- Final report -

From shelter to home…..

Greater Vancouver
Shelter Strategy
2006 - 2015

May 30, 2006

Prepared by:
Jim Woodward and Associates Inc.
Eberle Planning and Research
Deborah Kraus Consulting
SPARC BC

Prepared for:
Shelter Planning Group

Acknowledgments

DISCLAIMER

Executive Summary

Greater Vancouver continues to face a serious homeless crisis. The results of the 2005 Regional Homeless Count demonstrated that in the very least 2,066 people were homeless on March 15th. This is double the number of homeless people counted in 2002. While there were 936 shelter and safe house beds available in the region on count night, 1,130 people were without shelter accommodation. In 2005, the number of homeless people staying in shelters increased by 40% from 2002 (roughly proportional to the increased capacity of available shelter beds). However, the number of homeless people living outside, in cars, or couch surfing increased by 235%.

Purpose

The purpose of the Shelter Strategy is to plan for the shelter system in Greater Vancouver over a 10-year horizon, recognizing the links between shelters and permanent housing.

The Strategy focuses on all types of emergency shelters, including year-round adult and seasonal shelters, transition houses, youth shelters and safe houses. It includes recommendations on:

- The number of year-round and seasonal shelter spaces that are needed;
- Where these spaces should be located by sub-region; and
- What is needed to accommodate the different client population groups.

The development of the shelter strategy took place over several months and consisted of a number of steps, including a needs assessment and consultation with stakeholders at a number of points in the process. An implementation plan was also prepared.

The need for emergency shelters is driven by a number of factors. These include the lack of affordable housing, poverty and low incomes, and a lack of support available to people with special needs to maintain their housing. If, for example, affordable housing were more widely available, fewer people would become homeless and most individuals or families who do find themselves homeless would be able to move quickly from emergency shelter to housing. In this way, a small number of shelter beds could meet the emergency needs of a large number of people over the course of a year.

Assumption

The Greater Vancouver Shelter Strategy 2006 – 2015 recognizes this linkage to permanent housing. The following statement describes the major assumption under which this shelter strategy is prepared.

> *All levels of government will take responsibility for providing 678 permanent housing units in 10 years to meet some of the accommodation needs of homeless persons. If this does not occur, then there will be more street homeless, and the shelter strategy will need to be amended to address the shortfall.*

Principles

The following statements of principle reflect established regional policy and/or stakeholder views on shelter planning. Together with the assumption about the need for additional permanent housing they provide the basis for the Shelter Strategy.

A. **Solutions to homelessness are based on three essential elements: housing, adequate income and support services.** 3 Ways To Home

B. **Emergency shelters are an interim response to homelessness providing short stays and are only part of the continuum of housing, income and supports.** 3 Ways To Home

   The shelter strategy recognizes that emergency shelters are intended to meet crisis accommodation needs, offer temporary stays for those in need, and are not a replacement for housing. There will always be people in crisis, so we will always need shelters.

C. **Regional stakeholders support a 'housing first' approach to ending homelessness while meeting urgent shelter needs for sub-populations and sub-regions.** Regional Stakeholders Nov 05

   Housing first means giving people who are homeless direct access to permanent housing – along with whatever services and assistance they need and want to maintain their housing choice. This approach assumes that the factors that contributed to a household's homelessness can best be remedied once the household is stably housed.

D. **Permanent emergency shelter capacity should be available throughout the region so individuals living in each community have access to suitable emergency shelter locally.** 3 Ways to Home

E. **Emergency shelters in Greater Vancouver should be responsive to the unique needs of all groups. [They] should be able to accommodate all people who are homeless including youth, women, (with and without children), families, seniors, Aboriginal people, immigrants and refugees, sexual minorities and individuals with special needs such as addiction and/or mental health issues**. 3 Ways to Home

   In addition to the above, the Shelter Task Force wishes to acknowledge the need for shelters to be sensitive to people of different cultures and not neglect the needs of homeless men, who make up a significant share of the homeless population.

F. **The emergency shelter system should aim to provide service that is responsive to need, client-centred and adequately resourced**. Stakeholders

   A range of shelter responses is needed to address different needs, including both 24-hour full service shelters and shelters that operate only in the evening and

overnight, if alternative day services are located close by. Some homeless people need minimal barrier shelters that accept all individuals and others prefer dry shelters where drug or alcohol use is not permitted.

G. **A collaborative approach should be undertaken in planning for service provision to ensure that essential services meet a wide range of needs.**

H. **Outreach services should be developed and evolve in consultation with service providers to the homeless to assist in facilitating sustainability of placements and to facilitate collaborative service provision.**

The Strategy

This strategy was developed in response to the 1130 people who were without shelter on count night. This strategy addresses immediate issues within the existing shelter system, future needs and systemic issues related to reducing homelessness through the housing continuum, income and services. The strategy consists of five objectives as follows:

1. Improve the effectiveness of the emergency shelter system;
2. Improve services/links to move people from shelters to housing;
3. Focus on services that help street homeless people leave the streets;
4. Increase the capacity of transition houses to meet the needs of women and families fleeing violence; and
5. Develop permanent solutions to end homelessness.

<u>Objectives</u>

1. **To improve the effectiveness of the emergency shelter system** it will be necessary to develop targeted new emergency shelter spaces for underserved sub-populations and sub-regions. Towards this end, the consultants developed three scenarios, labelled A, B, and C, to demonstrate the different ways these needs can be met.

   Scenario A represents the minimum number of additional shelter beds required to meet current needs (154 beds), with the remaining daily accommodation needs of the homeless being met by permanent housing (976 units). This scenario would require 31 additional shelter beds annually in the first five years.

   Scenario B is the number of additional shelter beds that are needed (452 beds), again assuming that a significant share would be best served in permanent housing (678 units). This would require 91 additional beds each year over five years.

   Scenario C is the 'worst case' scenario, which must be considered in the event that permanent housing units for the homeless are not created. In that case, all daily accommodation needs of the homeless must be met by creating new year round shelter beds (1,130), and converting existing seasonal capacity to year round shelter spaces (266) for a total of 1,396 beds/units.

The following table shows the number of shelter beds (both permanent and seasonal, including safe houses) required region wide for the three scenarios. Figures are provided for two time periods: 2006 - 2010 and 2011- 2015. The focus in Phase 1 is to address current needs, while the Phase 2 focus is on future needs. The table also demonstrates annual needs, based on these figures. All scenarios assume that year round accommodation is expanded by 266 beds. This is equal to the current seasonal shelter capacity. This assumption reflects the data collected on count night which was during the period that CWW beds were available.

In all cases, the total daily need for accommodation for homeless persons by 2010 is 1,396 beds/housing units. The way in which this need is met varies for each scenario.

Proposed shelter bed requirements 2006-2015

	Scenario A Minimum Shelter Expansion		Scenario B Medium Shelter Expansion		Scenario C Maximum Shelter Expansion	
Phase 1 2006-2010	**# Beds/ units**	**Annual**	**# Beds/ units**	**Annual**	**# Beds/ units**	**Annual**
Shelter beds	154	31	452	91	1,130	226
Add year round capacity to cover CWWS beds	266	53	266	53	266	53
Sub-total shelter beds	420		718		1396	
Permanent housing units	976	195	678	136	0	0
Total current needs (shelter beds and housing units)	1,396		1,396		1,396	
Phase 2 ** **2011-2015**	119	24	136	27		
Total Phase 1 and 2 needs	1515		1532			

** Only 2 future scenarios were projected

The following table shows the proposed allocation of additional shelter spaces (both permanent and seasonal) for Phase 1 by client group and sub-region for Scenario B. Scenario B was selected as being most consistent with the stated 'housing first' approach, while taking into account existing shortfalls in shelter capacity. It focuses on those sub-populations and sub-regions that are presently most under-served. It will be important to monitor the situation after two years and again after the first five years. If permanent housing resources are not forthcoming in the numbers required, then the strategy will have to be amended to reflect this.

Not all sub-groups and sub-regions are represented in Phase 1. For example, there is little new allocation proposed for adult males because presently they are the best served of all sub-populations in terms of number of shelter spaces per homeless persons.   And, while further sub-regional distribution might be desirable in terms of local access to services, this must be balanced with ensuring that facilities are of a sufficient size to be

financially viable. There will be opportunities in Phase 2 to develop shelter capacity for other sub-populations and sub-regions. Additionally, all population groups and sub-regions should be accommodated in permanent housing, when it is built.

The table shows priorities for new shelter beds reflected in order of need, though it should be noted that each client group is a high priority given the level of under-capacity for these sub-populations and sub-regions. Adjustments were made to account for a situation where a sub-region has more capacity than average, but is underserved for a particular sub-group, or in the case of Vancouver, which acts as a regional resource. In addition, in sub-regions with little or no capacity at all, facilities for adult men and women are proposed to meet a wider range of needs.

Proposed Phase 1 shelter bed distribution 2006- 2010

Client group	Sub-region	Scenario B
		Number of beds/units
Aboriginal adults	South of Fraser	44
Seniors (55+)	South of Fraser	15
Seniors (55+)	Inner Municipalities	15
Seniors (55+)	Vancouver	10
Adult men and women	Northeast Sector	30
Aboriginal adults	Vancouver	44
Youth (19-24)	Northeast Sector	30
Youth incl Aboriginal (19-24)	South of Fraser	58
Single women	South of Fraser	30
Men	South of Fraser	44
Adult men and women	Inner Municipalities	44
Youth (19-24)	Inner Municipalities	43
Single women	Inner Municipalities	30
Misc. (youth, families, sexual minorities)	Vancouver	15
Additional shelter beds		452
Convert existing CWWS beds to year round beds		266
Sub-total shelter beds		718
Permanent housing units		678
Total current needs (shelter beds and housing units)		1,396

Proposed Phase 2 Shelter Bed Distribution 2010-1015

The Phase 2 allocation of shelter beds should be determined in the 5-year review of the shelter strategy. By that time, the next homeless count will have been completed and there will be a better understanding of how new shelter spaces and housing has affected the distribution of the Greater Vancouver homeless population. The focus in Phase 2

may well be on different sub-regions and sub-populations, if the dynamics of homelessness change.

As well as creating new shelter spaces it will be necessary to:

- Monitor and plan to ensure there are no negative Olympic related housing impacts;
- Improve/facilitate access to shelters;
- Develop interim seasonal capacity for sub-regions/sub-populations with no shelter capacity;
- Consider alternative approaches for emergency accommodation;
- Develop and implement standards/best practices;
- Collect and report shared shelter data; and
- Focus on capacity building among certain sub-populations and sub-regions to ensure suitable shelter resources are in place.

2. **Improving services/ links to move people from shelters to housing** includes:

- Increasing shelter staff/resources so shelter staff can assess each client and work with them to determine the support services they need and want;
- Promoting "in-reaching" to shelters so that workers/counsellors from outside agencies provide services *on-site* at the shelters and facilitate access to services in the community, e.g. treatment professionals, MEIA;
- Providing bridging services to help shelter clients access and make a successful transition to housing;
- Encouraging and supporting partnerships between housing providers, shelter providers and service agencies to facilitate access to housing units;
- Providing additional financial assistance to help shelter clients access housing and employment;
- Developing strategies that will induce more landlords to accept tenants with pets;
- Identifying ways to improve access to housing (e.g. one-stop access in multiple locations); and
- Improving communication and coordination among agencies helping homeless people find jobs and training and related services.

3. **Focusing on services that help street homeless people leave the streets** might involve:

- Evaluating and expanding the pilot "direct access to housing" project undertaken by the BC Ministry of Employment and Income Assistance and the City of Vancouver;
- Pilot testing an initiative with direct access from the street to permanent supportive housing;
- Ensuring regional distribution of shelters;
- Ensuring access to treatment, shelter and housing suitable for persons with addictions, mental health issues and other complex health issues; and
- Improved and expanded outreach services.

4. **To increase the capacity of transition houses to meet the needs of women and families fleeing violence** it will be necessary to:

- Further investigate the need for additional transition house beds to meet current needs;
- Establish regional resources within the transition house system to serve women with special needs who are fleeing abuse;
- Build capacity within the transition house system so transition houses can serve the different sub-populations of women with and without children who have diverse needs and are fleeing abuse;
- Ensure that women have access to services in their own and other communities;
- Increase the number of transition house beds to meet the future needs of women with and without children who are fleeing abuse; and
- Begin a process with transition houses to discuss data needs and options for improving capacity to gather and report statistics.

5. **Developing permanent solutions to end homelessness** would include:

- Developing more permanent housing for homeless families and singles in need, and more supportive housing for homeless people with special needs;
- Increasing income assistance, and providing rent supplements and/or a higher minimum wage in line with local rents; and
- Developing methods to gain community acceptance for affordable housing and emergency shelters and promoting public education.

The final part of this document is a recommended action plan. This will be used to initiate discussions with the identified implementation partners.

Table of Contents

Greater Vancouver
Shelter Strategy
2006 - 2015

1   Introduction

In most communities, the need for emergency shelters is driven by the lack of affordable housing, poverty and low incomes, and a lack of support to help people with special needs maintain their housing. If affordable housing were more widely available, fewer people would become homeless and most individuals or families who became homeless could move quickly from emergency shelter to housing. In this way, a small number of shelter beds could meet the emergency needs of a large number of people over the course of a year. Similarly, there would be fewer homeless people if poverty was eradicated, and households at the low end of the income spectrum had sufficient income to afford the available accommodation. If preventative and supportive social services were more readily available, fewer people would be homeless. Some population groups might need more support than others. For example, youth need lifeskills before they can successfully live on their own. In some cases, what is needed to successfully obtain or maintain housing is relatively small, such as financial assistance with a damage deposit to rent a unit.

Recognizing the contribution of all these factors, the Regional Homeless Plan Update called *3 Ways to Home*[1] adopts a continuum of housing, income and support as the framework for action. It calls for action on all three aspects of the continuum to address homelessness. It describes regional homeless goals and policy and provides a region-wide framework for community based programs and services that address homelessness and its root causes. The Plan was developed in consultation with stakeholder and community groups, and was based on the 2001 *Regional Homeless Plan*. Municipalities around the region adopted it in 2003/04.

The Plan was very clear that the role of emergency shelters is to respond to people in crisis who need temporary assistance with accommodation and other daily necessities:

> *Emergency shelters are an interim response to homelessness providing short stays and are only part of the continuum of housing and support.*[2]

Purpose

The purpose of this strategy is to provide direction to the region's decision makers regarding the number and type of emergency accommodation spaces required to meet the needs of homeless persons for the next 10 years, in the context of other actions to

---

[1] SPARC. *Three Ways to Home. Regional Homeless Plan Update.* November 2003.
[2] Ibid. p.25

reduce homelessness. It also provides direction on measures to move people from shelters into permanent housing as a means of freeing up emergency shelter space for its intended purpose.

Scope and definitions

This Shelter Strategy forms part of the implementation of the *3 Ways to Home* regional homeless plan, and is intended to identify needs and actions required to address the ***shelter*** component of the housing continuum, again recognizing the connection between shelters and the availability of safe, secure, affordable housing and/or additional income and support services.

Unless we choose to leave homeless people on the street, the choice of actions to ameliorate homelessness consists of more shelter spaces, more housing, additional income and/or support services. Because this is a shelter strategy, the focus is on shelter needs. It does not estimate the need for, or plan for, affordable housing or transitional and supportive housing for homeless people, although it recognizes the linkages as described above. A similar assessment and strategy for permanent housing and other needs of homeless people is also required.

The geographic scope of the shelter strategy is Greater Vancouver. It includes the same six sub-regions used for planning purposes in the Regional Homeless Plan and Update "3 Ways to Home". They are:

Vancouver	Vancouver and UBC
Inner Municipalities	Richmond, Burnaby and New Westminster
North Shore	City of North Vancouver, District of North Vancouver and West
Vancouver	
South of Fraser	Surrey, White Rock, Delta, City of Langley, Township of Langley
North East Sector	Coquitlam, Port Coquitlam and Port Moody
Ridge Meadows	Maple Ridge and Pitt Meadows

Stakeholders have expressed concerns with this sub-regional breakdown. Surrey has identified a need for its own sub-region because of its population growth (both total and homeless). Langley and Richmond have also identified a need to be separated out from their sub-regions to help them plan more effectively to address needs in their communities.

This report, plans for all forms of short-stay accommodation including emergency shelters, cold wet weather beds, safe houses for youth and transition houses for women and children fleeing abuse. Planning for extreme weather shelters is not part of the scope of this strategy.

Approach

The development of the shelter strategy took place over several months and consisted of a number of steps.

1. Needs assessment. This analysed available data to estimate the current need for emergency shelters in the Greater Vancouver region and for the next 10 years. It is summarized in the strategy.

2. Consultation with stakeholders. Workshop sessions were held in seven sub-regions and with the Aboriginal Homelessness Steering Committee to solicit input on needs and priorities. A consultation process was undertaken that involved interviews with close to 190 shelter clients, former shelter clients and homeless people who do not use shelters.

3. Draft strategy. The draft strategy was prepared using the findings from the needs assessment and the initial consultation. A working session with members of the Task Group helped to define the principles and main recommendations of the strategy.

4. Regional consultation. Two regional consultation workshops were held.

5. Final strategy and implementation plan.

The Joint Task Group on Shelter Planning representing agencies and organizations responsible for a range of homeless services led the project, and a Project Lead group, guided the work to develop the strategy. Throughout the process and at various stages, the consultants prepared a newsletter, which was provided to regional stakeholders via email.

2   Resources and needs

The following is a summary of the major findings from the needs assessment regarding existing emergency accommodation resources, shelter needs and issues.

Existing resources

There are 60 facilities region-wide offering emergency accommodation in the form of shelters, cold wet weather strategy (CWWS) facilities, safe houses and transition houses. This includes one youth safe house recently opened in Ridge Meadows, after the 2005 Homeless Count was conducted. These facilities can accommodate 1,128 people during the cold wet weather season, but only 840 persons in the rest of the year.

Table 1 – Existing emergency accommodation

Type of shelter	# Facilities	# Permanent Beds	# CWWS Beds	Total Beds
Shelters - permanent GVRD	25	613		613
Shelters - CWWS[3]	14		287	287
Safe houses	5	35	1	36
Transition houses	16	192		192
Total	60	840	288	1,128

Source: CWWS. Count 2005. Includes Fraserdale, Scottsdale, excludes Welcome House.

The number of emergency beds has expanded rapidly over the past five years, particularly in the form of permanent and CWWS shelter spaces, as shown in Tables 3 and 6 below.

Occupancy

Table 2 shows the number of shelter beds available in the region and the number actually occupied on March 15, 2005, count night. While this represents only one night, and does not necessarily correspond to other nights, it is the only inclusive and consistent information available regarding occupancy.

Shelters, cold wet weather shelters and safe houses had an occupancy rate of 101% on count night, as some shelters reported people sleeping on the floor. Transition houses had a lower occupancy rate of 56%. Despite having some vacant beds, all types of shelters turned people away on count night because there were no beds available, applicants did not fit the program criteria, were unsuitable for the available bed (i.e. female looking for a bed at a facility that had only male beds left), or they were barred.

Table 2 – Occupancy rates Count night 2005

Type of shelter	# Beds/mats	# Beds occupied count night	Occupancy rate	Turnaways
Shelters: permanent and CWWS, safe houses	930*	940	101%	154
Transition houses	192	108	56%	21
Total	1,122*	1,048	93%	175

* Excludes a 5-bed youth safe house that opened after the count.

---

[3] Some CWWS beds operate in permanent shelters.

<u>Length of stay</u>

Historical data depicted in Figure 1 from six shelters shows that the average length of stay in emergency accommodation has been increasing over the past ten years from about 8 days to almost 16 days per stay. This is consistent with the growth in long-term homelessness revealed by the count and is likely occurring because clients increasingly have nowhere to go upon leaving a shelter. We do not know the frequency of stays per person based on this data.

Figure 1 - Length of average shelter stay
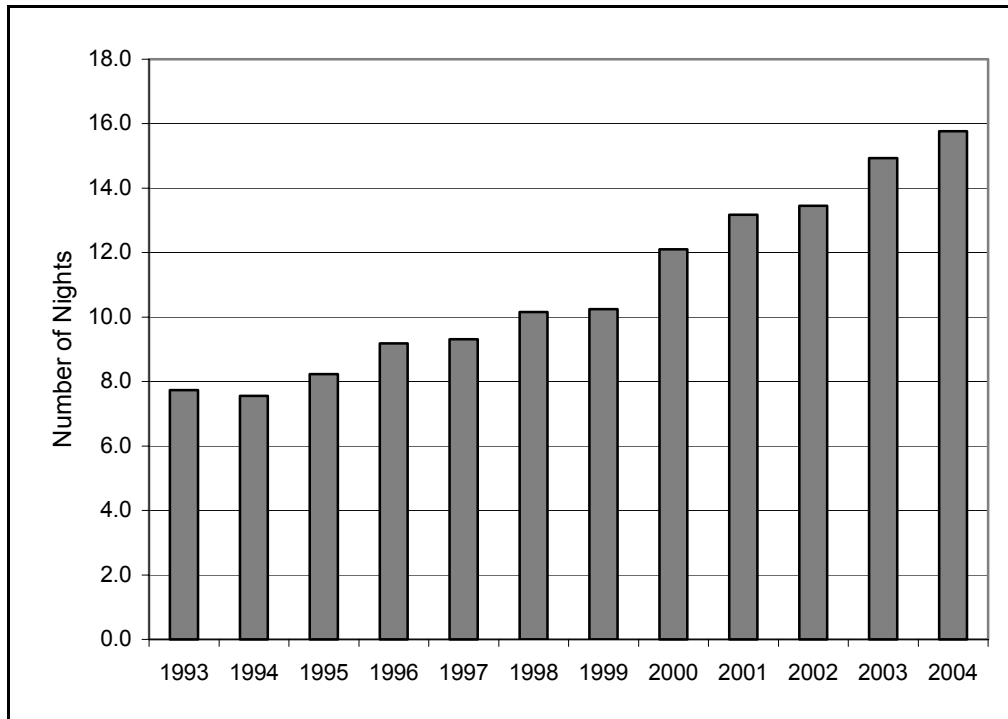
A) Permanent shelters and safe houses

The following table shows the distribution of permanent shelter spaces by sub-population served in 2005, and the changes from 2000 to 2005. There are almost 200 additional permanent beds in shelters and safe houses since 2000. Most beds are for adult men and women (33%), or men only (25%). Few or no spaces are targeted for seniors or operated by Aboriginal organizations for adult men and women. The biggest increase in permanent beds occurred for adult men and women, and women. The number of beds declined for adult men, for youth in Aboriginal run facilities, and in family shelters.

Table 3 – Permanent shelter and safe house beds by sub-group

	Number Permanent Beds			Share
Target Group	2000	2003	2005	2005
Adult men only (single)	207	192	163	25%
Adult women only (single)	0	38	48	7%
Adult men and women (single)	45	177	213	33%
Families with children (may include single women)	69	73	57	9%
People with mental illness/special needs	80	90	92	14%
Seniors 55+ (targeted)	0	0	0	0%
Youth (excl Aboriginal)	27	41	50	8%
Aboriginal run for adult men and women	0	0	0	0%
Aboriginal run for families	15	15	18	3%
Aboriginal run for youth	15	25	7	1%
Region wide	**458**	**651**	**648**	**100%**

Source: Plan Update 2003. Vancouver inventory 2005. Greater Vancouver shelter listings. CWWS April 2005. Count inventory. Includes safe houses. Categorization of beds is a complex issue and the beds for various groups might have been represented in more than one row. However, to avoid duplication this has not been done.

When looked at by sub-region, Table 4 shows that Vancouver maintains the lion's share of permanent shelter space region wide with 76% of the total. South of Fraser and the Inner Municipalities follow with 9% and 7% respectively.   Note that while shelter resources are predominantly located in Vancouver, many Vancouver shelters serve residents from other municipalities.   There are no permanent beds in the Northeast Sector.

Table 4 – Permanent shelter and safe house beds by sub-region

	Number Permanent Beds			Share
Sub-region	2000	2003	2005	2005
Vancouver	377	516	490	76%
South of Fraser	40	55	56	9%
Inner Municipalities	41	48	46	7%
North Shore	0	12	37	6%
Northeast Sector	0	6	0	0%
Ridge Meadows	0	14	19	3%
Region wide	**458**	**651**	**648**	100%

Source: Plan Update 2003. Vancouver inventory 2005. Greater Vancouver shelter listings.
CWWS April 2005. Count inventory. Includes safe houses.

B) Seasonal beds

Cold wet weather strategy (CWWS) beds, which generally provide service over the
winter months from Nov 1 to April 30th, are an increasingly important component of the
regional emergency accommodation system. There were 288 CWWS beds and mats in
operation over the 2004/05 season and some additional capacity during extreme
weather. The majority of the beds serve adult men and women, followed by men only,
and women and families. There was only one additional youth bed this past season.

Table 5 – CWWS beds by population group 2005

Population group	Cold-wet weather beds and mats 2005	Share 2005
Adult men and women	219	76%
Men only	40	14%
Women and families	28	10%
Youth	1	0%
Total	288	100%

Source: CWWS Background Information. Jan 20, 2005.

Over 100 new CWWS beds have been added region-wide since 2000 to meet growing
demand. The regional breakdown of CWWS beds is similar to that of permanent beds,
with a large majority located in Vancouver, followed by South of Fraser and the Inner
Municipalities. Most of the growth in CWWS capacity since 2000 has been in
Vancouver, Ridge Meadows and Inner Municipalities.

Table 6 – CWWS beds by sub-region

Sub-region	2000-01	2003-04	2004/05	Share 04/05
Vancouver	115	188	175	61%
South of Fraser	36	36	38	13%
Inner Municipalities	9	16	30	10%
North Shore	21	25	15	5%
Northeast Sector	0	0	0	0%
Ridge Meadows	0	30	30	10%
Total	181	295	288	100%

Source: CWWS 2004-06 Service Plan. The figures used in this table came from this Plan. The numbers may have been low and there were actually 25 beds on the North Shore. However, this does not affect the final outcome of this Strategy.

<u>Occupancy rates and turnaways</u>

CWWS occupancy rates increased between 2000/01 and 2003/04 from an average of 83% region wide to 88%, with many shelters reporting 100% occupancy or more.[4]

Although cold wet shelters provide extra capacity during the winter months and many are low or minimal barrier, there are many people turned away from Greater Vancouver CWWS facilities.   In 2003/04, there were over 4,200 instances of people turned away, an average of 12 turnaways per day. Most of these turnaways occurred because there were no vacancies (3,788).[5] The majority of those turned away due to no vacancies were male, accounting for 88% of turnaways.   NB: The same person may have been turned away from more than one CWWS facility. This could result in double counting, as a single person may account for several turnaways on one night or be turned away from one facility but find space in another.

Table 7 – CWWS turnaways

CWWS Turnaways	Number turned away	Percent increase	Turned away due to no vacancy
2000-01	1,109		N/a
2001-02	2,460	65%	N/a
2002-03	4,045	64%	3,321
2003-04	4,258	5%	3,788

Source: CWWS. 2004-06 Service Plan.

C) Transition houses

There are 192 transition house beds located throughout the region in 16 facilities.   Most of the facilities and beds are located in Vancouver and South of Fraser. However, a significant share of resources is located in the Inner Municipalities. Although not shown here, there has been a small increase in the number of beds available since 2000 from 184 to 192 beds.

---

[4] Pratt, James. *2004/06 Service Plan*. Greater Vancouver Cold/Wet Weather Strategy.

Table 8 – Transition houses by sub-region

Sub-region	# Facilities 2005	# Beds 2005	Share beds 2005
Vancouver	4	65	34%
South of Fraser	6	57	30%
Inner Municipalities	3	30	16%
North Shore	1	18	9%
Northeast Sector	1	10	5%
Ridge Meadows	1	12	6%
Total	16	192	100%

The following table shows the annual number of admissions at Greater Vancouver transition houses from 2001/02 to 2004/05.   Transition houses made over 2,700 admissions of women and children in 2004/05, slightly lower than the number admitted in the previous year. NB: If a woman stayed several times in a transition house, she would be counted several times.

Table 9 – Number individuals admitted to transition houses

Greater Vancouver Transition Houses	2001/02	2002/03	2003/04	2004/05
Total Women & Children Admitted	**2,542**	**2,372**	**3,052**	**2,743**
# Women Admitted	1,453	1,319	1,789	1,697
# Children Admitted	1,089	1,053	1,263	1,046

Source: Ministry of Community Services. Stopping the Violence Branch. June 2005.

Table 10 shows that the number of instances of women turned away from transition houses has been growing from 5,600 women in 2001/02 to 7,700 in 2004/05. In 2004/05, 3,147 or 41% of turnaways occurred because there was no or insufficient space to accommodate them. This works out to approximately 9 turnaways per day due to insufficient space.

Women and children are turned away from transition houses for other reasons as well. For example, 26% were not served because they were outside the program mandate, meaning that they were not fleeing violence but rather were in need of a place to stay. In addition, there has been a doubling since 2001/02 of the number referred but not admitted because the transition house could not meet their special needs such as mental illness and addictions. On average, 3 women were turned away per night for this reason. Again, the same woman would be counted more than once if she were referred several times.

Table 10 – Number individuals turned away from transition houses

Greater Vancouver Transition Houses	2001/02	2002/03	2003/04	2004/05
Total Women Not Served	**5,628**	**6,088**	**8,058**	**7,674**
Due to No/Insufficient Space	2,841	3,227	4,253	3,147
Outside Program Mandate	1,323	1,411	1,750	1,984
Chose Not to Use the Service/Spaces Available	546	514	688	802
Program Could Not Meet Special Needs	539	525	866	1,199
Other/Don't Know	379	411	501	542

Source: Ministry of Community Services. Stopping the Violence Branch. June 2005.

Needs

The following table shows estimated current *daily/nightly* needs for all forms of accommodation for homeless people except for the needs of women fleeing violence. (They are treated separately.) It shows that 2,066 people were homeless on March 15, 2005. At the same time, there were 936 shelter and safe house beds, leaving a shortfall of 1,130 people without shelter accommodation *that night*.

Table 11 – Daily Accommodation Needs 2005

Daily need for accommodation 2005	Number
Number homeless winter (March 15th) 2005 (excluding transition house clients)	2,066
Less current shelter & safe house spaces (includes CWWS spaces)	936
Daily need for accommodation 2005	**1,130**

This figure represents the estimated *daily* unmet need for accommodation for homeless people.   During the course of a year, many more people are homeless than those counted on one night.[6] It is best to use *annual* needs for planning for permanent housing forms. The figure for permanent housing needs for homeless people would be much larger.

---

[6] Burt, R. Martha and Carol Wilkins. 2005. *Estimating the Need*. *Projecting from Point in Time to Annual Estimates of the Number of Homeless People in a Community*… New York: Corporation for Supportive Housing. P. 8

A) Shelters and safe houses

While the above table shows that 1,130 homeless people were not accommodated in shelters on count night, this does not necessarily mean there is a need for 1,130 additional shelter and safe house beds. There are several ways of allocating this daily need among the housing (and shelter) continuum.

At the regional workshops, stakeholders expressed support for an increased emphasis on a Housing First approach while continuing to develop capacity to address emergency shelter shortfalls for some sub-populations and sub-regions.   Although goals were not explicitly addressed in the regional consultation process, most participants would likely agree that the long-term goal is to end homelessness. However, realistically, in the short term, strategies are needed to reduce homelessness.

The preferred approach *emphasizes* permanent forms of housing (including supportive housing) and puts less emphasis on shelters. This is a more cost effective response to the need for beds. It means directing some homeless people to a form of permanent housing, while others would continue to use emergency shelters. Deciding how many of the 1,130 homeless people should have housing (with or without support) and how many could reasonably be expected to stay in shelters for a time is a complex task. The following two scenarios were supported by regional stakeholders.

> Scenario A. A minimum estimate of current emergency shelter needs is the number of people turned away from emergency accommodation on an average night.[7]   On March 15, 2005, 154 people were turned away from emergency shelters and safe houses. There may be some double counting if a person went to two or more shelters seeking accommodation that night. Thus, a minimum estimate of daily **shelter need is for 154 spaces, and 976 permanent housing spaces.** This is referred to as Scenario A.

> Scenario B.   Another way of estimating need would be to assume that people who avoid shelters, for whatever reason, would best be served by another form of accommodation. For example, there were 412 homeless people counted who dislike shelters, and 266 people who did not seek a shelter but instead chose to "sofa surf" on count night. It might be appropriate to provide an alternate form of housing for these 678 people as opposed to a shelter option. Scenario B allocates the need between **452 additional shelter beds** and **678 permanent housing spaces.**

B) Transition houses

The average number of women turned away from transition houses due to insufficient space is 9 on a daily basis, according to historical figures provided by MCS.[8]   This is the minimum estimate of current need. Adding those turned away due to special needs increases the number of daily turnaways by 3 women, for an average total of 12 turnaways daily. This is the maximum estimated current need.

---

[7] Although historical or trend information on the number of turnaways is preferred, it is not available
[8] MCS. Stopping the Violence Branch. See Table 10.

Table 12 – Current needs - transition houses

Need	Number of spaces 2005
Minimum - based on turnaways due to insufficient space	9
Maximum - based on turnaways due to insufficient space and special needs	12

C) Total needs

Table 13 summarizes Greater Vancouver shelter and transition house needs, for two time periods, 2006, and 2007 to 2015. Future needs are based projections of the future homeless population, assuming that there are no significant changes in any of the economic, social or policy factors that affect the number of homeless.[9]

It shows that between **273 and 588** shelter beds are required to meet shelter and safe house needs for the next 10 years. Transition house capacity would need to expand by between **30 and 44** beds. Between **678 and 976** permanent housing units with appropriate support are required to meet the needs of homeless persons who do not seek shelter. **NB: If these permanent housing units are not available, then shelter needs will be higher.**

Table 13 – Total needs - shelter, safe houses and transition houses

Need**	Current 2006 # spaces	Future 2007 - 2015 # spaces	Total 2006 to 2015 # spaces
Shelters/safe houses			
Scenario A. Minimum – turnaway trends	154	119	273
Scenario B. Maximum – population trends	452	136	588
Transition houses			
Scenario A. Minimum – turnaway trends	9	19	28
Scenario B. Maximum – turnaway and population trends	12	30	42

** Assumes 678 to 976 permanent housing units are made available to homeless people.

---

[9] See Needs Assessment for detailed description of projection assumptions.

Needs by sub-population and sub-regions

In order to determine how the needed shelter beds should be distributed among various sub-populations and sub-regions, we have compared the relative adequacy of existing resources for each. The following charts and tables show the relative adequacy of existing shelter resources for each sub-group and sub-region within Greater Vancouver. It is used to identify groups that are less well served compared to others.

The first section compares the size of each homeless sub-population according to the 2005 Count with the number of shelter spaces for that group to produce the number of beds per homeless person. Together with stakeholder input, this ratio is used to help identify relative shortfalls in shelter spaces for specific sub-groups and ultimately to apportion needed shelter spaces by sub-population and by sub-region. The limitation of this approach is that if members of a sub-population were undercounted in the 2005 Count, their relative need would be underestimated. This is most likely to occur for homeless individuals who tend to sofa surf, primarily families and youth.

The size of each sub-population is matched with the number of spaces designated either for that group or, in the case of the Aboriginal population, run by Aboriginal organizations. This approach is not a perfect tool for measuring adequacy but it does provide an *indicator* of relative adequacy. For example, although there are 163 male-only beds, many of the beds in mixed adult shelters are also used by men, so half of the mixed beds have been added to the bed capacity for men.

A) Sub-populations

The average ratio of shelter and safe house beds per homeless person among all population groups is .29.[10] That means that for each homeless person there is on average one third of a bed or for every three homeless persons in Greater Vancouver, there is one bed. Figure 2 shows this average as a dashed line. It also shows that homeless adult men and women, adult males, people with mental health issues and families have access to shelter beds in quantities that either exceed or meet the regional average number of beds/homeless person. Youth and single adult women are slightly under-served while senior only services and persons wanting access to Aboriginal-managed services are very underserved.

The number of beds in transition houses for women and children fleeing violence is high relative to the average for shelters and safe houses, but similar to that for families. This is somewhat expected since family shelters must be able to accept the whole family at once, requiring excess capacity.

Based on these figures, the greatest need for shelter spaces is for homeless seniors and Aboriginal people to bring them into line with other sub-populations. This is followed by youth and single adult women. It is useful to look at two sub-sets of homeless youth separately because the shelter options and jurisdictions differ. Safe houses for youth

---

[10] This is lower than the actual average which is .55 because of overlapping sub-populations. This is not a problem, because the ratio is not used to determine absolute needs, rather relative needs.

age 16-18 are somewhat over-represented, while youth aged 19-24 are underserved by existing youth shelters.

Unfortunately, we do not know the number of beds that will accommodate persons under the influence of alcohol or drugs, and therefore, cannot make the calculation for the sub-population of homeless persons with addictions.

Figure 2 – Sub-population resources
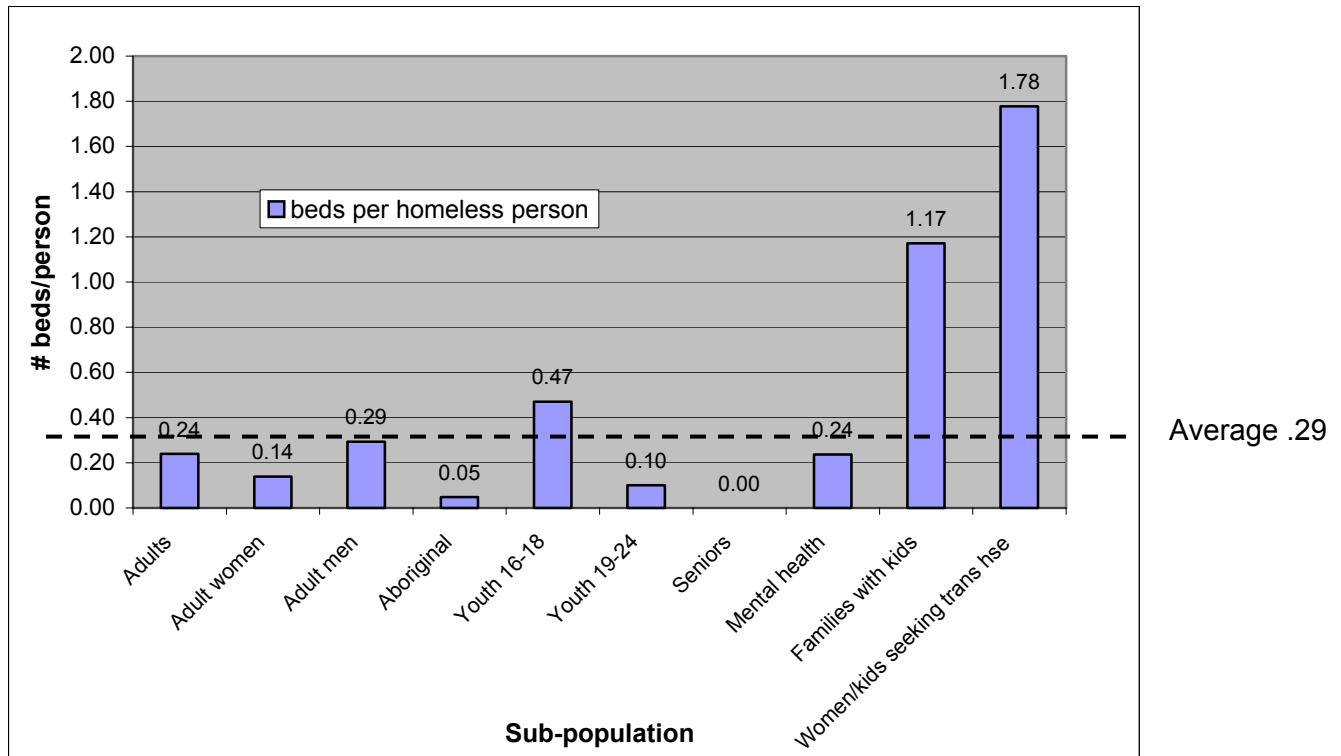
This is consistent with the needs identified by the stakeholders in the consultation process for this strategy. Many sub-regional stakeholders noted a need for shelter spaces run by Aboriginal people and for seniors, as were beds for youth and adult women. See Section 3. Sub-regional stakeholders also noted that shelters for families are needed, which differs from the resource analysis.

Table 14 – Number of beds per number homeless by sub-population

Sub-population	# of people 2005 Count	Share of total homeless	# of beds - shelter (incl cwws, safe houses)	# beds/ person
Adult men and women (single)	1804	87%	432	0.24
Single adult women (not seeking transition house)	345	17%	48	0.14

Sub-population	# of people 2005 Count	Share of total homeless	# of beds - shelter (incl cwws, safe houses)	# beds/ person
Adult men only	1292	63%	379	0.29
Aboriginal identity (incl youth)	515	25%	25	0.05
Youth under 25 (incl abor)	296	14%	57	0.19
Youth 16-18yrs	79	4%	36	0.47
Youth 19-24yrs	217	11%	21	0.1
Seniors (55 and over)	171	8%	0	0.00
People with mental health issues	389	19%	92	0.24
Families with kids (not seeking transition house)	64	3%	75	1.17
Average				**0.29**
Total	2,066		1129	
Women & children fleeing violence	108	5%	192	1.78

Note that the total population and number of beds add up to more than the actual totals, because some groups overlap. For example, an Aboriginal youth would be included in both in the Aboriginal and youth sub-groups. The need for these sub-populations is to have beds dedicated to the sub-population.

B) *Sub-regions*

Figure 3 shows a similar analysis for Greater Vancouver's sub-regions. The ratio of the number of homeless persons for each sub-region to sub-regional shelter capacity is displayed graphically in the chart below. The regional average is .55 shelter spaces (permanent, CWWS , safe house and transition house beds) per homeless person found. South of Fraser and the Northeast sector are the most underserved compared to the average. Each has a shelter to homeless population ratio significantly below the regional average. Vancouver and the Inner Municipalities are somewhat above average. Note that although Vancouver has a relatively high bed-to-population ratio, the count showed that individuals from all sub-regions use these beds. The ratios for Ridge Meadows and the North Shore also exceed the average.

Based on this analysis, the Northeast Sector and South of Fraser have the greatest need for shelter capacity to bring them into line with other sub-regions. The Inner Municipalities and Vancouver have the next lowest resource ratio.

Figure 3 – Sub-regional resources
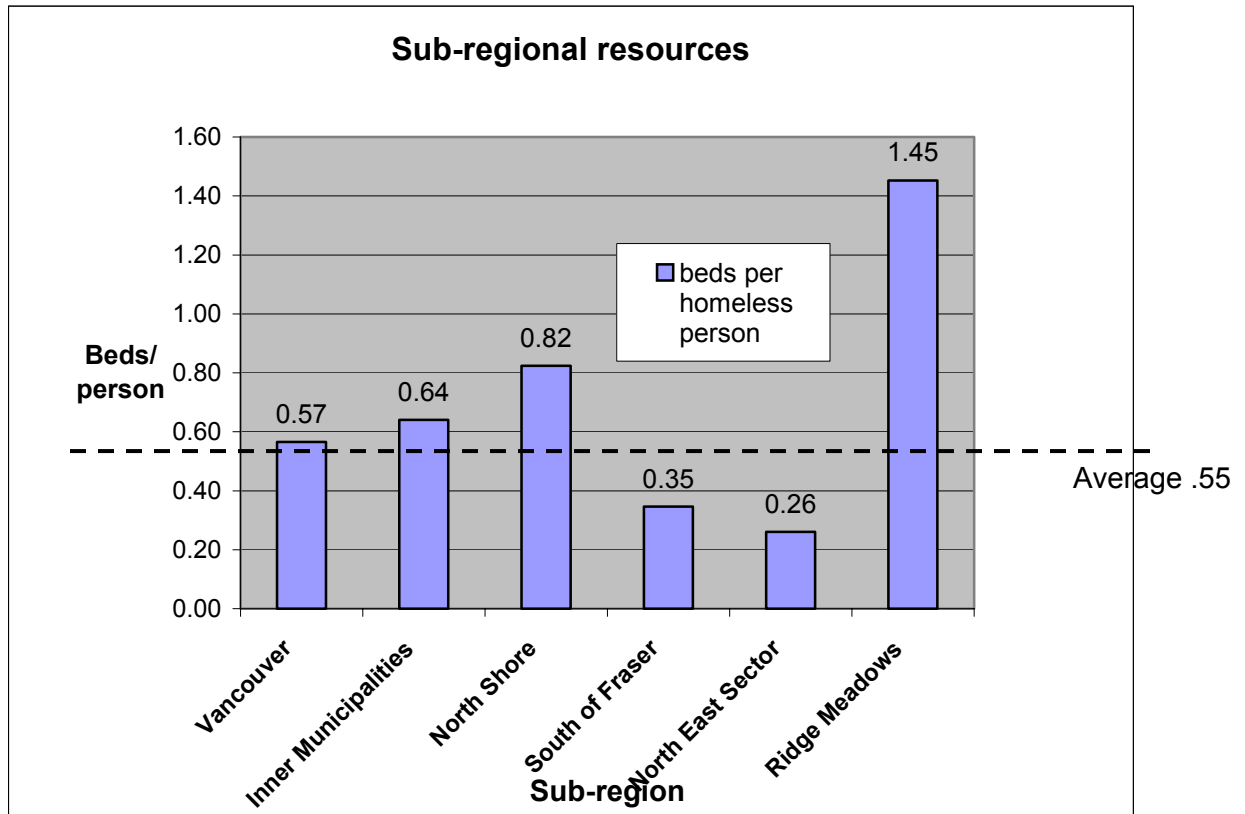
Table 15 – Number of beds per number homeless by sub-region

Sub-region found	Number Homeless 2005	2005 Regional share homeless	Number of shelter beds by region	Shelter beds/ homeless pl
Vancouver	1,291	63%	730	0.57
Inner Municipalities	165	8%	106	0.64
North Shore	85	4%	70	0.82
South of Fraser	436	21%	151	0.35
North East Sector	38	2%	10	0.26
Ridge Meadows	42	2%	61	1.45
Total Region	**2,057**	**100%**	**1,128**	**0.55**

3   Consultation summary

Sub-regional workshops

During the month of November 2005, the consulting team held seven sub-regional workshops in:
- Vancouver
- South of Fraser
- Burnaby/New Westminster
- Richmond
- North Shore
- Ridge Meadows
- Tri-Cities

Close to 100 participants attended the workshops, representing a variety of community, health, and government agencies interested in homelessness. The consultants also attended a meeting of the Aboriginal Homelessness Steering Committee and received an email from the organization *Justice for Girls* that responded to the consultation questions.

The following is a brief summary of the consultation questions and input received.

1. Do you support moving towards a "housing first" approach that would place greater emphasis on placing homeless people in permanent homes rather than in shelters – recognizing that some additional shelters may still be needed in some sub-regions and for some client groups?

In general, participants expressed support for the housing first concept. The main reasons were:

- Ideally, everyone should have permanent housing
- More and more people are in shelters because they can't find housing
- From the perspective of women with children leaving abuse, the lack of permanent housing is a serious concern
- Multiple moves are disruptive and stressful - particularly for families with children
- The immigrant population will couch surf rather than go to a shelter

However, it was noted that for housing first to work, there would be a need for:

- Government funding to build the number of housing units needed
- Procedures to ensure that the street entrenched homeless have access to the units
- Appropriate levels of support to ensure that tenants are able to maintain their units and develop their potential

At the same time, it was noted that additional shelters are needed in some communities and for some population groups. "Shelters may be a band aid solution, but we still need band aids." They are a good way for people connect with the services they need.

2. What proportion of the unmet need for accommodation do you think should be addressed by building more shelters?

In general, there was consensus that most of the gap in accommodation needs should be met by housing. Based on an estimated daily need of 1,131, most participants supported a need for 154-452 more shelter beds.

3. How can transition houses best meet the needs of women and children who are fleeing abuse in your community? Please comment on the types of services needed at transition houses to accommodate women and children fleeing abuse.

Participants identified that the following services that are needed to help transition houses meet the needs of women and children who are fleeing abuse:

- A central clearing house phone number so women can call to find out where beds are available (211 in Calgary)
- More capacity in some areas (suggestion that capacity could be increased by making units available within social housing developments)
- Suitable/flexible space to serve large families
- Support for specialized houses for women with special needs
- Revised eligibility criteria/support to be able to serve a diverse population including women in the sex trade, women who are not in receipt of income assistance, women with male children, seniors, young women (under 19 years old), women with pets, the GLBT population, and Aboriginal women fleeing abuse
- Flexibility re length of stay so women can stay longer than 30 days
- Enhanced service capacity including 24/7 staffing to handle more clients with special needs, help women access housing, help women access services and obtain skills as needed (e.g. vocational support, language skills, financial management, life skills, financial assistance, counselling and legal services)
- Funds to help women access items they can't afford such as first months rent, damage deposits, furnishings etc.
- Crisis intervention and day care support for women and children

4. Are there some population groups in your community whose needs are currently not being met by the shelter system?

Participants identified a number of population groups whose needs were not being met by the shelter system, particularly people with addictions, mental illness, youth, seniors and Aboriginal people.

Specific issues were raised as follows:

- Youth – need low barrier shelters for street entrenched youth; shelters for other youth who need a safe place to go in a crisis; places for girls only who may not feel safe in coeducational youth safe houses; and places for young women under and over 19 with children. Also, need coordination among all the ministries to address the transition period for 19 year olds.

- Families with children - need to serve families with older boys, 2-parent families, mother-led, and father-led families.

- Seniors - suggest co-location with a care facility. The seniors may need medical attention.

- Sexual minority community - youth have identified issues for this community. A high percentage of homeless youth are sexual minorities and do not feel comfortable at traditional shelters. No consensus about whether separate facilities are needed.

5. What do you think are the three most important services and strategies to link people in shelters to housing?

The most frequent responses included:
- Income assistance
- Affordable housing
- Improving access to services
- Increasing support within shelters. Suggestions included increased staffing, "in-reaching" (i.e. workers/counsellors from outside agencies come to shelters a few hours each day to provide services and help people access services in the community) and outreach services by shelter staff to help bridge clients to housing and services
- Street outreach – to help people access income assistance and housing
- Partnerships between housing providers and service agencies
- Build community support for affordable housing and to end homelessness

Meeting with the Aboriginal Homelessness Steering Committee

The consultants also met with the Aboriginal Homelessness Steering Committee. The Committee identified the following issues:

Keep families together.   The shelter system forces many Aboriginal families to split up. When seeking a shelter, fathers are separated from the rest of the family. In transition houses, teenage boys cannot stay with their mothers. This is traumatic and places great stress on the families.   A suggestion was made to find homeowners to house homeless families – like a foster care program, but for the whole family.

Racism. Aboriginal people experience racism when they look for housing – even if they can afford market rents. There is a need for sensitivity training for people who deal with Aboriginal people.

More housing. Support for housing first. Need more housing targeted to Aboriginal people.

More shelters.   There is a need for more shelters. In 2005, 34% of the homeless were Aboriginal, but in the Downtown Eastside, it was 61%. Yet, only 2% of the shelters are Aboriginal run.

Aboriginal run housing/shelters. Funding should flow through the Aboriginal sector so they can provide culturally sensitive/appropriate housing and services. There is a need for housing and shelters that are built and run by Aboriginal organizations. Aboriginal shelters should have an elder and services to help the people move on. It was noted that when the Aboriginal Friendship Centre opened its emergency shelter, they were flooded by Aboriginal people. Staff asked why they came. The people said that the staff treated them with respect – as guests in their home.   It was suggested that the Aboriginal Friendship Centre should be able to operate a shelter at night.

Youth in the Valley. Aboriginal youth in need of safe places are over-represented in the Valley. There is a need for a safe place for youth under and over 16, children with mental health issues and those at risk of suicide.

The extended family. There is a need for housing where different generations can live together when they come to the city. Some children have special needs, as do some elders. Buildings need to accommodate people with different issues.

Transitional and supported housing. There is a need for transitional and supported housing for Aboriginal youth, students who go through training programs, teen mothers and families not fleeing abuse. This housing should not be in the Downtown Eastside.

Transition houses. There is a need for transition houses for Aboriginal women fleeing abuse.   Need places that will take teenage boys.

Access to housing. Damage deposits present a major barrier to accessing housing. There is a need for programs with housing advocates to help and support people to access housing - especially younger people.

Prevent homelessness. There is a need to prevent homelessness.

Interviews with shelter clients, former shelter clients and the street homeless

Shelter clients, former shelter clients and homeless people who do not use shelters were interviewed as part of the consultation for this shelter strategy to gain their perspectives on shelter services and the draft shelter strategy. Almost 190 individuals answered the survey questions: 76 were current shelter clients, 27 were former shelter clients living in transitional or permanent housing, and 85 were living outside. While the survey was not carried out on a random basis, interviews were conducted in several sub-regions and among different population groups, so the results are likely reasonably representative of shelter clients and the street homeless. The results for former shelter clients are less likely to be representative since fewer were interviewed.

The agencies below assisted in arranging for interviews with their clients.[11]

Sub-region	Shelter clients	Former shelter clients	Street homeless	Inter-views
Vancouver	Yukon Shelter The Haven Vi Fineday Belkin House	Jim Green Residence Munroe House Covenant House	Kits Shower Program Aboriginal Friendship Centre Covenant House	
South of Fraser	Liz's House II Virginia Sam Transition House		Front Room	
Burnaby/New Westminster	Fraserside Monarch Place Transition House	Cliff Block	Progressive Homes	
Richmond	Richmond House			
North Shore	North Shore Shelter			
Ridge Meadows	Caring Place			
Tri-Cities				
Number of participants	76	27	85	188

Like most about staying in a shelter

What shelter clients like most about staying in a shelter is that they are warm, dry, have a roof over their heads, and do not have to sleep outside. Many said they felt safe (particularly women in a transition house), appreciated the friendly and helpful staff, the meals, having a bed, and a shower.

> *shelters provide "a stable environment – 'till I'm able to get out on my own again."*

The most frequent comments from former shelter clients about what they liked most were: the food, staff, feeling safe, the other residents, and a roof over their heads. The youth appreciated a shelter specifically targeted to them.

Like least about staying in a shelter

Current and former shelter clients

Hours of service. When asked what they like least, by far the most frequent comment was about curfews, getting up early and having to be out during the day. A few participants complained that they did not have enough time to sleep. They noted that sometimes they didn't get a bed until 11:30 p.m., and had to leave early the next morning. There were complaints about having to be out before other services were open, and having to leave early – even on Sundays. A few participants said it is hard

---

[11] Additional agencies were in the process of arranging interviews at the time of writing.

being out all day and not being able to go to your room if you are tired. One person said that being outside all day made it hard to stay away from crime and drugs.

Other residents. Participants also expressed concerns about living with the other residents and the lack of privacy. Some feel that shelters are too crowded. They don't like sharing rooms or being with people who have drug and alcohol problems. They noted that the lack of personal space and storage caused them to lose their belongings, and that "stuff gets stolen". As noted by one participant, "group living can be challenging".

Being homeless. When asked what they liked least, seven participants said that it was the fact "that I'm homeless and don't have a place to go to". Some commented that:

"It's just temporary, then you're back to square one".
"It's degrading, embarrassing."
"It does something to my pride. I've always been a working person".

Other. Other complaints were about staff, the location, "sometimes you see things you don't want to see", the limit on length of stay, and the lack of activities, food, laundry facilities, and showers.

Former shelter clients had similar complaints. They least liked other residents who didn't clean up after themselves, were using drugs, and broke the rules. Some former shelter clients had negative experiences with some staff. Another common complaint was about the hours of service (e.g. having to leave early in the morning), lack of security and having some belongings stolen. One participant also said that there was "too much moving – bed to bed, room to room".

Street homeless

The street homeless participants responded that they do not stay in shelters because of the rules, particularly rules about coming and going, and the curfews.   Other reasons included:

- They do not feel safe in shelters
- They do not like the location
- The lack of privacy
- Their addiction prevents them from staying there

Some participants had tried to stay in a shelter but didn't get in. However a few noted that they did use shelters sometimes – particularly in bad weather.

When asked if anything bad had ever happened to them at a shelter, 45% said that nothing bad had ever happened to them. However, 25% reported having things stolen or an act of violence (e.g. punched, beaten up, involved in fights, harassed and threatened). A few other participants complained about bed bugs.

Goals

Current shelter clients were asked about their goals while at the shelter. The most frequent response was to find housing (50), followed by finding a job (25). One participant said he goes out every day to try and get work and set aside enough money to move into one of the downtown eastside hotels.

Fourteen participants said their goal is to take care of their immediate needs, including addressing health issues, getting a good night's sleep, staying out of the rain, and "getting their feet on the ground". Eleven participants said that they were trying to get into treatment/recovery. Other goals included going back to school, receiving Employment Insurance, Income Assistance, learning how to be aware of abuse, and "getting insight into what got me here".

Most helpful services to achieve goals

When asked what types of on-site services at shelters are "most helpful to achieve your goals", the most frequent response was "staff". This included staff that offered support, counselling, advice, were resourceful and were available 24 hours.

Participants also appreciated having access to computers and the internet, a telephone, newspapers, message services, and bus tickets to help with their search for housing, a job or to obtain other services.

Many respondents also appreciated the meals. One participant appreciated the "real breakfast" provided at the shelter and another said the meals were "on time and brilliant". It was also noted that meals helped with recovery. Participants also mentioned clothing (e.g. fresh socks), the ability to sleep, showers, and zero tolerance for drugs and alcohol as among the services most helpful to achieve their goals.

Least helpful services to achieve goals

More than half the participants did not identify services that were least helpful. As one person said, "Nothing – everything is helpful". However, concerns raised most often were not enough time to sleep, a lack of bus tickets/transportation services, and not enough Internet access. It was also noted that sometimes, shelter clients aren't made aware of all the possible services that might be available to them.

Additional services needed at shelters

When shelter clients were asked what other services shelters should provide the most frequent response was more one-on-one time with staff or counsellors. They identified a need for more help with housing, employment, and drug and alcohol issues. They called for more computers and suggested that shelters provide opportunities for clients to build skills and obtain work experience. One participant suggested that shelters offer programs during the day instead of forcing people out. There was support for the idea that shelters should be a place for people to move forward. "Not just a flophouse but an opportunity."

Participants also identified a need for:

- Telephones
- Bus tickets
- Longer hours to provide a minimum of 8 hours sleep
- Laundry and showers
- More/better food – all shelters should have at least a take-away breakfast and coffee
- More security/storage
- Private rooms
- On-site health services
- More opportunities for fun activities e.g. movie night, table tennis/air hockey
- Help to re-unite with children

Families staying in shelters expressed a need for child-care services so they could look for housing, a job and attend to other essential appointments.

Former shelter clients who were adults identified a need for similar services: more help to find housing, child-care services, more activities for guests, more access to medical services, translation, bus fare, counselling, and individual support. It was suggested that clients be assigned to one staff person who would be responsible for ensuring that they receive the services they need. Youth who were former shelter clients suggested that shelters provide detox services in house, programs that support young moms and dads with babies, more counselling, and more lifeskills training (beyond time management and budgeting.) The need to accommodate youth with pets was also noted. As one youth said, "My dog is everything to me."

Housing

Current shelter clients

Most of the shelter client participants (71%) said that they were actively looking for housing. Among those who were not, some had found a place and were waiting to move in. Others were not looking for housing because they were waiting to get into a treatment program or they did not have enough money to rent a place or pay the damage deposit.

When asked what was important to them about the next place they live, most participants mentioned affordability and location, including being close to public transit and work. A few said that they wanted to be somewhere other than the downtown eastside.

Most participants also said that safety and privacy were important. A few said they wanted a "clean and sober" living arrangement. Also mentioned were housing that is safe for children, is clean, where the people are friendly, and with a fully equipped bathroom. One person remarked that, "people should not have to be confined to a box or SRO. Why should people have to live that way?"

Support to get housing

When asked specifically about what kind of services/support they needed to help get housing, the most frequent response was someone to help them, such as a housing advocate or counsellor. Other suggestions included a list of affordable rooms, newspaper ads, telephones, application forms and referrals, letters of reference, a message centre, and on-line computer access.

Participants also identified a need for:

- Financial support, including income assistance, a job, and help with a damage deposit and budgeting
- More affordable housing, including SIL units and non-profit housing
- Bus tickets, being able to stay longer in the shelter, furniture, and identification

It was noted, however, that income assistance rates would still be insufficient to find housing that the participants could afford.

Support to keep housing

When asked what kind of services they would need to keep their housing, the most frequent response was a job/income. Other comments included affordable rent or a rent subsidy, mental health support, treatment and support to remain abstinent (as well as alcohol and drug free housing), homemaker support, financial help in case of a crisis, a help line, furnishings and "no creepy crawlies".

Former shelter clients

Housing satisfaction

The former shelter clients interviewed had been living in transitional or permanent housing for a few weeks to 10 years. Most participants were very satisfied with their housing.   What they liked most was their independence and privacy – having their own bedroom, bathroom and kitchen – the activities, other tenants, staff, location, affordable rent, and the freedom to decorate. While some interviewees had no complaints about their housing, a few raised issues about being by themselves, other tenants, the neighbourhood, having to share, and being in an old building (e.g. bugs and leaks). A few residents in transitional housing expressed concerns about the limit on length of stay.

Support to get housing

Most of the adults reported that it was staff at the shelter that had helped them obtain housing. A few had been helped by other agencies, including their mental health team. A few said that nobody helped them. The youth said it was outreach workers, after care support and shelter staff that were most helpful in helping them obtain housing. One youth found a shared accommodation list helpful, and another found housing on their own.

Support to "settle in" to housing

When asked about what kind of services were most useful in helping them to settle in to their housing, the most frequent response from the adults was the staff at the housing. Participants also mentioned community services, their mental health team, neighbours and their family. A number of participants said that nobody helped them to settle in – they took care of things themselves. The youth mentioned after care workers, shelter staff who helped them move in, the van provided by the shelter, and outreach workers who came to visit. One youth with a youth agreement said the social worker had been helpful. A few youth mentioned receiving a start-up kit, although one complained that "you only get one and the stuff doesn't last too long."

Street homeless

The length of time that street homeless participants had been living on the street varied from 2 nights to 12 years. Most had been living on the street for less than five years and about one quarter had been living outside for less than six months. A small number had been living this way for five years or more, and some had been living outside "on and off" for a year or more.

Length of time living outside	Number	Percent
Under 6 months	23	27%
6 months to under 2 years	16	19%
2 years to under 5 years	27	32%
5 years or more	7	8%
On and off for 1 year or more	8	9%
No answer	4	5%
Total number of participants	**85**	**100%**

When asked about the kind of housing they would like to live in, almost all the participants said they wanted a private bedroom (92%), private bathroom (82%) and private kitchen (73%). A few said that while they would prefer their own space, they would share, if necessary.

In general, most participants said that they would like to remain in the area where they were living outside. They were "close to everything" and the people were friendly. A few said they wanted to move to the country or somewhere quiet, where they grew up, or close to their kids. Participants also said that they wanted to be close to transit, able to have their children, pets, access to laundry facilities and be able to grow vegetables.

> "Living in shelters makes people feel worthless, useless, depressed. Living in your own home helps you integrate – helps with self esteem."

When asked if someone were to offer you this kind of housing, would you be interested in moving inside, almost all the interviewees, 96%, said yes.

Comments on the draft shelter strategy

Interviewees were asked if they agree with the direction of the draft shelter strategy

which focuses on providing housing units rather than shelter beds to meet the needs of people who are homeless. Almost two thirds of respondents agreed. Support for more housing was particularly strong among the street homeless at 74%. The youth would like to ensure that some of the housing would be available to them.

Response	Shelter clients #	Shelter clients %	Former shelter clients #	Former shelter clients %	Street homeless #	Street homeless %	Total #	Total %
Mostly housing	40	53%	18	67%	63	74%	121	64%
Mostly shelters	12	16%	3	11%	5	6%	20	11%
Housing and shelters equally	16	21%	5	19%	3	4%	24	13%
No answer/Don't know	8	11%	1	4%	14	16%	23	12%
Total	**76**	**101%**	**27**	**101%**	**85**	**100%**	**188**	**100%**

The main reasons given for supporting the housing focus are:

- Shelters are only a "temporary solution and most people get stuck at that point".
- It is "stressful going from shelter to shelter".
- People would need less time in shelters if they could get into housing.

Participants also had some suggestions about the type of housing needed. One participant suggested considering SIL units – "dedicated buildings are not necessarily the answer." Other participants identified a need for long term supportive housing with no time limit. As one person said, "You are so broken down, you need the support. You don't want to keep moving."

It was noted that shelters are important because they provide support and can help link clients to treatment. Also it was felt that many homeless people would never get housing (especially those with addictions), and therefore they needed a shelter. A few participants said there is a need for more shelters that are home-like, and that shelters should be upgraded to provide single rooms.

4   Summary of issues

The following is a summary of the major issues revealed by the shelter needs assessment and consultation.

- □ Growth in number of homeless people between 2002 and 2005 despite increasing shelter resource capacity
- □ Growth in number of people who are homeless for one year or more (long term homeless)
- □ Growth in number of homeless people found on the street or sofa surfing
- □ Many street homeless don't want to/can't stay in shelters
- □ High prevalence of homeless persons with addictions/mental illness
- □ High Aboriginal prevalence among the homeless population
- □ Gradual aging of the homeless population
- □ Vancouver and South Fraser: largest and fastest growth in number homeless
- □ Large number of individuals and households at economic risk
- □ Other risk sources are youth aging out of child welfare system and family homelessness due to violence
- □ Average length of shelter stay has doubled over the past several years
- □ High occupancy rates in emergency shelters and CWWS facilities
- □ Mostly males are turned away from CWWS facilities
- □ Increasing number of women with special needs turned away from transition houses
- □ Increasing number of women outside the program mandate (i.e. not fleeing violence) turned away from transition houses
- □ Significant shortfall in the number of shelter beds run by Aboriginal organizations
- □ Significant shortfall in the number of shelter beds targeted for seniors relative to other sub-populations
- □ The number of shelter beds for single women is below average relative to resources available for other groups
- □ Significant shortfall in the number of shelter beds for youth aged 19-24 years relative to other groups
- □ Inadequate shelter resources in South of Fraser relative to the average
- □ Inadequate shelter resources in the Northeast sector
- □ Relative shortfall in shelter beds in the Inner municipalities relative to other sub-regions
- □ Consultation participants supported the "housing first" approach to addressing homelessness, while recognizing a need for more shelters in some communities and for some population groups
- □ Stakeholders felt that most of the gap in accommodation needs for the homeless should be met by permanent housing.
- □ Shelter clients interviewed appreciated having a warm, dry place to stay but were concerned about limited hours of service, and issues with other residents like lack of privacy and theft.
- □ Street homeless said they do not stay in shelters because of the rules about coming and going, and curfews.
- □ When the street homeless were asked about the type of housing they would like to live in, most wanted a private bedroom (92%), private bathroom (82%) and private kitchen (73%).

□   96% of the street homeless said they would move inside if they were offered housing that met their needs.

□   64% of all current and formerly homeless interviewed agreed that housing is the best response to homelessness and they agreed with the proposed direction of the shelter plan.

5   Principles of the strategy

The following statement describes the major assumption under which this shelter strategy is prepared.

> ***All levels of government will take responsibility for providing between 678 and 976 permanent housing units in 10 years to meet some of the accommodation needs of homeless persons.   If this does not occur, then there will be more street homeless, and the shelter strategy will need to be amended to address the shortfall.***

The following statements of principle reflect established regional policy and/or stakeholder views on shelter planning. Together with the above assumption and identified needs and issues they provide the basis for the shelter strategy.

A. **Solutions to homelessness are based on three essential elements: housing, adequate income and support services.** 3 Ways To Home

B. ***Emergency shelters are an interim response to homelessness providing short stays and are only part of the continuum of housing, income and support.*** *3 Ways to Home*

    The shelter strategy recognizes that emergency shelters are intended to meet crisis accommodation needs, offer temporary stays for those in need, and are <u>not</u> a replacement for housing. There will always be people in crisis, so we will always need shelters.

C. **Regional stakeholders support a 'housing first' approach to ending homelessness while meeting urgent shelter needs for sub-populations and sub-regions.** Regional Stakeholders Nov 05

    Housing first means giving people who are homeless direct access to permanent housing – along with whatever services and assistance they need and want to maintain their housing choice. This approach assumes that the factors that contributed to a household's homelessness can best be remedied once the household is stably housed.

D. ***Permanent emergency shelter capacity should be available throughout the region so individuals living in each community have access to suitable emergency shelter locally.*** *3 Ways to Home*

E. ***Emergency shelters in Greater Vancouver should be responsive to the unique needs of all groups. [They] should be able to accommodate all people who are homeless including youth, women, (with and without children), families, seniors, Aboriginal people, immigrants and refugees, sexual minorities and individuals with special needs such as addiction and/or mental health issues.*** *3 Ways to Home*

In addition to the above, the Shelter Task Force wishes to acknowledge the need for shelters to be sensitive to people of different cultures and not neglect the needs of homeless men, who make up a significant share of the homeless population.

F. ***The emergency shelter system should aim to provide service that is responsive to need, client-centred and adequately resourced.*** *Stakeholders*

A range of shelter responses is needed to address different needs, including both 24-hour full service shelters and shelters that operate only in the evening and overnight, if alternative services are located close by. Some homeless people need minimal barrier shelters that accept all individuals and others prefer dry shelters where drug or alcohol use is not permitted.

G. ***A collaborative approach should be undertaken in planning for service provision to ensure that essential services meet a wide range of needs****.*

H. ***Outreach services should be developed and evolve in consultation with service providers to assist in facilitating sustainability of placements and to facilitate collaborative service provision.***

6   Strategy

The strategy addresses both immediate issues within the existing shelter system, future needs and systemic issues related to reducing homelessness through the housing continuum, income and services. The strategy consists of five objectives as follows:

6.1   Improve the effectiveness of the emergency shelter system.
6.2   Improve services/links to move people from shelters to housing.
6.3   Focus on services that help street homeless people leave the streets.
6.4   Increase the capacity of transition houses to meet the needs of women and
        families fleeing violence.
6.5   Develop permanent solutions to end homelessness.

The following is a detailed description of each objective of the strategy, with specific recommendations.

6.1   Improve the effectiveness of the emergency shelter system

While the focus of the strategy is on 'housing first' solutions to homelessness, it recognizes that emergency shelters are an important crisis response, and that there are gaps in available shelter resources for certain sub-populations and sub-regions. An adequate distribution of resources is necessary to meet the needs of all persons who are

homeless.   The shelter system needs to increase its ability to provide services to all sub-populations and sub-regions while maintaining existing resources.

A) Develop targeted new emergency shelter spaces for underserved sub-populations and sub-regions

Table 16 shows the number of shelter beds (both permanent and seasonal, including safe houses) required region wide for three scenarios, A, B and C. Figures are provided for two time periods: 2006 - 2010 and 2011- 2015. The focus in Phase 1 is to address current needs, while the Phase 2 focus is on future needs. It also shows annual needs, based on these figures.   In all cases, the total daily need for accommodation for homeless persons is 1,396 beds/housing units.   The way in which this need is met varies for each scenario. All scenarios assume that existing seasonal shelter capacity (266 beds) is expanded to year round accommodation. (Transition house bed requirements are addressed in Section 6.4).

Scenario A represents the minimum number of additional shelter beds required to meet current needs (154 beds), with the remaining daily accommodation needs of the homeless being met by permanent housing (976 units). This would require 31 additional shelter beds annually in the first five years.

Scenario B is the number of shelter beds that are needed (452 beds), again assuming that a significant share would be best served in permanent housing (678 units). This would require 91 additional beds each year over five years.

Scenario C is the 'worst case' scenario, which must be considered in the event that permanent housing units for the homeless are not created.   In that case, all daily accommodation needs of the homeless must be met by creating new year round shelter beds (1,130), and converting existing seasonal capacity to year round shelter spaces (266) for a total of 1,396 beds/units.

Table 16 – Proposed shelter bed requirements 2006-2015

	Scenario A		Scenario B		Scenario C	
Phase 1 2006-2010	**# Beds/ units**	**Annual**	**# Beds/ units**	**Annual**	**# Beds/ units**	**Annual**
Shelter beds	154	31	452	91	1,130	226
Convert existing CWWS beds to year round shelter beds	266	53	266	53	266	53
Sub-total shelter beds	420		718		1396	
Permanent housing units	976	195	678	136	0	0
Total current needs (shelter beds and housing units)	1,396		1,396		1,396	

	Scenario A		Scenario B		**	
	# Beds/ units	Annual	# Beds/ units	Annual	# Beds/ units	Annual
Phase 2 2011-2015	119	24	136	27	136	27
Total Phase 1 and 2 needs	1515		1532		1532	

** Two future scenarios were projected.

Table 17 shows the proposed allocation of additional shelter spaces (both permanent and seasonal) for Phase 1 by client group and sub-region for Scenario B only.   Scenario B is selected as being most consistent with the stated 'housing first' approach, while taking into account existing shortfalls in shelter capacity. It focuses on those sub-populations and sub-regions that are presently most under-served based on the analyses in Section 2.3 and on feedback received throughout the consultation. It will be important to monitor the situation after two years and again after the first five years. If permanent housing resources are not forthcoming in the numbers required, then the strategy will have to be amended to reflect this.

Not all sub-groups and sub-regions are represented in Phase 1. For example, there is little new allocation proposed for adult males because at present they are the best served of all sub-populations in terms of number of shelter spaces per homeless persons.   And, while further sub-regional distribution might be desirable in terms of local access to services, this must be balanced with ensuring that facilities are of a sufficient size to be feasible financially. There will be opportunities in Phase 2 to develop shelter capacity for other sub-populations and sub-regions. Additionally, all population groups and sub-regions should be accommodated in permanent housing, when it is built.

Priorities are reflected in the order in which they appear, although each is high priority given the level of under-capacity for these sub-populations and sub-regions. Adjustments are made to account for a situation where a sub-region has more capacity than average, but is underserved for a particular sub-group, or in the case of Vancouver, which acts as a regional resource. In addition, in sub-regions with little or no capacity at all, facilities for adult men and women are proposed to meet a wider range of needs.

Table 17 – Proposed Phase 1 shelter bed distribution 2006- 2010

Client group	Sub-region	Scenario B
		Number of beds/units
Aboriginal adults	South of Fraser	44
Seniors (55+)	South of Fraser	15
Seniors (55+)	Inner Municipalities	15
Seniors (55+)	Vancouver	10
Adult men and women	Northeast Sector	30
Aboriginal adults	Vancouver	44
Youth (19-24)	Northeast Sector	30
Youth incl Aboriginal (19-24)	South of Fraser	58
Single women	South of Fraser	30
Men	South of Fraser	44
Adult men and women	Inner Municipalities	44
Youth (19-24)	Inner Municipalities	43
Single women	Inner Municipalities	30
Misc. (youth, families, sexual minorities)	Vancouver	15
Additional shelter beds		452
Convert existing CWWS beds to year round beds		266
Sub-total shelter beds		718
Permanent housing units		678
Total current needs (shelter beds and housing units)		1,396

For example, according to the table, 44 beds should be developed for Aboriginal adults in South of Fraser. The miscellaneous category could provide capacity for some sub-populations that are small in number, but regionally dispersed, for example sexual minorities and/or families.

Sub-regional allocations should have regard for the existing resource distribution within the sub-region. For example, Table 18 calls for 43 beds for youth ages 19 to 24 years in the Inner Municipalities. If there are no shelter spaces in Burnaby, but there are spaces in New Westminster and Richmond, then Burnaby should receive priority when allocating spaces within the sub-region.

The Phase 2 allocation of shelter beds should be determined in the 5-year review of the shelter strategy. By that time, the next homeless count will have been completed and there will be a better understanding of how new shelter spaces and housing has affected the distribution of the Greater Vancouver homeless population. The focus in Phase 2

may well be on different sub-regions and sub-populations, if the dynamics of homelessness change.

B) Monitor and plan to ensure there are no negative Olympic related housing impacts

Previous mega events in Vancouver have resulted in evictions and displacements of tenants by landlords seeking to benefit from increased tourist and worker demand. Olympic related evictions and displacements will increase the demand for shelter capacity. It is important planning occur to ensure that the needed shelter capacity is in place.

C) Improve/facilitate access to shelters

There remain a number of barriers faced by homeless individuals trying to access emergency shelters. For example, some shelters are closed until late at night, well after people have made a decision about where to stay for the night. Twenty-four hour access to shelters would help promote use of emergency shelters as opposed to rough sleeping. Even shelters that are not open 24 hours need to extend hours of operation to be open early in the evenings and to ensure that clients can have at least eight hours of sleep.   In addition, coordinated hours of service with other community agencies would ensure that people are not forced out of a shelter without there being another place for them to go – for a meal or services.

Income assistance eligibility for shelters still acts as a barrier for some. Block funding would eliminate this barrier and help to promote easier access to shelters for those who need it. This would also eliminate the problem of working poor people who are trying to save for damage deposit, having to pay to stay in a shelter. In addition, there was concern that the After Hours service of MEIA was not easily accessible.

There will still be people who are barred from shelters who have nowhere to go. A wider range of shelters addressing different needs among those who are homeless would address this situation. This includes separate shelters that are specifically designed to serve people with difficult/challenging behaviours, and shelters that adhere to a harm reduction approach. At the same time, there is a need to provide safe places for others to be in an alcohol and drug free environment.

Stakeholders identified a growing need for a response to the palliative care needs of homeless seniors and others with terminal illnesses. At present, they are discharged from hospital to shelters (which are unable to provide adequate care), and back again. It was agreed that shelters are not the place for these individuals - they require placement in appropriate facilities.

D) Develop interim seasonal capacity for sub-regions/sub-populations with no shelter capacity

Enhancing seasonal emergency shelter capacity should be considered as an interim measure, particularly for the sub-areas and sub-populations that are most underserved including Aboriginal persons, seniors, the Northeast Sector and South of Fraser. The aim of this shelter strategy is that existing seasonal shelters should be converted to permanent shelters or replaced with permanent shelters.

Seasonal beds should focus on the areas and sub-groups in Table 6, since it will be difficult to meet any of these permanent needs for at least three years.   (Note that planning for extreme weather capacity is not part of this strategy.)

Developing seasonal shelter resources might also be a way of increasing the capacity of some groups to develop and operate a permanent emergency shelter. Planning and operating a seasonal shelter would be a good first step to develop needed skills.

E) Consider alternative approaches for emergency accommodation

Recognizing the need for emergency accommodation for a growing number of homeless seniors in Greater Vancouver, the Seniors Housing Information Program (now called Seniors Services) has developed a pilot project aimed at offering homeless or at risk seniors an alternative to emergency shelters. Seniors Services is negotiating to rent one or two one-bedroom units in the New Westminster area, which can then be rented to seniors on an emergency basis, for up to 3 months. Residents must be able to live independently, although they will receive Seniors Services outreach services. They will pay rent according to their income. The pilot project has funding from the United Way of the Lower Mainland for two years. The Seniors Services pilot will be evaluated at the end of its implementation. The Jim Green Residence also has a unit that is operated to serve emergency accommodation needs.

This model might be appropriate for other groups or sub-regions with small homeless populations or which might benefit from a small, independent setting for example, sexual minority youth, families or people with pets. The advantage of this approach is that it doesn't require capital funding. On the other hand, it may be difficult for the seniors to move once accommodated in this unit.

There may be other alternatives to meet emergency accommodation needs of other sub-populations.   For example, some emergency shelters run by Aboriginal organizations elsewhere in the country might serve as a model that could be adapted here. In St. John's, NF, the Native Friendship Centre operates the Shanawdithit Shelter, named after the last Beothuk. The shelter opened in September 2003 and can accommodate up to 23 persons and families experiencing temporary or regular homelessness. It provides a culturally based shelter for homeless and transient clients, community based support, referral and advocacy to homeless and transient clients. The shelter operates 24 hours a day, 7 days a week providing a safe and secure environment for absolute homeless clients. It is handicapped accessible, complete with elevator and chair lift service.   The Centre provides services that are geared to the particular needs of the Aboriginal

community. For instance, one of the most often used services is welcoming people at the airport and providing transportation to the city. The shelter also helps clients get to medical facilities or a doctor's appointment. The Centre provides translation services from InnuktutuK and Innu Aimun to English so that patients can explain their situations. Beyond the actual services, staff at the centre can deal effectively with cultural dimension of the people they serve.

Innovative models such as that used by Seniors Services and other groups, as noted above, should be considered for some locations and sub-populations when implementing the shelter strategy.

F) Develop and implement standards/best practices

Best practices codes set out common values, principles and commitments that shape the future practices used by shelter providers, for the benefit of the homeless. Shelter Net BC and BC Housing intend to work together over the next year and a half to develop these standards. Shelter Net BC has created a discussion paper based on regional consultations with shelter providers.[12]   Similar standards should be in place for safe houses and transition houses.

G) Collect and report shared shelter data

In Greater Vancouver, much of what we know about homeless people has been obtained from homeless counts. While this is a valuable tool, it is limited. It is important that emergency shelters have the ability to aggregate their client records and tabulate, the number of different individuals who use their shelter/the shelter system over the course of a month or year, and some basic demographic data. Such a capability should be considered a "best practice" as it aids in shelter planning at the individual shelter level, but also at the system level. In addition, there is a critical need for reliable information about the number of chronic users of the shelter system – that small proportion of the homeless population who typically account for a major use of shelter bed nights – and their use of resources.

While most emergency shelters use a client database in their operations, and theoretically have the ability to compile and share this data given certain privacy safeguards, this has not yet occurred.   Discussions with BC Housing have been initiated to this end. It would be ideal to have this capability in place before the next homeless count (likely in 2007/08). This would simplify the count, in that the shelters would not need to be enumerated on count night, and shelter records could be used instead.

H) Focus on capacity building among certain sub-populations and sub-regions to ensure suitable shelter resources are in place

Planning, building and operating an emergency shelter, be it a shelter, safe house or transition house, is a large and complex task. Some community groups do not have

---

[12] Joan Cotie. 2006. Best Practices for Shelters. Regional Consultations with Shelter Providers in British Columbia 2005. Discussion Paper and Templates.

experience in this area, and do not possess the necessary resources or skills. It would be useful to implement some ideas to assist with capacity building in various sectors. Some potential ideas include:

- Funding for additional staffing/consultants
- Administrative and leadership development
- Provincial or regional information and resources for new shelter development, perhaps through Shelter Net BC
- Organization/network to support youth safe houses
- Workshops/courses on proposal writing, budgeting, managing, and cultural sensitivity
- Mentoring with existing organization operating a shelter
- Operating a seasonal shelter

6.2   Improve services/links to move people from shelters to housing

All three elements of the continuum are necessary to move people from shelters to housing, including: income, decent and affordable housing and support services. The following services/strategies are recommended as among the most effective ways to link people in shelters to housing:

A. Increase shelter staff/resources so shelter staff can assess each client and work with them to determine the support services they need and want

Shelters need sufficient staffing so they can assess each client and work with them to determine the support services they need and want. Shelter staff should help clients develop goals, plans for achieving these goals, and address any barriers to achieving these goals. Appropriate levels of staffing should be determined. Shelters also need sufficient resources for their clients, such as telephones, Internet access, newspapers, a 'resource board', the ability to take messages, and bus tickets to help clients find housing and apply for jobs or income assistance. Shelters that serve families need to provide child care services. Specialized services need to be available for people from different cultures and translation needs to be available for people who do not speak English.

B. Promote "in-reaching" to shelters so that workers/counsellors from outside agencies provide services *on-site* at the shelters and facilitate access to services in the community

Workers/counsellors from outside agencies should spend a few hours each day in shelters to provide services *on-site.* At the same time, they should also work to ensure that people in shelters are able to access the services they need in the community. Key areas for service while people are in shelters include income assistance, immigration, mental health, physical health, and dentistry. Shelter clients also need information on a variety of issues, including education and employment opportunities, addictions

treatment, how to find housing, and what is involved in being a tenant (e.g. rights and obligations).

C. Provide bridging services to help shelter clients access and make a successful transition to housing

Bridging services are necessary to help shelter clients move from shelters to housing. Stakeholders and clients identified a need for hands-on, one-on-one support with a housing counsellor or advocate who would help them access housing. They also identified a need for a list of affordable housing, application forms for housing, transportation to look for housing, letters of reference, help with the damage deposit, and help to secure furniture and household supplies.

Other services that could help clients transition to housing include:

- Case management;
- Helping clients access income assistance, addictions treatment and other services in the community;
- Helping to ensure coordination of the services needed by clients; and
- Accompanying shelter clients to medical and other appointments.

Once clients are housed, workers would continue to help clients with the transition to housing stability. Services could include:

- Helping clients with budgeting and money management issues (e.g. arrange for rent to be paid directly to landlords or for cheques to be paid weekly rather than monthly – if appropriate);
- Arranging for addictions treatment services – if appropriate;
- Checking in with the client to see how they are doing and if their housing situation is working out;
- Ensuring that the client receives any additional long-term support that will be necessary to maintain their housing (e.g. homemaking services or mental health support);
- Helping families with children to obtain child care and connect to schools, after hours programs, food banks, medical clinics and other services that stabilize the family unit; and
- Arranging specialized services for youth such as medical care, access to financial assistance and job training programs.

Bridging workers would aim to prevent a housing crisis. If a client is not doing well in a particular living situation, they might facilitate a move back to the shelter or to another housing situation. Their goal would be to minimize the disruption/upheaval for the client.

Bridging workers would work with shelter clients on a "short-term" basis. The goal would be to help clients become stable enough to maintain their housing. If a client would like ongoing support, the outreach worker would facilitate a smooth transition to a longer-term support worker. Bridging services can be provided by shelters or other organizations in the community. In South of Fraser, a housing registry helps shelter clients access housing. One advantage of having bridging workers connected to a

shelter is continuity when working with a particularly challenging clientele with a high rate of recidivism, and the ability to provide immediate assistance if they return to the shelter.

D. Encourage and support partnerships between housing providers, shelter providers and service agencies to facilitate access to housing units

There is a need to support and encourage partnerships between housing providers (non-profit and private landlords) and shelter providers to help ensure that shelter clients have access to housing units. Some ideas to encourage landlords to provide housing for people who have been homeless include:

- Ensuring that support is in place (for both the landlords and the tenants);
- Ensuring that landlords will be compensated should tenants damage their units or default on their rent;
- Providing for rents to be paid directly to landlords;
- Having tenants sign an addendum to the lease specifying that the building is Crime Free (makes it clear to the tenant what is permitted and what isn't);
- Suggesting that landlords implement fixed tenancies (e.g. three months) where appropriate, until they are comfortable with a new tenant;
- Educating landlords to end discrimination; and
- Educating landlords so they can understand the types of behaviours that particular tenants might exhibit and how to deal with these behaviours.

Partnerships that include Health Authorities and various support agencies have been able to serve people with special needs (e.g. Special Needs Housing Program – Victoria and the BC Housing Health Services Program).[13] In Toronto, the Hugh Garner Housing Co-operative accepts referrals from agencies that serve youth, refugees and Aboriginal people. The housing co-op makes a certain number of units available to the agencies' clients and in return, the service agencies provide support. Allocating a block of hours to particular buildings so that support staff can provide housekeeping and personal care services for clients with complex needs is another effective way to provide support. Partnerships between outreach/bridging workers and housing providers should also be supported to help agencies access units for their clients.

E. Provide additional financial assistance to help shelter clients access housing and employment

Shelter clients who are seeking housing may require financial assistance specifically to help them pay for damage deposits and moving costs. In addition, clients who are seeking employment may need financial assistance to pay for tools, clothing, and perhaps bus fare.

F. Develop strategies that will induce more landlords to accept tenants with pets

---

[13] Kraus, Deborah, Jim Woodward and Associates Inc, and Margaret Eberle. *Models for Sustainable Partnerships Between Housing Providers and Communities to Address Homelessness.* Prepared for the BC Non-Profit Housing Association.

Having a pet is a significant barrier for people seeking housing. Landlords might be more willing to accept tenants with pets if leases could specifically provide for the conditions under which a pet will be evicted, if additional damage deposits were available, and if support were available to assist in arranging for pet adoptions. It is necessary to identify additional strategies/initiatives that would encourage more landlords to accept tenants with pets.

G. Identify ways to improve access to housing (e.g. one-stop access in multiple locations)

Consider creating a "one-stop" system of access for all housing e.g. a central housing registry. Access points should be available throughout Greater Vancouver to make it convenient for people seeking housing. Regardless of which location they go to, applicants should be able to inquire about and apply for the same housing options. During the consultation, there were mixed views on the effectiveness of housing registries. It was noted that some have been successful in facilitating access to housing units. On the other hand, concerns have been expressed that there aren't enough housing units to make registries worthwhile (too much competition for too few units) and private landlords won't work through a registry – particularly in a tight rental market.

H. Improve communication and coordination among agencies helping homeless people find jobs and training and related services

 There is a need to:

- Create an inventory of existing programs that help homeless people find jobs or become employment ready, identify any gaps in programs, and ensure coordination of services, recognizing that some people will be unable to work because of a disability;
- Create services to help people get/replace their identification and other necessary papers enabling them to work;
- Improve communication and coordination among agencies while recognizing the need to protect client confidentiality; and
- Consider establishing partnerships with local businesses to facilitate employment of shelter clients, where appropriate. Ensure monitoring of employment.

Project Comeback is a pilot project sponsored by the Newton Advocacy Group Society in Surrey. It works with homeless people to help them secure full-time sustainable work and housing. Consideration should be given to introducing similar initiatives in other communities that do not have such programs.

6.3   Focus on services that help street homeless people leave the streets

The 2005 Homeless Count showed that Greater Vancouver has a large street homeless population. Some have lived outside for many years. Helping the street homeless to move inside, either into a shelter or permanent housing, is one of the key strategies to reduce the number homeless and to improve the quality of life of homeless persons.

A) Evaluate and expand the pilot "direct access to housing" project

The BC Ministry of Employment and Income Assistance (MEIA) in conjunction with the City of Vancouver concluded in December 2005 the first phase of a unique pilot project providing street homeless people with immediate access to income assistance and housing, usually on the same day. The project operated in the West End and Downtown Eastside of Vancouver. It was based on the assumption that homeless people found it too difficult to apply for income assistance and therefore did not attempt an application. The initiative relied on outreach workers to assist the street homeless to apply for income assistance, then, later that same day, with cheque in hand, facilitated their direct placement into a Vancouver SRO unit.

The 6-week pilot provided income assistance and placed approximately 50 street homeless individuals in housing. Based on anecdotal information from business owners in the West End, there has been a visible reduction in the street homeless in the area. An evaluation is currently underway to determine if the housed persons remain on income assistance and stably housed, either in the same unit or in a different one. It will also determine if the participants are accessing other services.

This type of initiative could be instrumental in reducing street homelessness and homelessness in general. However, it is dependent upon the availability of a stock of housing that is affordable to a person receiving the shelter component of income assistance and suitable for the needs of this population.

In order to know if the participants are *maintaining* permanent housing, the outcomes of this project should be tracked for least 6 months to one year. Otherwise, if participants exit to the street after several months because they could not maintain their housing, little has been accomplished.   Preliminary evidence after one month suggests that most clients are maintaining their housing.[14] Beginning in April 2006, BC Housing is coordinating an expanded project.

Other options for increasing access to income assistance should also be promoted. For example, the Yukon shelter is involved in a pilot project to prepare pre-applications for MEIA, and this is proving successful. Additional strategies include having MEIA workers spend more time in shelters, and having workers available in their offices early in the morning.

---

[14] Judy Graves. City of Vancouver. Personal communication. Mar. 2, 2006.

B) Pilot test an initiative with direct access from the street to permanent supportive housing

Since many homeless individuals, particularly the long term homeless, have significant health issues, permanent supportive housing is an appropriate solution to their housing needs. Given the sizeable number of homeless persons with addiction issues, it is appropriate to focus on providing suitable permanent accommodation for this group. The shelter strategy calls for a pilot project offering homeless people with addictions living on the street direct access to permanent supportive housing that is targeted to persons with addictions and/or mental health issues. This initiative would be a housing first approach, utilizing permanent supportive housing instead of SRO rooms and would provide appropriate services as needed and wanted. Supportive housing for homeless people with other special needs could follow.

C) Ensure distribution of shelters regionally (see 5.1 A)

According to the homeless count, one of the reasons homeless people do not use a shelter is that there is not one close by. Stakeholders felt that the homeless, like all of us, are attached to their home community, where they feel safe, and do not want to leave to access services.   In the same vein, many homeless people do not want to use available shelters, many of which are in Vancouver's downtown eastside area, as they do not like the neighbourhood. Some homeless people do not have the resources to take transit to reach a shelter. Availability of emergency shelters in each sub-region should help to alleviate this issue.

D) Ensure access to treatment, shelter and housing suitable for persons with addictions, mental health issues and other complex health issues

Many homeless people have addiction, mental heath problems, and/or other complex health issues that require treatment. In fact, addiction was the most common health condition reported by the homeless in the 2005 Homeless Count.   Some people with addictions or mental health issues who are in a housing crisis visit emergency shelters because they have nowhere else to go. Many others avoid emergency shelters because the shelter has barred them or requires a client to be sober. At any rate, most emergency shelters are not equipped and staffed to meet their needs. Most homeless people with addictions spend most of their time on the streets. The share of street homeless reporting addiction (53%) was higher than the share of the sheltered homeless (43%).

While minimal barrier shelters can provide for emergency needs, most individuals with addictions/mental health issues or other complex issues require access to treatment and/or housing that is suitable and meets their needs. An adequate supply of treatment spaces in mainstream drug and alcohol facilities and mental health services is required to help address this growing problem. The provincial government and health authorities must allocate additional resources to expand treatment capacity in Greater Vancouver for people seeking to address their substance use issues.   There is also a need to

expand access to mental health services for homeless people who are on the streets, in shelters, and who are able to access housing.

Some people who complete treatment programs will also require alcohol and drug free supportive housing options to maintain their stability. Other alternatives are necessary for people who do not wish to enter treatment or for whom treatment programs have not been successful.   Supportive housing that adheres to a harm reduction approach is necessary for them to ensure that the shelters and streets do not become their permanent "home".

E) Outreach services must be improved/expanded to address growing street homelessness

Outreach services are an essential link between people living on the streets and shelter or housing. This connection is often the first step in moving from the streets inside to a shelter and they will be critical in any direct access to housing initiative as well. *3 Ways to Home* outlined the critical importance of this resource, and sets out some recommendations (See *3 Ways to Home* p. 82).

6.4   Increase the capacity of transition houses to meet the needs of women and their children fleeing abuse

Although many of the preceding objectives and recommendations are relevant to the transition house sector, the following are unique to transition houses.

Transition houses play a pivotal role in helping women fleeing abuse escape their environment, and receive the support they need. While transition houses turn away women on a nightly basis, they may also have vacant beds. This happens because the available configuration of beds may not match the composition of families seeking assistance. This happens most often with women who have several children. Thus if a woman with four children seeks assistance, and there is room only for a woman and three children, then all five will be turned away, leaving vacant capacity but unmet need. Standard occupancy rates may not be useful for assessing need in transition houses and other facilities serving families.

A. Further investigate the need for additional transition house beds to meet current needs

There are 192 transition house beds located throughout Greater Vancouver in 16 facilities. Vancouver has 34% of the beds, South of Fraser 30% and the Inner Municipalities 16%. The remainder are located in the North Shore, Northeast Sector and Ridge Meadows. According to the needs assessment and based on figures supplied by Ministry of Community Services, Stop the Violence Branch, transition houses have typically turned away 9 women per day on average over the past four years due to

insufficient space or because the space available is not sufficient to accommodate a woman and her children.

Kate Booth House, a transition house located in Vancouver is presently undergoing an expansion of 10 beds, to increase capacity from 12 beds to 22 beds, thus potentially meeting current needs. Some questions have been raised as to whether these additional beds will be sufficient to meet current needs. The beds will be located in Vancouver, and transition houses believe there is a need for more beds outside Vancouver. Furthermore, there may be an additional need for transition house services that is not reflected in the turnaway numbers. Women may not be using transition houses for a variety of reasons. It would be helpful to explore this issue in more depth to discover the extent of this unmet need and how to better serve these women.

B. Establish regional resources within the transition house system to serve women with special needs who are fleeing abuse

The instances of women who were turned away from transition houses because of special needs has averaged approximately 3 women per night over the past four years. These women were living with mental health and/or substance use issues. Others may have had physical challenges that could not be accommodated in the transition house, for example, if the facility was not wheelchair accessible.   Thus, four additional beds for special needs clients are needed to meet current requirements.

Two Greater Vancouver transition houses offer specialized services for women with special needs: Shimai Specialized Transition House, a 10-bed facility in South of Fraser for women with substance use issues and their children who leave their homes due to abuse; and Peggy's Place, a 10-bed facility in Vancouver for women without children who have a mental illness, may have drug and/or alcohol dependencies, and have experienced abuse. Durrant House in South of Fraser provides an integrated approach to service delivery and accommodates all women fleeing abuse, regardless of whether or not they use substances.

Specialized and integrated facilities have their advantages and disadvantages.   A specialized facility can ensure that women with special needs receive the services they need. However, some people with substance use issues may not go to a specialized transition house.

The transition house system needs to increase its ability to provide services to women (with or without children) who have special needs and are fleeing abuse. Options include creating a new specialized regional facility for this purpose, identifying an existing transition house that could be adapted to become a specialized facility, and identifying transition houses that wish to expand their program and adopt an integrated approach to serve clients with special needs. In all cases, these transition houses will need to be staffed appropriately on a 24 hour basis, 7 days a week, and the staff will require specialized training. Flexibility is required so that women may stay longer than 30 days.

C. Build capacity within the transition house system so transition houses can serve the different sub-populations of women with and without children who have diverse needs and are fleeing abuse

Women who are fleeing abuse and seeking services from transition houses come from diverse backgrounds and have diverse needs.   Service providers have indicated that sub-populations include older and younger women, women with older male children, women with large families, women with pets, sexual minorities, women from different cultures, including Aboriginal women, and women in the sex trade. It is essential that transition houses be able to serve these women. To accomplish this, transition houses require increased resources and expertise. Ways to increase the capacity of transition houses include:

- Sufficient funding for appropriate staff positions;
- 24/7 staffing;
- Having access to resources so clients can access counselling and support services as needed, including legal and child care services;
- Staff training on the full range of issues to be addressed in transition houses with a diverse and multicultural population; and
- Innovative/flexible design solutions to accommodate diverse needs (e.g. women with several children, and women with pets).

Transition houses also need to be more accessible to women fleeing abuse. Suggestions include:

- A central clearing house phone number women can call to find out where beds are available (211 in Calgary); and
- An examination of current eligibility criteria, policies and procedures to identify barriers to women seeking services from transition houses, and a commitment to eliminate these barriers.

Similar to other shelter clients, transition houses clients also require access to a full range of services to help them access and make a successful transition to housing. See Section 5.2.

D. Ensure that women have access to services in their own and other communities

One of the principles of this regional shelter strategy is to ensure that individuals and families have access to suitable emergency accommodation in their own communities. It can be a great benefit to women seeking emergency services to have access to a transition house that is nearby. However, some women may wish to flee to another community where they will feel safer or anonymous. Transition houses need to facilitate both options.

E. Increase the number of transition house beds to meet the future needs of women with and without children who are fleeing abuse

Based on turnaway trends and population projections, an additional 19 to 30 transition house beds will be needed between 2010 and 2015 to meet future needs.   Some of these beds could be designated for clients with special needs.

F. Begin a process with transition houses to discuss data needs and options for improving capacity to gather and report statistics

Transition houses currently gather data each month about the number of women who are served, turned away, and the reasons why they are turned away. They document the number of visits to transition houses, but do not count the number of *individual* women served. (One woman may visit several times over the course of a year. It would be useful to know how many different women visit a transition house, and how many visits each one makes.) Additionally, we do not know from this information how many different women are turned away.   Different measures of occupancy rates could be explored to better reflect the circumstances at transition houses.

At a minimum, it would be helpful to implement a record keeping system within each transition house that can track individual clients and the number of visits. Some demographic information would also helpful, particularly to help plan for the diversity of clients. It would also be useful to be able to track the number of unique individuals who are turned away – and reasons why.   This information should be readily available to the BC/Yukon Society of Transition Houses to assist with policy and program development and planning.

Each transition house would need to be comfortable that the information collected would meet privacy requirements as well as that the ultimate use of the data would be appropriate. In addition, a transition house may have some particular data needs that it would like to see addressed. The BC/Yukon Society of Transition Houses should initiate a process of discussion with transition houses to develop these ideas more fully and to discuss and address any concerns. Development of such a system will only be effective if it meets the needs of all participants.

6.5   Develop permanent solutions to end homelessness

Emergency shelters cannot solve the homeless problem. They can provide a temporary, emergency response to ensure that those who are homeless have a roof over their heads, meals, other necessities and access to support services. Preventing and ending homelessness requires concerted actions on all 3 "ways to home". It requires a stock of housing that is affordable to those on income assistance and others with low incomes. It also requires incomes that are adequate to pay for housing. This includes improved rates of income assistance, income supplements and/or minimum wage rates including the working poor. Services, too, are equally important in reducing and preventing homelessness. The following recommendations are linked in some way to shelter provision. Many more actions are needed to end homelessness (see Regional Plan Update, *3 Ways to Home*).

A) Develop more permanent housing for homeless families and singles in need, and more supportive housing for homeless people with special needs

Permanent housing is an essential component of a *shelter* strategy because it offers the ability for shelter clients to "move on" from shelter to housing, also called "opening the back door." It also aids in preventing future homelessness. As the needs assessment showed, shelter clients are staying in shelters twice as long as they used to, and one of the reasons is that they cannot find a decent room or apartment that is affordable to them. Many of those staying at shelters are clients with special needs such as addictions or mental illness, and have stayed at shelters four or more times during a two-year period or over 60 days.[15] Also, homeless people say that the *reason* they are homeless in the first place is the same – they cannot find housing that is affordable. With prices continually rising, those with the lowest incomes, including income assistance recipients and those with minimum wage jobs, cannot keep up. To meet the daily accommodation needs of homeless persons in Greater Vancouver, 678 permanent housing units of various types are required within 5 years. This is in addition to other affordable housing needs in the region. For the purposes of this document, affordable housing refers to housing that is affordable to households with low and modest incomes and for which households pay 30% or less of gross household income for housing.

Permanent housing is clearly the answer for most people who are homeless. In fact, the number one goal of most people in shelters is to find housing. Housing with and without support is required.   The amount of support and length of time it is needed will depend on each individual. All three levels of government must play a critical role. A first step would be to develop a regional strategy for supplying permanent affordable housing and for supportive housing.

B) Increase income assistance, provide rent supplements and/or a higher minimum wage in line with local rents

The flip side of the lack of housing that is affordable to those with low incomes is a lack of income. Again homeless people cite this as one of the main reasons they are homeless. With the shelter component of income assistance (IA) set at $325/month, even SRO rooms in Vancouver are beyond reach. Linking the shelter component of income assistance to local market rents would help people in the shelter system "go out the back door". As has been shown by the direct access pilot project in Vancouver, improving access to income assistance can also clearly have a positive impact on reducing homelessness. MEIA should use the same procedures to facilitate the immediate receipt of IA for all homeless applicants.

The Correctional Service of Canada has increased resources to assist offenders on release. These include locating identification, securing Health and UIC Cards and obtaining income assistance. The program also ensures that on release some mentally disordered offenders are provided accommodation, assisted with special needs and provided mental health resources and links to the community services. The provincial

---

[15] City Spaces. Final Report: Downtown Eastside Frequent Shelter User Review. Feb. 2006. It found that the 211 Frequent Shelter users in the study occupied 33% of available shelter beds at two shelters (Triage and Lookout).

justice system should enhance resources to facilitate access to housing and income assistance upon release from correctional facilities.

The minimum wage is also inadequate to allow a Greater Vancouver household to afford market rental housing. That the working poor stay in shelters indicates that wages are too low for this housing market or that rent supplements are needed. The concept of a "minimum housing wage" demonstrates the lowest wage that would allow a single person to afford average priced accommodation in a housing market. The minimum housing wage for Vancouver is calculated at $13.04/hr.[16] An individual must earn $13.04 per hour to afford a bachelor apartment in Greater Vancouver, if they are to pay no more than 30% of their income on rent. This is compared to the minimum wage of $8.00 per hour. Rent supplements can also be used to improve affordability.   The minimum wage should be raised to be more consistent with market rents.
Direct deposit of the shelter component for rent could be used more frequently, thus ensuring that the shelter supplement is used to pay rent. While this option is currently available, it is not clear how often it is used.

C) Develop methods to gain community acceptance for affordable housing and emergency shelters and promote public education

Proponents of both emergency shelters and affordable/social housing often face immense neighbourhood opposition to their projects. This slows the development process, increases development costs and sometimes derails projects altogether. This is challenging problem, with no simple solutions.

One local 'best practice' involves hiring a community liaison person to meet with neighbours during the planning phase of a proposed project. The Lookout Society used this approach successfully for the Cliff Block and North Shore shelters. Mediation was used successfully in Red Deer, Alberta.

There are many resources available to housing providers that may assist them in successfully securing a site and approvals for such projects. One is a workshop developed by the federal government called "Strategies for Gaining Community Acceptance." It is based on findings from many case studies. The workshop and associated materials are designed to provide municipalities, affordable housing and homelessness service providers with tools, capacity and 13 best practices to overcome "Not in My Backyard" (NIMBY) opposition as it relates to affordable housing and homelessness services. This workshop has been delivered in the Greater Vancouver area to interested providers and will be offered in the future.

Educating the general public about poverty, mental illness, homelessness and other related issues should also be a priority so that NIMBY opposition might be reduced. BC Housing is beginning a project to develop communication resources to help the general public learn more about homeless issues and to equip local governments to deal with public opposition to various housing proposals so that more innovative solutions can move forward.

---

[16] Focus Consulting Inc.(2006) Minimum Housing Wage: A New Way to think about Rental Housing Affordability. CHRA.

7   Implementation: Phase ONE 2006 – 2010

Recommendations for Implementation

The following Implementation Plan is a recommendation only as no formal discussion has been undertaken or endorsement obtained regarding funding and responsibility for implementation.

Phase ONE 2006 – 2010

Item	Actions	Responsibility	Time Target	Potential Funding Partners
5.1 Improve effectiveness of the emergency shelter system				
A. Develop targeted new emergency shelter spaces for underserved sub-populations and sub-regions.	1. BCH to create new shelter spaces over next five years as per Greater Vancouver Shelter Strategy 2006 – 2015.	BC Housing Fraser Health Vancouver Coastal Health Ministry of Children and Family Development	December 2010	BC Housing Vancouver Coastal Health, Fraser Health MCFD
	2. Develop a call for proposals for year one. 3. Adjudicate proposals and approve new projects	BC Housing Fraser Health Vancouver Coastal Health Ministry of Children and Family Development	February 2007	BC Housing

Item	Actions	Responsibility	Time Target	Potential Funding Partners
	4. Provide funding for CWW beds to operate year-round.	BC Housing	May 2007	BC Housing
	5. Monitor provision of affordable housing and adjust shelter strategy as necessary	BC Housing	Ongoing	BC Housing
	6. Develop Phase 2 shelter plan for 2011 – 2015	BC Housing, Shelter Net BC and partners	Nov. 2010	BC Housing
	7. Form a task force to develop a model and management plan to provide a culturally sensitive, Aboriginally-run shelter	Aboriginal Homelessness Steering Committee or appropriate task group	December 2006	BC Housing
B. Improve/facilitate access to shelters	1. Provide funding for more shelters to remain open on a 24-hour basis. 2. Provide funding to extend hours of operation for shelters not open 24/7 so they can open early in the evenings. 3. Consider block funding for shelters and develop new policies/program criteria so that shelters can serve individuals in need regardless of whether or not they are eligible for Income Assistance.	BC Housing Shelter Net BC	July 2007	BC Housing Human Resources & Skills Development Canada (HRSDC)(SCPI)
	4. MEIA to improve infrastructure for after hours services.	MEIA	December 2006	MEIA
	5. Develop a plan for some shelters (outside of Vancouver sub-region to be designated to provide specialized services to homeless people with high needs and challenges using a harm reduction approach.	BC Housing Shelter Net BC	July 2007	BC Housing

Item	Actions	Responsibility	Time Target	Potential Funding Partners
	6. Meet with hospitals and Health Authorities to develop plans so that people in need of palliative care or other health services have their needs addressed through the health care system rather than shelters.	Fraser Health Vancouver Coastal Health	December 2006	Health Authority
C. Develop interim seasonal capacity in sub-regions with no shelter capacity	1. Develop a call for proposals for year one for additional new seasonal capacity in sub-regions with no capacity. 2. Adjudicate proposals and approve new projects.	BC Housing Shelter Net BC	July 2007	BC Housing
D. Consider alternative approaches for emergency accommodation	1. Explore opportunities to acquire rental units for use as emergency accommodation	Shelter Net BC BC Housing	July 2007	BC Housing
E. Develop and implement emergency shelter standards/best practices	1. Develop Best Practices guidelines for all emergency shelters, including youth safe houses and transition houses 2. Provide funding to create and resource a committee of agencies serving youth so they can develop Best Practices guidelines for youth safe houses . 3. Provide funding to create and resource the BC/Yukon Society of Transition Houses to develop Best Practices guidelines.	BC Housing Shelter Net BC BC/Yukon Society of Transition Houses Youth serving agencies	July 2007	BC Housing
F. Collect and report shared shelter data	1. Develop capacity to meet data needs of shelters and share with others.	Shelter Net BC BC Housing	March 2007	HRSDC
G. Focus on capacity building among certain sub-populations and sub-regions to ensure	1. Offer workshops for shelters on best practices, administration, leadership, proposal writing, budgeting, managing, and cultural sensitivity. 2. Consider introducing a mentoring program	Shelter Net BC BC Housing	April 2007	BC Housing HRSDC

Item	Actions	Responsibility	Time Target	Potential Funding Partners
suitable resources are in place	whereby experienced shelters can offer support to new shelter operators.			
5.2 Improve services/links to move people from shelters to housing				
A. Increase shelter staff/resources so shelter staff can assess each client and work with them to determine the support services they need and want.	1. Determine appropriate levels of staffing at shelters so shelters can properly assess clients and work with them to determine the support services they need and want – consistent with Best Practices guidelines. 2. Provide sufficient funding to shelters for staff to help clients develop goals, plans to achieve goals, and address barriers. 3. Provide sufficient funding for shelters so they can provide telephones, internet access, newspapers, access to community information, a message service and bus tickets for clients. 4. Create a program so that shelters serving families are able to provide child care services or access to child care services. 5. Create a mechanism to provide specialized services for clients from different cultures and translation for people who do not speak English. (e.g. a partnership with MOSAIC to provide a roving translation service).	BC Housing Shelter Net BC Fraser Health Vancouver Coastal Health	April 2007	BC Housing Service Canada

Item	Actions	Responsibility	Time Target	Potential Funding Partners
B. Promote "in-reaching" to shelters so that workers/ counsellors from outside agencies provide services *on-site* at the shelters and facilitate access to services in the community.	1. The two health authorities and MEIA commit to delivering services to people in shelters on-site and to ensure that shelter clients have access to the services they need in the community. Such services include income assistance, mental health, physical health, addictions and dentistry etc. 2. Shelters and community agencies work together to provide other services and information to shelter clients on-site to address issues including immigration, cultural needs, housing, employment and education.	Fraser Health Vancouver Coastal Health MEIA Immigrant Services Society of BC MOSAIC Community agencies	April 2007	Fraser Health Vancouver Coastal Health MEIA
C. Provide bridging services to shelter clients to help them access and make a successful transition to housing.	1. Develop a comprehensive list of bridging services that would assist clients. 2. Negotiate funding for bridging services that would include the ability to provide hands on, one-on-one support to clients. 3. Create a program to provide financial support to help clients access housing. This includes assistance for damage deposits, moving, and acquiring necessary household items	Shelter providers Service providers	April 2007	BC Housing Fraser Health Vancouver Coastal HRSDC
D. Encourage and support partnerships between housing providers, shelter providers and service agencies to facilitate access to housing units.	1. Build on work done by BCNPHA and the Fraser Health Authority to encourage housing providers to enter into agreements with the health authority to house mental health clients. 2. Plan for at least one housing provider in each sub-region to enter into an agreement to provide housing in first two years of the plan. 3. Housing providers and community agencies to work together to find ways to house	BCNPHA Fraser Health Vancouver Coastal	Ongoing	BC Housing HRSDC Fraser Health Vancouver Coastal

Item	Actions	Responsibility	Time Target	Potential Funding Partners
	homeless/shelter clients. 4. Support housing providers to house homeless/ shelter clients. This could include funding for support staff/home support services, developing a program to compensate housing providers for damage their units or rent arrears (e.g. landlord guarantee), fostering partnerships with outreach/bridging workers, and education for both landlords and tenants. 5. Promote the practice of having rents paid directly to landlords – if a client wishes.			
E. Provide additional financial assistance to help shelter clients access housing and employment.	1. Develop a program and provide funding to help shelter clients pay for damage deposits and moving costs. 2. Develop a program and provide funding for shelter clients seeking employment to pay for necessary items such as tools, clothing, and bus fare.	Ministry of Employment and Income Assistance (MEIA)	December 2006	MEIA
F. Develop strategies that will induce more landlords to accept tenants with pets.	1. Create a task force of housing providers and tenants to develop strategies that would make landlords more willing to accept tenants with pets.	BCNPHA	May 2007	MEIA
G. Identify ways to improve access to housing (e.g. one-stop access)	1. Initiate a project to identify barriers and constraints to expanding the current BC Housing Registry to include all social housing and to include private market rental housing.	Shelter Net BC BCNPHA BC Housing CHF BC	July 2007	BC Housing HRSDC
H. Improve communication and coordination among agencies helping	1. Create a task force to develop strategies to improve coordination of services for homeless individuals who are seeking employment opportunities.	GVRSCH MEIA	June 2007	MEIA

Item	Actions	Responsibility	Time Target	Potential Funding Partners
homeless people find jobs and training and related services	2. Create an inventory of existing programs that help homeless people find jobs or become employment ready and identify any gaps in programs. 3. Create a service to help low-income/homeless people get/replace their identification and other papers necessary to get a job. 4. Seek partnerships with local businesses to facilitate employment of shelter clients to identify their degree of success and factors necessary for success.			
5.3 Focus on services that help street homeless people leave the streets				
A. Evaluate and expand the pilot "direct access to housing" project.	1. Track the outcomes of this project for at least six months to one year to determine success rates. 2. Expand this pilot to other areas of the GVRD. 3. Investigate the need to offer support services to some clients to help them maintain their housing.	MEIA BC Housing	Ongoing	MEIA
B. Pilot test an initiative with direct access from the street to permanent supportive housing	1. Develop a pilot project offering homeless people with addictions living on the street direct access to permanent supportive housing.	MEIA BC Housing Fraser Health Vancouver Coastal Health	July 2007	MEIA BC Housing Fraser Health Vancouver Coastal Health
C. Ensure distribution of shelters regionally	1. Follow the recommendations of the Greater Vancouver Shelter Strategy 2006 – 2015.	BC Housing	Ongoing	BC Housing

Item	Actions	Responsibility	Time Target	Potential Funding Partners
D. Ensure access to treatment, shelter and housing suitable for persons with addictions and mental health issues	1. Allocate additional resources to expand treatment capacity in Greater Vancouver for people with addictions, mental illness and complex needs.	Fraser Health Vancouver Coastal Health	July 2007	Fraser Health Vancouver Coastal Health
E. Outreach services must be improved/expanded to address growing street homelessness	1. Hire more outreach workers throughout Greater Vancouver to identify and work with all types of homeless individuals, engaging them in a positive way, assessing their needs, helping connect them with services, maintaining ongoing contact, and helping facilitate a process of transition to permanent housing. 2. Encourage the provision of outreach services that meet the needs of homeless individuals 7 days a week/24 hours a day in areas where appropriate. 3. Encourage the provision of more outreach workers who are knowledgeable about specific populations including youth, seniors, women, Aboriginal youth and families, refugees, people from other cultures, people with mental health issues, addictions, sexual minorities, and other special needs.	Fraser Health Vancouver Coastal Health MEIA	Ongoing	Fraser Health Vancouver Coastal Health MEIA
5.4 Increase the capacity of transition houses to meet the needs of women and their children fleeing abuse				

Item	Actions	Responsibility	Time Target	Potential Funding Partners
A. Further investigate the need for additional transition house beds to meet current needs	1. Undertake a review to determine the need for additional transition house beds.	BC & Yukon Society of Transition Houses Ministry of Community Services	November 2006	Ministry of Community Services
B. Establish regional resources within the transition house system to serve women with special needs who are fleeing abuse	1. Create a task force to determine how to meet the need for women fleeing abuse who have special needs.	BC & Yukon Society of Transition Houses Ministry of Community Services	December 2006	Ministry of Community Services
C. Build capacity within the transition house system so transition houses can serve the different sub-populations of women with and without children who have diverse needs and are fleeing abuse	1. Create a task force to develop a plan to increase the ability of the transition house system to serve the different sub-populations of women with and without children who have diverse needs and are fleeing abuse. 2. Allocate sufficient funding to transition houses so they can meet the diverse needs of their clients.	BC & Yukon Society of Transition Houses Ministry of Community Services	March 2007	Ministry of Community Services
D. Ensure that women have access to services in their own and other communities	1. Promote increased communication among transition houses to ensure women have access to services in their own or other communities where they will feel safe. 2. Provide funding to help women get to transition houses (e.g. pay for a taxi if necessary).	BC & Yukon Society of Transition Houses Ministry of Community Services	March 2007	Ministry of Community Services

Item	Actions	Responsibility	Time Target	Potential Funding Partners
E. Increase the number of transition house beds to meet the future needs of women with and without children who are fleeing abuse	Create 19 to 30 new beds between 2010 and 2015 in Greater Vancouver.	BC & Yukon Society of Transition Houses Ministry of Community Services	March 2007	Ministry of Community Services
F. Consider data needs and options for improving capacity to gather and report statistics	1. BC & Yukon Society of Transition Houses to initiate a process with transition houses to discuss data needs and issues.	BC & Yukon Society of Transition Houses Ministry of Community Services	May 2007	Ministry of Community Services
5.5 Develop permanent solutions to end homelessness				
A. Develop more permanent housing for homeless families and singles in need, and more supportive housing for homeless people with special needs	1. Develop a plan for meeting the permanent and supportive housing needs identified in this strategy.	BC Housing Fraser Health Vancouver Coast Health	July 2007	BC Housing

Item	Actions	Responsibility	Time Target	Potential Funding Partners
B. Increase the shelter component of income assistance, provide rent supplements and/or a higher minimum wage in line with local rents	1. Use the direct access pilot project procedures in Vancouver to facilitate the immediate receipt of IA for all homeless applicants. 2. A Task Group to make a formal request to MEIA for increased IA rates in Greater Vancouver based on housing wage. 3. The Correctional Service of Canada has increased resources to assist offenders on release. These include locating identification, securing Health and UIC Cards and obtaining MEIA. The program also ensures that on release some mentally disordered offenders are provided accommodation, assisted with special needs and provided mental health resources and links to the community services. These initiatives should be explored by the provincial justice system for people exciting the system.	MEIA Representatives of the Justice system	December 2006 December 2006	MEIA
C. Develop ways of gaining community acceptance for affordable housing and emergency shelters	1. BC Housing is beginning a project to develop communication resources to help the general public learn more about homeless issues and to equip local governments to deal with public opposition to various housing proposals so that more innovative solutions can move forward. 2. Once the resources are developed they should be made widely available to local governments and community groups and become part of a public education strategy.	BC Housing	December 2006	BC Housing
D. Ensure access to treatment and housing for persons with	1. See 3.5			

Item	Actions	Responsibility	Time Target	Potential Funding Partners
addictions and mental health issues				

Glossary of terms

Chronic homelessness – A prolonged state of homelessness (as opposed to *episodic* homelessness where persons move in and out homelessness or *temporary/transitional* homelessness whereby homelessness happens once and never re-occurs).

Housing First – The direct provision of permanent, independent housing to people who are homeless. Clients will receive whatever individual services and assistance they need and want to maintain their housing choice.

Independent housing – Permanent affordable housing for individuals who can live independently.

Permanent housing – Housing for people who can live independently in the community.

Supportive housing – Affordable housing with no limit on the length of stay and support services, as needed. Support services may be provided on site or in the community. The housing may be in purpose-built dedicated non-profit apartment buildings as well as supported hotels leased or owned and managed by a non-profit society, with a high degree of on site staff support (e.g. 24 hours a day). It could also be located in apartments leased in private or non-profit buildings where outreach services are provided (scattered site apartments).   Examples of this approach include SIL and Super SIL (a more intensively supported version of this program). Some individuals may require an intensive level of support such as is provided through Assertive Community Treatment (ACT) or another form of intensive case management. The relationship between the resident and landlord is generally governed by the Province's landlord/tenant legislation. Support services are voluntary and flexible to meet residents' needs and preferences and may vary over time. Support may be de-linked from housing so that tenants/clients do not lose their homes if they no longer require/desire support services and tenants do not lose their support if they get evicted from their housing.

Transitional housing – Time limited housing (e.g. two to three years) often with support services and the expectation that the residents will move on to independent and permanent housing.