STILL AT HOME IN THE ALBERNI VALLEY

PORT ALBERNI'S STRATEGIC PLAN TO HOUSE OUR COMMUNITY & END HOMELESSNESS

2016 – 2026

FINAL REPORT & COMMUNITY PLAN

ALBERNI VALLEY COMMUNITY STAKEHOLDERS INITIATIVE

DECEMBER 2015

ACKNOWLEDGEMENTS

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Homelessness and housing insecurity continue to be a deep concern for the Port Alberni community and the findings of this project indicates this concern is warranted.

Port Alberni is in a challenging predicament. A community on the decline, its limited income opportunities and slow development add to the lack of affordable housing and spreading poverty. Housing insecurity and homelessness is on the rise as the housing foundations on which this community stands are crumbling.

This community plan, Still at Home in the Alberni Valley, directs how the community can join forces to mobilize all of its local capacity and raise the sophistication of the entire community to implement creative and made-in-the Valley solutions to its current predicament.

THE PROJECT

The Alberni Valley Community Stakeholders Initiative (AVCSI) joined with stakeholders and community members in a collaborative review and planning process focussed on affordable housing, housing insecurity and homelessness in Port Alberni. Over 60 community members and over 25 organizations contributed their data, expertise, and experience through information sessions, facilitated consultation, social research and strategic planning processes.

The project aimed to identify current industry best practices, conduct community research and use these to engage in collaborative strategic planning to determine the best strategic directions for the coming decade to achieve the vision: Everybody is at home in Port Alberni.

The community plan and final report is the result of this work.

The final report is intended as an education tool, to provide background information and rationale for the strategic directions recommended and ongoing reference as the community implements the plan.

The strategic plan is intended to bring the entire community together toward improving poverty and housing in ways that have been proven to work elsewhere but modified to fit the local needs and strengths. It is intended to guide planning, funding service delivery and monitoring at government, community and service level.

THE CHALLENGES WE FACE

Over the course of the last seven years, the work of AVCSI and its community partners appears to have made a positive impact helping reduce the incidence of absolute homelessness in the area.

However the findings of this project reveal:

- Housing insecurity is widespread and damaging. All residents living at or below the poverty line (18%) are at risk of homelessness as are those experiencing unaffordability (49%) of renters.

- The community relies heavily on the private rental market for affordable housing which is 'critically unaffordable' and lacking by at least 355 bedrooms and demand is projected to increase by 5-9 new households; particularly for seniors. Core housing need exists in approximately 1000 units and improvements in living conditions in some private rentals warrant immediate attention because of harm to vulnerable people including youth.

- The stagnant movement across the housing system exerts pressure on both the private rental market and subsidised low-income housing and supported housing. It is a landlord's market is

presently making securing tenancy more difficult for less-than-perfect applicants and practitioners reported unhealthy power dynamics resulting in the abuse of some vulnerable tenants.

- Homelessness appears to be shifting away from absolute (rough living or visible on the street) to hidden (couch surfing, staying with friends, living in structures not suitable for human habitation) however turn-aways at the shelter and service data indicate it remains a pressing issues. The community currently does not have a definitive homeless count.

- Single people and aboriginal people are consistently overrepresented with women making up more of the low-income earners however more likely hidden. Vulnerability is on the increase with young people, seniors and families.

- The system of care has strong networks and functions relatively well given its demands and limited capacity; it is strength of the community. However service gaps, barriers, duplications, and challenges in coordination, information sharing, systems management and systems prevention indicate improvements are needed.

- The need for social and housing-specialist services is increasing. Missing services include those targeting young people and access to mental health which continue to be important.

- AVCSI's community planning and performance monitoring via the previous plan was insightful and progress has been made. However community capacity is severely stretched – necessary overview, strategic coordination, data & research roles are 'off the side of desks' –hindering progress.

- Implementation of innovations is held back by lack of knowledge and necessary capacity-infrastructure, people and resources; in addition to the system oversight required for coordination and performance management.

- Information gaps and failures to communicate plague the system and diminish the sector's ability to make evidence-based decisions, demonstrate effectiveness of interventions or accurately communicate the needs of residents or the sector.

The urgency to solve these challenges persists.

The community is in a very precarious situation. Already, many community members are suffering the ill-effects of poverty, housing insecurity and homelessness. Without immediate attention and investment in solutions, the situation is likely to get worse.

If the stagnant housing development continues and incomes do not improve, an aging population and continued deteriorating housing stock will add pressure on Port Alberni's housing system. The non-profit sector is already pushed beyond its capacity and if business continues as usual, the line the sector has been holding will most certainly collapse.

The health and well-being of residents will worsen, the ability of residents to maintain independent housing will further diminish and demands for already-stretched and more expensive, supportive housing and specialist health services will multiply. The vicious cycle of housing insecurity, poverty and ill-health will further downward- spiral; the question will be how dramatically.

TO HALT THIS WE MUST:

- ☐ Address the root causes of housing insecurity and homelessness - lack of affordable housing, poverty and failures in the serving system to provide the necessary supports.

- ☐ Commit, plan and act to end homelessness by preventing it through adequate & affordable housing, income and appropriate support.

- ☐ Embrace Housing First in philosophy, policy and practice.

- ☐ Transition a systems planning approach across the entire support system.
- ☐ Prioritize people based on evidence while remaining responsive to unique needs and changing trends.
- ☐ Develop accurate community wide information systems for planning, effective service delivery and performance management of the system.

SOLUTIONS MADE IN THE ALBERNI VALLEY

An abridged version of the new community plan follows on pages 6-7.

The ten-year plan builds on strengths of community and applies evidence based approaches to the local context to identify which strategic directions achieve the community's goals. The plan focusses the community's attention on:

- ☐ Taking a multi-pronged approach for increasing housing; protecting and improving rentals, finding creative community-based solutions to bring current private units into the affordable housing continuum as well as financing new builds.

- ☐ Maximizing community capacity by:
  - Increasing participation in, and designating resources for the critical backbone entity, AVCSI to do the essential system coordination work that is absolutely critical for success.
  - Mobilizing under-utilized partners and expertise in the community by strengthening partnership with landlords, the private sector, First Nations, and the Health sector to join forces along common goals of improving health, economic well-being and housing for the community.
  - Enhancing the local system of care to improve efficiency and creatively re-align resources with approaches and practices proven to be effective and cost-effective including Housing First and Systems Planning.

- ☐ Acknowledging and acting on the vital role information and data plays in driving action, managing performance and in educating decision makers, stakeholders and the public.

- ☐ Strengthening the financial capacity of the sector by reducing its dependence of government sources and building self-reliance from within the community matching investments with the seriousness of the challenges.

- ☐ Clarifying the role municipal leaders, the private sector including real estate, development and financial, mainstream institutions, social and health sector and other members of the community are positioned to take to proactively implement solutions.

- ☐ Raising the sophistication of the community to respond to these challenges with evidence-based information, approaches and models that will accelerate progress.

Will the community answer the call?

A plan is just words on a page until we act. To bring this plan to life there is a role for everyone to play; the whole community must get informed, be engaged and actively participate however people are empowered or responsible to do so. What role can you take?

The hope remains that together the community will build on its successes to move closer still toward adequate and affordable housing for all community members. When the value and dignity of all residents are nurtured, when basic needs meet and everyone has a home, only then will Port Alberni again have the chance to thrive and prosper.

STILL AT HOME IN THE ALBERNI VALLEY

PORT ALBERNI'S STRATEGIC PLAN TO HOUSE OUR COMMUNITY & END HOMELESSNESS
2016 – 2026

OUR VISION:

EVERYBODY IS AT HOME IN THE ALBERNI VALLEY

COMMUNITY GOALS

WE AIM TO HAVE:-

- ☐ Enough and the right mix of housing units across the continuum for all residents.
- ☐ More community members earning above the poverty line
- ☐ Informed decision-making by politicians, funders, service providers and the public
- ☐ Informed, formally organised, responsive community capacity focussed on prevention.
- ☐ Sustainable & increasingly self-reliant funding to support our efforts, housing and services.

STRATEGIC DIRECTIONS

1 PROTECT & INCREASE HOUSING STOCK TO MAINTAIN AN AFFORDABLE HOUSING CONTINUUM RESPONSIVE TO THE CHANGING NEEDS OF COMMUNITY.

- ☐ Strengthen community leadership capacity focused on protecting housing and housing acquisition.
- ☐ Protect existing housing stock and improve living standards of available units.
- ☐ Design a creative evidence-based housing acquisition plan visioning 10-20 years ahead and implement.
- ☐ Develop a financial plan to implement and actively pursue objectives.

2 JOIN WITH ALL SECTORS IN POVERTY REDUCTION PLAN & INITIATIVES TO IMPROVE FINANCIAL WELL-BEING ACROSS THE COMMUNITY.

- ☐ Continue to raise awareness with organisations, institutions and the public of the connection between poverty & housing insecurity and its impact on the community.
- ☐ Establish baseline of the number of community members experiencing poverty as community housing insecurity indicator and distribute information annually.
- ☐ Broaden efforts across community to improve equitable access to income and initiatives that reduce cost of living aimed at priority populations.
- ☐ Strengthen collaboration between housing sector and social, health, employment and economic development sectors in efforts aimed at improving community financial well-being.

3 PROACTIVELY TRANSITION TO A SYSTEMS-PLANNING MODEL ACROSS HOUSING AND HOMELESSNESS-SERVING SECTOR.

- ☐ Educate and engage stakeholders and the public on the benefits of adopting a systems-planning approach and current best practices.
- ☐ Establish critical populations and critical people list based on evidence.
- ☐ Enhance and formalise Port Alberni's current system of care focussed on prevention, income and housing including aboriginal and non-aboriginal organisations and progressively move toward achieving fidelity to Housing First principles.
- ☐ Improve local systems prevention strategies across housing, health, justice and youth systems with a focus on priority populations.

4 ENHANCE INFORMATION COLLECTION, ANALYSIS AND DISSEMINATION.

- ☐ Strengthen local service providers' capacity to collect and share accurate and relevant information.
- ☐ Design information management program to progressively meet information needs for evidence-based community and systems planning, programming decisions, funding, research, performance management and improved communication.
- ☐ Transition to a community-wide integrated information management system.
- ☐ Improve communication across stakeholders and the community aimed at raising awareness, and providing direction and motivation for necessary change.

5 IMPROVE CAPACITY FOR HOUSING SYSTEM, ITS COORDINATION AND IMPLEMENTATION OF STRATEGIC INITIATIVES.

- ☐ Strengthen AVCSI capacity to enhance leadership & coordination.
- ☐ Design a creative financial plan for funding coordination, housing acquisition and plan activities increasing financial self-reliance for the community.
- ☐ Continue taking building community capacity approach
- ☐ Ensure consistency in embracing ending homelessness through prevention, affordable housing and Housing First philosophy across the community and in all actions.

Read the full plan on pages 39 -43 of the Final Report.

Click on www.portalberni.ca to access more information.

Recommended Implementation Actions Initial 1-3 years:

Presented by consultant and discussed with AVCSI Committee: December 18 2015.

For Port Alberni the urgency remains high for addressing housing & poverty and demands that the work to stabilize housing and end homelessness move from 'off the side of the desk' to a funded commitment across the whole community. The current 10 year strategy will remain just a plan unless the community makes initial investments in its implementation and completes the foundational community education and engagement required to increase broader stakeholder participation and bring more resources, expertise and motivation to the table.

With the new Government of Canada committed to a national housing strategy and reinvesting in social infrastructure, the community should ready itself by improving collaborative efforts and aligning to Housing First (HF) expectations. If the community fails to align with HF or remains unsure of the best use of funding before applications are open, the community risks unhelpful competition within the sector and further delaying any significant impact on the local challenges.

Unfortunately there is no magic bullet but magic can come if the non-profit sector can shift their focus initially to supporting other sectors to join in and share the burden of solving housing challenges and poverty across the entire community where it belongs..

I recommend the community stakeholders consider these initial actions:

1. Seek immediate funds to support staffing for AVCSI as backbone organisation – all successful communities have designated coordination roles overseeing cross-sector collaboration, systems coordination and processes.

- Explore partnering with poverty reduction advocates to join up initiatives as well as accessing resources from unused or duplicated services and social enterprises.
- Include sustainable fundraising as a responsibility for role, administration & coordination made available to sub-group chairs, communications and supporting the group with up-to-date research and innovations in their respective topics.

2. Expand membership of AVCSI to include more representatives from First Nations, Ministry Child & Family Development, Ministry Social Innovation and Social Development, Corrections, businesses, real estate & development, financial industry, social entrepreneurs, etc. and strengthen representation of irregular attendees for key partnering organisations, to further engage and mobilize the community's collective resources. Success in other communities has come when the profit sector bring their expertise and resources to solutions. They should be encouraged, supported to do so, guided by the expertise of the non-profit sector and recognised for their contributions. The non-profit sector has been carrying the load of this community-wide challenge and capacity must be increased by engaging sectors not currently actively involved in addition to the getter the wider community's support.

- Create sub-groups in the committee focussed on implementing action – have a chair for each sub-group who will be responsible for encouraging ownership and accountability and reporting to larger group and the public.
- Regular larger meetings should focus on action outcomes from the sub-groups, coordination of the activities and integration of solutions across the working groups. Consistent review of stakeholders' experience of the group and its progress should be conducted to ensure ongoing commitment and perceived usefulness.

- Consider topic based sub-groups for financing (coordination & housing) capacity, protecting and improving current housing stock (landlords housing program), systems planning & service delivery, and communication and advocacy etc. to ensure local expertise is used efficiently and ownership of outcomes is maximised throughout the groups.

3. Request local governments take a more proactive leadership role.

- Options for proactive leadership include funding a time-limited project with AVCSI to improve staffing capacity; championing the profit sector to join in initiatives including innovative capital & financing options, generating funds through taxation such as in nearby Comox Valley, utilizing all available municipal tools to encourage affordable housing development, and advocating for the community's inclusion in future government funding.
- Request council consider advocating for provincial and federal government improvements in matters outside of local jurisdiction by making a resolution at AVICC/UBCM.
- Non-profit sector must support local government to take a stronger leadership role by participating in education with decision makers and the wider community and collecting & disseminating information publically.
- For-profit sector can explore financial models (preferably increasingly self-reliant) that other communities have used and their fit for the Port Alberni context and assist non-profits and local government in implementation.

4. Commence immediate communication to stakeholders and the public starting with the final report, strategic plan and informing how the community and its leaders can help.

- Establish regular communications locally; highlight outcomes of current service provision, current challenges, best practices and how organisation and people in the community can be involved in solutions.
- Consider most effective media channels and seek in-kind contributions from community and for-profit marketing organisations for assistance ensuring they are well recognised for their contributions.

5. Service delivery sector to commence transition to systems planning and free up resources to transfer these resources to fill gaps and improve coordination.

- Complete systems mapping across community and formulate a plan for enhancing services, improving coordination, reducing duplication and realigning resources to fill gaps and deliver strategic coordination activities.
- Acknowledge and continue to support for the services currently providing services.
- Support providers proactively shifting to evidence based practices.

6. Expand clinical and service performance information sharing amongst service providers - information should be made available to inform decisions about housing gaps, info used to raise public awareness and motivation, support decision makers with evidence, determine housing gaps improved system and service coordination and priority people.

- Talk with BC Housing about changes in information sharing requirements and options.
- Information describing the business case of housing for all that is available currently should be shared immediately throughout the community.
- Determine an evidence based list of priority people, gather consents and prioritize these people across the serving-sector.
- Collect the evidence to align all the community on the best fit model for supported housing to prepare for when more funding becomes available.

7. To protect and improve current affordable rental housing

- Develop a landlord partnering programs such as 'Streets to Homes' initiative in Victoria, Dawn-to-Dawn in Comox Valley or Grand Prairie's 'Housing First Landlords' program partnering with private landlords, real-estates, property managers and City. Devise incentives for private landlords to sign onto program built into the program (constancy of rent, tenants supported by program, damage repaired etc.) in addition to future access to funding for repairs/ tax breaks etc.
- Utilize system-mapping task to identify organizations currently supportive services to private rental units, performing landlord liaison, tenant education, housing referrals etc. and bring current resources together and realign as needed to staff the landlords program.
- Explore how current services can join forces in transitioning to providing a Housing First Program that fits with the criteria outlined through the federal Homelessness Partnering and best practices as highlighted in Still at Home.

8. To improve conditions in rental stock and address safety concerns

- Explore with RCMP and City of Port Alberni a Community Safety Initiative or a Crime Free Multi-Housing Program directed at highlighted at-risk housing developments.
- Increase community awareness of the issue targeting messages particularly on the impact on well-being of young people.
- Service providers should be supported to prioritise engagement with at risk youth and adults and finding alternative accommodation.
- Focus on incentivizing these landlords encouraging improvement in conditions.

9. To address currents gaps and concerns around young people in the community, invite MCFD, First Nations representatives, mental health and other related providers to hold a dialogue about housing and safety issues for young people, current Housing First approaches for young people, integrating the systems serving young people as they transition to adult services and for attending to gaps in service currently.

Respectfully,

Amanda Ridgway
IGNITE CONSULTANCY

STILL AT HOME IN THE ALBERNI VALLEY
PORT ALBERNI'S STRATEGIC PLAN TO HOUSE OUR COMMUNITY & END HOMELESSNESS

Homelessness and housing insecurity continues to be a deep concern for the Port Alberni community.

Since 2008 the community's effort to solve these challenges has been aligned through a community plan - *At Home in the Alberni Valley: Our plan to end homelessness*. This document was the result of a collaborative planning process between members of a local stakeholders group, The Alberni Valley Community Stakeholders Initiative (AVCSI) and additional social, health & housing stakeholders, service users and community members.

Under the direction of this original plan and ongoing performance management against its objectives, new housing programs were created, services improved and the state of housing and homelessness in the community has changed.

After six years of progress the AVCSI initiated a review of the community's progress with a view to rewrite the community plan. The current project aimed to identify current industry best practices, conduct community research and use these to engage in collaborative strategic planning to create a new community plan to direct activities for the next decade.

This report summarizes the project, presents result of social research, list key findings important for planning & implementation and offers a new community plan for the coming decade.

The hope remains that together the community will build on its successes to move closer still toward adequate and affordable housing for all community members and achieving the ultimate goal of ending homelessness.

ABOUT AVCSI

The Alberni Valley Community Stakeholders Initiative (AVCSI) is a collaboration of local stakeholders representing government agencies, local service agencies, faith groups and members of the public pursuing improved housing conditions for the community. It is a sub-Committee of the Alberni Valley Social Planning Committee which is a registered non-profit society.

The AVCSI group was formalized after the Port Alberni City Council and the Office of the MLA convened a diverse groups of stakeholders early 2007 to discuss the growing concern of visibly homeless community members sleeping on the streets in the downtown area. As discussions progressed, participants saw the validity and value of designing a plan aligning community stakeholders to direct effort focussed on evidence-based needs and solutions. The AVCSI became the backbone organisation to facilitate completion of the plan and to coordinate plan activities.

The community has seen a range of successes in the community since; the build of Phoenix House, conversion of Redford/Sportsman Lodge to Rogers St Apartments, the build of the KUU-US transitional housing complex, introduction of a secondary suites policy, the strategic allocation of funds into the community for new resources and plans for a new emergency shelter.

The AVCSI continues to lead the coordination of housing and homelessness solutions in the Alberni Valley. With an open membership it includes representation from the MLA Office, City of Port Alberni Council, Alberni Valley Health Network, Ministry of Social Development, Ministry of Mental Health and Addiction, Canadian Mental Health Association (CMHA), Port Alberni Shelter Society, Alberni Valley Health Outreach, KUU-US Crisis Society, Bread of Life Society, and community citizens.

ABOUT THE PREVIOUS PLAN

The initial 2008 community plan At Home in the Alberni Valley: Our plan to end homelessness was funded by Island Health and completed by local consultant Myron Jespersen.[1] It was presented to local municipalities where it was endorsed and added to the Official Community Plan in June 2009.

Fundamental principles guiding the community's effort included:

- We can end homelessness.
- We follow the principles of "Housing First"
- We concentrate on efforts that offer measurable results

This collection of principles was innovative for 2008. Only recently was the same approach of ending homelessness with a housing first philosophy and a focus on measureable results now universally accepted across Canada as a nation.

Regular progress reports completed by AVCSI have provided ongoing feedback for the community and encouraged timely modifications in activities required and were included in this review. The choice to measure indicators made it possible to report trends and confirm observational hypotheses. This added significant value to this project but more importantly likely directly influenced progress for the Port Alberni community as described in this report. The AVCSI and community should be commended in its foresight.

ABOUT THE PROJECT

Over 60 community members representing themselves and over 25 organizations contributed their data, expertise, experience and ideas to the project. A list of participating stakeholders can be found in Appendix A. The project was took place between January and October 2015. It was funded by the AVCSI utilising investment with the Alberni Valley Community Foundation.

Consultant Amanda Ridgway, of Ignite Consultancy, was engaged to complete the project via an RFP process. A Collective Impact[2] approach together with BC Healthy Communities - Integral Capacity Building Framework[3] guided the design and implementation of the project's activities.

Project aims:
- Review progress against the goals set out in the earlier plan
- Determine current needs, strengths and resources of the community and
- Facilitate a collaborative process to create a new plan for the coming 5-10 years.

Process aims:
- Engage the necessary partners and a diverse group of individuals and organizations to contribute
- Integrate current evidence based approaches and industry innovations
- Utilise opportunities for education and up-skilling to build local and sector expertise

Activities included:
- AVCSI and stakeholder meetings
- Individual consultations,
- Public engagement sessions,
  Presentation to council and
- Strategic planning session with key implementation partners.

Further details about project activities and the raw data collected during activities are available in the appendices.

Limitations.
This project is not intended as empirical research. All efforts were made to ensure the accuracy of reported data and related implications. However determining the reliability of data collection methods of local sources of information and examining data using empirically focussed statistical programs were beyond this project's parameters. Various information systems with varying levels of data quality were used. Interpretations of provider-specific data and their collection methods were interpreted with a critical eye, and notes made accordingly where relevant to identify important considerations.

EVIDENCE-BASED APPROACHES & PRACTICES

SUCCESS FACTORS GUIDING THE COMMUNITY PLAN

Driven by alarming trends researchers, policy makers and service providers across the globe have raced to determine what works in keeping people housed. Historic approaches focussed only on managing homelessness by relying only on emergency shelters and support services have been demonstrated as ineffective and costly. Canada is calculated as spending $7 billion annually on managing homelessness through emergency responses as opposed to ending homelessness through housing.[4]

Learn the facts about housing insecurity and homelessness on pages 44-50.

Evidence based research has triggered transformational shifts in philosophy, policy and practice. Approaches are now being re-aligned with pragmatic, evidence based approaches that account for the complexity of human experiences and integrate services to attend the whole needs of families and individuals. And communities now push to apply emerging models to their local context and implement best practices to achieve the greatest impact with efficient use of often limited resources.

THE APPROACHES TRANSFORMING COMMUNITIES

COMMITTING AND ACTING TO END HOMELESSNESS

A radical shift has occurred in how housing insecurity, and it's most unhealthy outcome homelessness is perceived. Homelessness is no longer seen as inevitable, an assumption proven false by history and by research. Previous arguments that contributed to inaction are now replaced by respect for the rights of our community members, compassion for the health and wellbeing of others and a pragmatic push for responses that prove to be effective and are cost-effective.

Research demonstrates success comes when all activities and actions focus on eliminating homelessness and therefore prevention becomes a primary aim. This is achieved by preventing housing insecurity and homelessness through focused attention on three interlocking factors – adequate & affordable housing, income and support.

A community must act in all three areas to successfully provide housing security for its members. All individuals or families must have adequate affordable housing, the financial means to keep it and access to support when challenges their capacity to maintain housing and income arise. This requires not only the focussed attention of health and social services but also mainstream services, institutions, education and justice systems alongside private organizations, business and developers across a community.

SUPPORT + ADEQUATE AFFORDABLE HOUSING + INCOME

10 YEARS PLANS TO END HOMELESSNESS

These plans are the key to the success of cities and communities across North America. Emerging from the United States, these plans are the clear, deliberate and comprehensive strategy a community needs according to the Canadian Alliance to End Homelessness (CAEH) state.[5]

10 year ending plans have become accepted practice in community planning. The US now has 243 ending plans in place. Alberta, well known for its success committed to this approach in 2008. A provincial ending-homelessness plan, in addition to municipal versions for each of its seven major centers, were created. Alberta's extensive use of these plans has provided the opportunity to experiment with and demonstrate the impact of strategies and practices to identify what makes these plans work.

The CAEH prescribes four elements as a blueprint to success – planning for outcomes with clear targets and measureable outcomes, effective prevention, moving people quickly out of homelessness into housing with the support they need and building the necessary infrastructure. Detailing this approach further ten essentials to a successful Plan to End Homelessness are offered:[6]

1. Planning
2. Data, research and best practice
3. Coordinated system of care
4. Income
5. Emergency prevention

6. Systems prevention
7. Housing-focused outreach
8. Rapid re-housing
9. Housing support services; and
10. Permanent housing.

Consultation with stakeholders included applying the CAEH essential framework in reviewing current status of Port Alberni's housing system. See Appendix B for more information.

HOUSING FIRST

The Housing First (HF) approach has become a key response in efforts to end homelessness and is central to 10 year plans. While it is recognised that HF is not a 'magic bullet' for ending homelessness, it is now accepted that it does move communities closer to that ultimate goal.[7] The Housing First concept is applied in a range of ways described comprehensively as the Housing First Framework and depicted opposite. [8]

Housing First as a philosophy.

The approach aims to prioritize getting people into permanent affordable housing to individuals and families and then the access to the support and treatment they need. It is based on the concept that stable housing is a primary need and therefore any other issues that may affect the household can and should be addressed once housing is obtained. The approach prioritizes people getting into permanent housing with the supports they need to maintain it.

A core set of principles guides all levels of the HF approach. The principles illustrate the comprehensiveness of the HF approach which includes access to housing, maximizing housing choice and delivering the evidence based supports people need to stay housed and improve their wellbeing.

Housing and support are equally important components of the approach.

HF reverses the historic approach of treatment first than housing with readiness requirements. HF is client-directed approach providing what people already *know* they need; healthy housing that provides the necessary stability to then allow psychological space, time and motivation to focus the recovery process, and pursue personal needs & goals to improve their well-being.

Figure 1: The Housing First Framework
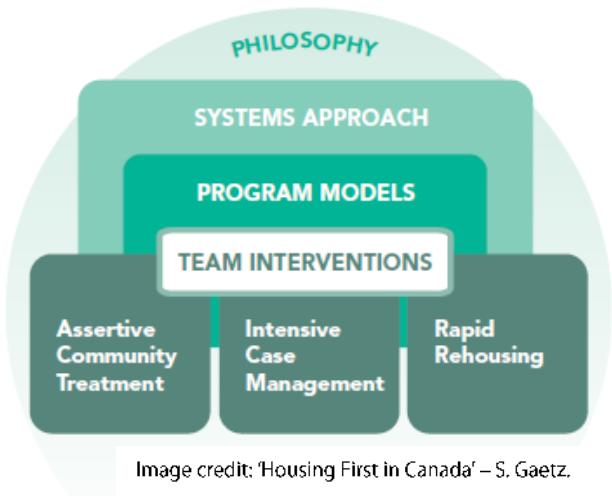
Image credit: 'Housing First in Canada' – S. Gaetz.

HOUSING FIRST PRINCIPLES

- Immediate access to housing with no housing readiness conditions.
- Consumer choice and self-determination
- Recovery orientation
- Individualized and person-driven supports
- Social and community integration

As a systems approach.

Applying the Housing First philosophy at a community level is best achieved within *a systems approach*. In a systems approach the housing and support services across a community act in a coordinated manner to deliver their housing and services as deeply as possible to the principles of housing first. A community 'system of care' is created with access to available housing and integrated service delivery that adheres to housing first requirements and provides the continuity of care best for the individuals and families using the system.

Strategic application of HF across the whole system is essential to making a sustained impact on homelessness. In this regard community plans help focus an entire community's efforts on implementing the necessary components and processes to equip the system to achieve the housing first principles.

Program models.

At the service-delivery level, specific program models and types of team interventions may be defined as Housing First Programs if they follow specific requirements. Housing First programs are becoming increasingly common as communities forge ahead turning available resources into housing first programs and services. As new cross-sectorial partnerships and service re-configurations shift to deliver assistance under the housing first principles, fidelity mechanisms are increasingly used to guide design and operations to ensure compliance to evidence based practices for cost-effectiveness and the best chance of success.

Team interventions.

Housing First teams have been developed and usually target very specific group of people. These teams often include clinical expertise in the form of Intensive Case Management (ICM) and Assertive Community Treatment (ACT) approaches. Rapid Rehousing are programs or processes that focus solely on diverting people from shelters and homelessness and moving people into permanent housing who do not need the clinical assistance.

SYSTEMS PLANNING

'Systems planning' is the current leading approach to integrating the HF framework across a community's housing and homeless-serving system. It is the purposeful development, design and management of the system to end homelessness.

Industry leader Alina Turner describes system planning as shifting from a reliance on organization-by-organization or program-by-program approach to delivery initiatives and coordinating services for a group of collective stakeholders all focussed on maximum impact.[9] System planning recognises how every part of the community that serves residents in housing, health, social care and alleviating homelessness co-ordinates around the HF philosophy and its principles. The approach is recommended as means to mitigate common resource limits of rural communities in implementing HF.[10] Learn more about the special dynamics of rural communities on page 50.

Key elements of systems planning have been identified as necessities in planning and implementation. [11] The elements are utilised at a community level, in systems coordination roles and at service-delivery level included within and between organizations. The 11 key elements of systems planning include:

1. Plan to End Homelessness	7. Performance Management
2. Backbone Organization	8. Homeless Management Information System
3. Community Engagement	9. Technical Assistance
4. System Structure	10. Embedded Research
5. Standards of Care	11. Systems Integration
6. Coordinated Intake & Assessment	

Attending to these elements during change management ensures the implementation of evidence-based modifications while providing for the flexibility communities need to adapt to their unique resources and needs to position themselves for success.

The approach is well supported by the Alberta experience and in particular by the Calgary Homeless Foundation with thirteen years of experience investing in, and examining the results of the approach.

The development of an accurate information management system is also considered a 'critical first step'. [12] Accurate data is fundamental to a responsive and coordinated system of care. Information management systems and sharing protocols for client information and outcomes are necessary to enumerating homelessness and its impact, implementing best practices, measuring success, understanding the financial return on investing in initiatives and crucial to raising awareness. [13]

Designing for performance management and evaluation is an important aspect of early planning. As communities initiate embracing the HF approach, fidelity to HF principles and programs have become an important aspect of evaluative strategies. The use of practice standards [14] throughout Alberta is now commonplace and funding requirements are built around compliance to them. Recent changes to the HPS program on incorporating HF results in the development of a Fidelity Scale for its program [15]. A performance management guide for community entities leading the transition to systems planning is now available.

PRIORITIZING PEOPLE

Housing First is not one size fits all; respecting the unique needs and desires of clients is inherent in its principles. When applying HF modifications are required to ensure the needs of sub-populations and individuals are met. Research shows that systems planning helps achieve this with processes that find balance between targeting & efficiency and proving consumer choice and individualized recovery support.

To be effective and use resources efficiently systems must choose on whom to focus first. Targeting occurs at varying levels of increasing specificity as depicted below. All these levels must be understood and designed into the local system, including the integration between levels. Targeting is a necessary requirement however must not be at the expense of excluding people who do not fall into these defined groups.

Priority Populations.

Special populations are well established in research including priority populations, including women fleeing violence, Aboriginal Peoples, families, seniors and youth, for instance. [16] These critical sub-populations must be the focus of broader policies, community level planning and service design. Mainstream organizations can focus prevention activities at these populations.

Special populations are now the focus of much of HF evaluations as Canadian communities seek to balance evidence based implementation, cost-effectiveness and success while allowing flexibility to account for unique needs. Recent reports exploring HF with these special populations are available here; Young People ; Youth Homelessness, Women, Aboriginal Housing First, and Families.
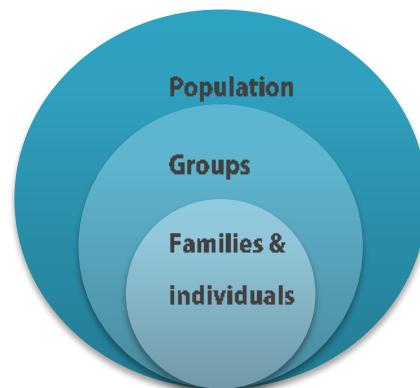
Service planners additionally focus on groups within populations designing specific programs to assist community members with individual characteristics or circumstances. Organizational staff focus on the specific needs of individuals and families.

Priority groups.

Groups of people are vulnerable and at risk of housing instability and homelessness because of genetic, familial or environmental factors that reduce their ability to secure housing, invite prejudicial responses from within the community or make it difficult to house them. Risk factors include experiencing conflict, violence and trauma, brain injuries, limited education including academic, social and life skills, limited or loss of key relationships & social supports for example.

Priority individuals.

Throughout HF successes, assessing acuity and prioritizing clients (with high needs and who are high service users) then matching the programs and supports to the client's needs and choices has been demonstrated as effective. [17]

Families and individuals who are likely priority groups and/or experience multiple challenges or high level of severity of their problems may be considered priority individuals and should be directly targeted for prevention and intervention.

Evidence for the effectiveness of these approaches comes from a variety of sources including key sources summarized below.

At Home/Chez Soi [18]

- A large clinical trial conducted in 5 cities over a four year period by the Mental Health Commission of Canada with chronically and episodically homeless people experiencing mental health and substance abuse concerns.
- Determined HF ends homelessness in client group and can be effectively implemented in cities of different size and different cultural contexts.
- HF a sound investment demonstrated every $10 invested in HF services resulting in an average savings of $9.60 for participants with high needs and $3.42 for participants with moderate needs.
- Convinced the federal government to realign the Homelessness Partnering Strategy (HPS) to require funded communities proactively implement the HF approach.[19]

'Housing First in Canada'

- The book Housing First in Canada details the HF framework and case studies of communities who have adapted the HF approach.[20]

Reductions in the rates of homelessness in communities applying HF

- Edmonton - 29.4 %
- Wood Buffalo/Fort McMurray - 43.7 %
- Lethbridge - 58.7 %
- Medicine Hat - 40.0 % reduction in unique shelter users;
- Calgary's homeless population decreased by 1.9 % compared to biennial increases of 30 % before 2008.[21]

Review study of 10 year plans [22]

- Reviewed communities in and the provinces of BC and Alberta which have used 10 year plans and HF approach
- Determined that homelessness is "stabilizing" but not declining.
- Concluded new affordable housing development was not offsetting losses in the private market rental.
- Limited progress attributed to inadequate federal-provincial investments under the Investment in Affordable Housing federal program and limitations in the jurisdiction and authority of municipalities to influence the structural drivers of housing instability and homelessness.

The economic benefits of utilising HF

- At Home/Chez Soi found for every $10 spent on housing and supports results in a savings of $21.72 in health care, social supports, housing and involvement in the Justice system.
- About $9,250 per person per year was saved when clients received housing and supports when compared to social service spending on those who did not.
- Cost analysis by Calgary Homeless Foundation on housing and supporting 759 adults during 2012. The annual cost of housing with support, and public system use was reduced from $46,000 to $22,000 or an annual cost savings of $34,000 per each of the individuals housed. For 72 individuals with the most complex needs this represents an annual cost savings of about $2.5million.[23]
- A US 2010 analysis of four cities determined the cost of permanent supportive housing is offset in most instances by reductions in emergency shelter costs and health care (physical and behavioral) costs.[24]

ACROSS CANADA

Leading national organizations joined together to made recommendations encouraging government support of implementation. The State of Homeless in Canada 2014, presented the recommendations depicted below.

The Federation of Canadian Municipalities (FMC) recommended an action plan 'Built to Last: Strengthening the foundations of housing in Canada.'[25] FCM strategies for improved housing affordability:

- Stimulate market and affordable rental construction
- Preserve and renew federal investments in social housing to rebalance the fiscal burden between federal government and provincial/territorial governments
- Develop a supporting framework for homeless strategies

IN COMMUNITIES

The website Canadian Housing First Tool Kit assists communities in implementing HF programs.

Recommendations specific to rural communities and HF include:[26]

- Develop a common understanding of HF as an approach and program type.
- Explore innovative HF adaptions for rural communities.
- System planning approaches should be developed. Regional service delivery mechanisms can help.
- Enhance research on rural homelessness in Canada
- Support the development of communities of practice via targeted networking and capacity building in the areas of HF implementation, performance management, system planning and research.

Municipal policy and planning tools
- Building From the Ground Up: Enhancing Affordable Housing in Canada
- Smart Growth BC Toolkit
- The Province of BC Tools for Local Governments.
- Strategies to address homelessness
- Yes in My Backyard Toolkit

Development & building innovations
- Redevelopment
- Legalising Existing Suites
- Small houses
- Innovative Buildings

Innovative capital & financing options
- Vancity's Springboard Home Ownership Program
- Vancouver Island Community Land Foundation
- The Vancouver Island Community Investment Co-operative
- Alternative Sources of Capital for Social Affordable Housing
- Social Impact Bonds

RECOMMENDATIONS

A new federal, provincial & territorial affordable housing framework agreement

Investments to target chronically & episodically homeless people

Direct investments in affordable housing programs

A housing benefit to assist those who face severe affordability problems in their current accommodation

A new affordable housing tax credit

Investments in Aboriginal housing both on & off reserve

To learn more, download the full report at: www.homelesshub.ca/SOHC2014

Canadian Observatory on Homelessness   the homeless hub   CAEH Canadian Alliance to End Homelessness

THE HOUSING SYSTEM SERVING OUR COMMUNITY
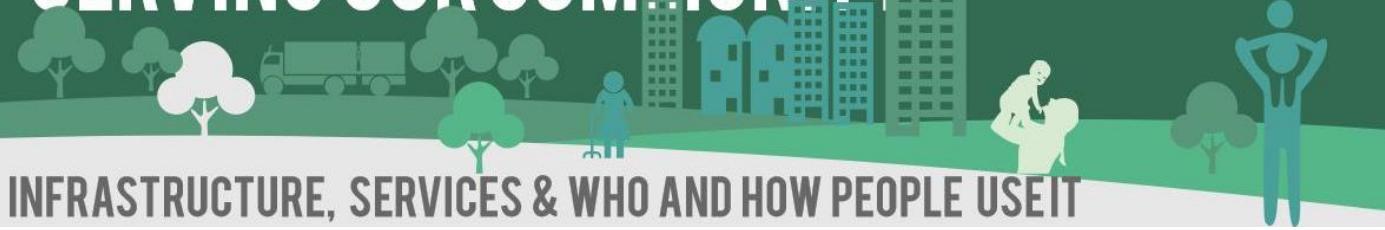
INFRASTRUCTURE, SERVICES & WHO AND HOW PEOPLE USE IT

The weak economic well-being of the Alberni Valley currently is well known to its residents. A snapshot below of demographics and income data focussed on the City of Port Alberni provides a slice of the difficult conditions that challenge the community's growth and prosperity.[27] Such difficult economic conditions do act to incubate housing insecurity and homelessness. However the community's slow population growth and its comparatively-low rental rates and house sales prices have also likely mitigated the negative impact of poor economic conditions; had growth been faster the demand for housing would be exerting significantly more pressure on the system.

17743 Population City of Port Alberni (2011)	78.8% People earning market income
25465 Population census agglomeration area	10% Unemployment rate (BC 7.8%)
1.1-1.3% Growth rate (BC 7.0%)	21.1% Government transfers (BC 11.7%)
13.3% Population identifies as aboriginal	6.8% Pension plans (BC 3.7%)
20.1% Population aged >65yrs.	5.3% Old Age Security + GIS (BC 3.3%)
80% increase in +75 age group in the next 20yrs	2.1% EI Benefits (BC 1.5%)
8428 Private dwellings	
7942 Usual residents	

How many residents live below the poverty line?

Determining the financial security of community residents provides an essential reference point for understanding housing insecurity.

Using Statistics Canada Low-Income Cut-Off (LICO) the poverty line is $19157 single person; $23755 for single parent; and $40723 for a two parent, three child household.[28]

18.5% is the overall after-tax poverty rate listed in the 2015 Alberni Valley Vital Signs.[29] According to 2011 National Housing Survey data 1980 households (17%) or a total of 8485 individuals in the Port Alberni census area have after-tax income below $20000 including 3155 men and 5340 (63%) women respectively.[30]

31 % of all children under the age of 18 living in low-income families and 37 % of all children aged five and under live in low-income households (2015).[31]

As an alternative measure, 'Living wage' is on the actual costs of living in a specific community which reflects what earnings a family needs.[32] The living wage is considerable higher than the poverty line, however still only provides a bare-bones budget without room for savings or paying off debt. It is the amount that a two-parent, two-child family, with both parents working full time, would need to earn in order to meet their basic needs.

For Port Alberni a Living wage is calculated at $17.22 per hour, or $33,579 annually using the Canadian Living Wage Framework.[33] The Huu-ay-aht made news in October 2014 by becoming the first 1st Nations community in Canada to adopt a living wage policy for all of its employees.[34]

PORT ALBERNI AFFORDABLE HOUSING CONTINUUM

Ideally residents have the opportunity to continually improve their income and have the housing options available to move through increasingly more prosperous housing scenarios. Building wealth and experiencing upward mobility for lower income earners has been become increasingly difficult in any BC community.

Known number of units in the affordable housing continuum presently along with relevant information is provided below.

Figure 2: Port Alberni's Affordable Housing Continuum

EMERGENCY SHELTER **12**

SUPPORTIVE TEMPORARY NON-PROFIT **85**

SUPPORTIVE PERMANENT NON-PROFIT **39**

SUBSIDIZED LOW-INCOME NON-PROFIT **220**

1037 Apartments & Townhouses

MARKET LOW INCOME PRIVATE **?**

MARKET MID-HIGH INCOME PRIVATE **?**

AFFORDABLE HOME OWNERSHIP **?**

HOME OWNERSHIP

There were 8225 owned residences in Port Alberni census area in 2011. Average accessed value of housing is $175 000 (2015).[35]

17.4% of homeowners spend more than 30% of their income on housing.[36]

The price for a benchmark home in Port Alberni in June 2015 was $190,600, down 6.36 % since June 2014.[37] The local real estate market is considered flat with little positive change in sale prices or sales activity over 2014-15. According to the Canadian Real Estate Magazine Port Alberni's median price is $218,000, below the province average and turnover is low with 3.37% of houses & 0.30% of apartment stock on market.[38]

The new home market saw limited housing starts in 2014 – 55 (46 single detached) compared to 40 (36 single detached) in 2013. All but one unit was listed as intended for freehold or condo sale as opposed to rental during these two years.[39]

RENTAL HOUSING

The Port Alberni community has one of the lowest rental markets across the province. Canada Mortgage and Housing Corporation (CMHC) offers there was 1037 rental units in April 2015 (up 21 from 2014), averaging $636 in rent (BC average $1022).[40] This includes purpose-built rental accommodation and owned units rented privately such as apartments, townhouses and secondary suites. This was a 1.3% increase compared to the prior year. 2013-2014 saw insignificant change according to CMHC however as seen in Figure 3 rent increases in the community are evident.

The apartment vacancy rates total 4.2% and townhouse and apartments together had a vacancy rate of 4.4%. Total vacancy rate was down 1.4 % from the previous year. In 2014 the City of Port Alberni introduced a Secondary Suites bylaw. There are presently 4 secondary suites registered with the City.[41]

Rental housing demand across the Alberni-Clayoquot region is projected to increase by 4% to 7% over the next 25 years according to the BC Non-Profit Housing Association (BCNPHA).

This is the equivalent of 133 to 237 households and requires between 5-9 new rental households every year to meet this demand. Seniors aged 70 and over and those aged 25 -44 are expected to make up the most of the anticipated population growth of 2% over this period.[42]

Figure 3: Reported spend on rent - clients at Homeless Outreach Program 2012-2014
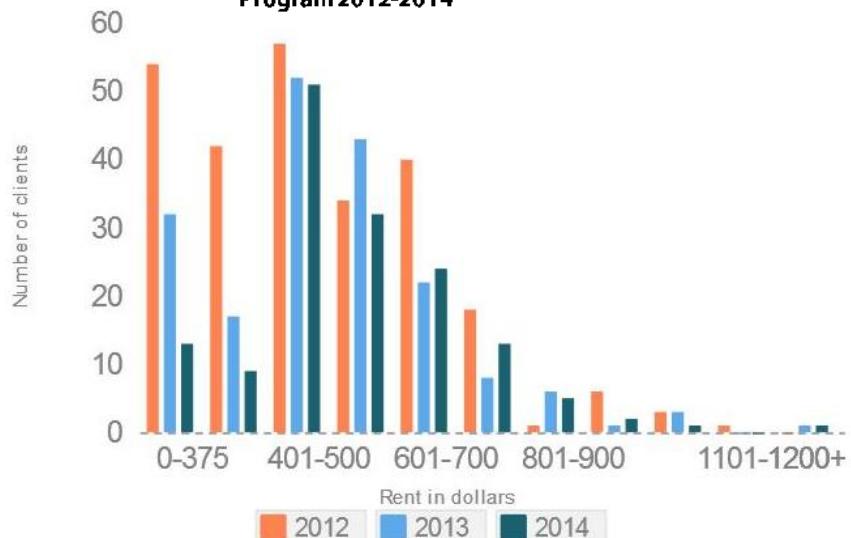
LOW-INCOME /AFFORDABLE RENTALS

A number of local landlords provide rentals at, or below market value. These units are an important part of the housing continuum for low and no-income earners in the community. While some of these units are included in the local data provided in Table 2, more specific information regarding occupancy and vacancies rates, the living conditions of these units and characteristics of renters would provide a more comprehensive understanding of the role these units play in housing the community.

AFFORDABILITY IS 'CRITICAL'

While some indicators above would appear positive in comparison to other BC communities, unfortunately an analysis of the affordability of rental housing by the BCNPHA declares that the Port Alberni community experiences 'critical affordability'.[43]

On average 49% or 1260 renting households spend more than 30% of their income on rent.[44] 21% or 545 households are overspending that is spending more than 50% on rent & utilities.

Examining the community's poorest half of the population reveals even greater unaffordability as detailed in Table 1 below. Individuals and families earning an income less than $25170 and looking for single units and or needing 2-3 bedrooms are very likely to be overspending on their housing costs.

Table 1: Rental affordability for lower half of income earners in City of Port Alberni.

Income Quarters		Studio	1 BRM	2 BRM	3 BRM	4 BRM	ALL
1st Income Quarter	Cost	$386	$481	$356	$659	$1098	$477
$0 -$15130	Affordability	47%	63%	48%	79%	134%	63%
Average: $9128	Overspending	0%	69%	56%	74%	100%	63%
2nd Income Quarter	Cost	-	$532	$620	$593	$967	$598
$15131 -$25170	Affordability	-	33%	37%	36%	58%	37%
Average: $19,643	Overspending	-	0%	15%	38%	86%	17%

COST
The amount households pay each month in rent plus utilities (such as heat, hot water and electricity)

AFFORDABILITY
spending more than 30% on rent plus utilities

OVERSPENDING spending more than 50% of before-tax income on rent plus utilities

AFFORDABILITY + LIVING CONDITIONS

Considering living conditions alongside affordability provides a clearer picture of housing conditions affecting the quality of life and well-being of a community's residents.

In 2011, 864 renter households were in 'core housing need'. [45] This does not include housing on reserves, farms or in public housing. Core housing need is when an individual's or family's housing does not meet one or more of the CMHC's adequacy, suitability or affordability standards AND 30% or more of its before-tax income is required to pay the median rent of alternative local market.

855 dwellings are rated (by the renter or owner) as needing major repairs. 32.9% of all households were built prior to 1961.

Fire has contributed to the loss of 3 multi-unit buildings over the last five years. The community has a large number of building stock built prior to 1967 before building inspections and the building code was initiated. Deteriorating buildings are at risk of fire particular due to old electrical systems that are pushed to the limit to handle newer or multiple appliances. [46]

When renters live in units that are not suitable for their household size and composition this is considered 'overcrowding'. Across all income groups overcrowding occurs in 11% or 270 units. Bedroom shortfall is the minimum number of additional bedrooms a community would need to house all renters suitably. Overall it is estimated that 355 additional bedrooms are needed in PA.[47]

How much income makes renting affordable?

The following graph details the additional income needed per year for the first and second quarter of income earners to bring housing costs into affordability. BCNPHA determine's these figures by comparing housing costs to the average incomes as listed above.

BC Housing offers similar information by determining *Housing Income Limits.* These numbers represent the income required to pay the average market rent for an appropriately sized unit in the private market.

For the City of Port Alberni these limits are defined as:- Studio 23000, 1 brm 23500, 2 brm 31000, 3 brm 35000, and 4+brm 39500.[48]

Figure 4: Income Gap in Rental Affordability in dollars.
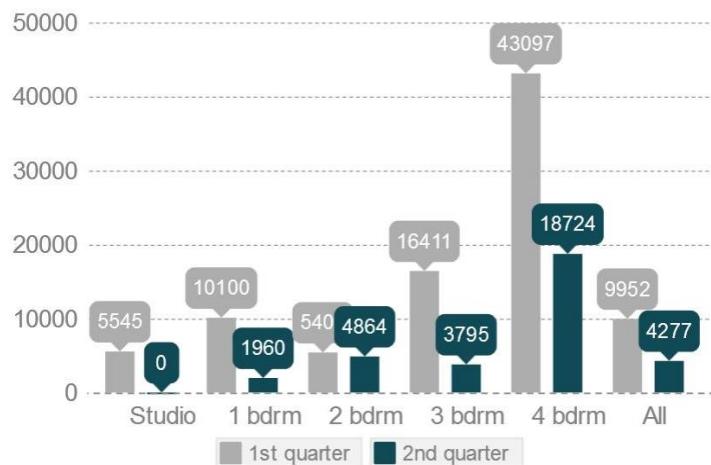
SOCIAL HOUSING

Social housing is accommodation that is subsidized by a level of government in the form of direct housing or in the form of rent supplements used to pay public or private landlords. The designation 'social housing' in the affordable housing continuum describes independent living situations that may be permanent or temporary with duration varying from one night to several years; may be mixed in projects with low- or mid-income market units and may be geared to assist special populations such as aboriginal people, clients with disabilities, or women leaving violence for example.

HOUSING UNITS

In Port Alberni, social housing is provided by BC Housing and non-profit organisations including M'akola Housing Society (M'akola), Port Alberni Shelter Society (PA Shelter), Alberni Community & Women's Services Society (ACAWS), Port Alberni Non-Profit Housing Association (PANPHA); and Abbeyfield Houses Alberni Valley Society (Abbeyfield). The numbers of units and designated special populations are detailed in Table 2.

Table 2 - Unit totals in Port Alberni's Affordable Housing Continuum

Emergency shelter	12	Supportive Temporary	85	Supportive Permanent	39	Subsidized low-income	220	Low Income Private	Unknown
PA Shelter Society	12	Rogers St - CMHA	42	*Special Populations Housing*		Makola 4160 - 4190 8th Avenue	16	Patricia Apts	63
		PA Shelter Society	26	King George - CMHA	20	Makola 3777 Argyle Way	16	Cygnet	63
		ACAWS Transition House	13	Kendall Apartments - CMHA	15	Makola/BCH George Dowling Place	16	China Creek	43
		KUU-US Crisis Services	4	PA Shelter Society (Men)	4	PANPA Heritage Garden Apartments	15	Beaufort	20
		Port House - CMHA	4			Makola/BCH Harbour View 4th Avenue	11	Phoenix House	19
						Makola/BCH Port Alberni Townhouses	10	King Edward Hotel	12
						Makola/BCH Red Oaks 8th Avenue	10	3687 15th Ave	8
						Makola 4950 Neill Street	8	PA Shelter Society	6
						Special Populations Housing		The Towers	
						Makola 3737 Bruce Street (First Nations)	18	Kingsway Hotel	
						PANPA Cool Waters (Permanent disabilities)	20		
						AVSCH Pioneer Towers (Seniors)	58		
						The Abbeyfield (Seniors)	22		

Social housing also includes units on reserves. According to the Aboriginal Housing Plan Strategy completed October 2010, approximately half of both the Hupacasath and Tseshaht bands live on reserve. Included in their social housing inventories are 13 and 51 units respectively. [49]

MOVEMENT IN UNITS

Housing units are accessed through varying application processes with varying eligibility criteria imposed. Social housing operators funded by BC Housing or private housing providers may participate in the Housing Registry but this is not mandatory.

Staff with KUU-US Crisis Society and the HOP program maintain running lists of affordable housing vacancies sourced through the colleagues, media, realtors and the web.

Waitlists are an important indicator of accessibility to housing. Long waitlists for low-income housing was noted in the Aboriginal Housing Plan Strategy (2010) as a root cause of homelessness.[50]

BC Housing maintains a waitlist for those projects included in the housing registry. Additional information provided by BC Housing on length of time on the housing registry and unit turnovers can be found in Appendix C. Housing providers also keep waitlists independently.

Table 3: Number of Housing Registry Applicant Households

Applicant Category	2013	2014	2015
Family	32	22	19
People with Disabilities	1	3	2
Seniors	3	4	6
Wheelchair Modified	2	1	0
Singles	0	2	1
Total Applicant Households	**38**	**32**	**28**

Source: BC Housing, Housing Registry Statistics, March 31, 2015

RENT SUPPLEMENTS

Rent supplements are a form of subsidized housing. BC Housing provides these supplements in the form of cash assistance to eligible seniors and low-income, working families in the private rental market through two programs: Rental Assistance Program and Shelter Aid for Elderly Renters. Rent supplements are also provided for homeless persons or those at risk of homelessness through the Homeless Outreach (HOP) and Homelessness Prevention (HPP) programs.

Table 4: Rental Assistance Units by year and client category

Client Category	No. of Units as of March 31 of		
	2013	2014	2015
Homeless Outreach Program (HOP)	30	30	30
Homelessness Prevention Program (HPP)	0	0	10
Rental Assistance Families	59	59	69
Rental Assistance Seniors	108	101	114
Total	**167**	**160**	**183**

Source: BC Housing, Unit Count Pivot Tables, March 31, 2015

SUPPORTED HOUSING

Supported housing is a form of social housing that includes varying support services for people with high needs related to physical or mental health, developmental disabilities or substance use. It may be designated as either permanent to accommodate community members who will always need support or temporary for crisis and short term needs.

PERMANENT SUPPORTED HOUSING

39 permanent units are listed in Port Alberni and all units are designated for special populations. Permanent housing is accessed through specialized health and occupational services. Clients stay for as long as they need the housing and it remains appropriate. There is often 24 hour supervision with a site manager and various levels of support services provided onsite.

- **King George Apartments** includes 20 subsidized units (17 one-bed; 3 two-bed apartments) which are managed by CMHA. The apartments are a mix of supportive & independent living situations for CMHA clients with mental health needs. The complex is shared with 22 non-managed units rented below fair market value.

- **Kendall Avenue Apartments** includes 15 unites also managed by CMHA for their clients. They are also are a mix of supportive & independent living situations depending on the needs of the client. These apartments run close to 100% occupancy.

- **Maitland House** has four beds for men only and is operated by PA Shelter Society. The facility operates at 100% capacity.

TEMPORARY HOUSING

85 units are designated as temporary. Temporary housing is provided for a variety of community members in a range of ways. This type of housing intends to provide stability to bridge the gap between the currently experienced difficulties and increasing well-being and permanent housing. Stays are often limited between 3 months to 3 years.

- **Port House** is a specialized temporary supported housing facility. It is a partnership between CMHA, Island Health and BC Housing for community members with mental health disorders with specific needs that cannot be easily met in other facilities. It is staffed 24hours a day with admissions managed by Mental Health Substance Abuse Services. There is one crisis room, two transition rooms and a flex room. Total yearly bed-nights were 1460 during 2014-15; 1026 nights were transitional and 150 were crisis. Approximately half of crisis admissions are repeat admissions. Stays for the transitional rooms have extended up to 4.5 years.[51]

- **KUU-US Transitional Housing** program includes 4 beds in shared fully furnished housing complex available for Aboriginal people. Support through developing care-plans and life skills is offered and stays are from one month to two years.

- **The Alberni Community & Women's Services Society (ACAWS)** operates 11 beds for women and children experiencing violence or contemplating leaving an abusive living situation. The transition house provides safe, secure accommodation at a confidential location with support and referral services. It is usually at full occupancy a few nights each year on average.[52]

Figure 5: ACAWS Transitional House Annual Bed Stays

Data points: 2009-10: 1174; 2010-11: 1873; 2011-12: 1186; 2012-13: 1753; 2013-14: 1356; 2014-15: 1947

Total annual bed stays

- **Port Alberni Shelter Society (PA Shelter)** operates a facility that includes 26 temporary supportive beds that are available to the public. Private and shared rooms are available with access to meals, shower & laundry, case-managed supports and access to health services, employment and training programs.

- **Rogers Street Apartments (RSA)** is a complex with 42 single-occupancy rooms for adults facing homelessness and mental health issues with less specialized level of support. Admissions are managed by CMHA with assistance from community representatives. On-site support worker is available and access to health and community services, advocacy, social inclusion, food security and skills & training activities. A 2-year tenancy term is suggested however stays are based on clients achieving planned goals. The complex consistently operates at over 98% occupancy and a waitlist is maintained.[53]

EMERGENCY SHELTER BEDS

Emergency shelter services provide temporary accommodation and essential services for homeless individuals. Participation in case managed supports is offered however is not a requirement. Stays usually do not exceed 30 days.

- **Port Alberni Shelter Society** operates 12 emergency shelter beds designed for crisis situations are available operated by the PA Shelter Society and funded by BC Housing

  The PA Shelter operates all year round, with an increase of 3 spaces between October and March for extreme weather. The same services and support are available as for the temporary housing facility. The shelter service operates close to or over occupancy consistently and regularly must turn people away (turn-aways) as detailed in the graph opposite.[54]

Figure 6: PA Shelter Society Annual client stays & turn-aways
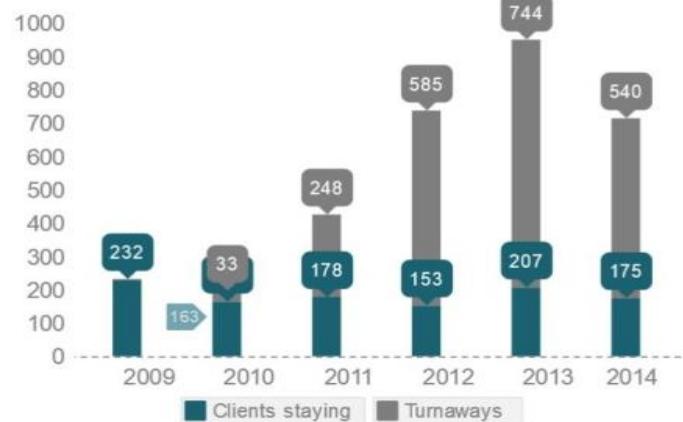
INDICATORS OF HOMELESS NEED & WHO USES THE SYSTEM

- **Homeless Outreach Program (HOP).** Data indicates the total number of unique clients using HOP is decreasing however analysing contacts per year would be helpful.. In 2012 43% of clients were identified as absolutely homeless and 34% at risk. In 2014 these proportions had change to 27% and 47% respectively. [55] The reversal of these proportions indicates a change in how homelessness may be experience in the community.

Figure 7: Total HOP clients per year by recorded status

- **Bread of Life Center meals served.** 1000 more meals per month were served by Bread of Life in 2013 compared to 5 years earlier.[56] Figure 8 (*on the following page*) demonstrates this is an increasing trend.

- **KUU-US crisis calls.** Of 10061 calls received over one year - 3565 centered around homelessness/at risk there of financial/food/clothing needs/eviction prevention.[57] Of the 10061 calls 7925 were of Aboriginal decent, 2032 were Caucasian and 104 were 'Other'. 4463 were male, 5382 were female and 16 were two-spirited. 1555 food hampers were provided over the year.

- **Vancouver Island Crisis Line.** Apr – Oct 2015 saw 229 calls, 12 crisis chats, and 10 texts from the Port Alberni, Ucluelet, Tofino, Bamfield, Ahousaht and surrounding areas. Of these calls, 7% were recorded under the category of financial/homelessness. Call volume is lower from this region as local provider KUU-US delivers crisis services as well and VI Crisis Line aims to support this. In efforts to collaborate, promotion of the island-wide service is therefore not prioritized for this region.[58]

WHO USES HOP & THE PORT ALBERNI SHELTER?

- Single people are the highest percentage across all age groups.
- 1 in 4 families were absolutely homeless 2012-14.
- 30-39yr olds are consistently the largest age group using the HOP services.
- Men & women use HOP almost equally however at the shelter the ratio is 4:1 male to female.
- 33% of clients at the Shelter are Aboriginal on average. This has varied from 31-37% over the last five years.
- 60% of shelter users are absolutely homeless which has remained relatively constant since 2009.
- Over 4% increase and 6 % increase in youth and seniors in the proportional representation of shelter users.
- Over the past 6 years, the proportion of newcomers vs. current residents (1-3 yrs) vs. long term (3+yrs) was steady averaging 66 %; 7% and 26%. 2014 saw an 8% increase of long-term residents.

Figure 8: Bread of Life Center meals served
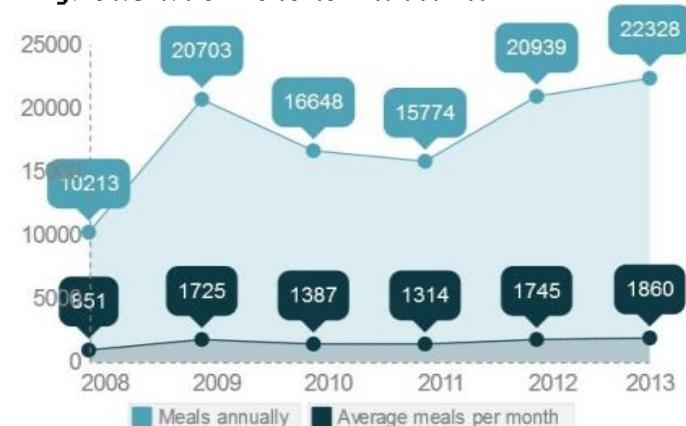
WHO STAYS AT KUU-US TRANSITIONAL HOUSING?

- Open to adult aboriginal single people. Ages range from 19-60 with an equal ration of women to men.
- Units are fully furnished and rent of $400 includes all utilities.
- Case management is provided and activities include talking circles, family social inclusion nights, employment opportunities & training placements.
- The complex operates at full occupancy approximately 75% of the time.

WHO STAYS AT ROGER STREET APARTMENTS?

As the large social housing complex in the community, RSA provides a representative sample of the characteristics of residents who are likely needing social housing and also provides insight into current trends. [59]

- The ratio of men to women is usually 3:1. Presently there are 16 women; 26 men - the highest proportion of women to date.
- 17 residents are aboriginal.
- Ages of tenants range from 19 – 78. Currently there are 0 teens, 7 tenants in their twenties, 7 in their thirties, 11 in their forties, 12 in their fifties, and 5 in their sixties. Staff indicates this is a fairly typical snapshot.
- 36 clients have been there less than 2 years, and 6 for 2+ years.
- 30 of 42 tenants are receiving Persons with Disabilities (PWD) Benefits. 11 tenants are on regular Income Assistance Benefits (IA). 5 of the 11 on IA are either enrolled in retraining courses or post -secondary education upgrading courses. 1 tenant is on OAP/CPP Disability.

MOVEMENT IN SYSTEM

Lengths of stay, waitlists, turn-aways, lost clients, turnovers of units and client outcomes provide helpful insight into how the system works and its effectiveness. This information is essential for creating a healthy and effective homeless-serving system.

Detailing individual client pathways to housing options provides valuable information however was not available at this time. Clarifying the contributing factors in individual situations and across populations in addition to examining trends encourages proactive adjustments to better serve all clients.

HOMELESS OUTREACH PROGRAM

Identifying unique individuals and examining length of contact with HOP provides a sense of both community members' needs and clarifies heavy users. The graph following uses the measure of time between the first point of contact and last known contact date to demonstrate the larger number of people who use the service for short durations vs. clients who use the service extensively either over a long period of time or as repeat users.

Recorded housing outcomes on exiting HOP services shows that 50% of clients move into market rental apartments.

More meaningful data such as duration and count of separate periods of time clients have used the service would help clarify how residents use the service and identify high users of the system however is difficult with the current database.

Figure 9: Total no. of HOP Clients by time known to service 2010-2015
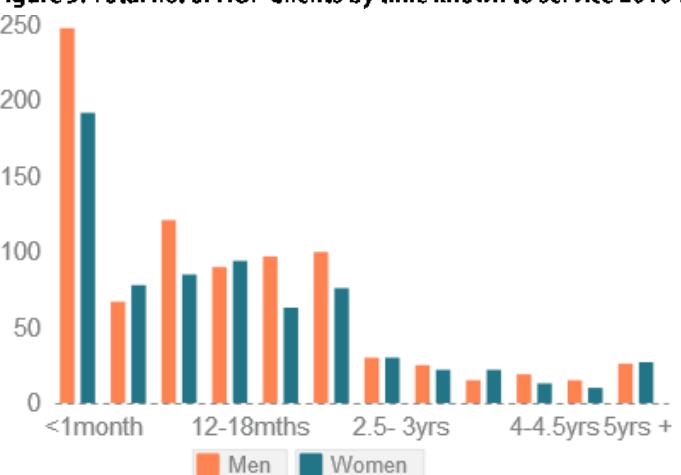
KUU-US TRANSITIONAL HOUSING

Tenant selection at KUU-US focuses on people wanting to address root causes of housing instability and expressing desire to move forward with their healing journey. Stays range from a few months to a maximum of 2 years with client readiness key to their moving on to more sustainable housing. Waitlists occur however usual alternative housing is found for applicants via the Housing Coordinator.

THE PORT ALBERNI SHELTER

The number of turn-aways from the shelter is an important indicator: it represents a barrier to people entering the system to receive the assistance they need. Learning more about the people who are turned away would provide valuable information to further understand the capacity needs of the community.

Over 2012-2014 30% of shelter visitors use the facility multiple times. Comparing men (462) and women (151) shows women are slightly more likely to stay only once. A number of men have used the shelter up to nine times over these three years. The most any woman has visited in any year has been 5 times.[60] Whilst small in number, these repeat clients are heavy users of the system and should be prioritized for housing and services.

Length of stay and total shelter nights for individual clients are important indicators for the functioning of a system however were not able to be analyzed at this time

Figure 10: No. of times individual visitors have used the PA Shelter by gender

MEN — 70% 1x users

WOMEN — 78% 1x users

1X (70%) 2X (13%) 3X (7%) 4X (5%) 5-9X (5%) 1X (78%) 2X (10%) 3X (6%) 4X (4%) 5X (2%)
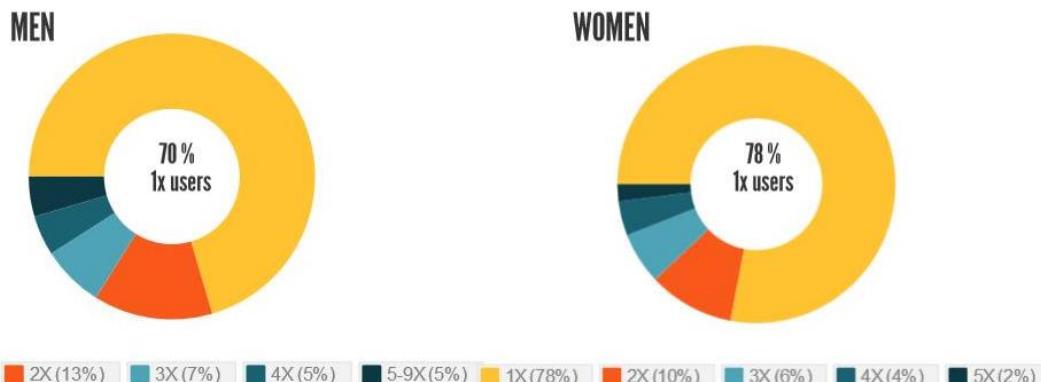
ROGERS ST APARTMENTS

Rogers St Apartments (RSA) experiences on average 1-2 turnovers in units each month however trends indicated that turnovers are becoming less frequent. Recently RSA experienced the longest period since opening, 4 consecutive months without a turnover.   Of 220 clients since opening 8 clients have been returning clients. 50 evictions have been initiated and 76 security deposits have been withheld due to damage. [61]

COMMUNITY FEEDBACK, PRIORITIES & SOLUTIONS

CONTRIBUTORS ADVICE, ANALYSIS & DISCUSSIONS

OUR VISION REMAINS THE SAME

Project participants all agree the vision of the community remains the same since recorded in the 2008 plan:

Everybody is at home in the Alberni Valley.

'Home' was further defined during consultation as more than the physical structure, unit or house. Participants offered words such as safety, family, sanctuary, love, let-the-breath-out, thriving-base etc., to help define what they hoped community members would all experience. These words are all included in the illustration on pages 7 & 66.

HOW ARE WE DOING SO FAR?

Participating community stakeholders and residents contributed their assessment of how the community has progressed since the last plan in 2008 and provide suggestions for improvements. They were asked what strategies, program and activities should the community keep, start and stop.

Bread of Life Center staff also created an anonymous feedback board for service users to contribute their thoughts (pictured on page 36). Their comments were included into the raw responses and in the subsequent voting process.

Raw responses provided by the community that received the highest number of votes (as listed in brackets) are listed below. A complete list of all raw responses for this and other consultation activities can be found in Appendix D.

KEEP	START	STOP
Outreach workers, caring nurses and homeless organizations (12)	Making more affordable housing (10)	Stop landlords not held responsible; check on landlords/ inspecting units so are safe & drug free. (13) Stop drug/booze/prostitution running landlords (2) Stop vacant/absent landlords. Stop exploitation - keeping people's damage deposits.
Finding a way to build the new shelter (12)	Raising awareness; education about housing issues (10) Community forums, story -telling, listen – building trust, honesty (4)	
Rogers St and King George are good role models (7)	Look at new models for affordable housing (8) Building on Habitat for humanity model (6)	Stop poverty (6)
Offering safe place to eat a meal, sleep, socialize, see a doctor/ nurse (5)	Low rent seniors housing (like Echo but with supports) Do better assisted living for seniors w addictions (6)	Stop making it so hard to get welfare (5)
Advocacy (5) Keep advocating; lobbying all government; lobby to reduce barriers. (4)	Youth housing (4)	Stop talking, start doing (4)
	Making government accountable – increase welfare (4)	Stop rental increases & improve notice (4)
		Stop relying on only traditional solutions (2)

COMMUNITY PRIORITIES

The following are raw responses of stakeholders during a partnership planning meeting focussed on identifying current community priorities against each of the CAEH ten essentials.

Plan
- Info provided by needs follow-up
- Multi-year coordinated approach
- Indictors work
- Be ready to jump on $$, on opportunities
- We do well on planning
- Implementation & follow-up not so good or measureable
- Need (go) button pushers – funders & decision makers

Data, research & best practices
- Who collects what data, how etc.
- Take data & share as helpful – whole region of data; good to help with public perception; ongoing conversation; strategic use of data
- Community best practices e.g. youth, e.g. client centered

Services
- Database/registry
- Youth safety
- 24 hour youth outreach

Coordination of system of care
- Need more team-based approach
- Inclusive systems
  - Clients + all agencies involved
  - reduce duplication
  - priority for client
  - MOU / formal

Emergency Prevention
- Community level – ensuring build, maintain
- Accessing dispute resolution thru tenant support (also system challenge)
- Training staff in advocacy
- Landlords mediation (some)
- Get away from knee-jerk management (team approach; shelter; prevention; friendship center)

Rapid rehousing
(Nothing noted)

Outreach
- Good services
- Monthly meeting be good - helps coordinate system of care
- A&D/Youth & Adult needs coordination
- School District has Outreach for youth – daytime hours is not helpful
- Would a plan help?
  - overlapping mandates
  - prioritising time
  - Text crisis line – no feedback received from organization to services

Income
- Propose pilot resources
  - Measure results
  - Geographically confined
  - On assistance
- Consider diverting rent straight to housing
- Provide gift certificates
- Get away from giving out cash – earning it = self-esteem + fills time.
- Social enterprises, casual, part-time
- Access to wage/training subsides that are 'marketable' in applying for jobs.

Systems Prevention
- Note downloading of responsibility
- Coordination with services
- Ask what works for the clients e.g. Access hours; weekends, evenings
- RCMP connects with people working out-of-hours – referrals from ACAWS
- Young people leaving care
- Medical/GPs – don't have
- MSDSI

Adequate permanent housing – build, acquire, maintain
- More publically managed low-income housing – keeps standards high
- More financial supports
- Public don't understand
- More permanent supported housing
- "you will save money Joe Public"
- Improved City of PA support in projects

INFORMATION GAPS

Participants identified information gaps as a challenge early in the discussions. During the project gathering detailed local information to conduct meaningful analysis was a challenge.

The 2008 indicators are useful and had provided content for analysis. Not all indicators proved viable however. Counting advertised rental listings and average monthly rent for example, proved difficult due to the time commitment involved and because the source of the data dissolved. This indicator was abandoned after two years.

Information exists. Various databases are in use in the community, each with varied quality of collection, analysis and reporting. Most are not currently effectively used or shared and the capacity for non-profit professionals to conduct local research is limited primarily due to stretched capacity. The BC Housing data base for example is complex and thorough however local analysis necessary for data-driven community planning is not made easily available from BCH and local access is not very user friendly to conduct research.

The lack of accurate or adequate depth of data: affected the clarity in a variety of topics and often resulting in more questions than answers viewed with an evidence-based perspective. It made corroborating statements and understanding the impact of specific issues within the broader context difficult.

Information to pursue includes:

- Priority people and heavy users of the system in each organisation/service/function of the system.
- Data on young people, people in reserves,
- Contacts per year at HOP
- Length of stays in transitional housing and emergency shelter
- Details of turn-aways from emergency shelter.
- Data from institutions and other health and social services including emergency services. helpful to inform prevention activities and service needs
- Costs of housing and housing services
- Point-in-time homeless count including hidden
- Movement through the system at all including timelessness of transitions between services and changes of status, between housing services and also measuring load on the system such as count of separate periods of service use.
- Individual client pathways through the system and qualitative experiences.
- Program evaluation, outcome and fidelity to HF data.

WHO SHOULD WE FOCUS OUR ATTENTION ON?

Priority populations

Discussions and data confirmed that at-risk populations found in research were also present locally. A comprehensive list created by participants of all people who have presented to services and organisations with housing challenges was completed with stakeholders as listed in Figure 11 on the following page.

Project participants offered this list of current priority populations and groups.

- Young people
- Women
- Young girls including seasonal
- Aboriginal adults, youth, foster care youth
- Seniors fixed income
- PWD applicants
- People with addictions & mental health challenges
- Parents/ women with children in foster care
- Street workers

With increasing poverty across communities, growing diversity in these groups should be anticipated. And all people living with no or low income including people on fixed income should be considered at risk of homelessness.

Priority groups

Three fundamental characteristics that crossed all vulnerable community members were identified when the comprehensive list was analysed. Individuals and families may fall in one or all of the categories as listed opposite and may experience varying severity of conditions.

Priority individuals

Practitioners offered currently some organizations have formal processes identifying priority individuals and some ad hoc communication occurs between organisations about prioritized people. However there is not systems-level consensus yet. It was agreed with appropriate consents in place, collaboratively creating a list of priority individuals across the community would be relatively easy.

Figure 11: List of community members at risk or experiencing housing insecurity.

CAPACITY/ COMPETENCY DISTURBED
Low literacy/life skills, mental health, youth including VAST, A&D addictions, people on disability, people with brain injuries, anyone measuring low on IENO functional level tests.

INCOME SEVERELY DEPRESSED
MSD Benefits, A&D addiction, earning no income, limited education/literacy, seniors on fixed income/medical needs/loss of partner, First Nations adults, Youth.

SIGNIFICANT STRESS OR LIFE CHANGE
People fleeing abusive relationship, A&D addictions, mental health, MSD payments, people on no income, seniors losing partner/medical needs, First Nations including residential school student, Youth - conflict, changing schools, mental health, sexuality, & transition out of care.

THEMES THROUGHOUT FEEDBACK

The following themes became evident in community feedback and research. The themes were subsequently reported to AVCSI partners for confirmation.

HOUSING INFRASTRUCTURE
- Inadequate, unhealthy housing situations for no-low income earners including vulnerable youth.
- Stabilizing living standards and maintaining private rental housing needs improvements in respecting rights and relationship between landlord and tenant including improving accountability for both parties.
- Losing housing stock and housing becoming 'slums'.
- Community trends suggest a lot more rental housing needed.
- Need to clarify supported housing needs of community.
- Prefer publically managed housing as keeps standards high.
- Creativity needed to fund new builds due to decreasing government funding.
- Build new shelter.

POVERTY REDUCTION
- Increasing poverty across community adding demand to affordable housing & services.
- Access to income, increasing earned income opportunities, improving fixed income benefits, embracing living wage, food, basic life needs education and provision, social inclusion were consistent topics.
- Community advocacy is strong and vital.
- Systems prevention with mainstream services and institutions needs attention.
- Economic development opportunities for all community members are needed.

HOUSING SPECIALISTS & SUPPORT SERVICES

- Core services for vulnerable and homeless people are working.
- Improved coordination would strengthen them.
- Advocacy works and need more especially advocacy for critical out-of-the-box people.
- Access to mental health and substance misuse interventions remain high priority.
- Housing specific outreach is strong however non-housing services are present but outreach hours and locations need to be client-driven not standard business hours.
- Need more support services to affordable housing while continued gaps.

PARTNERSHIPS & COLLABORATION

- Strong partnerships exist.
- Strengthen with service user involvement and with First Nations participation.
- Value all community human resources.
- Collaborate locally to remove systemic barriers and fill gaps.
- Business and development community and mainstream health, education, justice all need to be more involved.
- Coordination in service provision needs improvement to transcend conflict, remove duplication and deliver more inclusive team-based approaches that are formalised.

MIND SET, ATTITUDES & PERCEPTIONS

- Raising awareness and education about housing and homelessness is a priority.
- Advocacy and lobbying at all levels of government is essential.
- Local communication and awareness building needs improvement.
- Focus on reducing stereotypes and prejudicial attitudes and behaviours, encouraging compassion and building awareness of non-profit community impact.
- Information should be accurate and widely distributed.

LEADERSHIPS & SYSTEMS COORDINATION

- Collaborative leadership happening at all places and levels.
- Leadership in private rental market needed.
- We're good at planning need more action.
- Political will lacking but growing willingness needs to be supported with evidence.
- Leadership to help bring community together and reduce competitiveness especially with funding.
- Need more funding for everything.
- Growing understanding at systems connections and achieving shared outcomes.

Housing insecurity and risk of homelessness is prevalent.

- Port Alberni's housing insecurity is widespread and all community members living near or below the poverty line (approaching 20%) are at risk of homelessness. This includes 49% of renters and 17% of homeowners living unaffordable, people working full-time on minimum wage as well as those on fixed incomes.

- There has been a shift from visible or absolute homelessness to hidden homeless or precariously housed people confirming practitioner's suspicions.

- Need is increasing as indicated by trends such as increases in using free meals, stays at the ACAWS transitional house, turn-aways from the Shelter, reduced turnovers at Rogers St Apartments etc.

- Homeless people present as more with increase of youth and seniors at the PA Shelter and more families using the HOP services with 1 in 4 families being absolutely homeless.

- It is difficult to accurately enumerate people in need and homeless without a point-in-time count or community-wide information management system. Combining data from various services and counting a count of unique individuals would be helpful. The results would likely be an underestimate of the numbers of hidden homeless community members- research shows hidden homelessness is more prevalent in rural communities, in women and in aboriginal populations. Learn more about the special dynamics of rural communities on page 50.

Resolving housing insecurity is high priority due to damaging effects on occupants and property.

- Existing households in core housing need are likely nearing 1000 households at this point given the date of the last statistics, further deterioration of buildings and the exclusion of dwellings on reserves, farms or in public housing from the numbers. Physical building improvements and finding creative community-based solutions should be prioritized.

- Very poor conditions and unhealthy, abusive situations must be addressed by the community immediately. Practitioners expressed a clear and persistent concern for the health and wellbeing of tenants including vulnerable people especially youth.

- Improving conditions of current units is essential. Given the link between poor housing and poor health this situation is likely adding considerable burden to the health services and adding to residents' limitations to produce an income.

Who should we focus our attention on?

- Priority populations and groups identified in the community aligned with industry research.

- Single people and aboriginal people are overrepresented and there is a growing number of young people and seniors seen at the PA Shelter. More information is needed on families given high rates of poverty in the community and numbers presenting at HOP.

- Women, who are over represented in low income statistics appear to make contact with housing outreach services at an equal rate to men however use the emergency shelter considerably less than men and only

recently reached 38% of occupants at Rogers St. This reinforces the need to investigate likely barriers and ensure gender differences are considered in prevention, planning and service delivery.

- The over-representation of aboriginal clients in services (average 33% at PA Shelter vs. 13% in the population) highlights the need for cross-cultural partnerships, cultural sensitivity and a proactive implementation of recommendations specific to aboriginal people wherever possible.

- Young people have reduced access to age-appropriate housing and services and a great deal of concern is expressed for their vulnerability leaving care, transition to adult services and living in private rentals. Any young people known to services should be placed on the priority people list.

- Given the aging population, increases at the shelter and need for more housing suggested, seniors should also be targeted for prevention.

- Informal consensus is close on critical people in service sector however this must be formalised and included in policy for effectiveness.

Affordable housing units are needed desperately across the continuum.

- Healthier low-income housing infrastructure is needed. Movement across the entire affordable housing system is stagnant. First-home ownership is increasingly out of reach for many and rental housing gaps contribute to growing unaffordability and overcrowding. Lack of supply of affordable rentals consequently blocks movement out of subsidised social housing and supported housing keeping occupancy rates running close to, or at 100%.

- Critical unaffordability suggests raising income is equally important in making current housing affordable while new developments are initiated.

- The heavy reliance on the private rental market is clear. The bedroom shortfall 355 is likely an underestimate. Given this gap, together with the additional 5-9 new households needed each year, a significant effort will be required to catch the community up. Studios, 1 and 2 bedroom units is likely the largest need followed by a smaller number of larger units for families.

- With future needs projections, an aging population and rents increasing without corresponding increases in income, the income gaps in affordability will widen and the need for more affordable units will accelerate if there is no change.

- A multipronged approach is needed to protect and improve conditions in established whilst simultaneously increase units in numbers by conversion or attracting new builds. All options, such as secondary suites, unused units or rooms, converting buildings not currently in use etc., should be explored. Incentives for developers and owners will be required. The municipalities should take advantage of all available regulatory and policy tools to assist. Subsidies will likely be part of the stop-gap solution. Projects to help move renters into homeownership would help ease pressure in the rental market.

Supported housing is a recognised gap.

- Gaps in supported housing are present as anticipated from research on rural communities.

- The scope of needs for this type of housing could be further clarified by determining clients in temporary supported housing who could benefit from permanent housing, as well as regular users of the shelter and turn-aways, those on wait-lists, in unaffordable units and in core housing need should be included in any needs assessment. Island Health and the government ministries can assist.

- Developments flexible enough to assist multiple priority groups are likely the best model. Contemporary scattered housing projects with attached supportive services flexible enough to meet diverse needs are good options.

- Strengthening support services delivered to existing units in the community is an immediate solution while new builds are planned.

The system of care has been holding the line but needs improvement.

- The current system of care functions as well as can be expected given its current capacity demands created by the high degree of poverty and shrinking government support.

- Bottlenecks and barriers are indicated by presence of turn-aways, waitlists, lost clients etc. Duplication, disjointedness, and some competitiveness for funding remains with a desire for reconciliation between historical adversaries expressed. Pockets of integration at various levels occur with co-working, co-location of services, clinical consultation and sharing of information are present and could be enhanced.

- Processes such as centralized intake, acuity measures and prioritisation and shared information systems that help create a seamless and effective system are not present.

- Income generation and poverty reduction must be recognised as key prevention components of the system and stakeholders with these aims be empowered to play their roles in ending homelessness.

- Mainstream institutions, education, justice, child and youth services working with priority groups can help ease the demand on the system of care however they need to be encouraged, informed by current best practices and supported to do so. There appeared little evidence of essential systems prevention or discharge policies with mainstream services and government institutions however further investigation would confirm this.

Essential support and housing specialists services are mostly present however are over-burdened.

- Port Alberni is fortunate to have a good social infrastructure on which to build. The solid community-serving network with a mostly sufficient range of services available is a key strength of local community and must be well supported.

- Gaps in outreach, services and housing specifically for young people and the coordination between youth and adult services was highlighted as was the continuing need for better access to mental health and addictions services.

- Capacity could be increased if current duplications identified by systems mapping were eradicated, the system was made more efficient using evidence-based processes and practices and the work-load was shared more with other sectors.

Systems coordination across the community is crucial for success.

- Full community-wide coordination and systems management is needed. This will not occur 'off the side of desks'.

- The community is fortunate to have a backbone entity in AVCSI with growing participation from stakeholders and community partners. Bolstering its capacity by broadening involvement from key institutions and the profit sector in addition to obtaining staff capacity would greatly accelerate its much needed systems coordination and research role. Research shows initial investments in systems coordination pay off dramatically.

- Implementation of innovations is held back by lack of knowledge and the lack of capacity; infrastructure, people and resources, in addition to the system-wide coordination and performance management.

Information plays a vital role in solving challenges and must be prioritised.

- The quality and accessibility of accurate and helpful local data is varied. The vital importance of sharing accurate, thorough and relevant information in raising awareness, lobbying, motivating public and private champions, improving efficiency in service delivery, managing performance etc., must be emphasised.

- Unfortunately information gaps such as those listed in the report and failures to communicate plague the system diminishing the sector's ability to make evidence-based decisions, demonstrate effectiveness of

interventions or accurately communicate the needs of residents or the sector to the wider community and funders.

- Service information provided was incredibly helpful and more detailed analysis could be beneficial to create finer more targeted conclusions.

- Indicators enabled solid conclusions and should be expanded to include missing systems indicators alongside performance management measures such the items listed on page 31.

- A community-wide information management system or database would significantly help. With the number of databases in the community achieving this is a real possibility. An initiative to thoroughly understand local and provincial systems and exploring how they could yield more reliable and useful results would greatly assist the community in achieving its goals.

- Service providers should be supported to contribute technical data and participate in meaningful action-research including opportunities to pilot initiatives as Housing First is embraced in BC and across Canada.

More evidence-based awareness-raising and education is needed.

- Doubt was expressed if enough stakeholders and community members know the extent of the problem and connections between poverty, housing insecurity, homelessness and health. Comments were that this reduced visibility of homelessness may result in the broader community believing homelessness no longer exists.

- Communicating the facts with positive messaging was seen as vital to reduce biases and dispel negative perceptions. Accurate information on the costs of poverty & homelessness, and the cost-effectiveness of implementing best practices are crucial to increasing the profit sectors participation in solutions.

Financial sustainability is a key goal.

- Limited financial resources are a consistent challenge of smaller communities and Port Alberni is no different. The non-profit sector is pushed beyond its capacity helping the community bear the brunt of wider external market forces, systemic failures, irresponsible leadership and public ignorance- all seemingly with little help from local government or the private sector.

- Increasing financial self-reliance and strengthening local capacity is a more sustainable approach to buffer the community from further external forces, economic depression and policy changes known to impact rural community more deeply than urban centers.

- The private sector has much expertise to offer in finding creative financial solutions and should be engaged to assist. Successful communities see accelerated progress when businesses, the housing development community, the financial sector and social entrepreneurs proactively participate in creatively solving these challenges.

- The community's strong relationships with government funders should be maintained.

Leadership will accelerate progress.

- Local government, business and development community has not yet made a significant investment in solutions, a key to success in other communities. Good leadership, rural homelessness research shows, makes a difference including reducing the 'jurisdictional juggling' often present within government, geographical areas and services targeting particular populations.

- City and regional municipalities are positioned to take a proactive leadership role in lobbying, gathering support with the profit sector, increasing financial and staff capacity for systems management, community-wide initiatives such as information management systems, and leading larger new builds.

- Mainstream institutions and services can show leadership by embracing their responsibilities in primary and systems prevention, concentrating their efforts on raising awareness, education, early-identification of at risk individuals & families and effective discharge practices. Education on the social and financial

costs of the challenge, the cost-effectiveness of Housing First approaches and direction on transforming to a systems approach would help.

Partnerships will heal, empower and bring more focus for the community.

- It is advantageous to join housing & homelessness initiatives with poverty reduction initiatives. A persistent focus on poverty reduction strategies including education, skills training and employment programs for low or no-income earners and creative economic development and job creation in the community plays a significant role in improving housing insecurity.

- People with lived experience must be provided with and support to participate in consistent opportunities to help lead the community forward.

- Cross-sector and inter-cultural collaborations are inspiring developments in healing and whole-systems approaches that could be expanding to poverty and housing.

- Leadership must bring local predicaments such as difficult private landlords, organizational conflict and unhelpful negative attitudes into the light with open, honest dialogue. Community members most deeply affected by these impasses should be encouraged to express themselves with a focus on healing and improvements.

CONCLUSION

The deep concern for homelessness and housing insecurity in Port Alberni is well warranted.

The head-start stakeholders made on committing to end homelessness, embracing Housing First and focusing on results has paid off. Over the course of the last seven years, their work has made a positive impact helping reduce the incidence of absolute homelessness in the area.

However this achievement has required the non-profit sector to push beyond its capacity helping the poorest residents bear the brunt of wider market forces, systemic failures, irresponsible federal leadership and public ignorance.

However as the non-profit sector have been doing well to hold the line, the wider community must not be deceived by the reduced visibility of homelessness on the streets - the urgency to solve these challenges persists. Until the community has the necessary income, availability of affordable housing and support system, insecurity will continue to threaten its members.

Port Alberni is in a challenging predicament. A community on the decline, its limited income opportunities and slow development adds to the lack of affordable housing and spreading poverty. The rental market faces critical affordability with increasing deterioration of housing conditions. If these conditions continue with no improvement, the pressure of Port Alberni's housing system will only increase. With an impeding burst of Canada's real estate market bubble [62] and the role of aging demographics is predicted to play in the impact[63], Port Alberni will likely see the numbers of community members in core housing need increase as the community weathers another economic storm.

If business continues as usual, the line the serving sector has been holding for the community will most certainly collapse.

This strategic plan offers a new way for community to come together to not only prevent further deterioration of the community housing systems and immediately improve the system supporting the most vulnerable citizens as well as build its capacity to strengthening the Valley's economic and housing foundations. Real progress will be made investments in solutions match the seriousness of the problem and the efforts of the serving sector are joined with community leaders, mainstream institutions, and the private sector all working together to improving the quality of life of all its residents.

STILL AT HOME IN THE ALBERNI VALLEY
PORT ALBERNI'S STRATEGIC PLAN TO HOUSE OUR COMMUNITY & END HOMELESSNESS
2016 - 2026

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1   PROTECT & INCREASE HOUSING STOCK TO MAINTAIN AN AFFORDABLE HOUSING CONTINUUM RESPONSIVE TO THE CHANGING NEEDS OF COMMUNITY

OBJECTIVE 1: Strengthen community leadership capacity focused on protecting housing and housing acquisition.

- Extend leadership team and partnerships to include development & construction, real estate, business and philanthropic community.
- Nurture involvement of local business-community champions in communication activities & public relations.

OBJECTIVE 2: Protect existing housing stock and improve living standards of available units.

- Design incentive & support program with, and for private landlords. *Explore housing first landlords program such as Grand Prairie HF Landlords; Victoria Streets to Homes; Comox Valley D2D.*
- Explore community construction/trades repairs programs to assist with unit improvements such as renovations; energy efficiency conversions; eviction repairs etc.
- Strengthen relationships between landlords, support services and RCMP to increase security for private rentals. *Include this as part of HF landlords program.*
- Actively promote secondary suites policy.

OBJECTIVE 3: Design a creative evidence-based housing acquisition plan visioning 10-20 years ahead and implement.

- Clarify current and projected needs of community using available evidence.
- Create agreed list of priorities to be review annually. *Likely includes affordable purpose built rentals (mixed incomes), SRO's and supported housing units flexible enough to meet needs of Aboriginal community, families, youth, seniors.*
- Include current plans to build new shelter/transitional housing center. *Consider rebrand to capture true nature of housing tenure.*
- Utilise all available financial and regulatory tools to incentivize developers and homeowners to contribute to affordable housing.
- Prioritize models of housing flexible enough to meet needs of various groups demonstrated to work in other communities.

OBJECTIVE 4: Develop a financial plan to implement and actively pursue objectives.

- Explore creative models and partnerships in accessing non-traditional financial models *e.g. housing fund/ land trusts/ housing authority/ hybrid legal structures / taxing builds / Social Impact Bonds e.g. Vancouver Island Community Investment Co-operative; Vancouver Community Land Trust Foundation; Real Estate Investment Trust; Whistler housing authority.*
- Position the community to take advantage of development opportunities with or without government funding.
- Ensure link of housing acquisition funding plans and funding plans for coordination and administration of this plan and its activities.

2   JOIN WITH ALL SECTORS IN COMMUNITY FINANCIAL WELL-BEING (POVERTY REDUCTION) PLAN/INITIATIVES

OBJECTIVE 1: Continue to raise awareness with organizations, institutions and the public of the connection between poverty & housing insecurity and its impact on the community.

- Consistently highlight linkages in all public and sector communications.
- Advocate for inclusion of housing and homelessness considerations in planning & evaluation of local poverty reduction initiatives.

OBJECTIVE 2: Establish baseline of the number of community members experiencing poverty as community housing insecurity indicator and distribute information annually.

- Include poverty indicator in information gathering and reporting.
- Partner with poverty reduction organizations and advocates to complete and share outcomes.

OBJECTIVE 3: Broaden efforts across community to improve equitable access to income and initiatives that reduce cost of living aimed at priority populations.

- Ensure priority populations list is widely distributed and support services & organizations proactively target these groups.
- Address local systemic and structural barriers to income with cross-sector collaboration supported by leadership team.
- Continue partnerships with complementary supports that mitigate the impact of poverty on housing security *such as health services, food security, skills & literacy programs, transport initiatives, child-care etc.*

OBJECTIVE 4: Strengthen collaboration between housing sector and social, health, employment and economic development sectors in efforts aimed at improving community financial well-being.
- Educate and share information on housing and poverty linkages and current poverty reduction research and best practices.
- Align research, funding requests and initiatives within the community and seek opportunities to jointly participate in future research and initiatives.
- Jointly advocate for poverty reduction initiatives at all levels of government.

3   PROACTIVELY TRANSITION TO A SYSTEMS-PLANNING MODEL ACROSS HOUSING AND HOMELESSNESS-SERVING SECTOR

OBJECTIVE 1: Educate and engage stakeholders and the public on the benefits of adopting a systems-planning approach and current best practices.

- Engage aboriginal communities and health sector in promoting and supporting initiative as proponents of systems/ holistic approaches.
- Share messages and evidence of successes of systems-planning and best practices in communication activities.
- Utilise plan activities and professional development and networking events as community engagement and knowledge dissemination opportunities.
- Develop training and professional development activities as necessary.

OBJECTIVE 2: Establish critical populations and critical people list based on evidence.
- Achieve consensus across organization partners for current critical populations to direct targeted prevention and prioritization for system responses. Review annually.

- Achieve agreement on a list of critical people (individuals and families) and seek consent for information sharing across partners involved in systems of care project and for integrated clinical consultation. Review quarterly.

OBJECTIVE 3: Enhance and formalise Port Alberni's current system of care focussed on prevention, income and housing including aboriginal and non-aboriginal organizations and progressively move toward achieving fidelity to Housing First principles.

- Strengthen current integration mechanisms and collaborations such as case worker consultations; co-location of services; joint projects.
- Increase current capacity to design, coordinate and support a jointly funded, co-managed project to initiate and support transition to systems planning and HF approach.
- Collaboratively design and implement systems-integration work utilizing available best practices modified for the local context. Embrace contributions of people with lived-experience in design of system enhancements and ongoing evaluation.
- Incorporate integrated information management activities and performance management goals guided by outcomes of Strategy 4.

OBJECTIVE 4: Improve local systems prevention strategies across housing, health, justice and youth systems with a focus on priority populations.

- Engage mainstream services and institutions in the development of primary and systems prevention strategies including discharge planning from institutions, outreach, diversion and emergency prevention within the characteristics of the local context and likely high hidden homeless population.
- Improve integration of youth and adult services to provide seamless transition of young people through system of care and partnering sectors.
- Explore the use of community wide protocols across mainstream services to identify and respond early to at-risk individuals and families.

4   ENHANCE INFORMATION COLLECTION, ANALYSIS AND DISSEMINATION

OBJECTIVE 1: Strengthen local service providers' capacity to collect and share accurate and relevant information.

- Improve understanding importance of information management in achieving common goals.
- Demonstrate benefits of information to improved responsive, quality and effectiveness of interventions as soon as available.
- Deepen evidence-based practice & research friendly culture by encouraging participation in communities of practice & webinars, enhancing relationships with educational institutes and research organizations and actively seek opportunities to participate in research projects and conferences.

OBJECTIVE 2: Design information management program to progressively meet information needs for evidence-based community and systems planning, programming decisions, funding, research, performance management and improved communication.

- Determine indicators, targets and milestones needed to evaluate outcomes of planned activities. Explore use of a regular point-in-time homeless. Use as opportunity for community engagement and strengthen ties with research agenda.
- Determine gaps between existing and ideal/best practice information collection & reporting within current local and provincial systems and clarify current sharing capacity between sectors and agencies across community.
- Resolve data protection requirements to join-up current data collection mechanisms with a view to achieving Objective 3 in the future.

- Formalise performance monitoring and evaluation program across community for housing /homeless-serving sector incorporating necessary to detail to measure fidelity to Housing First in preparation of future funding availability.
- Establish regular reporting mechanisms and incorporate in communications activities and link to objectives in this plan.

OBJECTIVE 3: Transition to a community-wide integrated information management system.

- Explore regional & island wide partnerships to develop solutions e.g. HMIS e.g. community /stakeholder educational resources etc. approach BC housing
- Coordinate with leadership/coordination team and community partners to implement.

OBJECTIVE 4: Improve communication across stakeholders and the community aimed at raising awareness, and providing direction and motivation for necessary change.

- Ensure widespread distribution of this report and ideally snapshots for public consumption.
- Prioritize messages of evidence-based results of philosophy, approaches and economic benefits of affordable housing for all, Housing First and systems-planning approach as listed in related objectives throughout this plan.
- Ensure strong communication capacity is built into policy, practice and staff roles and time.

5 IMPROVE CAPACITY FOR HOUSING SYSTEM, COORDINATION AND IMPLEMENTATION OF STRATEGIC INITIATIVES

OBJECTIVE 1: Strengthen AVCSI capacity to enhance leadership & coordination.

- Extend leadership team to include landlords, development & construction, real estate, business and philanthropic community.
- Formalise representation of local government, health network and key partners with shared agenda such as MHAD, MSDSI, and First Nations etc.
- Invest in a coordination and administrative role to assist leadership group and the implementation of plan.
- Ensure both local governments endorse plan and support its activities whenever possible.
- Increase staff capacity to coordinate the implementation of this plan.

OBJECTIVE 2: Design a creative financial plan for funding coordination, housing acquisition and plan activities increasing financial self-reliance for the community.

- Engage business and development sector in AVCSI to create a business case for funding housing sector and coordination and implementation of plan.
- Explore suitability of innovative finance models used in other communities (see Strategy X objective X)
- Continue to advocate at all levels of government and with private and non-profit organisations for increased capacity, integrated policy & management and for evidence-based initiatives.

OBJECTIVE 3: Continue taking building community capacity approach

- Clarify roles and responsibilities of AVCSI as backbone organization to lead core cross-sector and coordination activities and the integration of all strategies across all plan activities.
- Maintain AVCSI focus on backbone responsibilities such as encouraging shared responsibility, transparent & joint accountability; funding the plan and its activities; communication and awareness building; engaging regional and provincial partners to support the community's plans; advocacy to government & regional and provincial organizations; laying groundwork for and coordinating community-wide initiatives such as information management & community-wide prevention protocols; etc.

- Engage local community partners to take lead on projects in their area of expertise and increase stakeholder's capacity whenever possible through support with AVCSI staff & resources.

OBJECTIVE 4: Ensure consistency in embracing ending homelessness through prevention, affordable housing and Housing First philosophy across the community and in all actions.

- Ensure AVCSI and community leaders are up skilled in current approaches to housing and homelessness and rationale behind current plan.
- Ensure communications objective is met and awareness-raising activities provide clarity of terms, evidence of effectiveness and success in relevant role-models.
- Support implementation of progressively deeper applications of Housing First (philosophy, systems, programs, teams) in the community.

HOUSING INSECURITY & HOMELESSNESS

THE FACTS EVERONE NEEDS TO KNOW

Housing is a basic need; an absolute necessity for living a healthy life. In Canada housing is considered a human right.

Adequate housing is a key determinant of health and has a direct influence on quality of life. Secure housing is a prerequisite for stability in employment, access to health care and social services, and various other aspects of individual and family functioning.

To thrive socially and economically communities need housing for all residents. Communities understanding this set their sights on that vision. To achieve it we must understand what housing is needed, how housing affordability is achieved, what happens without safe affordable housing and how communities can strengthen their ability to provide housing security to all its members.

COMMUNITY HOUSING SYSTEMS

Understanding housing in a community requires a systems perspective. A community housing system has *components*: essential housing, services and core programs that are necessary to serve and house community members, and *processes*: mechanisms such as government policies or activities such as application processes and assessment procedures that institutions and organisations use. Components define the structure of the housing system and processes help people access units and services and move through the system as appropriate.

A community housing systems is affected by external factors with little local control such as the nation's market economy or government policy and internal factors closer to home such as housing development projects and how services and the professionals who deliver them perform in their roles.

COMPONENTS OF THE SYSTEM

Housing units and services are the parts of the system that create system infrastructure.

Housing units are usually depicted as a *continuum of affordable housing* as shown in Figure 12. Different types of housing are needed to meet the different needs can capabilities of community members. The affordable housing continuum accounts for residents who own or rent, for market and non-market i.e. 'social housing' and for permanent and temporary tenure. It accounts for people who move through various types of housing and for those community members who may stay in or need the same kind of housing their entire life.

All communities need all types of housing however different communities need different amounts of units in each type according to the community's current and future population.

Services, the other components of the system, are touched on in the affordable housing continuum but it is not complete. Services are *program* components and are equally important to housing units in a healthy community system.

Figure 12: The Affordable Housing Continuum

Ending Homelessness			Rental Housing				Ownership	
Shelters	SRVs	Supportive Housing	Non-market rental (Social Housing)	Purpose-built Rental	Secondary Suites	Rented Condos	Condos	Other Ownership
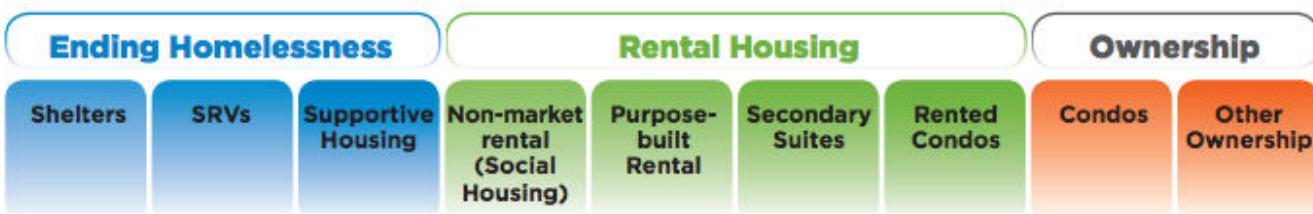
Image credit: City of Vancouver

Essential services include: Prevention, Homeless Specific Outreach, Specialist Housing Services, Housing providers and practices and Supportive and specialist services not specific to housing. Support services fall into three categories: housing supports, clinical supports and complementary supports.[64]

Services may be embedded into the type of housing, such as in supportive housing or emergency shelters or they may be part of separate organisations or social & health services such as outreach services and specialist housing services that help people find and apply for housing for example.

PROCESSES OF THE SYSTEM

Processes include mechanisms that help ensure people with varying financial, mental and physical capacities can access the housing they need also have the support the need to maintain it.

Government and institutions, as well as private developers and non-profit services all play a role in the processes of community housing system. Examples include government programs such as tax credits or GST rebates on new homes, municipal inclusionary zoning policies & resale price restrictions, and institutional policies such as Income Assistance Shelter Allowance and BC Housing's Housing Registry & Shelter Aid for Elderly Renters to name a few.

At the organizational level processes include applications processes, eligibility criteria, case management, professional development, information sharing, service coordination and funding mechanisms.

All affect how well the system works together and how well its activities and professionals perform. Processes also affect the availability and accessibility of housing alongside market influences and number of built units. Barriers to housing are often created in the systems processes.

MOVEMENT IN THE SYSTEM

A complete system allows for movement, as market supply and demand allow and as lives and circumstances change. While some people may always need or use a certain type of housing, movement within the system is healthy. Students, young people and low income earners use rental housing then later may become first-time home buyers. People unable to care for themselves move into housing with attached support services. Family violence forces people into an emergency shelter or transitional housing. Families upsize and downsize.

Movement is affected by the availability of housing units, income generation and accessibility to units and services. It is also affected by the processes that are designed to move people in and between various types of housing and services.

HOUSING INSECURITY & HOMELESSNESS

In a healthy community housing system, the number units across the continuum is adequate, all the necessary services and processes are in place and function well and there is healthy movement of community members through the system. The community has a high level housing security: residents can access the housing they need and desire as circumstances changes and they feel, and are secure in their housing knowing that if things change, they will be able to access different housing to fit their needs.

However, where this is a lack of appropriate affordable and social housing for the needs of the population or an absence, inefficiency, or complete failure of the mechanisms supporting the residents or the system, movement in the continuum becomes stagnate; residents are increasingly blocked from entering or moving through community housing systems into more appropriate or more desirable units.

Housing insecurity occurs when community members cannot find, secure or maintain affordable housing appropriate for their individual circumstances. Instead they must live in homes they cannot afford sacrificing other important items or services and/or live in housing situations that are unsafe, unhealthy or inadequate for their needs. Unhealthy trade-off's must be made between housing and food, utilities, clothing, medical needs, education etc. that make people's ability to maintain housing tenuous and creates housing instability. This in turn negatively affects the quality of life of household members.

Homelessness is defined as the situation of an individual or family is without stable, permanent, appropriate housing, or the immediate prospect, means and ability of acquiring it. This includes a variety of situations including unsheltered or absolute homeless, emergency sheltered, provisionally sheltered (accommodated temporarily or in a situation that lacks security of tenure) and those at risk of homelessness where economic or housing situation is precarious or does not meet public health of safety standards.[65]

HOUSING CHALLENGES ACROSS CANADA & BC

Presently Canadians are learning to cope with a 'housing crunch'[66] and 'homelessness crisis.'[67] There is a critical shortage of housing in many communities and housing affordability is decreasing for many residents. Canadians spending more on housing than almost any other developed country's citizens.[68]

- 1 in 5 households live in *'unaffordable'* housing meaning they pay more than 30% of their gross income on shelter.[69]
- About 1.6 million Canadian households were in core housing need in 2011 defined as spending more than 30% *and/or* living in units that do not meet standards for adequacy, suitability, or affordability as defined by Canadian Mortgage Housing Corporation (CMHC).[70]
- In BC almost 25% of all renter households spend more than 50% of their income – this is considered crisis level of spending. Homeowners fair better with less than 1 in 5 paying more than 30%.[71]

In the 1990's homelessness was recognised as a national crisis and unfortunately the experience of homelessness has become increasingly common.

- 1.3 million Canadians have experienced homelessness or extremely insecure housing at some point in the last five years.[72]
- An estimated 235,000 Canadians access homeless emergency services or sleep outside in a given year.[73]
- On any given night 35000 individuals are unsheltered, staying in shelters or provisionally accommodated.[74]
- It is estimated that a further 50000 people may be hidden homeless, that is out of site couch surfing, staying with friends or living in cars, squats or other precarious situations.
- Homelessness is on the rise in rural Canada.[75]

THE FINANCIAL COSTS OF HOMELESSNESS
The financial costs in addition to the impact on the health and well-being of people are now a consistent and frequent argument to end homelessness. Likewise evidence of the costs savings achieved by new approaches and best practices adds weight to the business case.

- By relying on emergency services and shelters an estimated $7.05 billion dollars is spent per year across Canada.[76]
- A 2008 study estimated B.C. taxpayers yearly contribution to homelessness is $644.3 million.[77]
- Based on 2001 costs, BC would save an estimated $211 million annually by providing adequate housing and supports to residents identified as homeless.[78]
- A recent plan to end homelessness created by national policy leaders and presented to the federal government suggests it would cost $4 billion/year to end homelessness, that's $106/Canadian annually, $2.04 cents weekly, which is just 88 cents a week more than current spending.[79]

Housing insecurity and homelessness is caused by the interaction of three groups of influences; structural factors, systems factors and personal or individual factors. At a community level, understanding the structural and systems factors and how they interact with personal factors provides the most useful insight.

Lack of affordable housing, not enough income and no access to health care or social support services are the most often presented causes of housing instability and homelessness. Alleviating these conditions is seen as the cure.

Figure 13: The collusion of factors causing housing challenges & homelessness.

STRUCTURAL FACTORS

A complex interplay of economic and labour market conditions, the housing market, demographic profiles and policy interventions play a role in housing security. Known as *structural factors,* these broad influences affect whole populations across Canada creating unfavourable housing and income-producing conditions.

Housing challenges in every community is impacted by the two most prominent structural factors; lack of affordable housing & poverty.

Lack of affordable housing

- Canada remains the only G8 nation that does not have a national housing plan.

- While the population has grown 30% since 2000 unfortunately high home prices and construction costs, diminishing rental housing and decreases in government affordable housing and policy initiatives have created a shrinking supply of adequate affordable housing.

- Rental stock which forms an important segment of affordable housing has been declining since 2005. Construction and rehabilitation of affordable rental units has failed to keep pace with the number of units lost to demolition, urban intensification projects and the more profitable conversion to condominiums. [80]

- Previously fewer than 10% of new builds are rentals whereas multifamily home builds had been at a record high. [81]

- There has been 46% decrease in Federal investment in social housing over last 25 years; representing a drop of $115 to $60 per capita. In 1982 20,450 affordable housing units built. In 2006 this was 4,393. The reduction equates to 100000 units not built.[82]

- Housing affordability has worsened over the last 15 years. Since 2000, workers earn only 13% more however homes cost 63% more.[83] Private market housing responds to income of the population not needs resulting in higher housing costs affect low and middle-income earners the most.[84]

- As costs of housing (including purchase price, debt financing, rent, and utilities) have increased, personal income and wealth growth has been stagnant for many. Only the top 40 per cent of households saw their share of Canada's wealth grow, while the rest saw their share decrease 1999-2013 and the bottom 20 % decreased from 5 to 4% of the total wealth.[85]

- Wealth inequality is most dramatic in BC and is most impactful on low income earners and the most vulnerable community residents. [86]

Poverty

Poverty is a complex issue and the experience poverty is consistently linked to poor health, lower literacy, poor school performance for children, more crime and greater stress for family members. The Canadian Medical Association offered poverty is the main issue that must be addressed to improve the health of Canadians and eliminate health inequities.[87]

- Canada does not have a national anti-poverty plan despite recommendations from the UN Human Rights Council.[88]

- BC has one of the highest poverty rates in Canada for the last 13 years listed 1 in 7 or 1 in 10 British Columbians are living in poverty, depending on how you measure it. [89]

- One in five BC children lives in poverty - that's 21% and higher than the national average of 19%.[90]

- Nearly half of B.C. children who live in a single parent family were living below the poverty line in 2012.[91]

- Reasons offered for BC's poverty in particular include increases in precarious work (part-time, as needed, unsteady, & contract work), lack of social spending, a large low wage sector, and big gender pay gaps especially at the low end.[92]

- A person working full year, full-time paid BC's current minimum wage rate, earns below the poverty line. [93]

- Poverty costs an estimated $8.1 - 9.2 billion dollars a year for BC in higher public health care costs, increased policing and crime costs, lost productivity and foregone economic activity [94]

- BC remains the only province not yet pursuing a Poverty Reduction plan. Jobs and employment, health, early childhood education and care, food security as well as housing and homelessness responses all play a part in recommended solutions.

A lack of financial assets in addition poverty's accompanying traits create housing instability. Diminishing health, personal stress, relationship stress and breakdowns, social isolation all reduce a family's or an individual's capacity to secure and maintain their housing.

Difficult choices must be made between housing needs and other essentials including food and medicine, keeping a job, or personal safety. People become trapped in or must accept housing that is inadequate for their needs, is unhealthy such as unsanitary conditions or unsafe including remaining in abusive and exploitive situations. This contributes to the cycle of poverty.

SYSTEMS FAILURES

'Systems' are intended to connect people to help and to connect services to each other through an integrated safety net for our residents. Systems failures are systemic and societal barriers or gaps that prevent or prohibit access to the appropriate support or services when community members need it. Instead services fail to connect with people who need them, people 'falling through cracks', or get trapped into unhelpful scenarios that may maintain or make worse their situation.

Systems failures play a critical role with the personal and individual factors associated with housing challenges such as those noted in Figure 13. The following systems failures contribute to housing insecurity and homelessness:-

- An overly-complex system that makes it difficult to navigate systems such as housing, income, legal, child welfare and creating barriers that can lead to, or keep people trapped in homelessness.

- Complex system requirements put people at risk of, or prolong periods of homelessness such as focusing on emergency services and/or enforcing limiting eligibility and maintaining service criteria such as housing-readiness, abstinence, diagnoses, behaviour expectations, identity documents etc.

- Disjointed, uncoordinated network of services and inefficiencies in information sharing that result in gaps and duplications in services and failure to deliver continuous care.

- Inadequate support or weak discharge planning from institutions such as hospitals, custody, corrections, armed services, foster care and health services marking institutional involvement a risk factor to homelessness. [95]

Many system failures are caused by a lack of resources and capacity most often attributed to cuts in funding. A second cause is the historical philosophical and service approaches known as 'siloing' – the division of needs of service users into discrete and separate topics creating division in social policy, funding and practice. Approaches that blamed individuals and created prejudicial and discriminatory practices are also responsible.

WHO EXPERIENCES HOUSING CHALLENGES

As lack of affordable housing and poverty become more prevalent, the diversity of people experiencing housing challenges and homelessness is expanding. Due to the combination of uncontrollable characteristics- such as gender, cultural identity, age, medical and mental health conditions – and the nature of our culture, institutions and systems, makes certain segments of our population and particularly marginalized groups especially vulnerable to poverty and housing challenges.

Persons living with disabilities, young people, single mothers, Aboriginals, elderly individuals, and racialized communities are all at greater risk, in addition to people experiencing mental health or substance abuse concerns, women experiencing violence, young people leaving care and people discharged from institutions.

Presently the incidence of youth, women, seniors, and families becoming homelessness is rising as determined by homeless point-in-time counts, research and observations. Recent reports focussed on some relevant special populations can be accessed clicking on the links below.

| ABORIGINAL PEOPLES | MENTAL HEALTH & SUBSTANCE ABUSE | YOUNG PEOPLE YOUTH IN CARE | FAMILIES | WOMEN | SENIORS |

THE SPECIAL DYNAMICS OF RURAL COMMUNITIES

'Rural homelessness' has distinct dynamics from urban regions with implications for understanding housing needs in the Port Alberni community. Growing research is investigating how the contextual realties of smaller and rural communities affect both the causes and conditions of housing insecurity and homelessness in additional to the effectiveness and application of Housing First.

- Hidden homelessness is more prevalent in rural communities, families comprise a larger share of the numbers and there is usually more diversity in people experiencing homelessness.[96][97]

- Aboriginal people are over represented in hidden homelessness and in homelessness counts.[36] Aboriginal migration significantly impacts homelessness in rural communities close to Aboriginal communities and where regional centres act as access points to services and opportunities. The dynamics of over-representation of Aboriginal people merits specific and concerted attention in future research.[40]

- A rural community's service and housing infrastructure is much less elastic to mitigate major economic shifts, changes in housing markets or even natural disasters and therefore feel the impact more deeply and are usually less able to adapt in time.[37]

- Housing units in rural communities tend to be largely single unit, free-standing housing with some small multi-unit dwellings available. Fewer units tend to be available and few developers willing to undertake building low cost or affordable housing especially dwindling communities. Landlord discrimination is common, particularly in strained markets.[37]

- Limited resources are common creating less social infrastructure and in pursuing solutions often limit the capacity to create services for prescribed systems functions (such as system coordination) or the accessibility to intensive supports (such as Housing First programs or ACT teams). As such integrated systems of care are more crucial to deliver the supports required.

- A consistent and critical gap of specialized supported housing for those with mental illness and addiction issues was found across Albertan rural communities.[98]

- Good leadership makes a difference including reducing the 'jurisdictional juggling' often present within government, geographical areas and services targeting particular populations.

- Limited housing stock and limited supports services may make achieve fidelity to HF principles such as consumer choice and self-determination more difficult. Rent supplements may help address affordability in tight housing markets.[99]

- Extensive collaboration with government departments, regional health authorities, non-governmental organizations and community partners. Smaller communities have advantages in terms of establishing relationships and service coordination that can create a more cohesive network and therefore more effective service delivery.[39]

- Social ties within communities acts as strength for clients however the lack of privacy can affect service use including black-listing or prejudicial responses from services That client's needs often require relocation must be considered when developing solutions in rural communities.[100]

- The demands of unreliable transportation, lack of services, heat & utilities and snow removal can be additional burdens on residents.[101]

ENDNOTES & APPENDICES

END NOTES

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APPENDIX A: List of Participating Stakeholders & Community members. Approximately 20 additional community members contributed to the project anonymously.

Name		Organisation	Role
Chris	Alemany	Port Alberni City Council	Councillor
Laurie	Allen	CMHA - PA	Homeless Outreach
Mark	Cairney	CMHA - PA	Homeless Outreach Worker
Dan	Cebuliak	Citizen	
Tamara	Coco	Victim Services	
James	Dafoe	Citizen	
Pamela	Day	Bread of Life Center	Board Member
Terry	Deakin	INEO Employment Services	Owner/CEO
Jim	Del Rio	Citizen	
Marcie	DeWitt	Alberni- Clayoquot Health Network	Coordinator
Patty	Edwards	AVCSI/ Alberni-Pacific Rim MLA/CMHA	Chair/ Constituency Assistant / Advocate
Robin	Forrest	Citizen	
Wendy	Haas	North Island College	
Bob	Hargreaves	CMHA - PA	Executive Director
Heidi	Hartman	BC Housing	Non Profit Portfolio Manager
Wes	Hewitt	Port Alberni Shelter Society	Executive Director
C	Hewitt	School District 70	
Maggie	Hodge Kwan	AV Community Foundation	Contractor -Vital Signs Report
Charlene	Holden	KUU-US Crisis Line	HC Housing advocate
Minnie	Hornridge	Bread of Life Center	Minister/Director
Laura	Humphries	Port Alberni Non-Profit Housing Association	Board Secretary
Annie	Humpries-Loutit	Citizen	
Myron	Jespersen	AVCSI/PA Shelter	
Janice	Jespersen	Island Health- Health Outreach	
Gord	Johns	Federal NDP	Candidate Courtenay-Alberni
Pat	Kermeen	PA Shelter	Outreach
Michael	Kleyn	CMHA - PA	Homeless Outreach
Arlene	Lamont	Housepainter	Owner
Darlene	Leonew	Port Alberni Friendship Center	Cultural support
Anna	Lewis	CMHA - Alberni Valley Social Planning Council	
Shane	Longman	Physician	
Jesse	McConnell	Island Health	Manager: Mental Health and Substance Use
Elaine	McLeod	PA Shelter	Case Manager/Administration
Dawn	McMillan	Bread of Life Center	Coordinator
Janis	Nairne	AV Social Planning Council	
Elia	Nicholson-Nave	KUU-US Crisis Line	Executive Director
Al	Nicholson	Phoenix House	Tenant
Josie	Osbourne	ACRD/ District of Tofino	Chair/ Mayor
Heather	Owen	Vancouver Island Crisis Line	Community Relations
Esther	Pace	Island Health	Public Health
Dave	Paddock	RCMP	
Yvonne	Parti	Port Alberni Non-Profit Housing Association	Treasurer
David	Peterson	MSDSI	
Mac	Richards	RCMP	Inspector
Wayne	Salter	Phoenix House	Owner
Dan	Schubart	Alberni Valley Transition Town	
Erica	Schubart	Bread of Life Center	Board Director
Joanne	Silver	ACAWS	Executive Director
Scott	Smith	City of Port Alberni	Planner
Cyndi	Stevens	Port Alberni Friendship Center	Executive Directors
Randy	Thoen	City of Port Alberni	Chief Fire Prevention Officer
Mark	Vandervelde	CMHA Rogers St Apartments	Staff
Debbie	Verhaevhu	Citizen	
Sherella	Wyton	HOP Public Health	Practicum Student

10 ESSENTIAL INGREDIENTS

DATA	COORDINATED SYSTEMS OF CARE	INCOME
EMERGENCY PREVENTION	SYSTEMS PREVENTION	OUTREACH
RAPID REHOUSING	SERVICES	PERMANENT HOUSING

10YR PLANS FOR SUCCESS

Extracted from : The Canadian Alliance to End Homeless Ten Essentials.

Plan.
Evidence-based, measurable and ambitious outcomes & key milestones. Learning, living and adaptive documents that cover the 10 Essentials; The product of an inclusive community process that engages key players in the local homeless system, including people with lived experience.

Coordinated System of Care
Systems planning approach. A single point of accountability for implementation; process for system organization, planning and coordination; process for monitoring the effectiveness of the homeless serving system; and a plan for adapting to environmental changes, learning, best practices and improved information. Targeting highest acuity to reduce demand on systems and matching acuity to programs for effectiveness.

Emergency Prevention
Communities need a thoughtful and methodical prevention strategy that includes: early detection, emergency assistance, system coordination, housing and support services and access to the income necessary to sustain housing through employment or mainstream income support programs as required.

Outreach
Housing-focused. A key ingredient to outreach is the ability to connect the homeless population with housing and support. Need staff trained to work with challenging behaviours.

Services
High quality housing support services tailored to the needs and wishes of clients is a critical success factor. Need a range of housing first programs to address different populations' needs. Consider client choice, needs and the housing market in your community.

Permanent Housing
Incorporate investment into creating affordable housing. Subsidized market rental housing with support is adequate for many. Some people, as a result of severe health, mental health, behavioural and/or addictions issues may require permanent housing coupled with onsite supportive services.

Data, research & best practices.
Use available research and information. Create an effective means of collecting local data and information on the functioning of your homeless system of care e.g. HMIS. Common assessment tools to appropriately match a client with services, co-ordinate and monitor assistance provided across agencies and identify system improvements.

Systems Prevention
Creating a clear path to housing and support from government institutions including jails, child welfare system, mental health programs and other medical care facilities. Use case management, access to services or housing assistance programs to reduce the role that institutions play in creating homelessness.

Rapid Re-housing
Housing locators search local markets and build relationships with landlords. Includes incentives to landlords to rent to homeless households; creative uses of housing vouchers and subsidies to improve affordability; and links to resources.

Income
Financial assistance programs and career-based employment services can help formerly homeless people build the skills necessary to increase their income. Mainstream services should be used for this purpose.

APPENDIX C: Additional information from BC Housing

Length of Time on the Housing Registry for Applicant Households Residing in the City of Port Alberni

Applicant Category	Less Than 6 Months	6 Months to One Year	One to Two Years	More Than Two Years	Total Applicant Households
Family	9	7	1	2	**19**
People with Disabilities	1	1	0	0	**2**
Seniors	0	2	3	1	**6**
Wheelchair Modified	0	0	0	0	**0**
Singles	0	0	0	1	**1**
Total Applicant Households	**10**	**10**	**4**	**4**	**28**

Source: BC Housing, Housing Registry Statistics, March 31, 2015

Notes:

1. Applicant statistics reflect applicants with active (live) or on hold status in the Housing Registry, a centralized database for participating housing providers containing current applicant information.

2. Non-participants of The Housing Registry keep their own applicant waiting list.

3. Eligible applicants must apply under one of the following Housing Registry applicant categories:

    a. Family: a minimum of two people, including one dependent child

    b. People with Disabilities: A single person who can live independently and qualifies for a disability pension, or can't work because of a disability, and is under 55 years of age.

    c. Senior: One or two persons, with at least one person who is 55 years or older.

    d. Wheelchair Modified: At least one applicant requires a wheelchair modified unit. May be family, senior or person with disabilities.

    e. Singles: Singles and couples under age 55 who do not meet the definition of people with disabilities.

4. Applicants wishing to transfer from out of an existing subsidized unit to another are not included in this report.

5. Length of time on the housing registry is measured by the time between the adjusted application date and March 31, 2015.

Prepared by BC Housing's Research and Corporate Planning Department - May 2015

Unit Turnover in Port Alberni Developments

Development Name	Client Category	Total Units	No. of Units Turned Over (fiscal year) 2012/2013	2013/2014	2014/2015
Harbour View	Low Income Families	**11**	2	5	6
George Dowling Place	Low Income Families	**16**	6	5	7
Port Alberni Townhouses	Low Income Families	**10**	2	4	3
Garden Apartments	Low Income Families	**16**	8	5	4
Heritage Place	Frail Seniors	**26**	2	8	7
Westporte Residence	Special Needs	**2**	1	0	0
Red Oaks Manor	Low Income Families	**12**	6	7	5
Rainbow Gardens	Frail Seniors	**10**	3	6	3

Source: BC Housing, Housing Registry Statistics, March 31, 2015

Notes:

1. BC Housing only tracks subsidized units where we have a financial relationship. There may be other subsidized housing units in the community.

2. BC Housing tracks unit turnover statistics if tenants in the unit are required to file an annual Declaration of Income and Assets report.

3. Unit turnover is based on the tenancy end date. The number of times units are turned over during the fiscal year counts all tenant move outs in the building between April 1 and March 31

Prepared by Research and Corporate Planning Department in May 2015

APPENDIX D: Raw Data Consultation Activities.

Consultation Exercise: Stakeholders review of current state of housing, services and challenges in the community.

Start, Keep Stop review completed by participants at AVCSI meeting January 26 & two public consultation sessions on March 6. A total of participants contributed their feedback. Participants at the two public consultation sessions were provided the opportunity to add feedback and vote on which they consider the priorities as indicated by the (numbers). The feedback has been organized in key themes.

HOUSING INFRASTRUCTURE

Keep   Finding a way to build the new shelter (12)
Start   Making more affordable housing (10)
Start   Look at new models for affordable housing; (8)
Start   Low rent seniors housing (like Echo but with supports) Do better assisted living for seniors w addictions (6)
Start   Building on Habitat for Humanity model – people use own skills to help build their new home (6)
Start   Youth housing (4)
Stop   Stop rental increases that are allowed to be given and proper notice for the increase. (4)
Start   Supported housing, safe affordable (4)
Stop   Stop looking at/ relying on only traditional solutions (2)
Start   Advocate building low cost housing (2)
Start   Allow small backyard homes (1)
Start   Getting creative through community land trust to create low cost housing. (1)
stop   Stop losing housing stock (1)
stop   Stop buildings becoming slums (1)
Start   Mixed model of housing variety of ages (1)
Start   Build lowest cost capacity
Start   Policy on land ownerships by City to keep better standards (have supports in place)
Start   Build/draw out of slum
Start   Teaching tenancy rights
Keep   Stay open and accessible
stop   Stop sitting on sidelines – need social housing.
stop   Stop Segregated housing

LEADERSHIP & COORDINATION

Stop   Stop Landlords not held responsible; Check on landlords/ inspecting units so are safe & drug free. (13)
Keep   Rogers St and King George are good role models (7)
stop   Stop talking, start doing. (4)
Keep   Keep caring and praying (2)
Stop   Stop drug/booze/prostitution running landlords (2)
Keep   Get more structured in meeting needs.
Keep   Accountability
Start   Funding strategy for building low cost housing
Start   Keeping talking until there is a consensus
Start   Seek out non-traditional sources of funding, new types of partnerships
Start   Policy on landownership by City to keep better standards (have supports in place)
Start   More/better service coordination
stop   Stop going in circles
stop   Stop looking at only/relying on "traditional solutions"/sources of funding

PARTNERSHIPS & COLLABORATION

Start   Value all our human resources (2)
Start   Work more cooperatively & collaboratively with other community resources, providing services to mutual clients. (2)

Start	Involve police in solving this (2)
Stop	Creating barriers/ Dictating who can access services/ falling thru cracks (2)
Keep	Ask them – what can I do to help? (1)
Keep	Partnerships (1)
Start	Accountability(1)
Start	Holistic plans – no more unsupported clients/tenants.(1)
Stop	Stopping non-talking among agencies (1)
Keep	Working to build consensus
Keep	A relationship between services & housing (geographic & pathways)
Start	More liaison with mental health assessment team & court system- legal aid.
Start	Keeping stats on people that fall into the category of "homeless"
Start	Have ME (homeless) at the table
Start	Work more with police and assessment unit at the hospital
Start	Getting private , businesses, corporations, partnerships
Start	Work with the Nuu-chah-nulth ;
Start	First nations involvement

MIND SET, ATTITUDES, PERCEPTIONS

Start	Raising awareness; education about housing issues (10)
Keep	Advocacy (5)
Start	Community forums, storytelling, listen – building trust, honesty (4)
Keep	Keep advocating; lobbying all government; lobby to reduce barriers. (4)
Keep	Keeping bring the issues before the city council and city residents (3)
Start	Treating people in poverty as real people; stop labelling- we are all people (2)
Keep	Compassion, keep caring about people in a real way (2)
Keep	Tell community for the need and what we are doing
Start	Education about housing issues
Start	Policy on landownership by City to keep better standards (have supports in place)
Stop	Stop NIMBY Stop Judgement; discrimination
Stop	Stop Creating barriers

POVERTY REDUCTION/ PREVENTION

Stop	Stop poverty (6)
Keep	Keep offering basic skills training (5)
Stop	Stop making it so hard to get welfare (5)
Start	Making government accountable – increase welfare (4)
Start	Training for "keeping a house" – more support for persons living independently and record of not managing money well (4)
Start	More nutrition supports (3)
Start	Jobs; Living wages ; living income for on assistance (2)
Start	Guaranteed annual income (x2)
Keep	More literacy training (1)
Start	Job creation for low skilled people (1)
Start	VAST alternative school program
Start	Growing more food.
Stop	Stop vicious circle
Stop	Stop keeping damage deposits by property managers
Keep	Life skills for everyone youth adults & seniors.

SUPPORT SERVICES

Keep	Outreach workers, caring nurses and homeless organisations (12)
Start	Easier access to mental health services (9)
Keep	Offering safe place to eat a meal, sleep, socialise, see a doctor/ nurse (5)
Start	Long term care beds shortage (1)
Keep	Stop giving money – provide supports, paid rent and bills, access to groceries and services. (1)
Keep	Finding a way to build the new shelter
Keep	Stay open and accessible
Keep	Keep coordinating
Keep	Support for young people going from foster care to independent housing
Start	Lobby government to reduce barriers
Start	Service in low rent housing
Start	More funding for families at risk
Start	Early intervention
Start	Holistic plans, no more unsupported clients/tenants
Stop	Stop barriers - kill the rules that stop access
Stop	Stop exploitation - keeping people's damage deposits
Stop	Stop focusing individually – be more "holistic"
Stop	Stop vacant/absent landlords
Stop	Stop dictating who can access services- falling through the cracks
Stop	Stop Young People moving from foster care to the streets.

Consultation Exercise: Stakeholders review against CAEH Essentials

Participants broke into small groups during AVCSI meeting June 10 to provide feedback of current state of homeless serving system as compared with the best practice CAEH essentials

	THINGS WE DO WELL	IMPROVEMENTS	MISSING/ INEFFICIENT ELEMENTS	PRIORITIES	POSSIBLE ACTIONS	CONTRIBUTORS	SUCCESS MEASURES
Data, research best practices	Have used available research & info eg. 2008 plan. Begin investigating local data collection (eg. Vital Signs, conversations about data gaps) Data base to record BC Housing ICM (INEO & MSSID)	using common assessment tools (e.g. across agencies and organizations) developing a joint data base (management, confidentiality, security are important) Gaps – no overlap or sharing between groups Limited stats recorded – little no record of what we perceive as pertinent stats. Blocks – cumbersome database. Groups are isolated.	Understanding what data is collected by whom. Identification of data gaps West Coast vs. Alberni Valley – data and understanding relationship between these two areas. Best practices match clientered services. Best practice not adequate in youth service area.	Who is collecting what data? Where is it being stored? Who has control over it? How is or isn't being shared & used? What are the gaps? Common database such as CASH *(Victoria)* Accessibility	AVCSI (with funding and the right consultant) to embark on a new project to undertake #1 above (investigation in to data) end result could be the single database/ end point.	AVCSI, community foundation, and all regional service providers, relevant agencies, organisations, shelters, houses etc. Alberni Clayoquot Health Network.	Use indicators (for housing etc.) Collaboration between organizations.
Income	Home -based, employment services, collaborating. Income assistance Rent supplements Safer program OAP/GIS Fair Pharmacare	Getting people on PWD de-centralized services. Income assistance hasn't increased. Gaps – below poverty line rates. People don't know what they quality for. Low literacy – can't access internet/ other info. Stigma of being on income assistance	Information systems.	Propose pilot projects: city could lead Increase in social enterprises. Raising rates to liveable amount. Literacy program Prevention programs to prevent isolation	Is there a way to work with centralised? Advocacy programs that are easily accessible.	Provincial government Federal government	Better health outcomes.
Emergency Preventions	Homeless outreach ACT Other advocates Outreach	Gaps – communication Additional supports Lack of communicate education Blocks – finances; lack of affordable housing.					

	THINGS WE DO WELL	IMPROVEMENTS	MISSING/ INEFFICIENT ELEMENTS	PRIORITIES	POSSIBLE ACTIONS	CONTRIBUTORS	SUCCESS MEASURES
Systems prevention	There are systems but….	They are poorly managed govt. agencies In constant flux/change Waiting for service is too long Blocks – huge discharge of disable adults/etc. by gov't that didn't offer any supports. Nobody get back to you.		Key role advocates can be Volunteers to help those less able navigate "the system" in order to access care, help, home, income.	Realistic plan for transition from jail, welfare, foster care. Funding from all levels of govt.	Govt. Client Local Govt. Charities Education system	
Coordinated system of care	Work well together and communicate Agencies generally communicate informally.	We need one – including a system approach Team approach Client based. This could be improved on – General communication between agencies. lack of common database privacy laws – client ROI			Use shared database as foundation for system. Establish MOU or clear agreement re: integration of system.		
Outreach	Housing outreach Health outreach CMHA Island Health Shelter INEO	Housing outreach support inadequately staffed. Connect outreach workers. Add health outreach Not enough funding Gaps in education, funding, early intervention, continuation & transition.	Early Intervention Education	Collaboration/coordination of staff providing outreach.	Continue monthly meetings – sharing safety Increase staff providing outreach. Increase tax money		
Rapid rehousing	CMHA – BC Housing Outreach – build relationship w/ landlords, rental supplements, educate, vouchers, increased eligibility for access "creativity" Shelter Island Health MHA	Gaps – lack of affordable, decent housing Safe housing Lack good landlords			Increase taxes Coordinate use of tax $ Educate – share knowledge	All of us The community leaders.	

Consultation Exercise: Stakeholders review against CAEH Essentials (continued)

	THINGS WE DO WELL	IMPROVEMENTS	MISSING/ INEFFICIENT ELEMENTS	PRIORITIES	POSSIBLE ACTIONS	CONTRIBUTORS	SUCCESS MEASURES
Services	Work well together Shelter Transition house services Housing outreach Health outreach Legal advocacy Housing workers Advocates Public health nurses	More legal advocacy 2nd stage housing Increase youth services Personal coordination. People don't know how to access the system. Can't participate in groups – clients with history.	Teen housing – MCFD. Inadequate supervision at foster services coo-ordination of intake	Simple database/ registry relating to housing needs Youth safety (housing, exploitation, foster care) 24 hour youth outreach	Contact with foster parents & MCFD. Creation of data base. Integrate services Fund system advocate to coordinate client care.	Everyone in housing. CMHA MCFD Re: youth & foster/Guardian	No youth at risk on streets easy access to shared data.
Permanent Housing	Rogers St Phoenix House Cool Waters Shelter BC Housing PAACL CLBC	City partnership Standards for housing providers Gap – employment – income – education.	Federal and provincial funding	Additional funding for supports Additional permanent support with housing More publically managed low-income housing.	Flexible institutions	Govt.	No more homeless people.

Consultation Exercise: 5 Key Priorities for Action & Investment.

Participants broke into small groups during public consultation meeting to determine immediate priorities.

- Increasing access to mental health & substance misuse services
- Making landlords accountable i.e. With-holding security deposits and for substandard of housing e.g. Running drugs/prostitution
- Providing more supports with affordable housing
- Political leadership to spearhead
- Tax sale houses; incentives to homeowners.

- Build new shelter with long-term single rooms for the hardest to house
- Educate basic life needs management (money/finances/budgeting, personal hygiene, house cleaning, cooking/healthy eating
- More supportive housing
- Keep advocacy for living income/minimum wage
- Wider platform for story-telling: good publicity for about the good stories
- Greater coordination/communication between service providers

- Housing first "safe" or funding
- Support to build self-respect/life skills
- Medical and dental services (educate for practitioners)
- Create meaningful things to do
- Advocate to assisting to access services.

- More community inclusion
- Fundraising to build more affordable housing e.g. Victoria RRSP Fund for Affordable Housing
- Support landlords – landlord registry – accountability exploration fundraisers for support the "good" landlords for the ability to rent at $375

- Develop safe secure housing
- Affordable housing
- Livable income
- Coordinated supports
- Federal election- Go to all candidates meetings to ask what party is going to do about homelessness.

Consultation Exercise: Implementation challenges brainstorm

Participants as a large group brainstormed likely challenges to implementation and related solutions.

Anticipated planning challenges

- Money
- Time labour
- Division of resources e.g. took 2 years to establish 5 priorities in health outcomes project
- Political will – because there is no "profit"
    - NIMBY
    - Historical responsibility
    - "The Non-profits will look after it".
- Willingness
    - Territorial, own priorities, own piece of the pie
    - Don't really know the work or its impact
    - "If we make it too nice everyone will come here "

Planning solutions.

- Working together
- Getting input from community
- Working group for action steering
- Costs of homelessness made public

Consultation Exercise: Preliminary Systems Mapping.

Participants were asked to designate which roles their organisation played in the local housing system. If multiple roles are filled, participants prioritised roles by numbering them, 1 representing their primary role.

Universal Prevention	Affordable housing	Income Generation	Housing loss prevention
Island Health –population healthy; food security; determinants of health 1 PA Friendship center 1 ACHN 2 CMHA 4 INEO employment services 5 City of PA 4 RCMP Advocate – volunteer PA Society Shelter	A-CRD – 1 zoning CMHA – 1 PANPHA 1 City of PA 1 PA Friendship Center – family support workers; legal outreach Phoenix housing advocate volunteer	City of PA 2 Port Alberni friendship Center 3 AYTEP/ATEP INEO Employment Services CMHA New Horizon Center – advocacy	Island Health – Healthy outreach team 2 shelter A-CRD 2 City of PA 3 New Horizon Center advocacy PA Friendship Center – family support workers KUU-US Crisis Line Society
Discharge planning	**Outreach**	**Targeted prevention**	**Eviction prevention**
PA friendship centre AMW 4 Island Health programs KUU-US Crisis Line Society	Island health – health outreach team 1 ACAWS resource center Port Alberni Friendship Center KUU-US Crisis Line Society	ACAWS Victim services INEO Employment services #4 ACAWS Exploited women – teens & adults PA Soc. Shelter KUU-US Crisis Line Society	PA Friendship center 2 CMHA 3 New Horizon Center advocacy 3 Advocate FSW KUU-US Crisis Line Society
Landlord support	**Tenant support**	**Diversion**	**Systems Management**
CMHA PA Friendship Center advocate; prevention Advocate – volunteer KUU-US Crisis Line Society	PA Friendship Center 1 – advocacy RCMP -2 CMHA MLA office advocacy 2 New Horizon Center – advocacy KUU-US Crisis Line Society	PA Friendship center; FSW INEO 6 Shelter	ACHN 1 AV Community Foundation 2 A-CRD 3 PA Friendship Center RCMP City of PA CMHA KUU-US Crisis Line Society
Support Services Only	**Intensive case management**	**Emergency Shelter**	**Short-term supportive housing**
ACAWS – housing, referrals to team, Drop in emergency services, emergency supplies RCMP PA Soc. Shelter ACAWS INEO Employment services	Island Health – Health Outreach Team 1 ACAWS Children who witness abuse Port Alberni Friendship FWS- ECD INEO Employment Services 3 PA Soc. Shelter Island Health – Public Health Perinatal KUU-US Crisis Line Society	ACAWS Domestic violence PA Soc. Shelter	CMHA Emergency housing PA Soc. Shelter Advocate – volunteer KUU-US Crisis Line Society
Permanent supportive housing	**Housing & intensive supports**	**Rapid rehousing**	
PA Soc. Shelter CMHA 2 PANPHA 2 City of PA 5 Advocate volunteer housing	PA Soc. Shelter CMHA KUU-US Crisis Line Society	(nothing noted)	