The Salvation Army Harm Reduction Guidelines for Emergency Shelters

Salvation Army emergency shelters play an important role in meeting basic needs for people experiencing homelessness and protecting them from serious harm. Emergency shelters are often a last resort for people who may otherwise sleep in places where they are exposed to environmental dangers or interpersonal risks.

The goal of emergency shelter is to help people meet their basic needs, secure and retain housing, and to connect with community-based support services. The Salvation Army is committed to ensuring that our emergency shelters are welcoming and as accessible as possible to those in need, including individuals with mental health and addiction challenges.

The Operating Principles for Emergency Shelters state that we will **use harm reduction principles to guide emergency shelter service delivery and use behaviour-based criteria for restricting access to shelter.**

Harm Reduction Principles

The Salvation Army uses harm reduction principles to guide emergency shelter service delivery. These principles are as follows:

- **Respect:** Staff treat clients with dignity and respect.
- Understanding and Compassion: Staff understand that people who have experienced trauma in their lives or who are living with physical or mental health issues may rely on drugs or alcohol as a way to escape emotional, psychological or physical pain.
- **Non-Judgment:** Staff recognize that a non-judgmental approach is critical to the building of trust with clients that can lead to positive life change.
- **Practicality:** Staff take a practical approach, making client safety the main priority.
- **Opportunity:** Staff use the time a person is in emergency shelter to address housing needs and connect them to needed resources and services including those that address substance abuse.



Behaviour-Based Criteria

Salvation Army emergency shelters use behaviour-based criteria rather than abstinencebased criteria to determine access to or restriction from emergency shelter. That is, decisions about admission, early discharge, and restriction from services are based on behavioural standards and not on absolute sobriety. In each unit, policies and procedures are in place to ensure this.

Behaviour-based criteria allow a client to gain admission to and maintain their bed at an emergency shelter if they are under the influence of drugs or alcohol, as long as they are not behaving in a way that would pose a risk to themselves or others.

For instance, if a person is acting aggressively, or is threatening clients or staff, the person may be turned away or discharged. Staff would first attempt to calm the client and de-escalate the situation. If de-escalation does not occur, the client would be assisted to access another shelter or alternate accommodation.

Or, if a person is intoxicated to the point that they may be at risk of alcohol poisoning or a drug overdose, the person would be transferred to emergency medical personnel rather than be admitted to shelter.

Behaviour-based criteria may vary from community to community.

- Where The Salvation Army operates the only emergency shelter in a community, the behavioural criteria would be as minimal as possible to ensure that every person seeking shelter is provided access.
- In communities where people have access to a variety of emergency shelters, specifically no-barrier or low-barrier emergency shelters, The Salvation Army may establish higher-barrier behavioural criteria for its units, while ensuring that clients are referred appropriately and not discharged to homelessness.
- Emergency shelters that serve youth and/or families with children set behavioural standards that reflect the risks and safety needs of minors. This includes the risks to intoxicated youth if they do not have a safe place to stay for the night.



• In extreme weather conditions, behavioural standards may be adjusted to address the increased risk of injury, illness or death for those in need of emergency shelter.

Each emergency shelter manages their risk and liability recognizing that, wherever possible, no one is to be turned away with no place to stay.

Harm Reduction Products

Harm Reduction products are made available to emergency shelter clients. These are supplied by a public health agency or by contract with another service provider. Policies and procedures are in place to guide client access to these products.

Methadone and Suboxone may be stored on behalf of clients who have a prescription.

In the case of opioid overdose, Naloxone is to be used as a life-saving measure by residents or staff who have had appropriate training. Operational policies and procedures will be in place to guide the safe and appropriate use of this drug, and staff training will be ensured.

Harm Reduction Programs

Since The Salvation Army intends to create safe environments where drugs and alcohol are not permitted on-site, clients seeking safe injection sites, managed alcohol, heroin maintenance, or other harm reduction programs are referred to other service providers.

