable people could be done to learn more about this group in a way that has not been previously done.

As well, it is necessary to assess change on a more individual level. As the first phase of the actions taken by the initiative will be directed towards improving the



standard of living for the most in need in the DTES, it is particularly important that the people are followed to ensure that the initiatives have resulted in beneficial outcomes. Consideration will have to be given to issues such as how to determine “success” for each individual. One way, shown in Figure 7, in which this could be assessed would be to determine the number of primary issues which impact the quality of life for each of the most vulnerable people. Intervening at an appropriate level based on the level of need, as defined by the number of concurrent issues, will ensure maximum benefit to the individual without overlooking those with fewer needs. This needs-based response is depicted by the inverted intervention triangle in the figure. Ultimately, this approach will reduce the size of the total population of the most vulnerable as well as the number of people at each level of need. By following this group, changes could be readily evaluated to determine what direct impact the interventions have had. In addition, the implementation of prevention strategies that have been shown to be effective in addressing the root causes of these problems will ensure that the influx of people coming into the DTES will be reduced.

Figure 7 - Possible Metrics to Assess Impact

Number of Issues	Current Situation		5 Years Later
6 +	150		50
5	250		150
4	350		300
3	450		400
2	600		500
1	700		600
Total	2,500		2,000

MAKE DECISIONS AND TAKE ACTION

This is one of the most important aspects for the team. Writing goal statements and outlining strategies will be meaningless if the group is unable to act and achieve results. Appropriate allocation of resources is an obvious place to help push the developing vision for the DTES to fruition; however, the steering committee will also need to work to inspire stakeholders and encourage them to come to the table in order to have discussions that can improve the quality of life for the most vulnerable.

Firm decision making does not mean dictating action to stakeholders; instead, it means that the committee enables the stakeholders to reach consensus about actions that need to be taken and facilitating the implementation of those actions.

CONCLUSION

- The lives of the most vulnerable people that reside in Vancouver’s Downtown Eastside are increasingly negatively affected by mental health issues, illicit substance abuse, physical health issues like HIV and Hepatitis C infections, poor housing, illegitimate businesses, crime and public disorder, a thriving sex trade, a historical reduction in police presence and the impact on aboriginal people.
- Despite numerous previous attempts to coordinate efforts in order to take action on these serious issues, the quality of life in this community continues to be dismal for the most vulnerable. Immediate action is required to improve the lives of those most in need in the DTES.

- There is a need to establish an initiative including top-level government decision makers who can work with ground level teams to devise and implement strategies that can significantly improve the quality of life for the most vulnerable people in the DTES to ensure meaningful change; these individuals must have the ultimate decision making ability for their organization.
- The best chance for the success of any initiative is to assist those who are most in need of help. This is a necessary condition of moving forward with other bigger picture initiatives. Thus, one of the first tasks should be to work towards facilitating information sharing between agencies so that the most in need individuals can be identified. Then, a coordinated effort can be made to improve the lives of those individuals.
- The steering committee should be supported by adequate staffing including a director and support staff of agency representatives and a triage team.
- With appropriate prioritization and action, a positive “ripple effect” could be seen within the DTES community, whereby the improved quality of life for the most vulnerable would lead to improvements in surrounding communities.
- Civic investment is important to the area and should be encouraged as part of the efforts to improve the standard of living for the most vulnerable in the DTES. An example of a catalyst for change would be the relocation of VPD HQ back to the DTES.

Despite the efforts of numerous agencies and all levels of government, the most vulnerable people in the DTES are still facing a number of critical issues. However, it is recognized that the problems that degrade the quality of life for these individuals are larger than can be addressed by any single organization. Therefore, there is a need to work together at the highest levels, where top decision makers in each organization have the authority to take action and commit their resources to bring about change.

The goal should be to get people the help they need. Politics, or a desire to be treated in a certain way, should not be factored into any solution.

*-Michael Smythe,
Vancouver*

To guarantee success and facilitate the efficient use of resources, this report proposes the creation of a steering committee of top-level decision makers, support staff of agency representatives and a triage team. This essential collaboration will ensure that there is an improvement in the quality of life for the most vulnerable individuals and for the DTES community as a whole. By first focusing inter-agency efforts on identifying and assisting those who are the most in need and improving their quality of life, the health of the community will follow.

RECOMMENDATIONS

1. Establish a collaborative steering committee with top level decision makers with adequate support staff and community involvement as suggested in Figure 5.
2. The steering committee should facilitate an information sharing process between agencies to identify those individuals who are most in need and then work to improve the lives of those individuals.
3. The steering committee should further devise and implement strategies to significantly improve life in the DTES based on the guiding principles.
4. Evaluation and accountability must be an integral part of framework established by the steering committee. ■

APPENDIX A: Matrix of Some of the Existing Strategies

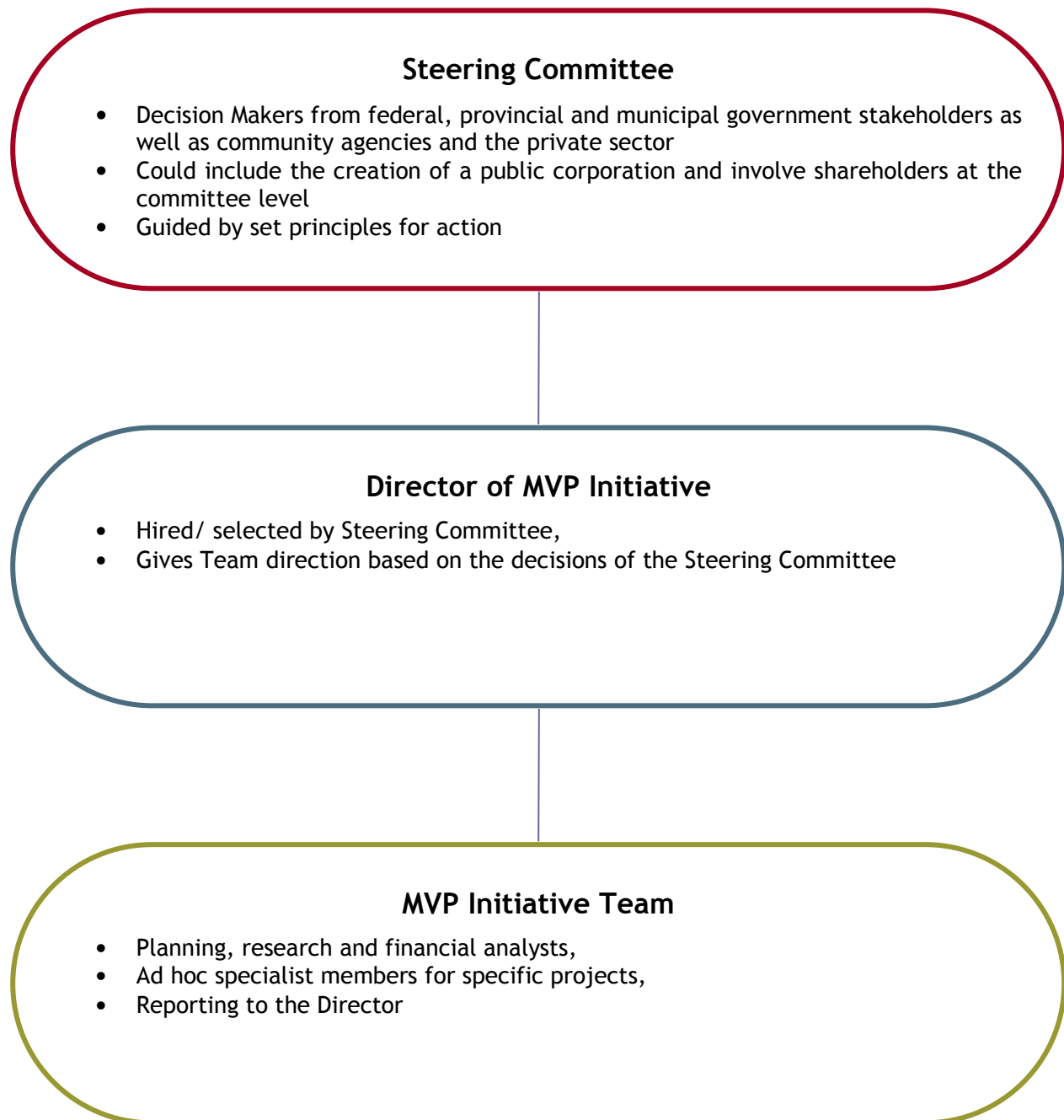
		Key Stakeholders							
		Police	City	Health	Justice	Other Provincial	Federal	Private and Non-Profit Sector	
Challenges	Crime	Beat Enforcement Team (BET) Crime Free Multi-Housing Con-Air Program Project Old Timer Safer Parking Lot Program Chronic Offender Unit				Downtown Community Court		ICBC Bait Car Program	
	Mental Illness	Mental Health Car (Car 87) Lost in Transition Report	Supportive Housing Strategy	Vancouver Coastal Health's Mental Health & Addictions Supportive Housing Framework New Vancouver Coastal Health Office at 2750 East Hastings Street		Task Force on Homelessness, Mental Illness, and Addiction			
	Alcohol and Drug Addiction		Four-Pillar Approach Drug Policy Program Preventing Harm from Psychoactive Substance Abuse	Centre for Concurrent Disorders Assertive Community Treatment Program Building on Strength Strategy Plan Prism Alcohol and Drug Services	Vancouver Drug Court	Crystal Meth Secretariat		North American Opiate Medication Initiative (NAOMI)	
	Street Disorder	Beat Enforcement Team (BET) Police Facility at 312 Main Street	Project Civil City Neighbourhood Integrated Service Teams (NIST) Keep Vancouver Spectacular Program				Safe Streets Act		Private Security/Ambassador Program
	Homelessness	StreetoHome	Downtown Eastside Housing Plan Homeless Action Plan Homeless Outreach Program				Provincial Housing Strategy BC Housing Management Commission	Homelessness Partnership Initiative	StreetoHome Foundation
	Survival Sex Trade	Sex Trade Liaison Officer							Women's Information Safe Haven (WISH) Prostitution Alternatives Counselling and Education Society (PACE)

APPENDIX B: Alternative Governance Model

Alternative governance structuring was considered during the development of this report. One suggestion of the many possible is included here. Based on the best and most effective pieces of the Vancouver Agreement and Project Civil City a high level multi-stakeholder steering committee could be formed to facilitate this alliance (see Figure 8). This committee could also include the creation of a public corporation whose shareholders are comprised of all relevant stakeholders, including the private sector. Given that decisions made in other areas of the region and the province are highly relevant to the DTES, it is important that high ranking members of regional and provincial governments in particular are included on the committee to better make decisions that benefit the people. Supporting this committee should be a Director and team, jointly funded by the three levels of government. To ensure success, the individuals that represent each stakeholder must have the ultimate decision making authority for their organizations, including the authority to commit resources.

Specifically, this committee will operate according to guiding principles about how to implement change in the DTES. To be most effective, the steering committee should be made up of cabinet ministers, deputy ministers or assistant deputy ministers, high level managers from the City of Vancouver and other agencies whose services impact the DTES, such as Health, Housing, Income Assistance, Justice, and the private sector, to name a few. This committee will then select a Director to supervise and manage a team of staff and resources in order to fulfill the direction of the steering committee. The Director will liaise with and report back to the Steering Committee while ensuring that the objectives of the committee are brought to fruition as well as facilitating the information sharing necessary between the agencies involved. This will assist in establishing accountability between the partners and in the coordination of public and private efforts to improve the DTES. The team of staff under the Director will be made up of planning, research and financial analysts who work to implement the strategies decided upon by the Committee. Other staff members may be brought on to work on specific projects. For example, experts or specialists in a field (such as health or crime) may be brought in to ensure that the implementation of the strategies at the ground level is as efficient and effective as possible.

Figure 8 - Alternative Model



ENDNOTES

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