

## **CUPE BC 2022 CONVENTION COMMUNITY SOCIAL SERVICES COMMITTEE REPORT**

Like many other public service sectors in CUPE BC, the Community Social Services (CSS) sector has been significantly impacted by the COVID-19 pandemic. CUPE CSS members continue to feel not only unappreciated for the services they provide, they also feel disrespected by employers who retreated to work from home while they were expected to continue working on the frontlines despite the risks to themselves and their loved ones. Significant and critical staff shortages have led to recruitment and retention issues across the sector. People receiving our services are increasingly frustrated by the constant lack of access to supports and resources, which has resulted in our CSS members experiencing higher rates and severity of violence at work. The lack of safe drug supply has meant that community social services members must address skyrocketing overdose rates while frequently being exposed to overdose deaths, in some cases daily. Because of these compounded challenges, CSS members are reporting higher levels of burnout and mental health challenges such as depression and anxiety. Many say they do not know how much longer they can sustain their current working conditions.

### **Ongoing Lack of Recognition**

In the last Community Social Services report to convention, our committee reported that CSS members felt they were not recognized for the work and services they were providing throughout the pandemic. From the beginning, the Community Social Services sector was quickly designated as essential service work for the purposes of the pandemic, forcing CSS members to pivot quickly despite the lack of PPE and significant risk to themselves. While many of our members received a one-time payment of \$4.00 per hour for 16 weeks of work in recognition of the services they provided, child care workers and staff required to work remotely did not receive this payment. This includes staff at bc211, who suddenly shifted to remote work while struggling to cope with increased workloads due to the creation of new helplines such as the Seniors Line, increased caller needs, and changed technology, with little

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to no additional support. While workers in the health care field were recognized by government and society at large, many CSS workers felt that their contributions and the challenges they faced remained largely invisible. This only compounded the burnout, mental health challenges and sense of loss that CSS workers had personally experienced and witnessed throughout the pandemic whether working remotely, in the child care sector, or on the front lines.

### **Recruitment and Retention**

CSS workers have toiled in the face of significant and worsening recruitment and retention issues in the sector. This is a longstanding problem, but employers and members alike agree that it has never been as severe as the current staffing crisis. Members report working significant overtime in an effort to address staffing shortages; employers are redeploying individuals in order to address scheduling issues. Often these redeployments continue for indefinite and undefined periods, causing CSS members anxiety and uncertainty. In some cases, employers have been forced to reduce services because they simply do not have enough staff. Recruitment and retention in the CSS sector have been exacerbated by the pandemic, as staff contracting COVID have been forced to take long-term medical leaves due to long COVID and/or their own or a relative's immuno-compromised medical conditions, or because they are not vaccinated and so cannot work due to vaccine mandates. These challenges have increased burnout and vicarious trauma, prompting members to take much-needed medical leaves.

### **Increased Violence on the Front Lines**

A growing number of CSS workers report that they are experiencing significant increases in the rate and severity of workplace violence. These reports range from threats and other verbal abuse or harassment, to damage to personal property and physical and/or sexual assault. This can be as devastating for the entire work force as for the individual worker involved, as cumulative effects can add up quickly. The CUPE BC CSS Committee has been raising awareness of this issue. We have been calling for improved training for workers to be able to manage these situations. This training needs to include better violence risk assessment skills, procedures, and practices, more and improved training in managing hostile interactions and non-violent crisis intervention, and improved incident debriefing and follow-up. Our sector is

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losing regular full-time and part-time workers, and the violence issue is certainly a key reason for this attrition.

### **The Opioid Crisis**

The COVID-19 pandemic exacerbated B.C.'s other public health emergency – the opioid overdose crisis. The year 2019 saw the first decline in B.C. overdose deaths in eight years, and it was significant: 982 deaths, down from 1,559 the year before. But in 2020, the numbers rose to a new record of 1,767 deaths; in 2021, yet another record, at 2,224 overdose deaths. The opioid crisis has affected many families, along with workers, throughout the province. Our CSS sector has workers on the front lines of this crisis, and many have witnessed and experienced the devastating effects of addiction firsthand. These same workers have also been the ones to breathe life back into lifeless bodies. They have shared hope and encouraged the persons they are supporting to make healthier options and choices. Because of this, they are able to witness people making significant and positive life-changing decisions.

### **Burnout and Increased Mental Health Challenges**

When the new CUPE BC Community Social Services Committee first met in October 2021, all committee members spoke of increased burnout and the mental health challenges they had either personally experienced or witnessed as they struggled to navigate work during the pandemic. After two years of working amidst increased uncertainty as the pandemic has continued to plague our communities, the fear of contracting COVID-19 and causing potential transmission to loved ones, and witnessing the impact on our clients who have contracted the disease, times have been extraordinarily challenging for CSS workers. In addition, CUPE CSS workers have contended with skyrocketing rates of mental illness in persons served, and dramatically increased numbers of overdoses as the supply of safe drugs steadily decreased. These challenges—compounded by significant increases in verbal, physical and sexual violence—have left an indelible impact on Community Social Service members. Our committee members report having to make extraordinarily difficult, split-second decisions between their own safety and the safety of others, and are doing this despite severe emotional and physical exhaustion caused by the enduring impact of COVID and extended work hours. For example,

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members describe witnessing overdoses occur and choosing to provide mouth-to-mouth resuscitation in an effort to save lives, despite potentially contracting COVID themselves.

In response to this burnout and mental health crisis, similar to those of other CUPE BC Committees, our committee members requested mental health supports for their stewards and their members. Increasingly called upon to support their members living with mental health issues, stewards report that they do not have the tools they need.

### **The Community Social Services Committee Workplan**

In response to the challenges caused by COVID-19, the committee heeded a request to provide more information as to the reasons for the severe recruitment and retention crisis plaguing the CSS sector. Since providing our President, Karen Ranalletta, with an exhaustive list of the reasons for this problem, we are pleased to report that Sister Ranalletta has used this information to advocate with government on behalf of CSS members in our province. In light of the mental health issues impacting our CSS members, the committee has requested mental health resources and tools to assist our stewards in supporting our members as well as tools to support themselves. Since the majority of CUPE BC committees identified mental health to be a significant public sector issue, the Committee is committed to supporting the use of existing CUPE BC resources along with any new resources that may be developed for all CUPE members.

As mentioned, violence against CSS members has been a long-standing, troubling issue in the Community Social Services sector. Unfortunately, as clients struggled with the lack of resources during the pandemic, our members became the victims of increasing rates of verbal, physical and sexual violence, with the violence increasing in intensity. Because of this, our committee is committed to ensuring that our members have access to violence risk assessment tools and understand how such tools can be used to help keep themselves safe. As such, the committee's priority resolution recommends that CUPE BC works with CUPE National to develop Violence Risk Assessment Training to help our members better understand this tool and how to use it.

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The escalating rates of overdose deaths have significantly impacted our province, and in particular, many Community Social Service members that find themselves on the frontlines as first responders to overdoses. The Committee recognizes that the lack of supports for those who seek addictions treatment is a significant barrier to recovery from addictions. Often, those who struggle to address addictions issues seek detox treatment only to be left waiting for weeks, and sometimes months, before being able to access long-term treatment. The committee is committed to meeting with government to highlight the existing gap between detox and long-term treatment programs in order to advocate for the development of additional treatment options to help close this gap.

Because CSS workers understand firsthand the challenges of working on the front lines without appropriate access to PPE, the committee is recommending that the provincial government develop a strategic plan in order to address future pandemics and ensure advance and ready supply of PPE for frontline workers. CSS members reported experiencing extreme anxiety related to the lack of PPE, particularly during the first year of the pandemic. The health and safety benefits of appropriate PPE were well reported by the Public Health office, other health officials, the government, and the media. This only heightened anxiety in the Community Social Services sector as PPE were consistently unavailable: the fact that available resources were directed to the health care sector meant that CSS workers were left unprotected.

The lack of affordable housing remains a significant issue in British Columbia. The pandemic only highlighted this problem, as citizens and workers struggled to find affordable housing in their respective communities and were isolated during lockdowns. Homelessness still plagues parts of B.C. and continues to escalate in rural and remote communities. The lack of affordable housing has contributed to recruitment and retention issues in the CSS sector, largely because CSS workers continue to be poorly compensated and struggle to find affordable housing. When CSS workers are unable to access affordable and secure housing in a given community, it means they are also unavailable to work there. The Housing First model has been proven to work in other jurisdictions such as the United States, where the model was first developed. BC Housing has begun to implement Housing First programs; however, much more is needed if

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we are to address the current housing crisis in B.C. With this in mind, the CSS Committee is committed to meeting with the provincial government to promote the continuation and expansion of the provision of additional supportive housing as per the *Housing First* model.

### Recommended Resolutions in Order of Priority

As per the workplan just discussed, the following are the CSS Workplan in order of priority:

- Violence Risk Support and Training
- Program Development to Address the Gap Between Detox and Treatment Programs
- Pandemic Planning and Access to PPE for CSS Workers
- Expansion of the *Housing First* Model to Address the B.C. Housing Crisis

### Respectfully Submitted:

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March 2022

