



Response to Homeless Encampment Health Issues in the Context of COVID-19: Guidelines and Best Practices June 8, 2020

#### Introduction

The COVID-19 pandemic and the opioid overdose crisis are both active public health emergencies that threaten to severely and disproportionately impact the health and welfare of vulnerable people experiencing homelessness, including those in encampments.

COVID-19 pandemic response measures have helped reduce transmission of the virus but have also led to a reduction in necessary supports available to people experiencing homelessness through closures of public washrooms (with access to running water and sanitation), loss of housing, closed or reduced shelter spaces, limited access to food, outreach services, day programs, harm reduction, health and income services. In some communities, people are clustering together and setting up encampments around the few services that are open and for personal safety. It is also challenging for people sheltering in encampments to follow public health guidance to prevent COVID-19 virus transmission, such as practicing physical distancing or self-isolating should they be exposed to COVID-19 or exhibit symptoms.

These guidelines are intended to aid local governments and local organizations in responding to the health risks to people sheltering in homeless encampments. Included are select best practices, as well as issues and mitigation strategies related to some health risks in homeless encampments. These guidelines draw from, and supplement, public health guidance from the Office of the Provincial Health Officer, and encampment response best practices from the Ministry of Municipal Affairs and Housing.

It is important to note there are additional resources regarding the opioid overdose crisis through the Ministry of Health, Ministry of Mental Health and Addictions and local authorities, to ensure continuity and expansion of harm reduction services and health supports.

## **Provincial context**

The Province takes a Housing First approach to homelessness and encampments, prioritizing access to supports and safe and secure housing. There are hundreds of people sheltering in encampments across the province – in tents, vehicles, RVs and structures, and in small and large groups in both urban and rural settings. The Province has a key role in responding to homelessness and encampments and does so through partnerships with local governments, non-profits, Indigenous and community organizations. For the purpose of these guidelines, the following principles apply:

• Safe and secure shelter and housing, with sanitation facilities, are preferable to people living in encampments;

BC Centre for Disease Control







 While encampments, or tent cities, can offer vulnerable people a sense of community and security, they are not a suitable or desirable form of long-term housing but may be temporarily necessary to provide shelter when other options are not available;

 Encampments and public homelessness are key points of contact for providers to offer people the housing, shelter and support options they need.

Best Practices: Encampment prevention and response is best served through a collaborative and coordinated multisectoral approach. This includes all levels of government, land management and social service ministries, agencies and legal services. A timely and coordinated response to an encampment ensures people can be connected to housing and support services and stay safe and healthy during their time in an encampment.

Legal and Human Rights Considerations: People experiencing homelessness in encampments and public spaces have legal rights, including rights under the Canadian Charter of Rights and Freedoms (the "Charter") and under BC's Human Rights Code. Some people are physically, mentally, or emotionally vulnerable and, as such, should always be provided with supportive, informative, non-judgemental and culturally-sensitive assistance.

People experiencing homelessness have rights like all citizens, including privacy, safety, property, the right to live without threat, harassment, and fear of violence and the right to not be libeled. Public communications should be developed carefully to ensure that these rights are protected even as a local governments seek to explain their objectives and approach.

**Communications and Engagement:** In all cases, it is good practice to engage with people who are vulnerable, experiencing homelessness and to avoid stigmatizing or stereotypes. Consider developing an advisory board inclusive of encampment representatives for decision-making. Encampment leaders, peers and advocate groups can be key to helping communicate with people in encampments. However, they are not always connected to all residents so consider multiple communications avenues and formats. People experiencing homelessness in encampments may not have access to phones or internet and may work in the day and need shelter at night - this makes it important to try to connect in person, rather than just by written or other non-personal contact.

**Encampment Health and Safety Risks:** There is strong scientific evidence supporting numerous associations between homelessness and poor health such as mental illness, substance use disorder, poor nutrition, skin conditions, diabetes, higher exposure to violence and exposure to weather-related incidents in extreme heat, cold, wind and rain. Also, people experiencing homelessness can face barriers to accessing the health system - leading to further health challenges (see endnotes).

In general, people in encampments face many risks to their health and safety – which include overdose, violence, sexual exploitation, fire, and sanitation risks and barriers. Those requiring addictions and mental health support, youth, women, and Indigenous Peoples, all of whom represent a disproportionate percentage of people experiencing homelessness, are especially vulnerable.

Decreased services and increased encampment population due to the COVID-19 pandemic emergency response is increasing these risks. In the event of documented or suspected disease transmission (such as COVID-19) in the encampment, swift public health action to identify and mitigate the source should be taken and should be directed by regional health authorities.







#### **Issues and Strategies**

The following are key issues related to homeless encampments which may be present or exacerbated in the current context of COVID-19 pandemic response measures and the related mitigation strategies:

Sanitation and Health: Inability to access water, food, sanitation and waste management all create a cumulative risk for the development of disease and the potential for outbreaks of gastrointestinal or respiratory diseases (such as COVID-19) at the camp.

- Ensure access to running water and soap on-site or at a nearby public facility where people can use toilets, wash ٠ their hands, stow and sanitize food and belongings. Water supply is highly variable across encampments. Provision of safe drinking water mitigates communicable disease and dehydration risks.
- Common areas should have routine cleaning and disinfection to prevent the spread of infectious diseases. • Proper steps for cleaning and disinfecting are important to take into consideration for the prevention of food borne illness or other communicable diseases. Health authorities can advise on appropriate cleaning protocols.
- Health authorities can advise on the number of toilets and hand-washing stations to be made available, their • location, access and maintenance, as well as where grey water is to be disposed of to maintain sanitation and help prevent disease outbreaks. Consider the following mitigation strategies to ensure the ability for handwashing with soap and water/sanitizer, cleaning surfaces, and advising wearing a mask if experiencing symptoms:
  - Re-opening any closed public washrooms and/or facilities (ex. Community centre or library washrooms)
  - Providing portable toilets, hand-washing stations and/or showers including grey water station spaced at a distance
  - Setting up a food storage, preparation and distribution hub, with cleaning materials
  - Providing adequate waste management and containers. Lack of proper waste containers and clearance strategy, including organic waste and standing or grey water, may result in accumulation of waste, attracting rodents or other pests, which may increase the chances of vector-borne disease (see endnotes).
  - Ensuring easy access for emergency responders

#### **COVID-19 Specific Prevention:**

Information to share with campers includes (see handouts included for suggested resources):

- Alerts about overdose incidents and occurrence of COVID-19 spread in their area ٠
- Physical distancing recommendations ٠
- Hand hygiene instructions and information where people can go for attending to personal hygiene needs, cough • etiquette instructions, and advice not to share personal items
- How to recognize the symptoms of COVID-19, what to do if they are sick, and how to access testing resources •
- What to do if their friends, family, or community members are sick ٠
- How to access resources so that they can isolate themselves if they have symptoms
- Updated information on where to find food, water, hygiene facilities, regular healthcare, and behavioral health resources if there have been local closures or changes

Fire and safety: Fire safety is a common concern in homeless encampments, as people use or store flammables in or near tents, use candles, propane heaters and cook with fire often in enclosed spaces. These dangers increase in hot, dry





weather when forest fires are a concern. With the increase in encampments during the COVID-10 pandemic, the following fire safety information is provided to help guide fire inspectors in assessing the existence and severity of fire hazards in encampments:

- Check for adequate separation around and between the tents (two metres is recommended) and 12feet-by-12-feet of space per person
- If tarps are used to cover the tents, ensure that they are non-flammable, secured, and do not to cover more than one tent
- Ensure unimpeded egress from each tent is maintained to a clear path of egress from the tent out of the encampment to a safe area
- Check the overall encampment area for clutter that could impede egress or contribute to the rapid spread of fire
- Remind occupants of the dangers of flame or combustion in and around tents, specifically that:
  - Open flame units should not be used inside the tents for heating, lighting or cooking (i.e.: candles, propane stoves, propane heaters)
  - Flammable liquids or compressed gas should not be stored inside tents
  - Candles, matches or open flames of any kind should not be used in or near a tent
  - Lamps, heaters or stoves should not be refueled inside a tent
  - All lanterns should be extinguished or turn off before going to sleep, and battery powered lanterns should be used whenever possible
  - Cooking should not be done inside a tent, occupants are encouraged to have a central cooking area with adequate safety measures and clearance from combustibles
  - Smoking should not occur in tents
- Ensure any open fires are downwind and have adequate separation from a tent or combustibles and be sure to fully extinguish fires before leaving a campsite or before retiring for the night (no open fires is optimal)
- Ensure adequate clearance around generators from combustibles + adequate air circulation to avoid carbon monoxide buildup in or near your tent.

## Consider the following mitigation strategies:

- Check what your local fire bylaws cover and the powers to act listed under the bylaw. This may allow quicker enforcement options to deal with problems that are identified.
- Establish communication with the campers and develop a rapport.
- Explain the hazards to campers and why they represent a danger to life safety. •
- Work with the occupants to find ways to safely address the hazards.
- If unsuccessful, contact the local fire chief.
  - Identify and explain the situation and risk.
  - Discuss the use powers of inspection under the *Fire Services Act* to inspect.
  - Work with occupants to address hazards
  - If necessary, issue an order under the Act to deal with the hazards (see section 21 and 22). Note: this is not an order under the fire code.







If you need advice or assistance, contact your local Fire Service Advisor from the Office of the Fire Commissioner.

## Vulnerable groups and safety: Are there noticeable imminent social or physical safety concerns to people?

- Determine if the encampment site physically safe for the people there. Consider proximity to roads or sidewalk with busy traffic. Consider presence and proximity of unsafe structures that could collapse or large trees or building materials that could fly off or fall and cause harm a person.
- Assess the encampment for the presence of any distinct vulnerable groups, such as children, youth, women at-risk of violence, Indigenous people, seniors, LGBTQ2S, persons with physical, mental or developmental disabilities, opioid users – and determine engage appropriate Ministry intervention and need immediately (such as an alert to Ministry of Children and Families Development).
- Where imminent risks are present, in collaboration with service providers, local police and fire • departments, and provincial agencies, and if appropriate enforce existing bylaws and policies to ensure safety measures can be achieved.

#### Upholding the rights of Indigenous Peoples and considerations for cultural safety:

Indigenous peoples are strong and resilient and have diverse and unique ways of being. Indigenous self-determination is a fundamental key to wellness. Canadian colonial practices and policies have inflicted historical and contemporary harm on Indigenous peoples. Due to ongoing systemic power imbalances and a lack of cultural competency, safety, and humility, many Indigenous Peoples mistrust Canadian institutions and agencies due to historical and ongoing colonial abuses including Indian Residential Schools, Indian Hospitals, Sixties Scoop policies, the child welfare system, the justice system, and violence against Indigenous women and girls. Racism and prejudice also contributes to inequitable healthcare and health disparities and outcomes. Where possible and appropriate, to support the well-being of Indigenous camp members, agencies should reach out to local Friendship Centres, Métis Associations, or other outreach centres to facilitate the connection to cultural and spiritual supports. While various agencies many be able to provide different services, Indigenous Agencies may:

- Help encampment residents access culturally safe, wholistic health services that they need to improve or maintain their health
- Advocate on an encampment resident's behalf with in the health system, including the mental health system
- Provide assistance accessing First Nations Health Authority benefits and funding for services •
- Provide culturally safe education on health issues and concerns •
- Connect residents with community resources and benefits
- Provide homelessness prevention and/ or outreach programs •

Bylaws and Discretion: Physical distancing is an important way to prevent the spread of COVID-19 among people and throughout communities. However, following the public health guidance to promote physical distancing, such as staying home, limiting outings and travel, is not feasible for people without a home and who depend on public resources. Also, many of the resources and services that help people experiencing homelessness, including safe shelter, food, sanitation, financial, communications, addictions, health, mental health and social supports, have closed or significantly reduced services.







Local governments can help support people experiencing homelessness to reduce health risks and to improve access to essential services, supplies and supports. This may include looking at any bylaws that require people experiencing homelessness to move or leave safe shelter, be that a park or vehicle. Clearing or moving encampments without providing shelter or housing immediately can cause people to disperse throughout the community and break connections with service providers. This increases the potential for infectious disease spread and may lead to isolation, which also poses health and safety risks to vulnerable people.

Local governments should consider short-term policy adjustments to the enforcement of local bylaws regarding overnight sheltering or camping in public parks or elsewhere, as well as overnight parking bylaws that prevent people from parking in vehicles or RVs overnight on public streets. In some cases, and in some locations, it may not be advisable or possible to relax bylaw enforcement, namely if there are immediate health and safety concerns, or if people are camping in spaces that are not safe for camping or sheltering, such as sidewalks or boulevards, and some parks.

A community approach, considered in collaboration with your regional health authority, local services providers and law enforcement can help determine where and when short-term policy adjustments to bylaw enforcement can be most helpful, and support service delivery, without resulting in unintended consequences, like the entrenchment of unsafe encampments.

**Outreach and Supports:** Housing, health and social supports are the first step in provincial encampment response. However, the COVID-19 pandemic emergency has impacted the ability and capacity of government and non-profit organizations to provide expanded outreach services to all encampments. There may be additional shelter, housing, income, addictions and health supports for vulnerable people at this time – as part of the pandemic emergency response measures.

- The Ministry of Municipal Affairs and Housing helps coordinate cross-ministry responses and information for complex homeless encampments.
- BC Housing provides operational homelessness and encampment responses, include outreach, housing, shelter, provisions and site management.
- The Ministry of Social Development and Poverty Reduction provides community-based outreach income and social supports through Community Integration Specialists.
- The Ministry of Health, through health authorities, may provide clinical and health outreach supports to people in encampments, information on the prevention and response to communicable disease risks, and overdose prevention services.

**Mental Health and Addictions:** Access to harm reduction supplies and services have been impacted in some communities due to staffing and supply pressures related to the COVID-19 pandemic emergency. This includes access to overdose prevention sites, managed alcohol programs and harm reduction supplies. People who use drugs may also not be accessing or visiting service because of virus transmission fears. Using drugs alone puts people at a greater risk of opioid overdose harms and death.

• Assess what services have been impacted in your community and consider working with government, the health authority and local service providers to maintain services, provide outreach or mobile services.





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### Additional Resources

**COVID-19 Resources:** Resources to help communities respond to homelessness during the present pandemic include:

- BC Centre for Disease Control (BCCDC): <u>Prioritized screen and testing for vulnerable people through local health</u> <u>authorities</u>
- BC Housing press release: <u>New sheltering spaces and outreach</u>
- Ministry of Social Development and Poverty Reduction <u>Financial Assistance webpage</u>
- Provincial Health Officer/BCCDC: <u>Guidelines for social service providers (homelessness)</u>
- Extended supports for youth in care
- Factsheet for Unsheltered People: <u>http://www.bccdc.ca/Health-Info-Site/Documents/COVID19\_FactsheetForUnsheltered.pdf</u>
- SDPR COVID-19 Support for Income & Disability Assistance: <u>https://www2.gov.bc.ca/gov/content/family-social-supports/income-assistance/on-assistance/covid</u>

## Harm Reduction, Overdose Emergency and Safer Supply Resources

- BCCDC Harm Reduction Services: <a href="http://www.bccdc.ca/our-services/programs/harm-reduction">http://www.bccdc.ca/our-services/programs/harm-reduction</a>
- BC Overdose Prevention and Response in BC: <u>https://www2.gov.bc.ca/gov/content/overdose?keyword=overdose</u>
- Safer Supply and other substance use issues, BC Centre on Substance Use: <u>https://www.bccsu.ca/covid-19/</u>
- BCCDC Harm Reduction and Overdose Control Factsheet: <u>http://www.bccdc.ca/Health-Info-Site/Documents/COVID19-harm-reduction.pdf</u>

## **References to Guidelines in Other Jurisdictions**

Canada:

- Toronto Public Health: COVID-19 Interim Guidance for Homelessness Service Settings: <u>https://www.toronto.ca/wp-content/uploads/2020/03/8ee3-Interim-Guidance-for-Homelessness-Service-Settings-Providers.pdf</u>
- Homeless Hub: COVID-19 Response Framework for People Experiencing Homelessness : <u>https://www.homelesshub.ca/sites/default/files/attachments/HPD-Doc-</u> <u>CHN3CovidPlanningRevisedwithHealthRecos-20200320%20%282%29.pdf</u>
- Youth Homelessness COVID-19 Resources: https://www.homelessnesslearninghub.ca/courses/youth-homelessness-covid-19-resources
- COVID-19 and Persons Experiencing Homelessness or Vulnerable Housing: <a href="https://caep.ca/wp-content/uploads/2020/03/COVID-19-and-homelessness-CAEP-updated-0321-1.pdf">https://caep.ca/wp-content/uploads/2020/03/COVID-19-and-homelessness-CAEP-updated-0321-1.pdf</a>
- Webinar: COVID 19 Response for Unsheltered Homeless People: <u>https://www.youtube.com/watch?v=QgJDOrPTRZs&feature=youtu.be</u>

## United States:

- Centers for Disease Control and Prevention. (2020). Website People Experiencing Homelessness and COVID-19: Interim Guidance on people experiencing unsheltered homelessness. https://www.cdc.gov/coronavirus/2019-ncov/community/homeless-shelters/unsheltered-homelessness.html
- Homeless Hub COVID-19 Wiki Encampments
  <u>https://sites.google.com/a/community.solutions/homeless-hub-covid-19-wiki/home/encampments</u>
- State of California. (2020). *Recommended strategic approaches for COVID-19 response for individuals experiencing homelessness.*



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https://www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/COVID-19/Protocols-Homeless-Pop.pdf

- Street Medicine Institute. (2020). *Street medicine practice during the COVID19 pandemic*. <u>https://ccalac.org/wordpress/wp-content/uploads/COVID-19-Street-Medicine-Guidance-3-20.pdf</u>
- US Department of Housing and Urban Development. (2020). Infectious Disease Toolkit for Continuums of Care: Preventing & Managing the Spread of Infectious Disease within Encampments. <u>https://files.hudexchange.info/resources/documents/Infectious-Disease-Toolkit-for-CoCs-Preventing-and-</u> Managing-the-Spread-of-Infectious-Disease-within-Encampments.pdf
- US Department of Housing and Urban Development. (2020). Protecting health and well-being of people encampments during an infectious disease outbreak. <u>https://files.hudexchange.info/resources/documents/COVID-19-Essential-Services-for-Encampments-During-an-</u> Infectious-Disease-Outbreak.pdf

Europe and the United Kingdom:

https://www.lshtm.ac.uk/sites/default/files/2020-04/Guidance%20for%20the%20prevention%20of%20COVID-19%20infections%20among%20high-risk%20individuals%20in%20camps%20and%20camp-like%20settings.pdf

# Endnotes

<sup>1</sup> For evidence on the association between homelessness and health outcomes, see:

- Public Health Ontario (2019). Evidence Brief: Homelessness and Health Outcomes: What are the Associations? <u>https://www.publichealthontario.ca/-/media/documents/eb-homelessness-health.pdf?la=en</u>
- Canadian Population Health Initiative of the Canadian Institute for Health Information, Mental Health, Mental Illness, and Homelessness in Canada (2009). In: Hulchanski, J. David; Campsie, Philippa; Chau, Shirley; Hwang, Stephen; Paradis, Emily (eds.) Finding Home: Policy Options for Addressing Homelessness in Canada (e-book), Chapter 2.3. Toronto: Cities Centre, University of Toronto. <u>www.homelesshub.ca/FindingHome</u>
- Hwang, S. W., & Bugeja, A. L. (2000). Barriers to appropriate diabetes management among homeless people in Toronto. *CMAJ*, *163*(2), 161-165.
- Cusack, L., van Loon, A., Kralik, D., Arbon, P., & Gilbert, S. (2013). Extreme weather-related health needs of people who are homeless. *Australian Journal of Primary Health*, *19*(3), 250-255.
- Lubik, AA, McKee, G, Chen, T, Kosatsky, T (2017). Municipal Heat Response Planning in British Columbia, Canada.
  BC Centre for Disease Control. Vancouver, Canada.
- Stares, J, Kosatsky, T (2015). Hypothermia as a cause of death in British Columbia, 1998-2010: a descriptive assessment. *CMAJ*. <u>http://cmajopen.ca/content/3/4/E352.full</u>

<sup>1</sup> On waste management and disease, see:

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- World Health Organization (2006). Overview of greywater management: Health Considerations. <u>http://applications.emro.who.int/dsaf/dsa1203.pdf</u>
- McVea, DC, et al. (2018). Exposure to Rats and Rat-Associated Leptospira and Bartonella Species Among People Who Use Drugs in an Impoverished, Inner-City Neighborhood of Vancouver, Canada. *Vector Borne Zoonotic Disease*; 18. <u>https://www.ncbi.nlm.nih.gov/pubmed/29298408</u>



