Putting an End to Child & Family Homelessness in Canada

RAISING THE ROOF | CHEZ TOIT

Long-term Solutions for Canada's Homeless

Putting an End to Child & Family Homelessness in Canada:

Raising the Roof provides national leadership on long-term solutions to homelessness through partnership and collaboration with diverse stakeholders, investment in local communities, and public education.

This report is the result of the three-year Child and Family Homelessness Initiative. This project aims to support communities and government by reviewing existing programs, creating a comprehensive framework, and developing practical tools and recommendations for addressing child and family homelessness in Canada.

Also available:

- Building a comprehensive framework to address child and family homelessness in Canada: Phase I, an environmental scan
- Beyond Housing First: A Holistic Response to Family Homelessness in Canada

Acknowledgements

We would like to acknowledge the following individuals for their incredible work and dedication to the Child and Family Homelessness Initiative and this final report.

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Our Community Partners

We would like to thank the following Partner Agencies for their immense contributions to this report, without which this work would not have been possible.

Campaign 2000: End Child and Family Poverty in Canada

Ending Violence Association of British Columbia

Family Enrichment and Counselling Service, Fredericton Inc.

Homeward Trust Edmonton

Oolagen Community Services

Port Cares

Wabano Centre for Aboriginal Health

YMCA Yellowknife

Our Funding Partners

We would like to express our deep gratitude for the generosity of our Funding Partners, who have supported the work of the Child and Family Initiative and the development of this report.

LEAD PARTNERS

Children's Mental Health Pillar

RBC Foundation
RBC Fondation

Ontario Collaborative Agreement

Ontario Trillium Foundation
Fondation Trillium de l'Ontario

MAJOR PARTNERS

gsc green shield canada

SUPPORTING PARTNERS

Catherine Donnelly Foundation

DIALOG

Franklin Templeton Investments

John & Heather Hall

Heather's Walk

HOMES Publishing Group

IKO Setting the Standard

Ivey Business School Western University · Canada
EMBA Class of 2016

Manulife

Scotiabank

The Christina Mary Hendrie Trust

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Executive Summary

> *Imagine waking up in a strange place one morning and not knowing where you are, not recognizing any of your surroundings. Your mom takes you and your siblings to a cafeteria-style dining hall where you eat a bit of breakfast before taking a bus to school. After classes finish, your mom meets you in the schoolyard and you take transit across the city to another strange building for the night. This time, you are sharing a bed with your younger sister, your brother is on the couch and your mom sleeps on the floor of the living room. Yet you know you were lucky to be out of the shelter tonight and in a friend's house. Tomorrow you know the process will repeat itself.*

This could be the life of one of hundreds of children who are homeless in Canada right now. For homeless kids, the loss of stability is enormous. While many homeless families are able to access some "permanence" in emergency shelters, others are more transient, staying in temporary shelters and with friends. The disruption to their lives results in many negative consequences, both in their childhood and as adults.

Yet, when most people think about homelessness in Canada, they picture an older, single man sitting on a street corner. Indeed, this image is often perpetuated through media and various charitable fundraising campaigns. However, homelessness is much more complex and involves several different facets and populations groups.

Every night in Canada approximately 35,000 people are homeless; 235,000 unique individuals on an annual basis. For every person who is absolutely homeless, there are at least three more who fall into the hidden homelessness category (Gaetz, Gulliver & Richter, 2014). Homelessness is a disaster in this country, one that has been recognized by the United Nations. If we fail to act soon, this problem is only going to get worse.

Family homelessness (and therefore homelessness amongst dependent children and youth) is a significant, yet hidden, part of the crisis. Some researchers have identified visible homelessness as only the "tip of the iceberg" of what is a much larger and critical, affordable housing problem in Canada. Numerous studies have shown that many families are forced to live in overcrowded, sub-standard housing and regularly make the choice between paying the rent and feeding the kids.

> Family homelessness is largely underpinned by structural factors, including inadequate income, lack of affordable housing and family violence. Following the withdrawal of government housing programs and decreased supports, more families are turning to emergency shelters (Gaetz et al., 2013, p. 27).

Raising the Roof's Child and Family Homelessness Initiative is a comprehensive, three-year examination of homelessness affecting children and their families across Canada. Much of the research that has been done on homelessness focuses on the adult or youth populations, but family homelessness makes up a significant percentage of the overall homeless population in Canada. Families are also one of the highest risk groups for homelessness given the extreme levels of poverty, food insecurity and housing unaffordability in this country.

The Initiative began with an environmental scan of agencies responding to child and family homelessness, followed by interviews with over 40 service providers, community advocates and academic researchers. This led to the development of our conceptual framework for ending child and family homelessness through the areas of Primary Prevention, Systems-Based Responses and Early Intervention Strategies. Each of these areas is discussed in detail in the body of the full report. We have also identified eight pillars which are connected to all three of the framework components. These are:

- Poverty/Income
- Affordable Housing
- Child care
- Food (In)security
- Discrimination
- Intimate partner violence (IPV)
- Children's Mental Health and Family Wellbeing
- Stigma

We then partnered with eight community organizations from across Canada and interviewed 103 agency staff members and 36 family members who were accessing services at the agencies. In September of 2015, we hosted a two-day Summit with 30 National representatives and 20 Provincial representatives and shared some of the preliminary findings from our research. Attendees were invited to participate in facilitated group discussions and those discussions have been incorporated throughout this report. Their critical insights were taken into consideration as we moved towards developing a set of best practices and recommendations for programs responding to child and family homelessness.

The three areas that make up our framework and the eight pillars are, in many ways, inseparable. If we build affordable housing but do not address Intimate Partner Violence, we will not completely stem the flow of women and children into homelessness. If we only look at downstream solutions instead of prevention we will always be in a reactive mode to the crisis.

We have also dedicated a significant portion of this Initiative to children's mental health. According to the Mental Health Commission of Canada, approx. 1.2 million Canadian children and youth (1 in 5) are affected by mental health, yet less than 20% will receive

appropriate treatment (MHCC, 2016). These numbers are higher for children and youth experiencing homelessness. Studies into youth homelessness have shown that 40-70% struggle with mental health issues compared to 10-20% of housed youth (Gaetz, 2013). Children who are homeless – and their mothers – deal with a wide range of emotional impacts that often go unnoticed and/or untreated because of the transient nature of their lives and housing instability.

Almost half of children (47%) who were homeless had been diagnosed with anxiety, depression or withdrawal, compared to only 18% of children who were living in stable housing (Hart-Shegos, 1999; National Centre on Family Homelessness, 2011; Zima et al.; 1997).

For children and youth experiencing discrimination – such as those who are from Indigenous, racialized or LGBTQ2S communities – the issue is even starker. Suicide amongst young people is the second leading cause of death – representing approximately one-quarter of deaths for those aged 15-24. For Indigenous males the suicide rate is 126 per 100,000 and for Indigenous females it is 35 per 100,000. This contrasts with the rates for non-Aboriginal youth of 24 in 100,000 for males and 5 in 100, 000 for females (Health Canada, 2015).

Solving homelessness amongst children, youth and their families means we can also greatly reduce adult homelessness. Growing up in poverty, encounters with the criminal justice or child welfare systems, experiencing trauma and abuse at a young age as well as being from a racialized or Indigenous background, are all risk factors for homelessness. It is incumbent upon us to take a stand for children to prevent an ongoing, self-perpetuating cycle.

Through this work we hope to develop practical tools and resources that can be used by community organizations and government to encourage promising practices. To that end we have also generated recommendations – both short and long-term for communities, service providers and governments at all levels.

Recommendations for ALL Levels of Government

We recommend that the federal government, in conjunction with the provincial, territorial and Indigenous governments:

1.0 Support and fund national coordinated response and action on Children's Mental Health.

2.0 Develop and fund a National Housing and Homelessness Strategy.

Recommendations for the Federal Government Only

We recommend that the federal government:

3.0 Develop and fund a National Poverty Reduction Strategy focusing on family poverty.

3.1 We further recommend the implementation of a National Housing Benefit.

Recommendations for the Provincial/Territorial Governments Only

We recommend that provincial and territorial governments:

4.0 Implement a “One Child, One Case” policy for all government services.

5.0 Develop a Ministerial Homelessness and Housing Secretariat/Roundtable to Work on Preventing and Ending Homelessness.

6.0 Develop a province/territory-wide Plan to End Homelessness.

Recommendations for Municipal Governments Only

We recommend that municipal (or regional where relevant) governments:

7.0 Review bylaws and municipal practices to ensure a focus on “inclusionary zoning” and development of affordable housing.

8.0 Develop, in partnership with other levels of governments and/or non-profit or private developers, new emergency shelters, transitional and/or permanent housing aimed at families with children.

Recommendations for Community Agencies

9.0 Work to develop a system of care within your local community to provide holistic, wraparound services for clients, including coordinated assessment and common intake.

10.0 Develop trauma-informed services to better support clients and staff.

Introduction – Child and Family Homelessness Initiative

Raising the Roof's Child and Family Homelessness Initiative is a comprehensive, three-year examination of homelessness affecting children and their families across Canada. Much of the research that has been done on homelessness focuses on adult or youth populations, but family homelessness makes up a significant percentage of the overall homeless population in Canada. Families are also one of the highest risk groups for homelessness given the extreme levels of poverty, food insecurity and housing unaffordability in this country.

This initiative began with an environmental scan of agencies responding to child and family homelessness, followed by interviews with over 40 service providers, community advocates and academic researchers. This led to the development of our conceptual framework for ending child and family homelessness in the areas of primary prevention, systems-based responses and early intervention strategies. We then partnered with eight community organizations from across Canada and interviewed 103 agency staff members and 36 family members who were accessing services at the agencies. In September 2015, we hosted a two-day Summit with 30 National representatives and 20 Provincial representatives and shared some of the preliminary findings from our research. Attendees were invited to participate in facilitated group discussions, the outcomes of which have been incorporated throughout this report.

Children who live in homelessness run the risk of doing poorly in school, developing negative health and mental health outcomes, having behavioural issues and struggling to exit poverty as adults. Research into the causes of youth and adult homelessness shows a connection to their living situation and experiences as a child. By focusing on preventing and ending children's homelessness, we are able to stem the flow of people into homelessness in later years.

When we talk about "children's homelessness" and "child poverty" it is important to recognize that unlike youth and adults experiencing homelessness, children are not solo, isolated individuals. Children become homeless when their family – single parent, two or multiple parents or caregiver(s) – becomes homeless. Children live in poverty because their family is poor. Therefore, it is important to understand the experiences of the adult caregivers in these children's lives. Addictions, mental and physical health issues, poverty, Intimate Partner Violence (IPV) and other challenges play a significant role for many of the families experiencing homelessness. Therefore, this report pays significant attention to understanding these issues as well.

Methodology in Detail

There were three main phases included in Raising the Roof's Child and Family Homelessness Initiative. Phase 1 of our plan involved conducting an environmental scan investigating agencies responding to child and family homelessness at the national and

international levels. Following the identification of 147 Canadian agencies and an additional 52 international agencies, we subsequently interviewed over 40 service providers, community advocates and academic researchers. These agencies provided a broad range of organizations focused on eradicating homelessness through the implementation of front-line services, research, or prevention based programming.

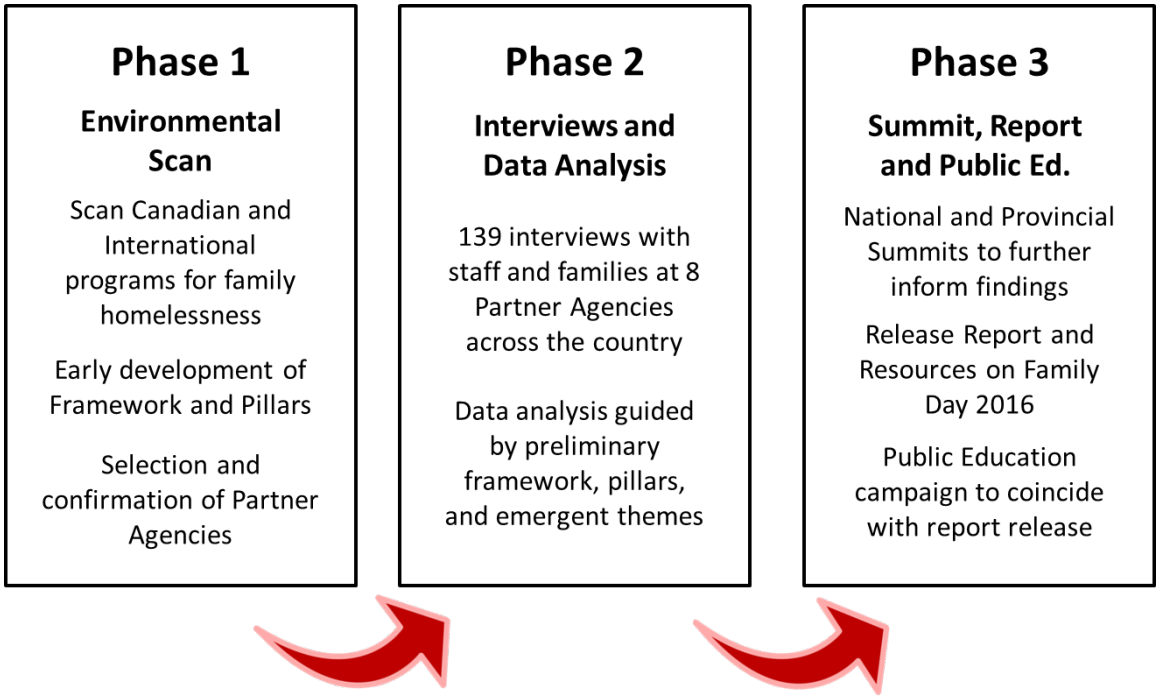


Figure 1 – Phases of Child and Family Homelessness Initiative

The second outcome of the project was to develop a comprehensive conceptual framework that focused on solutions to end child and family homelessness at three levels: Primary Prevention, Systems-Based Responses, and Early Intervention Strategies. The framework included core principles, or fundamental values that should be considered when developing any service to address family homelessness and have provided the critical backbone to this final report. These principles advocate for effective services that are responding to children and families in a respectful manner that empowers individuals in need.

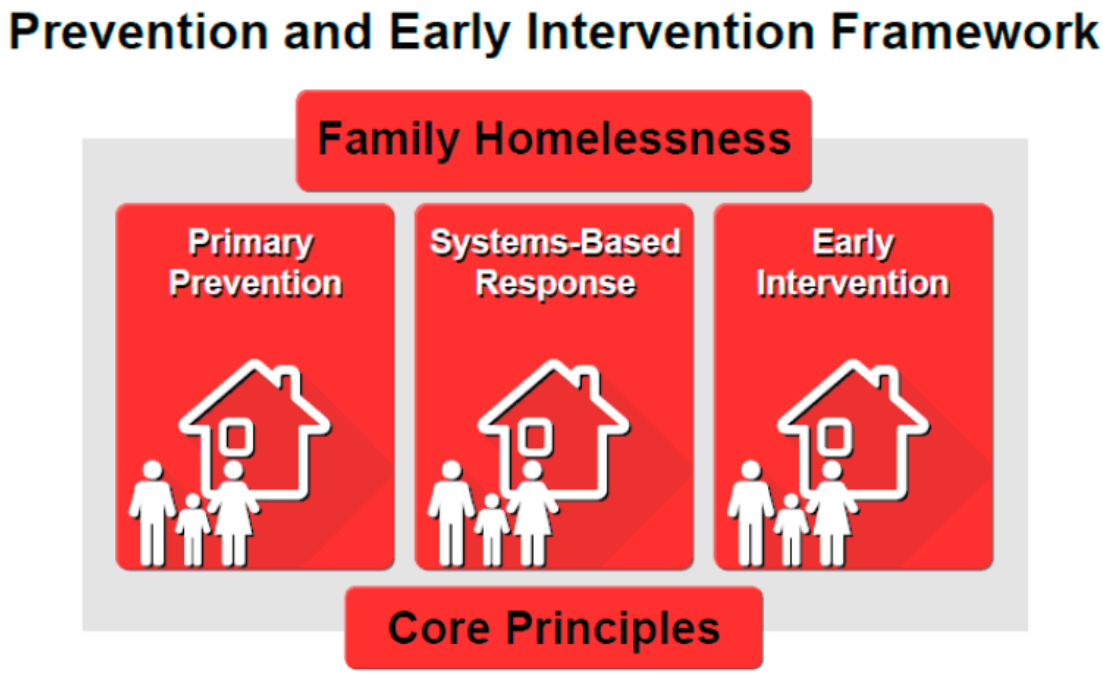


Figure 2 – Child and Family Homelessness Conceptual Framework

After developing our family homelessness framework, we partnered with eight community agencies from across Canada whose work focused on specific elements of Prevention, Systems-Based Integration, and Early Intervention. These agencies provided a representative sample of agencies from across the country (including the Northern territories) that were using a variety of different strategies and services to address at-risk families in their communities. The agencies are identified throughout the report with the following symbol:

The agencies we partnered with were:

- Campaign 2000: End Child and Family Poverty in Canada
- Ending Violence Association of British Columbia
- Family Enrichment and Counselling Services Fredericton Inc.
- Homeward Trust Edmonton
- Port Cares
- Wabano Centre for Aboriginal Health
- Young Parents No Fixed Address
- YWCA Yellowknife

Through these partnerships, we were able to interview 103 agency members and 36 family members who were accessing services at the agencies. The interviews were used as an opportunity to identify strengths and weaknesses of the current system of responses and to inform our understanding for opportunities for growth and improvement.

Once the 139 audio recordings had been transcribed, all interviews were then uploaded to NVIVO, a qualitative data analysis program. The data analysis component of this project involved both broad based and granular analyses. Using the framework and initial common word searches, each interview was analysed to generate themes that aligned with specific aspects of primary prevention, systems-based prevention, and early intervention. Direct quotes were grouped into different thematic 'nodes' and have been combined with supplementary research, facts, numbers, and figures, to provide the original source material used to generate the final report.

In September 2015, we hosted a two-day Summit with 30 National representatives and 20 Provincial representatives from Ontario. In addition to panel and keynote speakers, we presented some of the preliminary findings from our research. Attendees were also invited to participate in facilitated group discussions to help inform our original research. Their critical insights were taken into consideration as we moved towards developing a set of best practices and recommendations for programs responding to Child and Family Homelessness.

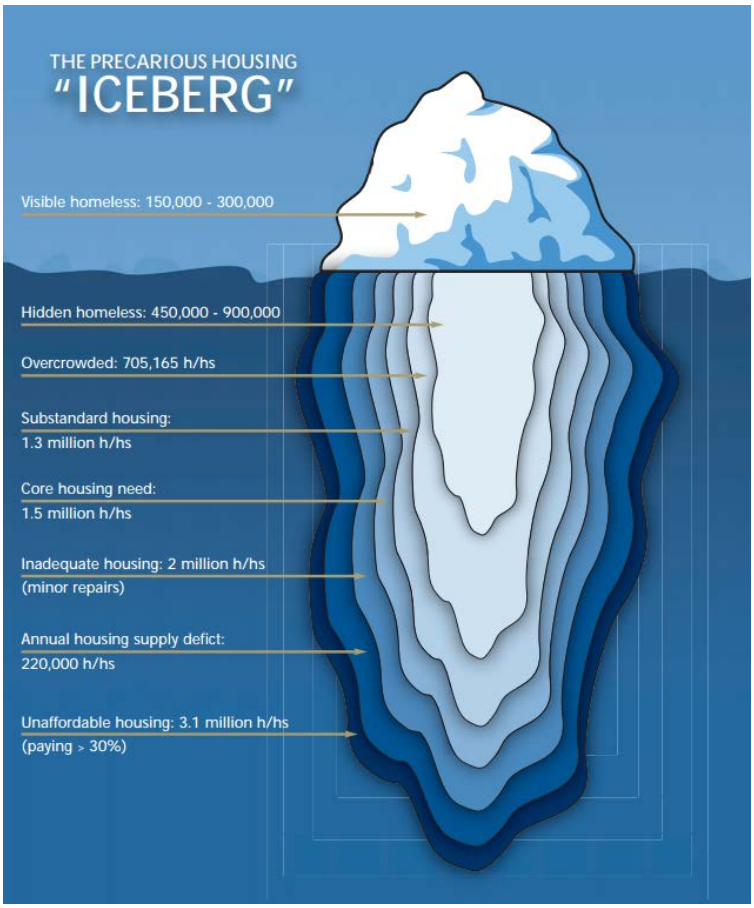
Finally, through this work we hope to develop practical tools and resources that can be used by community organizations and government to encourage promising practices. To that end, we have also generated recommendations – both short and long-term for communities, service providers and governments at all levels. These recommendations are found at the end of the report and are also indicated throughout the report using the following symbol:

Background on Family Homelessness in Canada

> "Low incomes and lack of affordable housing are key causes of homelessness; violence, especially partner abuse, precipitates homelessness for many women and families; discrimination in housing and job markets limits access to adequate housing for lone mothers, immigrants, and racialized people; and homelessness is deeply stressful, having lasting effects on people's sense of belonging in society, their well-being, their family relationships, and children's schooling and development" (Paradis et al, 2008, p. 1).

When most people think about homelessness in Canada, they picture an older, single man (usually white) sitting on a street corner. Indeed, this image is often perpetuated through media and public service announcements. However, homelessness is much more complex and involves several different facets and populations groups.

Every night in Canada, approximately 35,000 people are homeless; 235,000 unique individuals on an annual basis. For every person who is absolutely homeless, there are at least three more who fall into the hidden homelessness category (Gaetz, Gulliver & Richter, 2014). Homelessness is a disaster in this country, one that has been recognized by the United Nations. If we fail to act soon, this problem is only going to get worse.



Family homelessness (and therefore homelessness amongst dependent children and youth) is a significant, yet hidden, part of the crisis. Some researchers have identified visible homelessness as only the "tip of the iceberg" of what is a much larger and critical, affordable housing problem in Canada. Numerous studies have shown that many families are forced to live in overcrowded, sub-standard housing and regularly make the choice between paying the rent and feeding the kids.

Figure 3 – The Precarious Housing Iceberg
Source: Wellesley Institute (2010)

The Canadian Definition of Homelessness states "homelessness describes the situation of an individual or family without stable, permanent, appropriate housing, or the immediate prospect, means and ability of acquiring it. It is the result of systemic or societal barriers, a lack of affordable and appropriate housing, the individual/household's financial, mental, cognitive, behavioural or physical challenges, and/or racism and discrimination" (Canadian Homelessness Research Network, 2012, p.1).

Through creating a typology of homelessness, the definition shows that homelessness is not a static state but rather "describes a range of housing and shelter circumstances, with people being without any shelter at one end, and being insecurely housed at the other" (CHRN, 2012, p. 1). People often move in and out of the different stages on the continuum of homelessness before finding stable, secure housing.

The typology of homelessness as outlined in the Canadian Definition of Homelessness includes:

- **Unsheltered**: This refers to individuals or families who are 'absolutely homeless' and live outside, or in sheds, cars and other places not intended for people to live in.
- **Emergency Sheltered**: This means that the individual or family is residing in some form of overnight shelter whether it be for people experiencing homelessness or those who have been affected by intimate partner violence.
- **Provisionally Accommodated**: This stage refers to people who are living in an environment where the accommodation is temporary or 'lacks security of tenure' which could include people residing in jails, hospitals or other institutions.
- **At Risk of Homelessness:** The individuals and families who are at risk of homelessness are housed but their living situation (as related to housing or economics) is very precarious, or that the housing they are living in does not meet basic safety or public health standards.

Furthermore, "feminist scholars note that definitions of homelessness must recognize the situation of women who may be physically housed, but lack the security, ownership, control, protection, and privacy considered to be fundamental aspects of 'home.' This definition includes women and youth who face gender-based violence and other forms of abuse in their home. Housing problems are also strongly associated with the apprehension of children by child welfare agencies. A gendered understanding of homelessness takes into account the effects of inadequate housing on children, and the difficulties lone-parent mothers face in securing housing that is safe, affordable, and appropriate for themselves and their children" (Paradis, Wilson and Logan, 2014, p.3).

Most reports and Point-in-Time (PiT) counts[1] that set out to enumerate the homeless population severely undercount the number of families who are experiencing homelessness. The nature of the methodology involved in counting generally does not allow for consideration of people living in a hidden homelessness situation and often, even Violence Against Women shelters are excluded from the counts.

What we do know is that the crisis is growing rapidly. The usage of emergency shelters by families (often female-led, single parent families) increased significantly over the past decade. Between 2005 and 2009, shelter use by children increased by over 50% from 6,205 to 9, 459 in Canada (Segaert, 2012).

Families also stay in shelters three times longer than other groups with the average length of stay being 50.2 days, a 50% increase over a five-year period (Segaert, 2012). The State of Homelessness in Canada: 2013 report indicated that "families accounted for just 4% of all shelter stays, [not including Violence Against Women facilities but] they used 14% of total bed nights" (Gaetz et al., 2013, p. 27). This rapid growth in many communities has caused the family shelter system to have problems responding to the needs.

Two Northern prevalence studies which examined homelessness through interviews at food banks, shelters, drop-ins, meal programs and other homeless serving agencies in Timmins and North Bay, paint a very different picture than what is normally found in typical one night "snapshot" Point-in-Time counts.

The Timmins study, conducted in January 2011, identified 257 children (36.5% of the total sample) 14 years of age and under who were either absolutely homeless or at high risk of becoming homeless. Over half (51%) of those in the absolutely homeless category were children and youth under the age of 19 (Kauppi et al., 2012).

Similarly, the North Bay prevalence study – conducted in July 2011 – saw a much higher number of women and children than is usually found in a PiT count. One out of five participants (101 people) was under the age of 10. 39% of those who were absolutely homeless were under the age of 18 (Pallard & Kauppi, 2014).

Prevalence studies provide a more in-depth look at homelessness than a PiT count, but they still do not capture the full picture of risk. According to the Wellesley Institute's 2010 'Precarious Housing' report, 1.3 million Canadian households live in substandard housing and 1.5 million households live in inadequate housing. At the time of the report there were over 3.1 million households live in unaffordable housing where they are paying more than 30% of their household income on housing costs (i.e. rent, utilities,

[1] A Point-in-Time count provides a snapshot of homelessness in a given community. Usually it is a one day/night count that enumerates number of people staying in shelters or other facilities (i.e. jails, hospitals, transitional housing) or sleeping rough on the streets. For more information see: http://homelesshub.ca/pitcounttoolkit

mortgage). That is, 1 in 5 Canadian households lived in unaffordable housing; the situation has not improved in the past several years.

Housed families who are at risk of homelessness often suffer from one or more types of housing problems including:

- "**Overcrowding:** While sharing a home can enhance social support and extend resources, living in overcrowded conditions also increases stress and conflict, limits privacy, and makes it difficult for adults and children to find a quiet place for work or study. Newcomers who double up with other families on arrival often find it difficult to move on into places of their own due to discrimination and barriers in employment and the rental market.
- **Bad building and unit conditions:** Elevated homelessness risk was correlated with an increase in the number of repairs needed to housing, and the likelihood that landlords had neglected to complete all necessary repairs. Often, repairs were not completed after repeated requests and even formal complaints by tenants.
- **Unaffordable housing:** Affordability drives families' housing choices, forcing them to compromise safety, space, and decent conditions just to keep a roof over their children's heads. Furthermore, housing and hunger are directly connected; many parents mentioned using food banks or skipping meals to pay the rent.
- **Unsafe housing:** Events of theft, harassment, and assault were much more commonly reported by those in the higher-risk categories. Abuse by partners and other family members is the most common cause of homelessness among women and families.
- **Insecure housing:** Of all indicators, being behind in the rent was the most strongly correlated with critical risk of homelessness. Service providers noted that in a competitive rental market, a history of eviction can make it almost impossible for families to find new housing. Shelter workers are often forced to re-house families in poor-quality buildings because these are the only places that will accept tenants with such a history" (Paradis, Wilson and Logan, 2014, p. iv-v).

What these facts point to is the need for a shift towards *preventing* homelessness as opposed to simply *reacting* to it. Homeless services too often focus on providing support to individuals and families *after* they become homeless, rather than focusing more upstream on the factors that exist which may lead to homelessness. Housing precarity, low vacancy rates, sub-standard housing conditions and low incomes are all part of the structural factors that lead to homelessness. Any conversation about solving homelessness needs to include a discussion about how to prevent it. And any conversation about prevention must include initiatives to address the lack of affordable, social housing and income access issues in Canada.

Causes of Homelessness

So what do we mean when we talk about individual behaviours, systemic failures and structural factors? How do they lead to or exacerbate homelessness? How can we understand the causes of homelessness and their interconnectivity? To understand this in a Canadian context we turn to the excellent work conducted by Professor Stephen Gaetz and his team at the Canadian Observatory on Homelessness.

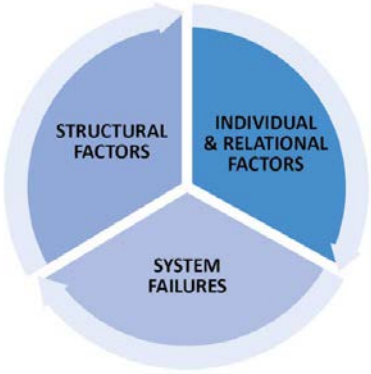


Figure 4 – Causes of Homelessness
Adapted from Gaetz et al., 2013, p. 13

The pathways into or out of homelessness are different for every child and family. Homeless families are not a homogenous group and often share very little beside their extreme vulnerability including "lack [of] adequate housing and income and the necessary supports to ensure they stay housed. The causes of homelessness reflect an intricate interplay between structural factors, systemic failures and individual circumstances. Homelessness is usually the result of the cumulative impact of a number of factors, rather than a single cause" (Gaetz et al, 2013, p. 13).

The authors then explain the differences between structural factors, systemic failures and individual circumstances.

Structural Factors

"Structural factors are economic and societal issues that affect opportunities and social environments for individuals [and families]. Key factors can include the lack of adequate income, access to affordable housing and health supports and/or the experience of discrimination. Shifts in the economy both nationally and locally can create challenges for people to earn an adequate income, pay for food and for housing. Homelessness and poverty are inextricably linked. People who are poor are frequently unable to pay for necessities such as housing, food, childcare, healthcare and education. Being poor can mean a person is one illness, one accident, or one paycheque away from living on the streets" (Gaetz et al., 2013, p. 13).

> Family homelessness is largely underpinned by structural factors, including inadequate income, lack of affordable housing and family violence. Following the withdrawal of government housing programs and decreased supports, more families are turning to emergency shelters (Gaetz et al., 2013, p. 27).

Systems Failures

"Systems failures occur when other systems of care and support fail, requiring vulnerable people to turn to the homelessness sector, when other mainstream services could have prevented this need. Examples of systems failures include difficult transitions from child welfare, inadequate discharge planning for people leaving hospitals, corrections and mental health and addictions facilities and a lack of support for immigrants and refugees" (Gaetz et al., 2013, p. 13).

Individual and relational factors

"Individual and relational factors apply to the personal circumstances of a homeless person, and may include: *traumatic events* (e.g. house fire or job loss), personal crisis (e.g. family break-up or domestic violence), mental health and addictions challenges (including brain injury and fetal alcohol syndrome), which can be both a cause and consequence of homelessness and physical health problems or disabilities. Relational problems can include family violence and abuse, addictions, and the mental health challenges of other family members and extreme poverty" (Gaetz et al., 2013, p. 13).

Why Does It Matter?

Homelessness can be an incredibly destructive force for any individual, but this is particularly true for parents and children. Recent research has shown that while many people become homeless as a result of traumatic issues, homelessness in and of itself is often considered a cause of trauma.

Depression or PTSD amongst mothers –the largest group of homeless parents are single women—leads to negative outcomes in their children. These include:

- Poor health
- Emotional and behavioral disorders
- Cognitive vulnerabilities
- Difficulties forming secure attachments
- Lack of school readiness
- Poor school performance

(source: Olivet, 2015)

The high levels of negative mental health issues caused by homelessness is one of the reasons that we, along with our partners at the RBC Foundation, have chosen to create a specific focus on children's mental health within this report. Discussions specific to children's mental health will be denoted with the following symbol throughout the report, but are also available in a supplemental document – titled *Child and Family Homelessness: A Determinant of Children's Mental Health* – that has been released in conjunction with this report:

Homelessness, especially family homelessness, impacts all of us. The long-term impact on the individuals creates a greater burden on society. We all pay the cost when children have difficulties learning in school or develop poor health outcomes. By focusing on preventing homelessness we are better able to not only reduce expenditures but to make the future better for children and their families.

The Framework and Symbols

We are using a variety of symbols throughout the document to help show the interactive complexity of these issues.

There are three components to the framework:

Primary Prevention

Systems-Based Responses

Early Intervention Strategies

Each of these is outlined below along with the eight pillars that were identified through our interview process:

Poverty/Income

Affordable Housing

Food (In)security

Child care

Intimate Partner Violence

Children's Mental Health and Family Well-being

Stigma

Discrimination

It is important to understand that the three components and eight pillars are all interlinked and interdependent. Resolving one area may improve the overall situation for homeless families and children, or those at-risk of homelessness, but it does not solve the entire crisis.

Initially, we identified the eight distinct pillars as falling specifically within the Primary Prevention component of our framework. Yet, as we continued to work through this report, we came to understand that there is such tremendous overlap between the pillars and the three components of Primary Prevention, Systems-Based Responses and Early Intervention Strategies that we cannot separate them. While they fall within the

Primary Prevention section of this report, they are certainly relevant when identifying Systems-Based Responses and Early Intervention components as well.

The Three Components of the Framework

Primary Prevention Overview

The overall goal of primary prevention is to 'work upstream'[2] in order to reduce risks to individuals, families and communities. Primary prevention activities may be targeted specifically at an 'at-risk' community, or they may be interventions directed at society as a whole. For example, a targeted activity could include a rent bank for low-income families or energy support programs for those facing energy poverty. On the other hand, poverty reduction strategies or anti-discrimination campaigns are aimed more broadly.

Primary prevention also means looking at all of the various causes of homelessness – not just individual behaviours but also systemic barriers and structural failures – that have led to a large homeless population. As a society, we are failing homeless families, and Canada's so-called "safety net" has many holes. If we fail to act, there will always be new families entering into the cycle of homelessness and families already entrenched in the system will find it increasingly difficult to exit homelessness. Front-line staff, no matter how hard they work or how successful their programs are, will essentially be running in circles to meet the same needs of repeat clients: income, affordable housing, food security, healthcare, child care etc.

Systems-Based Responses Overview

Systems-Based Responses refers to addressing homelessness (and related issues such as poverty, housing, and mental health) in a collaborative and cross-sectoral manner. "A "**system of care**" is a strengths-based, culturally relevant, participatory framework for working with individuals with complex needs. A system of care approach utilizes inter-agency collaboration, individualized programming and community-based service provision" (Homeless Hub).

Although traditionally designed for children and youth in the mental health sector, systems-responses have been adapted to the homelessness sector. It provides a way of doing things differently within one level (or more) of the community: municipal, provincial/territorial, national. "As a method of organizing and delivering services, housing, and programs, it aims to coordinate resources to ensure community level

[2] There is a parable of sorts told (with many variations) in the helping professions of two people who are walking along a river when they see someone in the water drowning. They pull them out but then see someone else caught in the current also drowning. They pull that person out as well, but then see another person, and another, and another. Soon they are surrounded by people who have come down the river. Eventually one of them decides that they need to go "upstream" to figure out why all of these people are coming "downstream". Providing services after someone is already homeless is therefore considered to be a downstream solution, while examining systemic barriers and structural causes that lead to homelessness and trying to prevent those is considered an upstream response.

results align with 10 Year Plan goals and meet client needs effectively" (Calgary Homeless Foundation, 2014, p. 2).

Systems Integration aims to:

- align services to avoid duplication.
- improve information sharing.
- increase efficiency (e.g. reduce wait-times).
- provide a seamless care experience for individuals and families. (Homeless Hub)

Early Intervention Overview

Early intervention is also known as "secondary prevention". It is a means of identifying and addressing problems and conditions shortly after they occur or when they are at clear risk of occurring. When the strategies do not help a family retain their housing, the goal is to use rapid rehousing to ensure families are only homeless for a short duration and are quickly moved into appropriate, safe and affordable accommodation.

According to the Canadian Observatory on Homelessness, "elements of effective early intervention include: coordinated assessment, case management and shelter diversion strategies such as host homes. Key supports can include family mediation, rent banks and landlord-tenant mediation" (Homeless Hub). Systems prevention is a key component of early intervention strategies.

Another way of thinking about early intervention is to consider it as a means of "preventing escalation". That is, working quickly to avoid someone becoming entrenched in homelessness.

Primary Prevention

Primary prevention refers to the need to prevent people from **becoming** homelessness, not simply providing support services after-the-fact. Understanding the various root causes of homelessness – including each of the eight pillars we identify – is imperative in being able to address homelessness before it happens.

Our current response to homelessness (see Figure 5) is primarily focused on Emergency Response, costing Canadians over $7 billion annually (Gaetz et al., 2013). When we only respond to the existing problem of homelessness instead of trying to prevent it, we get trapped in a never-ending cycle.

Figure 5 – Our Current Response to Family Homelessness
Adapted from Gaetz, 2013, p. 20

A better and more proactive response to homelessness (Figure 6) steps back from emergency response and imagines what would happen if we shifted our emphasis to prevention and to providing housing (with supports) to address the crisis in a more humane manner.

There is an overlap between strategies that could be labelled as Primary Prevention and those that fall into the Early Intervention (Secondary Prevention) category. For example, eviction prevention is often considered an Early Intervention strategy, but ideally, community agencies would be able to utilize eviction prevention programs to ensure that families do not become homeless at all. Similarly, systems prevention – ensuring that governmental and community systems are not discharging people into homelessness – could fall under either primary or secondary prevention.

Figure 6 – A Better Response to Family Homelessness
Adapted from Gaetz, 2013, p. 20

Evictions Planning and Prevention

Eviction prevention programs can help keep families in their homes, avoiding homelessness. These programs are usually available to low-income renters but occasionally are also available to homeowners. There are a number of different eviction prevention strategies including:

- Rent Banks – short term loans or grants to pay rent or rental arrears (occasionally these are also used for start-up costs such as a rent deposit).
- Eviction Programs – aid to tenants to help them understand the eviction process (particularly useful for new Canadians, people with low literacy or those who speak English as a second language who are unable to understand the written notices provided by the landlord).
- Energy Assistance – programs that help cover the cost of utilities for low-income clients.
- Credit counselling agencies that can help families create a budget and deal with creditors, often freeing up some monthly income.
- Landlord Mediation – programs that help tenants and landlords resolve disputes before the landlord proceeds to an eviction.

Understanding the Interconnectedness of Homelessness and Prevention

Many of the front-line support workers interviewed agreed that homelessness does not occur in a vacuum. Numerous factors precipitating homelessness are interrelated and add to the complexity of managing these populations. In many cases, families are trying to secure housing, a job and three meals a day. It can be frustrating for families who try to navigate the systems of support that are supposed to stabilize their circumstances, but are undermined by systemic and structural factors.

Greg from Campaign 2000 says, “The fact that, you know, we see that there’s not enough affordable housing that’s decent for people to be able to move into, that they, yeah, that they can afford. That there’s lack of income. I mean, we’ve had experience where, you know, participants have no food at the end of the month. Like no food. Their fridge is empty, I mean, it’s not that uncommon, unfortunately, in Ontario.”

As mentioned previously, too often our responses to homelessness have focused on downstream approaches, rather than looking upstream to prevent families from becoming homeless in the first place. To solve homelessness from a prevention standpoint, it is critical that the root causes of homelessness are addressed. Without finding solutions for these issues it will be impossible to solve the homelessness crisis.

In the following section we will outline the eight pillars of the Framework, but keep in mind that each pillar is related not just to the other pillars but is connected to Primary Prevention, Systems-Based and Early Intervention responses.

The Eight Pillars of the Framework

Poverty/Income

In discussing poverty, we want to emphasize that poverty cannot be separated from homelessness. A family that becomes housed but remains in poverty continues to remain at-risk of homelessness. For the millions of Canadians who live in poverty, instable housing is a common thread and homelessness is never far away.

Child and family poverty is growing in Canada. Let that sink in. Child poverty is a growing concern in one of the world's wealthiest countries. Over the years, governments have had the opportunity to intervene; to improve, if not solve the problem. And yet, years of government inaction has resulted in an increasingly worsened situation.

In 1989, a group of concerned citizens, organizations and policymakers lobbied the federal government to eliminate child poverty by the year 2000. The all-party resolution was passed unanimously. New votes were made in 2009 and 2015, along with a commitment to end poverty for all people in 2009. Rather than eliminating poverty, the issue has continued to grow, with only slight improvement in the last couple of years.

Campaign 2000 was formed to hold the House of Commons accountable for the 1989 resolution. Pulling its name from the original goal year, each passing year emphasizes the failure to achieve the elimination of child and family poverty. The consequences of this failure are visible in homeless shelters, food banks, classrooms, hospitals, child care centres and streets across Canada.

By the year 2000, poverty amongst Canadian families had steadily increased. In 2016, over 17 years after the original goal and 27 years after the initial resolution, child and family poverty continues be a significant issue, with the depth of the problem remaining quite alarming.

> "Campaign 2000 has consistently stated that child poverty is not inevitable, but that it is a result of choices. Federal politicians pledged to end child poverty in 1989, 2009 and 2015; but it continues to deprive over 1.34 million children of their only childhood. Choosing to allow child poverty to continue forces children to endure hunger, deprivation and exclusion, and compromises their health and life chances. Choosing to reduce Canada's fiscal capacity rather than to invest in social programs exacerbates inequality. Choosing to cast away almost 1 in 5 children to poverty deprives Canada of the richness of their full contributions" (Campaign 2000, 2015, p. 1).

Partner Agency Spotlight: Campaign 2000: End Child and Family Poverty in Canada

Campaign 2000 was developed in an attempt to hold the House of Commons accountable for the 1989 all- party resolution to end child poverty in Canada by the year 2000. Every year Campaign 2000 publishes a national report card that outlines current rates of child and family poverty in Canada as well as its consequences, offering practical solutions and recommendations to all parties for action.

Campaign 2000 is a non-partisan coalition that works in partnership with over 120 national, provincial and community partners to raise awareness of child poverty and develop policy recommendations.

Several partners across Canada also publish provincial report cards. Campaign 2000 is a public education movement that convenes its partners, conducts research and lobbies the government to address child and family poverty. The primary policy areas addressed by Campaign 2000 include child tax benefits, quality employment, high quality and affordable child care, affordable housing and community services.

> "We have a high hope that it will happen one day. That one day - and I'm borrowing this idea from a colleague of mine - that one day we'll look back on Canada, we'll look back on this time and we'll think to ourselves, 'What were we thinking that we allowed people to be living in poverty? What were we thinking? How were we - how could we think it was okay to not consider these people's human rights? How did we think it was okay not to consider the dignity of these people?'"
> – Michele, Campaign 2000 Partner.

Measuring Poverty

Measuring poverty in Canada has becoming increasingly difficult with the cutbacks by Statistics Canada. The return of the Long-form Census in 2016 is a good step towards being able to understand the depth and diversity of poverty in this country. A representative from Campaign 2000 remarks "So if one wants to drill down and really measure progress, we look at trends every year in our report cards, we look at numbers. It's difficult; I think there was a point in time when there was more agreement among governments and non-government organizations on what measures to use. There are some established measures of income and poverty, although Statistics Canada will tell you they're not measures of poverty. But…to try to summarize it, getting reliable, up-to-date, comparable data has become a major issue, compounded by the loss of the long-

form census and being able to drill down to groups that are at higher risk, or not, of falling into poverty or the kinds of things we used to be able to track – poverty rates among recent immigrants, among Aboriginal peoples. I don't know that we'll be able to do that again."

Child Poverty Rates Across Canada

In 2013, 1,334,930 (19%) of children lived in poverty across Canada, an increase from 1,066,150 (15.8%) in 1989. This rate is even higher in some communities with 37.7% of children in Nunavut facing poverty (Campaign 2000, 2015).

There is some variance in poverty rates across the country, with Nunavut being the highest and the Yukon the lowest (12.7%). Four provinces fall below the national average: Newfoundland and Labrador (18.7%), Prince Edward Island (18.2%), Quebec (14.8%) and Alberta (15.9%). Each of the remaining provinces and territories have higher rates of poverty than the national average including:

- Nova Scotia – 22.5%
- New Brunswick – 21.3%
- Ontario – 20%
- Manitoba – 29%
- Saskatchewan – 25%
- British Columbia – 20.4%
- Northwest Territories – 23.2%

(Source: Campaign 2000, 2015, p. 4)

Child Poverty Amongst Diverse Populations

> "Shamefully, child poverty affects families who are Indigenous, racialized, recent immigrants, affected by disability or led by a female lone parent in disproportionate numbers"
> (Campaign 2000, 2015, p. 3).

Indigenous children are hit particularly hard by poverty, with 40% of Indigenous children nationally living in poverty and 1 in 2 Status First Nations children living in poverty. The June 2015 Truth and Reconciliation Commission of Canada report contains several recommendations aimed at improving the impact of decades – if not centuries – of discrimination, including the impact of the residential school system. "Generations of Indigenous children in Canada have endured grinding poverty due to legally sanctioned racism and attempted cultural genocide" (Campaign 2000, 2015, p. 6).

There is also evidence that other equity-seeking groups disproportionately experience poverty. "The inequities caused by persistent racial and gender discrimination, able-ism and ongoing colonialism translate into greater levels of poverty among children and families who are Indigenous, racialized, recent immigrants, impacted by disabilities or living in female-led lone-parent families" (Campaign 2000, 2015, p. 7). The elimination

of the Long-form Census has challenged the ability to understand poverty in marginalized groups, however the reinstatement of the Census in 2016 should improve this deficit.

What we do know is that many families are marginalized:

- "Median income among female lone parent families is $37,720 – only two-thirds of median income among male lone parent families.
- 16% of individuals accessing a food bank self-identify as First Nations, Métis, or Inuit.
- In addition to Immigration restrictions and back logs, the requirement for a sponsor to have an income that meets the Low-income Cut-Off (LICO), or LICO plus 30%, to sponsor a grandparent, is a barrier to family reunification; family separation contributes to the further destabilization of low-income immigrants.
- Children with disabilities are twice as likely to live in households relying on social assistance and families of children with disabilities are more likely to live in poverty" (Campaign 2000, 2015, p. 7).

For parents who have children with specialized needs, the situation can become even more precarious: "I went into a meeting to discuss my son's special needs, like needing a special needs stroller and help with a special diet and stuff. And I get back, 'So, when are you looking for a job?' I looked at the guy who said that, I said 'you're joking right?' He's like 'No.' I said, 'Do you even know my situation.' He's like 'No.' I said, 'Well, then how the hell can you dictate what I should or shouldn't be doing right now. I have a 24/7, full-time job. EA's get paid a heck of a lot more supporting them, doing 8 hours a day and get to home to their families and enjoy them and have a typical life. I have no prospects of retirement. I have no prospects of sick days. I have to go to the hospital? I get to suffer at home with no care, having to care for my child on top of having to get care for what I need myself. And, I'm forced to support him on $10, 000 a year. And it costs $600/month just to feed him. You do the numbers. You find the time in my life. He goes to school 20 hours a week, over a five day period. What job is going to hire me for 2 hours a day, when they need you work a minimum of 3-4 hours to pay you? How am I supposed to do that? I don't get respite! The father's not in the picture. I don't have family support. What am I supposed to do? And the money you give me doesn't even support my child's needs. And now you're telling me to get a job'" – Family Enrichment Focus Group member.

In these cases, a parent can be providing 24/7 child care and have no time to secure employment or income. These catch 22's were a recurring theme in interviews: parents would try to find child care but couldn't afford it and were told to get a job, but had not time to get a job because they were providing all day support for their child.

Work and Poverty

There is an unfortunate misconception that individuals and families experiencing homelessness are taking from the rich, are lazy, and just want to live off of government

funding. However, all agencies and family members interviewed for this Initiative discussed at length their hope to secure employment immediately or in the near future. A large proportion of homeless adults were trained and skilled workers but an unforeseen set of circumstances had led them into homelessness. “Once we started this piece, we noticed that a lot of gentlemen in their mid 40's or 50's, they have some kind of trade, so either they are cooks, they are welders they are this and they just hit basically…most of what I have seen they have one instance after another happen to them, then they are homeless. It's not even that they weren't willing to work, it's just that they had too much stacked up against them at once. So there's that piece” (Focus Group participant).

It is often said that child poverty and homelessness could be solved if parents ‘just got a job’. However, a full 37% of children who live in poverty have an employed parent working full-time, year-round. Unfortunately, the recent trend has been towards temporary, part-time and precarious work and the low minimum wage makes it hard to get ahead. “Since 2009, nearly 75% of all jobs created have been part time, temporary or self-employed” (Campaign 2000, 2015, p. 9). This makes it harder for families to get ahead.

Over two million workers are employed in temporary jobs while nearly one million are holding down two jobs. Yet, “low wage work makes it difficult for parents to spend time with their children, afford and schedule childcare and budget for household expenses” (Campaign 2000, 2015, p. 9).

This is exacerbated for already vulnerable populations with racialized workers earning less than non-racialized workers (81.4 cents on the dollar). There is also a gender pay gap – currently 31.5% in Ontario, for example (Campaign 2000, 2015).

Minimum wage rates vary across the country, but none are considered an adequate living wage. Even in areas where housing costs are very low, there is rarely enough income to sustain oneself, let alone a family. “Full time work at minimum wage leaves workers in poverty in every part of Canada” (Campaign 2000, 2015, p. 9).

For people receiving social assistance, this is even harder. A representative from Campaign 2000 says “social assistance is far from a guarantee of being out of poverty. A job is far from a guarantee; like, all of these things that we used to think protected people from poverty, now we know, does not protect people from poverty.”

The precarious nature of being a single parent with no social support was apparent when one family member discussed being fired from her job because she had to care for her sick child. “I was forced to quit my job because I was trying to do it all on my own but trying to work. At one point, my son got sick, he couldn't go to daycare. I had to stay home. My job pretty much told me I was unreliable because I wasn't at work. I couldn't pay the rent, and I was forced to quit my job because I was apparently unreliable. And

so, I had to go on Ontario Works and go into a shelter because I got evicted from my place just to be able to get into Ottawa Housing. Just so I could have geared-to-income rent."

In some cases during the interviews, it did not make sense for parents to find employment. They would potentially lose their subsidy for child care services and only be able to find employment at a minimum wage job while still having to try and care for multiple children. It was physically impossible. "They won't earn enough either way. We are talking about if they are going to make minimum wage if they have children, they are dependent somehow on getting subsidy to have children in daycare to then be able to work at a job that is minimum wage and 9-5. It's just almost impossible" – YPNFA Focus Group.

Impact on Families

Frustration was often palpable in many of the interview focus groups. Family members recognized the extremely difficult and sometimes helpless nature of their situation, remarking that they felt as though they were always taking two steps forward and one step back. "What I see happening here is, we've a got a gap that's rapidly growing, and we have our poor and we have our rich. The middle class is dissolving. And they're forcing you - the working poor, they're making it so difficult to be the working poor that you're being forced to absolute poverty. And the rich are getting richer. And between this gap, there's that total division. And there's no difference between these people and these people. They were raised in the same country, and the same education, and the same way. There's no reason!" – Family Enrichment Focus Group

The resiliency of many of these families interviewed was remarkable. Of course, that resiliency can only be stretched so far. "Tackle a job, friends, this, that, all at once. You got to take it in strides. Just like a hockey game, when you're down six-one in the third period, and you want to make a comeback, you're not going to score five goals in five seconds. You got to get that first one, then get another one, and by the time you know it, it's two minutes left in the period: you got a tie game. You might go to overtime, you know what I mean? So, always before, I tackled- I never had so many problems at once. So they were easy to tackle when a problem came along, because it was one here, one there and they were pretty small. Losing my job was, where I used to live, losing my friends, losing my dad, was all too much at once. I tried to fix it all at once and it was too much of a stress because nothing was working out, because I'm trying to tackle too much at once" – Yvon from Port Cares.

In some cases, finding housing did nothing to resolve the level of poverty and may in fact exacerbate it due to the high costs of rent. One study by Paradis et al. (2008) stated, "perhaps the most disturbing conclusion of this study is that, in some respects, mothers and families living in poverty are actually "better off" in shelters than they are in their own homes. Although women in the study stated that shelter life was stressful and

difficult, they and their children were often safer, more stable, better fed, better served, and living in better physical conditions in shelters than they had been in their pre-shelter housing and even in the housing they found after leaving the shelter" (p. 2).

A sense of hopelessness can be a constant reminder of the unbearable situation that many of these families are living in "You know that...it's like an oppressive cloud, we walk through our entire lives, 100% of our lives, living in this cloud, where there is never a sunny day. It's never clear because something is always there to hit me, so imagine living like that…we know what it was like to be poor, so it's that depression is constant and never goes away. And then if you can't feed your kid, your kid has no lunch, it just spins out of control and then there is health problems and pain problems and everything else and there is no light at the end of the tunnel, there is no way you are getting out of it" – Focus Group at Wabano.

Family members spoke about how they felt like an outcast or that they were consistently letting their children down when they were unable to secure a job. Parents felt isolated from society, and the constant pressure for the next paycheque and care for their children was an extremely stressful situation. "Yeah. I feel like I'm a part of the community again. I was feeling like an outcast, you know what I mean? I'm not contributing to my pension; I'm not contributing to social that pays the welfare checks and the EI checks and infrastructure. I felt like I had no purpose; sitting at home watching hockey that was on TV all day. I would go out and job search and drop off a resume here and there, here and there" – Yvon from Port Cares.

Progress and Solutions

There are some promising indications that our country is moving in the right direction: 12 out of 13 provinces and territories have introduced a poverty reduction strategy; only British Columbia has not (Campaign 2000, 2013). These poverty reduction strategies focus on the same kinds of issues talked about in this report – lack of housing, expensive child care, low incomes and food insecurity. By addressing systemic poverty in Canada we can begin to move towards ending homelessness for children and families.

Not One-Size-Fits-All

Poverty is very personal and does not affect all families equally. Several family members stressed the need for services to provide customized services that can adequately respond to the specific needs of every family. "Assess the need, rather than a one-size fits all but only helps those who needs it least, and doesn't help those who need it most." –Family Enrichment Family Focus Group.

We need to move away from standard cookie-cutter programs and start developing progressive services that have the capacity to integrate a variety of services that offer wraparound support and can manage complex cases and family situations. This will be discussed in more detail in the Systems-Based Responses section.

Proactive versus Reactive

In the past, many programs have tried to reactively manage homelessness by waiting for families to leave their homes. “Let me tell you about my situation. They said, it's a "2, 2 and a half year wait" and I said "It's an emergency! I'm being evicted and I'll be homeless and I'll lose my child" And they say "Oh sorry, well until you're homeless, you're not considered an emergency." I said, "Well, by then I've already lost my child, I've already lost everything" – Family Enrichment Focus Group.

We need to start reconceptualising how we develop programs that address precarious situations and implement preventative programs that will protect individuals from being evicted from their homes. This is not to say that there will never be a need for emergency services, shelters, and food banks, but if we can start redirecting government funding into preventative programs, we will be able to proactively assist families and children before they ‘fall through the cracks’.

Employment

Some agency members work with clients to identify employment opportunities. In many cases, clients had not worked in years and were finding it difficult to secure employment. “It's individualized, this is your return, because they've identified their goals, they've identified their barriers, they've identified what they can do and what can't do. You know what I mean? It's all about them. And so we formulate this return to work action plan based on their needs, on their wants. And then here, it's agreed upon, it's signed by both of us, here, this is yours. So they kind of leave the office with a sense of "maybe I can, maybe I can do this " – Sheila from Port Cares.

Support Services

Previous models of homeless sector agencies often provided basic needs but did not offer any additional services. However, Wabano’s clients spoke at length about the organization’s goal to provide more than basic needs. The organization prides itself on being able to provide social capital services, by developing clients working strengths and supporting clients by providing them with several transferable employment skills. “Don't give people handouts, give them a hand up. Right. I started coming to programs here because of handouts but then the people here gave me skills and helped me build up my skills so then I could go out and get a job. I didn't graduate high school until last year so finding a job wasn't always the easiest but because of the skills I learned here and I was able to put volunteering here down on a resume I was able to get work. So if you are just giving people free stuff all the time, I mean yes it will help them in the short run but you've got to give them skills they can use in the outside world and then they can get a job and then that will help them up” – Dion from Wabano.

Self-Sufficiency

Creating self-sufficiency is a major goal for most organizations. “So, slowly we ween off our services. Rather than us paying the bills directly, we'll give them a copy of the bill and let them know that there's an extra amount on your cheque and that has go towards the bill and they'll go to the bank and pay it themselves. So, eventually, they are completely self-sufficient again and they're able to keep track of their bills and to sustain their housing that way” – Port Cares Focus Group.

National Housing Benefit

In the State of Homelessness in Canada: 2014, the authors proposed the development of a housing benefit to support low-income individuals and families who are homeless or at risk of homelessness.[3] This benefit would be a new program to support those who have issues of severe affordability in their current housing and would be administered through the Canada Revenue Agency, in a manner similar to the Child Tax Benefit, GST payments, etc.

This benefit would be available to both homeowners and renters and would differ in amount based on housing costs, size of the family unit and household income. The housing benefit could be deposited directly into the recipient’s bank account on a monthly basis. According to Londerville and Steele (2014) “the maximum income for a family of two adults and two children would be under $36,000 while a single would need to make less than $22,000. Recipients would be expected to make a reasonable contribution towards the cost of their housing – for example 30% of their income – and the housing benefit would cover 75% of the difference between the actual housing costs and the contribution” (as cited in Gaetz, Gulliver & Richter, 2014, p. 58).

Londerville and Steele (2014) have calculated the cost of this housing benefit at $871.08 million annually for renters and $247.92 million annually for low-income homeowners.

Recommendations Related to Poverty/Income

Recommendation 3.0 - We recommend that the federal government Develop and fund a National Poverty Reduction Strategy focusing on family poverty.

Recommendation 3.1 – We recommend that the federal government implement a National Housing Benefit.

Recommendation 9.0 – We recommend that community agencies work to develop a system of care within their local community to provide holistic, wraparound services for clients, including coordinated assessment and common intake.

[3] For more information on the concept of the Housing Benefit, the impact, costs etc. see both Gaetz, Gulliver & Richter (2014) and Londerville & Steele (2014).

Affordable Housing

Housing solves homelessness. While it may sound like a truism, the fact of the matter is that at the core of all homelessness is the lack of safe, secure and affordable housing. There are a variety of reasons why people may have lost their housing in the first place or why they have problems maintaining housing, but an imperative part of preventing homelessness is ensuring that there is a sufficient quantity of available and affordable housing for all who need it. This lack of housing means "…family shelters, which were intended to function as a crisis intervention of last resort, are in fact functioning as transitional and supportive housing for certain types of families" (Paradis et al., 2008, p. iii).

Decline of Social Housing

Unfortunately, in the past few decades Canada's federal government, in particular, has decimated the social housing playing field. From a heyday in the late 1980s/early 1990s when thousands of units of affordable social housing were built annually, we have dropped to mere handfuls of housing being built in communities across the country.

> "The policy shift with the most profound impact on homelessness has been the reduction in the investment in, and overall supply of, affordable housing (including private sector rental and social housing). Key here was the dismantling of Canada's national housing strategy in the mid-1990s. This began with the gradual reduction in spending on affordable and social housing (including support for co-op housing) in the 1980s, culminating in the cancellation of the program in 1993 and the transfer of responsibility for social housing to the provinces in 1996. The government's housing policy shifted from direct investment in housing to a monetary policy (low interest rates) and tax incentives to encourage private home ownership. Michael Shapcott notes that in 1982, all levels of government funded 20,450 new social housing units. By 1995, the number dropped to approximately 1,000, with a modest increase to 4,393 by 2006" (Wellesley Institute, 2008 in Gaetz et al., 2013, p. 15).

Emergency Shelter Use

The lack of new social housing and the decrease in support programs has required more individuals and families to turn to the emergency shelter system. "A significant finding from the Segaert study [of shelter usage over a period of years] was that the sharpest increase in shelter use has been amongst families (in most cases headed by women) and therefore children" (Gaetz et al., 2013, p. 27).

One in seven shelter users is a child (Segaert, 2012). For thousands of children, this means living in emergency shelters is a normal part of their childhood experience. But the loss of security that children should gain from having permanence of place results in negative mental health consequences. There has been an increase of more than 50% of

the number of children staying in shelters (from 6,205 in 2005 to 9,459 in 2009). It is expected that these numbers are even higher now.

Families also stay in shelters longer than individuals. “Segaert identifies that the average length of shelter stay for families was 50.2 days, an increase of 50% over five years, and more than triple the average stay for the total population of people who experienced homelessness. This means that while families accounted for just 4% of all shelter stays, they used 14% of total bed nights” (Gaetz et al., 2013, p. 27).

It is important to note that Segaert’s study did not capture data related to family usage of Violence Against Women shelters. A 2010 Point-in-Time count of Violence Against Women shelters found that “7,362 beds were occupied by women and children” (Gaetz et al., 2013, p. 24).

As a response to homelessness, emergency shelters have become a necessary evil. Conditions in shelters are not always good, particularly for families and children. While congregate living may be suitable for short-term emergencies –such as a natural disaster – shelters do not provide an atmosphere suitable to long-term accommodation.

Primary prevention means diverting families into housing, not simply funneling them into emergency shelters. “But, I mean, we know now that families that have children that, where children that stay in shelters are more likely to be shelter users as adults. We know that there’s all kinds of health issues and mental health issues, and then the whole piece about changing schools and lack of educational success as well as all of the stress that impacts on families who are experiencing homelessness” – Lynn from Campaign 2000.

Affordability

Many people are simply unable to afford their housing for reasons outlined in the previous section on poverty. “The primary reason for housing precarity is affordability; the intersection of low incomes and high housing costs – which includes rent/mortgage payments, but also utilities, and in some cases, maintenance and taxes” (Gaetz, Gulliver & Richter, 2014, p. 43).

The Canada Mortgage and Housing Corporation (CMHC) provides the following definition for core housing need: when housing “falls below at least one of the adequacy, affordability or suitability standards and would have to spend 30% or more of its total before-tax income to pay the median rent of alternative local housing that is acceptable ([that] meets all three housing standards)” (CMHC, 2012). Extreme core housing needs occurs when households have to spend more than 50% of their income on housing.

CMHC defines the terms ‘adequate, affordable and suitable’ in the following ways:

- **"Adequate** housing does not require any major repairs, as reported by residents. Housing that is inadequate may have excessive mold, inadequate heating or water supply, significant damage, etc.
- **Affordable** dwellings cost less than 30% of total before-tax household income. Those in extreme core housing need pay 50% or more of their income on housing. It should be noted that the lower the household income, the more onerous this expense becomes.
- **Suitable** housing has enough bedrooms for the size and composition of the resident household, according to National Occupancy Standard (NOS) requirements" (cited in Gaetz, Gulliver & Richter, 2014, p. 43).

One-third of Canadians are renters (CHRA, 2014) and Londerville and Steele calculate that about 18% of these households – or an estimated 733, 275 households – have extreme affordability issues (2014). This varies from city to city with the highest rates "in Vancouver at 22%, in Halifax at 21%, in Toronto, Edmonton and St. John's at 20%, and Montreal at 19%. A much smaller percentage of homeowners live in core housing need, though it is worth pointing out that in large cities where house prices are high, the problem is more serious. In this case, Vancouver (8%) and Toronto (7%) are highest while every other CMA is well below 6%" (Gaetz, Gulliver & Richter, 2014, p.43). There are thousands and thousands more households who live in core housing need – paying more than 30% but less than 50% of their income on housing costs. In fact, about one-quarter (3.3 million) of all Canadian households (this includes tenants as well as homeowners) are precariously housed; that is, they are living in housing that is unaffordable, over-crowded, below standard, or a combination of all three (Wellesley Institute, 2014).

Housing Instability

Affordable housing also provides a stable environment for families and children to prosper and form those necessary social connections. For example, Greg from Campaign 2000 says "One of the – for families and children – one of the biggest problems that I see is the lack of stability. For kids in particular, to be able to stay in the same school, develop friendships, and so that's particularly hard, you know, to be moving around like that."

The cyclical nature of family homelessness needs to be addressed as well. When families at-risk of homelessness or families living on the street have children, those children are at a much greater risk of becoming homeless as adults. Ernie from Campaign 2000 says "I'm applying it on a poverty lens that if the mother is poor, the child will drop out of school, the child will not get nutritious food, the child may well not have adequate or any child support, the child has a high probability of ending up in poverty as well."

"So, we have our children that were raised in our system, and in years past, once they aged out of the child welfare system then they're referred into our shelter system. They

were pulled out of our families for very good reason - reasons of abuse, reasons of neglect, and basically a lot of individuals that were born into poverty haven't had a fair shot a life right from the get go. And unfortunately, the system hasn't done well to support them to land on their feet either" – Tanya from Homeward Trust Edmonton.

Barriers to Housing

Even families that did not have to be on a waitlist experience several challenges. The cost of rent and the selection of apartments available to families acted as a huge barrier for interview participants. In many cases, the only available places to live were in dangerous neighbourhoods or accommodations that provided unliveable conditions. "Yeah, I've been accepted to be part of this program but the problem is that that the program rates are based on apartments and we can't be in an apartment. It's like putting a band-aid on a severed arm. The thought's there, but it's not meeting the need. So, if it doesn't fix the issue, it's pointless. The idea of the program is good, but I can't find any house in town for under $800 that's liveable" – Family Enrichment Focus Group.

Even the agency staff members were outraged at the lack of affordable housing in their communities and the fact that there was nothing being done to help alleviate the problem. "They want to live. They want to be warm. They want to be treated with respect. They're not looking for a two bedroom so they can have a den like the rest of us. They want a warm bed. They don't want bed bugs. And they want a hot meal three times a day. And they're not getting it. It's wrong. Don't get me started on housing" – Judy from Port Cares.

Although agencies continue to assist families to secure affordable housing and promote pro-choice, the choices are limited and often exacerbate the problems. Families are often forced to move into neighbourhoods where illicit drugs are easily accessible, there is limited transportation to find employment and there is no sense of community to provide support; often, it is only a matter of time until families are homeless again.

Indigenous Housing Issues

There is very rarely Aboriginal-specific housing, which can make it extremely difficult for Indigenous families. These families often have to cope with racism, frustratingly long wait lists and limited support from landlords. "So of course, clients are going to gravitate towards Aboriginal-specific housing. Why would you put yourself in a situation where not only are you exhausting all your resources to stay there, but you're exhausting all your resources in a place where you know you're not welcome! Or you're going to be stigmatized by the person that's supposed to be taking care of you. You have to trust the person who's going to be taking care of your home, right? And if you don't trust that person or they don't trust you, it's already a toxic relationship. But we only have very limited Aboriginal specific housing and it fills up. And it fills up with people that can afford to pay market rent for all of the ones that aren't subsidized. And then they wait. And it's exactly like being on the social

housing registry. I have clients that have been waiting for housing, Aboriginal or not at this point, for over seven years! You've come to a community thinking it's going to have more opportunity for you and you live in squalor" – Katie from Wabano.

An inherent aspect of Aboriginal culture is for community members to support those around them. Unfortunately, within housing programs, this can create problems. Clients are often not permitted to have additional individuals stay with them, yet as a primary part of their culture of connectedness, Indigenous peoples commonly offer a helping hand to support loved ones in need. "A lot of our clients because they lived on the street have Street Families or because they are Aboriginal and family is huge part of culture as it is for most people, they wouldn't think to say no to people. Now you've got the place - we're coming in. So a lot of our clients are evicted, not because of the behaviour of the clients, but because of their guests or the behaviour of the clients, or their inability to manage their guests" – E4C Focus Group.

Lack of Supportive Housing

There is not only a lack of permanent affordable housing but also other types of supportive housing units. For some individuals with high acuity and complex needs, they may be unable to maintain an individual housing unit and alternatively require permanent supportive housing or 24/7 medical support units. Permanent supportive housing units are most often developed for individuals and the needs of families who require supportive housing are not addressed.

Child Welfare Intervention

Families are often fearful of entering a Housing First program or other housing initiative because they do not want to have their children apprehended by child services (Children's Aid Societies, child welfare etc). While some programs, especially Housing First programs, are based on a harm reduction model and the goal is to meet clients 'where they are at' to provide them with comprehensive support, tensions may exist between a harm reduction model and a family and children's service model, which promotes abstinence.

In many cases, agency members spoke of addressing these issues on a case by case basis and intervening only once drug use affected a parent's ability to care for their child. "I would say that's been my experience as well, the whole thing, our philosophy as a Housing First program that has a harm reduction model is just so different from the child and family services model. So it's different philosophies, so when I work with families who have kids, they often never ask me for services for their children because anything I would give them would put a spotlight on their family, and potentially they could lose their children b/c they are apprehended. So they stop asking for help out of fear, because the system is punitive" – E4C Focus Group.

Large Family Size

Large families are additional consideration for caseworkers who are trying to place families in housing. Logistically speaking, the case worker must find a residence that has the legal number of bedrooms for mixed sex families and find a house that is suitable for young children to live in.

Service Integration

The need to integrate services – especially between homeless services and mainstream services can be a barrier. For example, a Housing First program cannot survive as a lone entity but requires support and collective buy-in from other services to help manage clients' issues and keep them off the street. If ongoing support does not exist, it would be extremely challenging for clients to solve their issues by themselves. "But it's still a program where they say we buy into these programs, like our 'Cadillac program' we've been called, Housing First. But the supports that we need to make this program successful, the mental health, the addictions, all of that are very, very limited. So it's a great idea, but we're still reliant on most of the agencies, non-governmental agencies to be those human resources that we are supposed to be setting our clients up with" – E4C Focus Group.

Solutions

There are a number of solutions to the affordable housing crisis in Canada. To begin with, there is a need for a National Housing Strategy and for investment into capital repairs in existing social housing stock, the renewal of operating agreements and new money or tax credits for new affordable housing builds.

Case Management

Some agency members spoke about how even though case management was a helpful component of services, if different services were not properly integrated, it made it difficult to coordinate their services together and to develop a comprehensive case management strategy. "But if you are disconnected with that entire process, it's like you know, it's like having a restaurant right, and you have the meat, and um the vegetables all in one room, and then you have the spices in an entirely different room and because they are in another room you don't know where those spices are in the other room and you would like to use them, but…So when you have something disconnected like that it creates a blindness as to what can be offered to the participant which is very frustrating, most of all to the front line workers. It just you know – ensuring that there is a structure that interconnects" – Renee from Homeward Trust Edmonton.

Case management must put the clients' needs and wants first. The purpose of case management should be to provide advice but, more importantly, should be about empowering families through a process that promotes respect, dignity and choice. "When I used to be a team lead way back in the day (I still do it in Housing First 101) I

would say 'nobody wants somebody coming in their living room telling them what to do and the moment you do that you create a barrier and even if you are well intended, you are still creating a barrier you know. You present them with choices because it is their life. And it's not yours'" – Renee from Homeward Trust Edmonton.

Case managers can become very close with their clients and act as mentors or a comforting voice in the parent's lives. They take on the role that often extends beyond case manager, however, it is important that boundaries are set and a team is in place to help distribute the load and prevent burn-out for case managers. "But Nicole has been great. If I have had an issue or something I have wanted or needed to talk about or whatever, Nicole has been there. Whether it be on a weekend when she is on her time off, if I leave her a text message, she may not respond right away, but she will respond at some point that weekend and say ok, are you ok, is this to check up on me and it's awesome. It's almost like having a big sister" – Debra from YWCA Yellowknife.

Parents will often build a personal relationship and bond with their caseworker which allows the parent to receive the support that they desperately require. However, some caseworkers may also run the risk of burn-out if their clients become too dependent on them to provide 24/7 support. "That's one thing that a lot of times on the weekends especially me as a new staff, we tend to leave our phones on but that becomes overwhelming because that also create the dependency, we are the first ones they call when in actuality they should be accessing other resources so that when there is a crisis, like do you call police or 911 is this something we can handle if it is above and beyond, we need to teach them and train them we are not always the first person you call like you can phone us to let us know what happened but not the first person that you call" – Bent Arrow Focus Group.

Case managers often face difficulties between managing theory and what actually happens in practice. "We're not supposed to have a waiting list, we're supposed to have a priority list, but the reality is that we've had people that have wanted to get into our program for over a year, but we just don't have the [capacity]. There's a difference between theory and practice" – E4C Focus Group.

Tenant Mediation

Tenant mediation was an integral strategy utilized by of several organizations. Often individuals do not know how to resolve issues with landlords. Language barriers may result in someone leaving their housing when they receive an eviction notice, not knowing that they have opportunities to make remediation.

Rent Banks

Another prevention strategy is to implement rent banks where grants or loans can be made to help prevent eviction. If a family has difficulties paying rent, they would have

access to financial support directly from an agency or learn how to apply for various monetary grants in order to maintain their housing.

National Housing Strategy

Ending homelessness requires building of new housing and the development of supports. In order to achieve these efficiently, we need an orchestrated system of commitment to developing new affordable housing and supporting programs that will end homelessness.

A national Housing and Homelessness Strategy should include the following:

- A common definition of homelessness that will be used nationally. Two existing definitions – The Canadian Definition of Homelessness (2012) and the Canadian Definition of Youth Homelessness (2015) are already widely accepted across the country and would provide the easiest starting point for a consistent definition.
- A commitment that ending homelessness is the desired outcome of any housing program. This should include measurable criteria for determining success. The authors of SOHC: 2014 suggest "One approach to measuring this national outcome could be that an end to homelessness in Canada will be achieved when no Canadian individual or family stays in an emergency homeless shelter or sleeps outside longer than one week before moving into a safe, decent, affordable home with the support needed to sustain it."
- Agreed upon measures including "milestones, outcomes and performance expectations along with an agreement on regular evaluation and reporting" (SOHC: 2014).
- The development of targeted strategies and plans to address family homelessness, youth homelessness and violence against women.
- A focus on the elimination of homelessness amongst Indigenous peoples. Homelessness reductions for Indigenous Peoples should be both embedded within mainstream plans at all levels of government, but also be focused on as a separate and distinct area. These strategies should be developed in conjunction with Indigenous organizations and communities.
- Implementation of a family-based Housing First strategy.
- Plans for an annual Point-in-Time count of homelessness using a consistent national methodology **as well as** regular prevalence studies in communities to identify the hidden homeless population.
- Investment in rent supplement programs as a means of preventing family homelessness (or the National Housing Benefit in Recommendation 3).
- Development of an intensive and extensive new social housing capital building program and investment in repairs and maintenance for existing social housing stock.

Inclusionary Zoning and Development of Affordable Housing

Historically, many communities in Canada (and throughout the world) have practiced "exclusionary zoning" when it comes to affordable housing or emergency shelters. They limit the locations of developments, make it difficult for social housing to be developed by imposing fees and support opposition from neighbours.

By contrast, inclusionary housing programs or inclusionary zoning allows municipalities to change their development regulations and processes to require private developers to include affordable housing units or to pay into a fund to provide for the development of such housing elsewhere. This enables municipalities to move forward on affordable housing initiatives even in the absence of funding from higher levels of government. By ensuring that their zoning bylaws and practices are enabling, rather than restricting, housing development, municipalities can support reducing homelessness.

Some of the inclusionary housing practices will require approval from the province or territory the municipality resides in while others can be directly implemented by the municipality. We encourage municipalities to implement as many changes as they can in developing their inclusionary housing programs and to collaboratively lobby their higher level government for changes to the respective legislation.

Below are some examples of possible changes that could allow a municipality to develop more inclusionary zoning. For more information please see Inclusionary Housing Canada and The Wellesley Institute's Inclusionary Housing reports.

Affordable Housing Requirements

Inclusionary housing programs often require developers to build affordable housing units as a percentage of the total number of units being developed or to provide alternative community benefits. In Ontario, this is covered under Section 37 of the Planning Act. By mandating affordable housing – and providing clear guidance – as to what this entails, municipalities could increase the number of units available in their communities. Currently, implementation often sees the provision of community benefits (i.e. a playground) rather than housing, or the housing is geared towards home ownership, rather than rental.

Cost Offsets

To assist developers in including affordable units in their developments, municipalities can provide a number of cost offsets. The most effective of these is likely "density bonuses", wherein an increased number of units can be built, outside of the density restrictions. Other cost offsets could include reducing the number of parking spaces required, fast tracking approvals or reducing/waiving certain development fees.

Elimination of Bylaw Restrictions

Restrictions have been developed in many communities that prohibit the number of shelters in one area or provide a set distance between certain residential care facilities. Toronto's Dream Team was successful in convincing four communities – Toronto, Kitchener, Sarnia and Smiths Falls – to amend their exclusionary by-laws after filing cases against them at the Human Rights Tribunal of Ontario.

The "tiny home" movement is also restricted from reaching its full potential due to bylaw restrictions governing size of units, access to services etc. By allowing for implementation of tiny home communities or by permitting individuals to allow a tiny home on their property, thousands of individuals and families could be housed quite easily and cheaply.

Limits on Strata Conversions

Strata (or condo) conversions refer to the development of condominiums in previously rented buildings. This is popular in urban centres where land may be expensive or unavailable, but it then reduces the number of rental units available in that community. Several communities in British Columbia (including North Vancouver, Victoria and Coquitlam) restrict condo conversions if the vacancy rate is below 4%. This therefore allows these municipal governments to ensure that needed rental housing is not diminished at a time of high demand/low availability.

Second Suite Housing

Many communities have restrictions against second suite housing or prevent people from renting out units in their home by limiting the number of unrelated people who may reside in one residence. For families with children experiencing homelessness, sharing a home with a couple other families may be a necessary and useful first step towards independence. In other cases, accessing a basement apartment often provides the cheapest kind of affordable housing and yet these places are often illegal. By allowing homeowners to legally rent out spaces in their homes, or by permitting sharing of facilities, families can be quickly and easily put on the path to recovery.

Need for Emergency Shelters and Transitional Housing Programs

It is important to recognize that there is not one perfect solution. While housing is being built, there is still going to be a need for emergency shelters and transitional housing programs to support the large number of people who need housing. Even if we see the development of a fully-funded national housing strategy with thousands of units in the pipeline, implementation to the point of addressing the number of people currently homeless, those living in hidden homelessness and those at extreme risk of becoming homeless is several years away.

Unfortunately, this is not how homeless services have operated since the focus was put on Housing First. "So the government who has seen HF as the be all and end all, has cut

funding to shelters, and is not adding more of that. But what we feel is that we do need more of that. Shelters -and even transitional housing – because we need places for in-between. If someone gets evicted because of the housing market we can't get them housed right away" –E4C Focus Group.

Municipalities should be working with a variety of community partners to develop the types of shelters that their community needs. Many communities have an insufficient supply of adequate family shelters and shelters for women fleeing violence. Municipalities can donate surplus lands to developers and/or non-profit groups to use for the development of shelters, transitional housing or permanent residences. Developers and property management companies can also be encouraged to donate (aside from any tax rebates or incentive programs listed in Recommendation 7.0) units in each of their buildings to families exiting homelessness.

Recommendations Related to Affordable Housing

Recommendation 2.0 - We recommend that the federal government, in conjunction with the provincial, territorial and Indigenous governments develop and fund a National Housing and Homelessness Strategy.

Recommendation 5.0 - We recommend that provincial and territorial governments develop a Ministerial Homelessness and Housing Secretariat/Roundtable to Work on Preventing and Ending Homelessness.

Recommendation 6.0 - We recommend that provincial and territorial governments develop a province/territory-wide Plan to End Homelessness.

Recommendation 7.0 - We recommend that municipal (or regional where relevant) governments review bylaws and municipal practices to ensure a focus on "inclusionary zoning" and development of affordable housing.

Recommendation 8.0 - We recommend that municipal (or regional where relevant) governments develop, in partnership with other levels of governments and/or non-profit or private developers, new emergency shelters, transitional and/or permanent housing aimed at families with children.

Child Care

> "A universally accessible high quality childcare program has always been fundamental to Campaign 2000's child poverty eradication agenda. Envisioned as early childhood education and care (ECEC), a national childcare program is part of advancing healthy child development, school readiness and well-being. It is also critical in enabling parents' participation in the workforce or education to escape poverty, building strong communities, fully including children with disabilities, welcoming newcomers and strengthening women's equality across Canada" (Campaign 2000, 2015, p. 10).

Child care is fragmented and disjointed across the country and there is no national child care policy. While the advent of junior kindergarten, "full day, every other day kindergarten" and integration of day cares into elementary schools have helped provide a better continuum of early childhood education programs, there are still many issues including lack of space, lack of access, cost and regulation.

The demand for child care is high although it varies somewhat depending upon age.

- In 2011, 46% of parents reported using some type of child care for their children aged 14 years and younger in the past year.
- 54% of parents with children aged 4 and under, used child care (most frequently for 2-4 year olds) vs. 39% of parents with school-aged children (5 to 14 years)
- Parents of infants aged one and younger were among the least likely to use child care (26%).

Generally costs decrease as the child ages, in part because of lower needs but also because of the number of hours the child is engaged in school. Canada's parental leave through workplaces and/or Employment Insurance, also allow a number of parents to stay home in the first year of the child's life.

For working parents, the cost of child care is often one of their largest expenditures; sometimes costing more than rent, depending on geography and number of children. Income assistance applicants with young children are told that they need to find work, yet the lack of child care subsidies means that they are often further behind financially than before they began working.

There are several Catch 22 scenarios. You will often hear critics of homeless families say "Why don't they get a job?" In many cases, single parent families are trying to secure full time employment but find it impossible if they have to care for three children during the day. If they can't afford child care, they will not be able to maintain a job and this will subsequently affect their income and housing options. "Okay. Well, for one thing,

people who are poor, especially - not only, but especially, single mothers…they can't get out of it without child care. Because you can't work, train, go to school, even take English classes" - Martha from Campaign 2000.

This often leads to a sense of embarrassment from parents who are not able to provide for their families. They would like to be employed but are unable to without child care. They feel like they are not able to provide for their families and are not being a positive role model for their children, even though their circumstances prevent them from finding a job.

For most low-income families, regulated child care is out of reach because of cost. This means children are placed in unregulated, unlicensed child care facilities, are cared for casually by family and friends, or parents are unable to work. These unregulated situations are not always legal, meaning parents also risk losing their child care at a moment's notice and increase the level of danger posed to their child.

The costs associated with child care vary across the country quite significantly, with Quebec as the lowest and Ontario the highest. "Parent fees are unaffordable, climbing as high as $1,676 in Toronto (monthly median for infants); while subsidies – offered by all provinces/territories except Quebec – can be subject to long wait lists, failing to make childcare fully financially accessible and including hefty surcharges of up to $500/month" (Campaign 2000, 2015, p. 10).

Parents can expect to pay an average of $761 per month for infants, $701 for toddlers and $674 for preschoolers. (Flanagan et al., 2013). Quebec's provincial government subsidizes child care so that the cost is a mere $7 per day, or approximately $152 a month no matter what age. The Atlantic Provinces pay four times as much with a median cost of $541 per month. Ontario's expensive child care comes in at a median cost of $677 per month for children aged 4 and under (Sinha, 2014).

Part-time child care – usually before and after school – varies depending upon the age of the children, but again geography plays a role. Age also counts as older children who spend most of their time at school do not spend as much time in child care. In Quebec, 90% of parents paid under $200/month for before and after school care. Outside of Quebec only 48% of parents paid under $200, with the remaining 52% paying $200 or more per month for before and after school arrangements (Sinha, 2014).

Child care subsidies may be available in most provinces, but waitlists are extremely long and in the meantime parents are left without any supervision for their children. "And, you know, it's not a viable system. It's not a system and it's not financially viable…and it costs an arm and a leg. If you're low-income or modest income and theoretically you could get a subsidy - you can't get a subsidy in Toronto or a lot of Ontario 'cause there are huge waiting lists for subsidies" – Martha from Campaign 2000.

Progress and Solutions

There needs to be better access to child care for low-income populations, otherwise single parent and at-risk families will continue to experience difficulty juggling other responsibilities like securing affordable housing, employment and other basic needs such as clothing and food.

Child care provides more than just stability for parents, but also improves children's socialization skills, language development and conflict resolution skills which can help them as they mature into young adults. Child care must move beyond just a babysitting service and offer programs that are able to stimulate and encourage social interactions between children. This happens in formal, licensed programs but not always in casual or unregulated situations. Sheila from Port Cares identifies a need for more programs in general, but in particular child care: "I think child care is great; however I'd like to see a child care with more. I don't just want to see a babysitting service."

Recommendations Related to Child Care

In Recommendation 3.0 calling for a National Poverty Reduction Strategy, we include the need for "the development of new, regulated child care spaces across the country and increased funding for child care, especially for low-income parents." We see subsidized child care as an excellent anti-poverty strategy because it will better enable parents to secure full-time employment positions or return to school as appropriate.

Campaign 2000, in its report card for 2015 outlines a number of child care initiatives that we support including:

- Endorsement of the plan by the federal government to "design a national policy framework based on the best available evidence."
- The need for "a universal, high quality, publicly funded and managed childcare system."
- "Specific attention to ECEC [Early Childhood Education and Care] for Indigenous communities."
- A transition "away from the current market model towards a more equitable, planned, public approach – the best practice in policy and service delivery."
- Clear principles for the policy framework including "universality, public and not-for-profit delivery, high quality and comprehensiveness".
- A "clear commitment to substantial sustained earmarked funding" including "an emergency infusion of $500 million in federal transfer payments earmarked for regulated child care to provinces/territories/and Indigenous communities while

further details about long-term funding are being worked out" (Campaign 2000, 2015, p. 10).

> "People have to understand that when you spend money on the poor, this isn't a one-way handout that goes from the rich to the poor, that it is an investment. Spending on education, spending on child care, spending on all these things is investment and it has payoffs…if you have one dollar to spend with public money, the best use you can make of that dollar is to spend it on child care. Because if you spend it on child care, you get return on that investment through that child succeeding 70 or 80 or 90 years of life. There is no other investment you can make that gives you an 80-year return or pay back. You know you spend that money on a computer and two years later its obsolete, you spend money on a child and you get a return for 80 years" – Ernie from Campaign 2000.

Partner Agency Spotlight: Family Enrichment and Counselling Services Fredericton Inc.

Family Enrichment and Counselling Service Fredericton Inc. is a not-for-profit, community agency providing counselling services, educational programs, and mediation in Fredericton and surrounding area. Family Enrichment provides services to:

- children (play-based therapy)
- individuals, families, and couples
- employees through Employee Assistance Programs (EAP_
- employers through on-site consultation and training
- the community through personal and professional development programs and advocacy

Therapists and facilitators work with clients with challenges involving abuse (physical, emotional, mental), anger, anxiety, bullying (at work or at school), depression, separation and divorce, conflict resolution, fears, grief, panic attacks, parenting, relationships, self-esteem, stress, suicide and more. Family Enrichment is a member of Family Services Atlantic and Family Services Canada.

The agency's primary goals are to:

- promote, encourage and assist in the attainment of fuller and stronger family life in the community.
- provide educational services to the public in relation to the recognition and resolution of difficulties in family life.
- provide programs, courses, projects, counselling and therapeutic services to parents and families.

Family Enrichment's vision is "healthy communities where every person feels valued, connected, empowered and competent. The agency's mission is to enrich and support individuals, families, and communities through counselling, education, training and advocacy."

Family Enrichment uses a sliding scale in addition to offering up to four sessions a year free of charge. To accommodate families in need the rates start at about $25 for someone who is making about $15,000 a year and then it goes up incrementally depending on the household income and size. As a result individuals with the same income may pay different rates because of the number of dependents.

Food (In)Security

Several years ago, there was a community coalition called "Pay the Rent or Feed the Kids". This name exemplified the struggle that most parents living in poverty face on a regular basis. In 2012, 1.7 million Canadian households (including about four million people, many of them children) experienced some level of food insecurity. This represents nearly 13% of Canadian households and about one million children (Campaign 2000, 2015).

Proper nutrition is extremely important for developing children, and if they are not receiving adequate nutritional meals on a daily basis, it can negatively affect their bodies as they grow older. "Unfortunately childhood food insecurity is linked to obesity, anemia, diabetes, chronic stress, depression and other physical and mental health related outcomes" (Campaign 2000, 2015 p. 14).

There are many factors that impact a caregiver's ability to provide nutritious food, including "income, geographic isolation, cost of food, access to transportation and the costs of rent, hydro and heat" (Campaign 2000, 2015 p. 14). Food insecurity is most prevalent in Canada's North (especially Nunavut) and the Maritimes, but affects families across the country (Tarasuk et al.2014; Tarasuk et al., 2015).

In 2013, households with children faced a greater risk of food insecurity than adult only households: 16.5% versus 10.8% which was up from 15.6% versus 11.4% the year before. Overall, 1 in 6 children in Canada lived in food insecure households (Tarasuk et al., 2014; Tarasuk et al., 2015). This means that in most elementary school classrooms (which have upwards of 25-30 students), as many as four to five students in each classroom face food insecurity and are likely going to school hungry.

In 2013, 68% of families that relied on social assistance as their main source of income were food insecure, pointing to the fact that social assistance does not provide a liveable income for families. However, *the majority of food insecure households (61.1%) were still reliant on wages or salaries from employment (*Tarasuk et al., 2015). This connects to the previous discussion about low wages, part-time or contractual work and insecurity of employment.

Parents in northern communities face additional challenges in feeding their families, given the lack of employment opportunities and the extremely high cost of food. In 2012, Nunavut and the Northwest Territories had the highest prevalence of children living in food insecure households at 62.2% and 31.6% respectively (Tarasuk et al., 2014).

Food banks were meant to be a temporary solution to address a basic need, but are now acting as a permanent part of our response to poverty and homelessness. They can

help support those who have recently been housed to retain housing, but must be combined with a variety of other services to help remove families from shelters and keep them off the streets.

"There has been a 1.3% increase in food bank users since 2014, with 852,137 people now accessing food bank services each month. More than 1 in 3 people helped are children. The current makeup of food bank users shows people's main source of income is from employment followed by Employment Insurance, social assistance, and disability related income. It is clear that families require living wages and more robust income supports to end hunger and meet their basic needs" (Campaign 2000, 2015, p. 14)

> "Food banks. We have a huge infrastructure around food banks in this country, but they don't, but they're meant to be a Band-Aid solution, obviously, right? That has persisted and has emerged as the - you know, it is a stop-gap but it's not, it's not the solution; it's not a charitable response. You know? I think that's a big part of like, 'who cares about poverty?' like, you know, 'I gave money to this.' Right? There's sort of that, kind of like, 'I made a contribution' like for many people" – Laurel and Anita from Campaign 2000.

Quality

The quality and quantity of food being distributed at the local food banks is often a huge barrier when dealing with food security amongst homeless families and children. Some parents revealed that they had found bugs and cockroaches in their groceries and receiving expired food on a regular basis. "Well, it'd be – if I had more money, it would be better because then I can actually give them what they need. Because the food; I hate to 'diss' the food bank, but the food bank is really nice and it fills your stomach, but it's total crap" – Family Enrichment Client Focus Group.

Embarrassment

There is a sense of embarrassment when parents had to access food banks. It was their only option if they were hoping to feed their children, but resorting to handouts to make meals affected their psyche. "I mean it's hard, you've gotta swallow your pride to go to them and then like the one that is just down the road here, they make you stand outside and there are cars driving by and people walking by, and they are kind of giving you the look like 'oh you have to access a food bank'. I think if a place like Wabano had one, people walk in and out of here all the time. It's normal for people to come in and out, so I think if a place like this had one that our people could access and it wouldn't be as, you wouldn't have to swallow your pride so much" – Dion from Wabano.

Limited Selection

Since most food banks rely on donations from individuals or corporations, there is often a limited amount of food and/or selection available. “But, the Inuit community here, they have weekly food banks. The way they line up is elders go first, families second and singles third. So, they call two by two to pick up the food so you had to go before they opened to choose what you want. Let's say they only have 30 ground beef and they're frozen. If you're maybe the 32nd in line, you don't get the ground beef” – Abbygail from Wabano.

> “I use food banks once a month, I have to and sometimes it's not enough, like I mean everybody, if you go to the food bank you will see a lot of staple food and everything. Once in a while you will see vegetables. The one thing that they miss a lot of, that people don't get and that people need that can't afford it is meat. You never see a food bank or somebody offering meat except for the weekend” – Debra from Homeward Trust Edmonton.

Kids Needs First

Parents admitted to restricting their own eating habits to provide for their children. The precariousness of balancing income, housing and other basic needs amongst both parents and children can become extremely difficult and stressful. “Yeah, I'll sacrifice for myself. I go three days without eating to make sure he's got good meals on the weekend while he's over, so be it. You know what I mean? I'm starting to look down on the world, thinking you know, why? I'm a good guy, why is this happening to me?” – Yvon from Port Cares.

Selflessness

Many parents felt like there were others who were worse off than them and refused to use the food bank because others may have had a greater need for the groceries. There was a sense of support amongst these high-risk families; even if they did not know the other person who would be receiving the food, they were all collectively trying to indirectly help out one another. “I've had to go to the food bank a few times, but I kind think there's people in much worse situations than me so I try to stay away from there and leave that open to them” – James from Port Cares.

Progress and Solutions

As a method of prevention, food banks and other meal programs can help maintain clients in their homes. However, overall they should be considered an emergency or band-aid solution and we should work towards reducing dependence on them.

Meal programs at Port Cares offer community meals that are open to the entire community and not only limited to high-risk families. This helps foster a sense of belonging, community and socialization between all social classes and helps reduce the

embarrassment of having to rely on these types of basic services. “Three times a week we provide two lunches and a dinner and its open to not just clients but anyone in the community, so we welcome those who are not necessarily a client of the food bank, to come and see what we do and interact with our clients. The hope is that they get the socialisation, they get a better picture of maybe of what it’s like to live within a low-income cut-off and bring the community together in that sense” – Amanda and Marissa from Port Cares.

School-feeding programs are often universal as well. This reduces the embarrassment a child may endure and encourages participation in school breakfasts and lunches.

Pro-choice helps to empower parents and also allows them to modify their groceries based on specific needs of their family members. Several food bank programs are using creativity to allow clients to select their own food rather than giving them no choice in selection. In some cases, this means providing grocery cards instead of food or assigning points to each type of food and giving clients a set number of points based on family size.

Recommendations Related to Food (In)Security

Creating a National Poverty Reduction Strategy (Recommendation 3.0) and the implementation of a National Housing Benefit (Recommendation 3.1) will enable parents to both pay their housing costs and purchase food. This will enable food banks to focus on supporting the highest needs and will reduce dependence of families overall on food banks.

Partner Agency Spotlight: YWCA Yellowknife

The YWCA in Yellowknife was founded in 1966 in response to the growing number of single working women moving to Yellowknife who had no safe place to stay once they arrived. The mission of the YWCA Yellowknife is to "build safe and equitable communities where women, girls and families can realize their full potential." It is affiliated with YWCA Canada, which is the oldest and largest women's organization in the country.

While all of Canada is experiencing a housing crisis, this is particularly true in Northern Canada throughout all three territories. A YWCA study in 2007 estimated that over 1000 women were homeless in the Northwest Territories.

YWCA Yellowknife offers both emergency shelter and transitional housing:

- Alison McAteer Family Violence Shelter is the only domestic violence shelter in Yellowknife. It has six units and a 12 bed capacity, offering support to single women or mothers with children who are fleeing domestic violence (boys up to 14 years old only). Clients stay about a month on average.
- Sutherland House – Fort Smith is an eight bed domestic violence shelter for women and children (boys up to 14 years old only) in the small community of Fort Smith. Clients can stay up to six weeks.
- Lynn's Place is a building for providing safe housing for women who have left a violent relationship or who are need a stable and safe environment. It offers 18 suites (six bed-sit units for single women), 10 two bedroom units and 2 three bedroom units. Rent is designed to be affordable. Residents can stay for up to three years.
- Rockhill Family Housing Program is transitional housing for families and includes 33 units with a mix of bachelor, 1 bedroom and 2 bedroom units. Half of the units are designated for single parents, and the remainder are for couple-led families, many of whom are new Canadians. Two family support workers are on site during the week to provide support. The average tenant stays about a year and then moves in permanent housing.

The YWCA Yellowknife offers a number of other services including after school programs in every Yellowknife school, GirlSpace (an empowerment and leadership program) and Project Child Recovery, an RBC funded program for children who witness violence.

Discrimination

Experiences of poverty and homelessness are not universal. Some populations experience disproportionate rates of poverty and homelessness due to historical oppression and ongoing discrimination. Research has shown that family homelessness disproportionately affects families – particularly women and children – from Indigenous and racialized communities. Furthermore, new immigrants and refugees experience homelessness at greater rates that citizens of Canada. Women experiencing homelessness tend to be young with young children (Paradis, Wilson and Logan, 2014; Paradis et al., 2008). In this section, we explore some of the underlying causes and issues that have led to the large numbers of children and families experiencing homelessness in certain communities.

Indigenous Families

'Indigenous Peoples' or 'Aboriginal Peoples' are broad terms that include a number of groups such as First Nations, Métis and Inuit populations. It includes people living on reserves, in urban and rural settings and in Indigenous and non-Indigenous communities.

Historical Oppression

Beginning with colonization, oppression has occurred against Aboriginal communities whose members were viewed as "heathens", "savages" or "in need of saving." Over the years, Indigenous communities experienced the loss of culture and language, exclusion from traditional lands and physical, political and emotional violence (Patrick, 2014).[4]

For many Indigenous populations, the loss of traditional lands and access to historical activities of hunting, farming, fishing and gathering meant a loss of access to foods as well as destruction of a way of life. This was institutionalized with the introduction of

the reservation system, particularly for First Nations communities. Conditions on reserves and in many northern and rural communities are horrendous, with several lacking basic necessities including electricity or clean, running water. Housing construction is poor and often overcrowded (Patrick, 2014).

The inception of the residential school system meant many Indigenous children were seized from their parents and removed from their homes. They were 'educated' in school systems where they were often punished for speaking their language and engaging in cultural practices. Many children were also physically and/or sexually assaulted. The recent Truth and Reconciliation Commission of Canada heard many stories from survivors who spoke of the impact residential schools had on their lives.

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[4] A strong analysis of Indigenous homelessness, including historical oppression and trauma, can be found in Aboriginal Homelessness in Canada: A Literature Review, by Caryl Patrick, 2014. It is available as an e-book for free download from http://www.homelesshub.ca/AboriginalHomelessness

Children lost connection to their family and parents grieved the loss of their sons and daughters. As a result of this dislocation, cultural traditions were extinguished and many Aboriginal individuals experienced a lost sense of identity.

In the 1960s and 70s, the removal of Indigenous children occurred again, but this time children were placed in foster homes predominantly run by Caucasian people. Known as the 60s scoop/sweep, this once again caused dislocation and loss of cultural identity for many. Abuse was often prevalent, just as it had been in residential schools. The impact of abuse and trauma has led to high levels of substance abuse and addiction. Many individuals developed poor coping skills and did not learn conflict resolution (Patrick, 2014).

As a result of residential schools and the 60s scoop, many Aboriginal children grew up with no real sense of family or parents. They did not know how to be parented, nor did they learn important parenting skills for when they had children of their own. For example, at an E4C Focus group, one of the agency members commented, "The whole issue of parents never learning how to parent because of residential schools and colonization. One of my clients, my Aboriginal clients, recently said to me 'I don't like disciplining my kids'. So I'm like okay, 'kids need discipline and rules and boundaries. What do you see as discipline'? And she was like 'you know hitting them, smacking them'. It really stuck with me; that doesn't have to be discipline, it can be positive reinforcement, telling them they're doing a good job. I have talked about timeouts and 1-2-3 magic and she's like 'I really like that I'm going to write that down.'"

> "Well I think there's a lot that has already been said about the fact that we have such a disproportionate representation, that the effects of colonization, residential schools, re-location, you know, what is home? All of those things have impacted Indigenous people in Canada and it shows up in every kind of profile - the over-representation in jail, in homelessness, in addictions that is a reality that is caused by you know decades if not centuries of interactions with the settlers and Indigenous population" – Susan McGee from Homeward Trust Edmonton.

Current Situation

It is important to understand that when looking at the current situation we still need to consider what happened in the past. Colonization is an ongoing process.

Trauma

The impact of decades of abuse has led to inter-generational trauma. Not only were those who experienced residential schools affected, but their children, grandchildren and great-grandchildren have also been affected. Ongoing discrimination means that healing will not be easy and is

anticipated to take many more generations. While many Indigenous Peoples are now actively trying to strengthen their community's sense of cultural identity, they recognize this process takes time, collective effort and most importantly government funding and political support.

Partner Agency Spotlight: Wabano Centre for Aboriginal Health

The Wabano Centre for Aboriginal Health provides a variety of programs and services to First Nations, Metis, and Inuit communities in the Ottawa area. Families also travel from Northern Ontario to access their services. The Centre offers a variety of programs for children and families including outreach programs, HIV/AIDS education, several fitness and exercise programs, Cree language classes, pre- and post-natal programming, an interactive parent/child program, and after school clubs. The Awashishak Project provides services to families impacted by Fetal Alcohol Spectrum Disorder (FASD) through support groups, nutrition programs, a community garden, and various events.

Wabano's mental health division includes the Working Hope Program, a counselling program for Aboriginal children and youth ages 5-21, and the Circle of Care program that supports children and families through their involvement with the Children's Aid Society (CAS). They also offer group and individual counselling for Aboriginal adults and their families.

Wabano introduces cultural practices and traditional teachings to those who access their services. Many individuals felt like they had lost their identity but their spirit needed nurturing and support which they found at Wabano. In this way, reconnection with cultural identity is a form of treatment. Linda says, "So, Wabano, what we do, we here provide a place for them as a place of belonging. This is like a family. When you come in here and you come into the community, it's a place where you can come and belong and start connecting again. But what we feel and what we see as the antidote, is the culture as treatment. Culture as treatment is really, really important. When our clients come, at first there's not a lot of trust because a lot of that trust had been broken."

This is also addressed through the Circle of Care model. "Families who are working with [Children's Aid Society] CAS in Ottawa are supposed to be asked or offered the possibility of …being a part of the Circle of Care program if they so choose. And once that referral is made, then a facilitator will be assigned to that family," says Amanda from Wabano. "So, what it does is that it helps to equalize the power, I guess, and brings in a more cultural aspect to some of these meetings. For any family, it can be quite overwhelming or threatening to meet one-on-one with a CAS worker, especially when there's that perceived power that CAS does have; they can take your children…So, having a facilitator just makes those meetings go a little bit more smoothly…And we'll have a bunch of these different circle meetings and then there'll be a final circle, which is more or less in conjunction with some sort of the closing of the file plan because it is an alternative dispute resolution. Instead of going court, it's a dispute resolution piece and it's done in a very cultural way. So, there'll be an elder at that meeting. We take turns speaking. Everyone gets invited so that's normally where my role comes in, is that I'm normally invited to that final circle for at least a piece of that time. And I share what I've been working on with that family. We talk about some of the goals. We also talk about if there's going to any after care support, or if we're already done our piece."

Poverty

40% of Indigenous children live in poverty compared to the national average of 19%. 1 in 2 First Nations children, primarily those living on reserves, live in poverty (Campaign 2000, 2015).

Education

Aboriginal children on reserve are not receiving the same level of education or support as the general population. This makes it difficult for children to complete secondary school education and will put them at a severe disadvantage when trying to secure long-term employment. Unfortunately, many Indigenous participants shared that they felt like they were in a never-ending cycle in which no external support was enabling them to rise above their predicaments. "I feel like there is so much more they could be doing to help assist Aboriginal people in climbing out of, I don't want to say the rut that we are in but like it is a big cycle. And it has been going on for a long time so there is a very big picture and I just don't think we are close enough to making those changes. For example like a big picture I am talking about the education system for example…We don't prioritize the elementary stages which almost sets us up for failure. Our students on reserve are, their education levels are a lot lower than the mainstream so how are we going to go from a grade 8 into like a mainstream high school? …So I think that there is a big gap there and kind of sets us up for failure you know going into university when we are not really at a standard level for it. I don't know if it will be this lifetime that we see those changes" – Tricia from Wabano.

Judgement

Some Aboriginal Peoples continue to experience judgement for disclosing their Indigenous status. They have to defend themselves when asked what percentage they are, justify why they do not have to pay taxes, and defend themselves when asked why they do not have to pay for education. "In my opinion, it's still going to be generations before all the misconceptions are laid to rest. Canada is a self-declaring nation, so status, non-status, First Nation, Inuit, Métis you know. You're always going to run into those questions of - how much are you? Or shouldn't you be living here? Or why don't you have to pay taxes? Or why didn't you go to university because it's all paid for? There's so much more involved in that than what's presented. And I feel like cultural competency is something that we're lacking on a frontline level, all the way up to policy makers, all the way up to politicians" – Katie from Wabano.

Cost of Living

The cost of living is also a huge issue for people residing in Canada's North. There have been sanctions to limit seal hunting which affects families' abilities to sustain themselves, and they are forced to purchase food sold at inflated prices. When considering the majority of the population are already

living in poverty, this only compounds their circumstances. “And that is another huge thing...the cost of food up there. Like your taxpayers, your tax…money is going to provide a subsidy to food up north but the stores aren't passing that subsidy along to the Inuit people. Right? They are just keeping it to themselves and making more money. Now there is a couple of Facebook groups that are helping send food up north and they are bringing things to the public's attention. Like social media is just going rampant with it and it is great to see. We need it right? Like if you live in a remote community up north you've gotta spend $750 a week on food. So that is $3,000 a month. But the average annual income up north is only $19,900” – Dion from Wabano.

Housing

Agency members in the North were clearly upset with the living conditions their clients had to endure and the lack of funding supporting Northern community initiatives. “I'm not just talking about here, cast your eyes around Canada. If you ever enter a reserve, see how they're living. It's like third world living in the first world. Why is that? If this happened anywhere where a group of people are treated like that, what would the first world say? Oh look at those poor Africans they are suppressing them and all that. That is genocide. We would point fingers. But here, it's okay? It shouldn't be okay. When we have -40 and people are sleeping outside, in tents? In this day and age when everybody needs to have a roof over their head? Why is that ok? And then we go to conferences from the North and they hear about all of the things that are going on in Alberta and how the government is participating and they are giving money to end homelessness and Housing First and there are so many things going on there. Where does the North fall in here? If there's any place colder in Canada, it's the North so why are not looking at it? [Why] is there no focus? There are people living here also - is it because the majority of people who are here are Aboriginal? That's why we aren't looking at it? And we've got to call it as it is because too many people want to dodge this issue. And I’m not speaking for Aboriginal people, but it's blatant and it's right here and you see it and you see the racism” – Kate from YWCA Yellowknife.

Intimate Partner Violence

Leaving their home community can be an unbearable stressor for individuals seeking support and help from shelters. There are language barriers, a lack of social support, geographical isolation and trying to cope in an unfamiliar setting. “They don't have programs like this in a small community. No shelters for women, nothing. The only thing that they have is an AA counsellor, they don't have an emergency shelter in any of the small communities at all. So when you leave a situation, when you leave your partner, your home, that was your home. You are leaving everything behind coming to a place like this, especially if you are coming from a small community, and you haven't been away from community and you are on familiar grounds around familiar people, and everything you are familiar with, that you are attached to you leave all that and you come to a center like this where 99% of the time

English is the only language that is spoken. It's difficult. It would be difficult for others that would probably have to come to these facilities to get help, because I know that a lot of ladies in the smaller communities are very timid and some of them would be embarrassed to talk about their situation even if it's done in their own language, it would be very uncomfortable. But for them to say it in English, that would be like a brick wall. It would be like going up against a brick wall, so there is also language differences too" – Mary Rose from YWCA Yellowknife.

Racialized Families (including new Canadians)

Racism is experienced by Indigenous individuals and other people who are not Caucasian. Dion from Wabano speaks about the overt racism he experienced as a child and how he and his sister coped with their identities: "When I was a kid I was like the darkest kid in my school. We were the only Inuit family so I got called like brown cow and savage and all kinds of other stuff. Got into fights constantly. My sister grew up telling people she was Chinese rather than telling people she was Inuit because that was more acceptable."

Poverty is very much racialized; people from racialized communities are disproportionally living in poverty. "I have some data show that in urban centres in Ontario, racialized groups in 2001 represented about 22.8% of the population and represented 39.4% of those who were poor. In 2006, this is five years later, they represented 26.9% of the urban population, so they went from 22 to 26% but also the proportion of poor increased from 39.4% to 45.8%. So that as the population grows in size, it seems like over time more and more of them become poor. The proportion of those who are poor also seems to be growing" – Edward from Campaign 2000.

While the elimination of the Long-form Census has hindered our full understanding of the actual numbers in recent years, anecdotal experiences from agency workers and clients clearly indicated that the issue has not improved. Families that are led by single mothers who are racialized also experience higher poverty rates than white, single mother led families. So gender and race can compound the issue of poverty.

Members of racialized communities are also discriminated against in housing. Racial inequality speaks to a larger issue related to social exclusion. Edward from Campaign 2000 says "in the final analysis that poverty is yes about income deprivation and income inequality but fundamentally it is about social exclusion. Fundamentally it is about excluding people from the common extended experience of a society."

Racialized communities are much more likely to be discriminated against in the workplace as well. People get pushed to the fringes of the economy and have difficulties securing long-term employment. While, as previously noted, jobs are already more precarious, people from racialized communities are disproportionately represented in those sectors of the economy that are low-paying, non-unionized and short-term.

Newcomers to Canada –regardless of race—must often find employment for positions where they are overqualified. As Edward from Campaign 2000 notes, “a process of socialization of many generations that essentially have embedded this notion that the human quality of immigrants is lower than the human quality of those that were trained in the Canadian context. So you can see the evaluation of people's labour is likely to lead them into types of work that are probably below their qualifications and competition that is below their qualifications. It will also likely lead them into underemployment in many cases.”

Progress and Solutions

The Truth and Reconciliation Commission of Canada’s report has 94 recommendations that need to be examined. These cover a broad range of issues but many address some of the systemic underlying areas of concern that have been raised in this section of the report.

Some people interviewed – clients and workers – expressed their belief that there should be mandatory education courses for landlords and those working in social services to help them understand the Indigenous culture and make them aware of cultural trauma and the history of these people.

Some agencies, such as Homeward Trust Edmonton and Wabano, have introduced cultural teachings into their response strategy and have witnessed extremely positive outcomes. In many cases, individuals had resorted to self-medication with illicit drugs because they were experiencing a loss of self. These agencies are introducing them to their culture and history so they can start developing a new life narrative. “Then we look at that, we talk about trauma, we talk about triggers, what tempts you into using, why do you self-medicate, what can you do instead of self-medicating, we talk about coping having that ability to heal yourself. That is why we are introducing ceremonies, because that is all about healing and being able to basically look at yourself inside out with the creator's help. And that is one of the things that I always look at when I talked about the journey to wellness, this is what I wrote because it means something to me because I walked that path – Deanna from Homeward Trust Edmonton.

Wabano has a residential treatment program for clients who are dealing with addictions. The recovery process incorporates sweat lodges, cultural teachings and other traditional ceremonies. Relapse prevention is also included as an aftercare strategy. Katie describes why aftercare is such a critical component of the rehabilitation model: “people come back from residential treatment, especially in the homeless community, from my experience, you come back from residential treatment and you're very positive, and you're sober and you're living. And then you return to the shelter system, and you're set up for failure. You're set up to fail coming back. I just...it doesn't make any sense. There should be some kind of, or more second stage, particularly more

Aboriginal second stage. But if you're coming from Aboriginal based treatment back into community, there isn't an Aboriginal-based second stage."

Social enterprise programs are very also important for Aboriginal clients as they are empowering, encourage cultural learning and assist in the development of self-sufficiency. "I run a carving program, kind of life-skills based, kind of harm reduction approach kind of thing. Where it's just a day program, get people off the streets, get them using their hands, get their minds off of active or, kind of social enterprise kind of thing. Whatever they make in that space, even though we're providing some of the initial materials, whatever they make, they can take home. They can sell it, they can gift it away, they can keep it, you know? But eventually, it hopes to instill some more positive values within themselves" – Agency member from Wabano.

Focusing on strengths is incredibly important amongst clients who have consistently been told they would never amount to anything. "So, it's a matter of drawing from those gifts, it's a matter of looking at their strengths. Instead of saying, "Oh, you relapsed again! What the hell's wrong with you?" It's like "Oh okay, let's learn from that." And that's the process is that we're always learning and moving forward. There's never a failure" – Linda from Wabano.

Recommendations Related to Discrimination

Within recommendations 2.0 (National Housing and Homelessness Strategy) and 3.0 (National Poverty Reduction Strategy) we emphasize the need to focus on Indigenous populations. For example, 2.0 says in part, "A focus on the elimination of homelessness amongst Indigenous peoples. Homelessness reductions for Indigenous Peoples should be both embedded within mainstream plans at all levels of government, but also be focused on as a separate and distinct area sensitive to the specific multi-generational and systemic injustices of our country's Indigenous communities. These strategies must be developed in conjunction with Indigenous organizations and communities."

Recommendation 10.0 also encourages community service agencies and government to develop trauma-informed services to better support clients and staff.

Partner Agency Spotlight: Ending Violence Association of BC (EVA BC)

The Ending Violence Association of British Columbia (EVA BC) is a dynamic, solutions-based provincial association that trains and supports over 300 anti-violence programs and cross sector initiatives across the Province of British Columbia respond to sexual and domestic violence, child abuse and criminal harassment. Their programs includes BC's Community Based Victim Services, Stopping the Violence Counselling and Outreach, Multicultural Outreach and Sexual Assault/Women Assault programs. Among their cross-sectoral initiatives are Violence Against Women Coordination Committee, Inter-Agency Case Assessment Teams (ICATs), Community Coordination for Women's Safety, Be More Than a Bystander, *Indigenous Communities Safety Project* and Safe Choices. EVA BC also undertakes research, develops resources and tools, conducts public education, develops best practices and works towards ending violence through prevention.

Be More Than A Bystander is one of EVA BC's flagship programs. It is a groundbreaking initiative between EVA BC and the BC Lions Football Club aimed at substantially increasing understanding of the impact of domestic and sexual violence in the lives of women and girls and on communities as a whole. Launched in 2011 the program sees sports icons from the BC Lions using their status and public profile to create awareness and urge everyone to "Break the Silence on Violence Against Women".

Since its inception, this initiative has continuously gained momentum and broadened its audience. After its first four years, the publicity reach of this program was conservatively estimated to be in excess of 137 million impressions; it has won several awards, been highlighted in a global session at the United Nations in New York and has been directly responsible for a number of spin-off campaigns across Canada. The highly successful youth education component has connected BC Lions spokespersons in-person with close to 64,000 students throughout British Columbia in the first four years through in-school presentations.

Be More Than a Bystander has also trained amateur football coaches throughout BC to help them talk to kids about violence against women and developed a film that engages men and boys as allies and encourages them to be more than bystanders. Awards include the BC Association of Broadcasters' Humanitarian Award, Scotiabank Game Changer Award, Crime Prevention and Community Safety Award from the BC Ministry of Justice and the City of Vancouver Award of Excellence.

Community Coordination for Women's Safety (CCWS) is another of EVA BC's program which assists BC communities to develop new models or improve upon existing models of cross-sectoral coordinated responses to violence against women. Coordination brings together various sectors that respond to violence against women — including community-based victim assistance, counselling, outreach, transition houses, police, hospitals, Aboriginal

services and the like to ensure that all services work together as effectively as possible with the common goal of keeping women safe.

The CCWS team connects with hundreds of communities throughout BC each year to provide consultation, information, resources and training. CCWS supports a network of cross-sectoral coordination initiatives, coordination committees, and community response networks for violence against women and sexual assault at the local level in both rural and urban communities. Central to the work of CCWS is the identification of barriers to women's safety and working with the provincial government and leaders in relevant sectors to reduce or eliminate those barriers. They also conduct legal analysis and policy development around key issues affecting women's safety and are the leaders in providing training, support and the development of best practices for Interagency Case Assessment Teams (ICATs) in British Columbia.

Interagency Case Assessment Teams (ICATs): is another ground breaking initiative of EVA BC. Since 2010, EVA BC has supported the development of approximately 50 BC communities who are either operating or developing ICATs. These cross-sectoral partnerships – involving police, child welfare, health, social service, victim support and other anti-violence agencies – work together to undertake risk assessment, risk management and safety planning in highest risk cases of domestic violence. A recent provincial file review of 639 high risk domestic violence cases involving 1,701 people (victims, children and offenders) identified 556 (87%) cases as 'highest risk' and 662 children (39%) at high risk. Communities with ICATs reported zero deaths. In 2015, EVA BC embarked on a two-year ICAT research project in partnership with the FREDA Centre for Research on Violence Against Women and Children at Simon Fraser University. Researchers are gathering ICAT data and conducting research and analysis for the purposes of verifying the outcomes reported by ICATs around the province. The creation of a standardized ICAT data collection system that could serve BC for years to come is another hoped-for legacy benefit of the research project.

Intimate Partner Violence (IPV)

Next to poverty, Intimate Partner Violence (IPV)[5] is the leading cause of homelessness for women and children. It has direct and indirect impacts, not only on homelessness, but also on poverty, trauma, substance use and a cycle of dysfunctional relationships.

[5] Also referred to as Violence Against Women, Domestic Abuse or Family Violence

What is IPV?

In the US, the Centers for Disease Control and Prevention (CDC) define Intimate Partner Violence as "physical, sexual, or psychological harm by a current or former partner or spouse. This type of violence can occur among heterosexual or same-sex couples and does not require sexual intimacy" (CDC website). In Canada, definitions vary but must include two key aspects: the type of violence and the connection of a familial relationship (expanded to include dating relationships in 2012).

Intimate Partner Violence includes a range of abusive behaviours including:

- Physical abuse
- Sexual abuse
- Verbal abuse
- Emotional abuse
- Financial victimization
- Neglect

Children who witness abuse of a parent or other family member are also considered to have been subjected to a form of child abuse.

IPV is different from violence that occurs between strangers, acquaintances or friends in a few ways. "First, the ongoing relationship, potential economic dependence and emotional attachment of intimate partner victims to their abusers make this type of violence unique (Ogrodnik, 2006). Second, the impact of victimization may extend beyond the direct victim, in that Intimate Partner Violence may also involve the safety and well-being of children (Bedi and Goddard, 2007). Third, the violence often involves multiple incidents over a period of time, rather than single, isolated events (Ogrodnik, 2006; WHO, 2002). Together, these particular victim-offender relationship factors, as well as the ongoing nature of the violence, make IPV a distinct form of violence" (all references cited in Sinha, 2012, p. 26).

People of any gender can be victims or perpetrators of Intimate Partner Violence, however the largest number of victims are women and the largest group of perpetrators are men. For spousal violence alone, men and women self-report similar rates of experiences however, women usually "experience the most severe forms of self-reported spousal victimization, such as multiple victimizations and incidents with physical injuries" (Sinha, 2013a, p. 8).

Scope of IPV

The level of family violence is hard to measure because most statistical analyses depend upon reported crimes. A large number of crimes, especially those for less serious offenses, go unreported.

"In 2013, there were 87, 820 victims of family violence in Canada. This represents a rate of 252.0 victims of family violence for every 100,000 individuals in the population"

(Sinha, 2015, p.4). The majority (68%) of family violence victims are women. Spousal violence accounted for nearly half of this number with "48% of family violence occurring at the hands of a current or former spouse (married or common law), (Sinha, 2015, p. 4).

There were 90,300 police-reported victims of Intimate Partner Violence in 2013, down slightly from the 97,500 victims in 2011 (Sinha, 2013b; Sinha, 2015). Overall, dating violence represented 53% of IPV reported to the police, while spousal violence made up 47% (Sinha, 2015).

As with violent crime overall, young Canadians were most often the victim of IPV. The highest rates of intimate partner violent victimization were amongst 20 to 24 year olds (Sinha, 2015).

Family Violence

Although many people have moved away from the term "family violence" and now use "Intimate Partner Violence", the latter term fails to capture violence that occurs between parents and children. This can be linked to homelessness when it occurs to teenagers who then flee their home to escape their abuser or when children and youth are removed from the home by child welfare. There is a strong correlation between the experiences of youth in the child welfare system and youth homelessness. "According to police-reported data for 2013, about 16,700 children and youth, or 243.5 for every 100,000 Canadians under the age of 18, were the victims of family-related violence. This represented over one-quarter (29%) of all children and youth who were the victims of a violent crime" (Sinha, 2015, p. 4).

Most often, victims of family violence were in a spousal relationship with the accused, with about half of victims in 2011 and 2013 (49% in 2011 and 48% in 2013) being currently or previously married to the accused. Another 18% of family violence victims in 2011 were victimized by their parent, 13% by an extended family member, 11% by a sibling and 9% by a child, most often a grown child (Sinha, 2013b; Sinha, 2015).

Victims of family violence were predominantly female (69%). This disproportionate representation was most pronounced for spousal violence, as 80% of victims were female, but was also evident when the accused was a child (63%), extended family member (58%), parent (57%) and sibling (57%) (Sinha, 2013b).

Provincially, the highest rates of family violence were recorded in Saskatchewan (583 per 100,000 population) and Manitoba (402), while the lowest rates were recorded in Ontario (190), Prince Edward Island (227), Nova Scotia (246) and British Columbia (271), (Sinha, 2013b).

Impact of Violence

Victims are often conditioned and made to believe that they deserved the abuse. They are in a constant cycle of thinking their situation will improve when in fact it often gets worse. “Put-downs. Everything’s my fault, even though it really never was. I can see that now. Yeah, it’s amazing when you’re in the cycle of abuse how you don’t see it, and when you finally get to a point of leaving then it’s like, a little while later you’re like, ‘Oh that was so obvious’ (laughs). Yeah. I really don’t know how to explain it” – Family Enrichment Focus Group.

Sometimes there is the belief that women are exaggerating or maliciously lying about their partner to have him apprehended. “I think another barrier to leaving which is huge when you’re talking about working the systems, and women as Tracy was just describing, have to interact with all these systems, is victim blaming. It’s huge. And it just comes from this belief that women could by lying, and this misunderstanding of why women stay in abusive relationships for so long” – CCWS Focus Group.

A study conducted by the Centre for Research on Inner City Health found that many women who took part in the study experienced abuse and/or unstable housing during their childhood, which may have had long term effects. This includes contributing to the normalization of abuse, negative self-images and maladaptive coping strategies. As adults, “they were more vulnerable to housing instability and exploitation”. It may have also contributed to “an inability to protect their own children from abuse or neglect” (2014, p.7).

Housing Stability/Instability

Women experienced housing instability in different forms across different time periods. When they lived with their abusive partner, the financial resources were there for some women and not for others, but regardless “the existence of violence led to meaningful instability and women did not feel in control, safe, or like home was a refuge (CRICH, 2014, p 7).

In the immediate aftermath of leaving their partner, “Women faced higher levels of instability and mobility as they were on the run, staying with family, friends, or in a shelter, or sleeping on the streets” (CRICH, 2014, p. 7). This precarity led some women to return to their partners or to live in undesirable living situations.

When women maintained safe housing for a long period of time, this “material housing stability contributed to their meaningful stability. This increased as they began to feel safe in their homes and in control of their lives, especially those living in social housing” (CRICH, 2014, p. 8).

IPV and Homelessness

Intimate Partner Violence can often lead to a life of homelessness amongst women. They are forced to flee their home and often have no established support networks to turn to. Violence triggers a set of circumstances where women are not able to financially support themselves, call a place home, or find employment. "Young women leave home for those reasons, they leave home for violence reasons and certainly in the past, I hope we have more response now, but that can lead to basically a lifetime of homelessness, right? Long, transient periods. If it leads into any, you know, any kind of addiction, if you can't finish your education, if you get seduced/pressured into sex trade, all these things lead to, you know, a transient life and, you know, long periods of homelessness" – Ann from Campaign 2000.

There is a correlated relationship between violence and homelessness and how both can predicate the other. Homelessness can lead to a sense of helplessness and families often lack effective coping mechanisms when they are not able to care for one another. Unfortunately, this can lead to continued violence in these precarious situations.

Many women stay with their partners out of fear, but there is a constant internal battle where they struggle to guess what will happen to them in the next bout of violence. "And I always hold him at night because he always threatens me, he had been doing that for four or five years now so I always think that he might get up when I am in a deep sleep and he might do something terrible to me like maybe stab me maybe hit me, maybe he will throw something at me. That is what goes through my mind, so I always hold him when I sleep just so that when he moves or gets up I will wake up" – Mary from YWCA Yellowknife.

IPV is a major risk factor for women who become homeless. "One of the things was we initiated a campaign to end women's homelessness. 'Cause the more we got into looking at the things that was, there's just a huge connection between the two. So, violence is the largest driver of women's homelessness and from our '*Life Beyond Shelter*' study the bottleneck is, coming out of shelter and going to some affordable housing and safety" – Ann from Campaign 2000.

Women's Experience of Homelessness

Although overall more men are homeless than women – at least in shelters and visible on the streets – there are a number of factors which put women at a higher risk of homelessness and unstable housing than men. These include:

- "non-permanent, precarious employment that make them more vulnerable to income changes and unemployment
- women are more likely to take on additional caregiver roles (children, dependents with disabilities) which are barriers to their labour participation, and increase their need for additional social supports (income assistance, accessible and stable housing, childcare, transportation, etc.)" (CERA, 2002, p. 7-8).

Many shelters that serve women fleeing violence and their children are not counted in the overall homelessness numbers as they are not always included in Point-in-Time counts. Additionally, as women's homelessness is often more hidden they may be undercounted except in prevalence studies, especially those based in social services agencies.

As discussed previously, two northern prevalence studies which examined homelessness through interviews at food banks, shelters, drop-ins, meal programs and other homeless serving agencies in Timmins and North Bay, painted a very different picture compared to what is normally found in typical one night "snapshot" Point-in-Time counts.

The Timmins study, conducted in January 2011, identified 257 children (36.5% of the total sample) 14 years of age and under who were either absolutely homeless or at high risk of becoming homeless. Over half (51%) of those in the absolutely homeless category were children and youth under the age of 19 (Kauppi et al., 2012).

Similarly, the North Bay prevalence study, conducted in July 2011, saw a much higher number of women and children than is usually found in a PiT count. One out of five participants (101 people) were under the age of 10. 39% of those who were absolutely homeless were under the age of 18 (Pallard & Kauppi, 2014).

Violence against Women Shelters

The 2014 Transition Home Survey counted 627 shelters serving abused women in operation on April 16th 2014 in Canada. The majority (57%) were founded in communities of at least 1,000 people, with 4% serving a rural population only. 3% of facilities served exclusively an on-reserve population while one-quarter of all shelters, regardless of location, provide services to both on-reserve women and women from other communities (both rural and urban) (Beattie & Hutchins, 2015).

The distribution of shelter admissions for women fleeing violence were:

- 50% - transition homes (short and moderate-term secure housing)
- 41% - emergency shelters/women's emergency centres (temporary short-term accommodation)
- 3% - second-stage housing (long term secure housing)
- 6% - other residential facilities (i.e. safe home networks, interim housing, family resource centres) (Beattie & Hutchins, 2015).

Barriers for Women in Addressing Intimate Partner Violence

There are a number of barriers that prevent women from leaving an abuser or cause women to return. These barriers stem from a number of areas including structural issues, geography, economic matters, concerns for safety, lack of services, culture etc.

There are a number of structural barriers, including a lack of employment and financial resources. A shortage of affordable housing in the area may also prevent a women from

being able to access an alternative place to live. Additionally, some women are hesitant to leave because it means entering into the bureaucratic quagmire of Children's Aid and the criminal justice system.

"Well it means that they are likely to be earning less because that's just the way it works out anyway, and physically they are more tied to the care of their children which reduces their mobility. Most women know that family law will be a nightmare if they leave, I think you know gone are the days when women had any high expectation they would be given sole custody of their children, so they usually know that will be a huge barrier for them. So disproportionate responsibility plays into their income level, their poverty, their ability to find housing the more children they have" – EVA BC Focus Group.

There are geographical barriers in the North where women are unable to leave their homes because they have nowhere else to go. Women's shelters in the North are scarce, meaning women may have to travel up to hundreds of kilometres away to access an alternative. If there is a VAW shelter in the community where a woman seeking shelter lives, there is often the fear that her partner may easily locate her due to the size of these small communities.

In many Northern and rural communities there are limited shelter options for women experiencing IPV to find refuge. "Most of the communities don't even have a shelter to go to, and some communities don't have RCMP. So where do you go when you are in violence? Those who have a shelter can go to the shelter but you go there for how long? And what does it take for somebody to be able to access a shelter? And then after that where do they go? Because they don't have any housing. There's nothing to access and housing is too expensive. They can't afford to pay and even if they can afford to pay they can't find one. And if they can't find any because they have no income you know the biggest landlord in town won't rent to them so where do they go? You just have to go back to the abuser. And then what? Because then it gets even worse because you went and then you came back. The violence gets even worse" – Kate from YWCA Yellowknife.

The criminal law system can act as a massive barrier for women experiencing IPV. "One of the other big barriers is the legal system and how it functions. We see, there's a resurgence of, well there's, mandatory charging in some places has led to dual charging, so you get called, the police get called to the house, they are under mandatory charging; they're supposed to lay a charge and they just lay a charge against both. And then the woman doesn't, you know, pursue getting a lawyer, or can't, and by the time it comes around to custody, she pleads to the charge and they've both got the same kind of charges, right, when that's not really the situation. So the legal system is a big issue, and connecting the criminal courts and family into one system; some places have that, we're

working on it in Ontario. There's the new court justice support worker program that they piloted, and that's in other places" – Ann from Campaign 2000.

When police apprehend the men, it is now out of the woman's control to reconcile differences with her husband if she chooses to do so. "But also it's, that's, like the criminal justice response; well, it's really important that, you know, these are crimes and they're against the law. It's against the law to assault anyone, especially if, you know – you're not relieved because you're married to them, or living with them. That criminal law response is not really a functional one for women a lot, right? So, the guy gets taken out of the house, and if you call the police then you're in a system you can't control. Right? You don't have, you can't say at this point, "Okay, stop. That's enough. He learned his lesson, now I want him back and start, you know, paying for everything." And they have to testify; there's things all the way along. They don't have control, they don't necessarily have the supports; they don't necessarily have access to Legal Aid. Legal Aid is a really big problem; the fact that it's hugely under-funded" – Ann from Campaign 2000.

Issues and Barriers Involving Men

In most communities there is nowhere for males to find support and receive anger management therapy. "Another barrier I'd like to talk to about is no programming for men. There's nothing. So she's in a relationship that is good 60% of the time, he's the father of her kids, she loves him, and he beats her up once and awhile, or maybe he's emotionally abusive continually. But there's no place for him to go get help unless he has money and can go to a psychologist, and you know most people don't" – EVA BC Focus Group.

Some interviewees discussed the need for a place to stay for men who are victims as well as men who are abusers. "Well, again housing if they need a place to stay. There's a whole range of services they should have, they should have services from the point they are involved in the criminal justice system. There should be somebody there giving them information about how to get themselves in a situation where this doesn't happen again, and also how, what they can do is actually protect their wife and children, and then where can they go if they actually want to get help. All of that. So services for men need to be on a spectrum, the way they are for women, and there are lots of different interventions. There needs to be psycho-educational programming for men, there needs to be probably psychotherapy for some of them, there needs to be monitoring and accountability" – EVA BC Focus Group.

While a few of the shelters listed in the THS survey allow men to stay, many do not. This also applies to older teenage boys who are often forced to move away from their mother when she is using a shelter. The shelter services for abused women at YWCA Yellowknife, for example, only allow teenage boys under 15 to stay there. At other agencies the cut off is 16 or 18.

Need for Gendered Analysis

The current response has been set up in a way that often victimizes females and forces them to escape their current situation. Ann from Campaign 2000 talks about the need to shift this perspective to protect the women and remove the males from the house to receive rehabilitation therapy. "You want to keep them housed, you'll have to get the perpetrator out of the house and make them safe in the house. The whole response, the whole system that has identified violence against women as an issue and brought it to the fore and, you know, made it a legitimate issue that we talk about and we respond to, was set up in a different way. It was set-up in an escape way."

Participants at an EVA BC focus group felt that there needed to be more training within protection services to educate police about IPV. "You have all these police that aren't being trained on the primary aggressor, and they go to a scene, and they have a gender neutral policy, so no one is telling them that like 99% is going to be violence perpetrated by men, so don't be fooled if you go to a scene and he's accusing her off abusing him." While there are certainly men who experience IPV, statistics do show that men are more often the abusers than the abused.

The political narrative around abuse also needs a gendered analysis. "I think we have always got to remember the politics. The reason that there is all these supports and services for young women, the reason there's all these abused women's shelters, in a way that's because nobody wants to deal with the bigger problem right? It's like well they are the problem, so put them in a residence, they are the problem, put them in a shelter, no one is doing anything to the men who is either getting them pregnant or the men who are abusing them hence leading. So to me there needs to be just as many shelters for these men to go to get the support that they need to stop doing what they are doing, but there isn't. And it's like they just go on carrying on freely after getting five different girls pregnant, and we have all seen that guy, one girl after another identifying the same baby father and that type of thing happening. So there is a real politics to it as well by providing shelter, it enables the government if you will to avoid dealing with the real problem" – YPNFA Focus Group.

Impact on Children and their Mental Health

Agency members acknowledged that children are often deeply affected by IPV. Children can become stressed when their parent is experiencing difficulties and when they are in a situation where the parent is not able to adequately protect the children from witnessing violence in the household. "I guess something that struck me about that, those situations where a child has had to flee domestic violence or homelessness is really the importance of mom, and I guess the resilience that you see when kids feel like mom is going to be okay. And sometimes in those situations really zoning all your supports in on mom and trying to get her, or help her get to the best place that she can be is really the best way to help the kids, because they're usually okay if mom's okay. If mom's stressed out and doesn't, you know,

doesn't know where to go next or what to do next, the kids feel that, and that anxiety of course is, has an impact on them" – Amy from Family Enrichment.

Children are also easily impressionable and look to their parents to learn habits and strategies to respond to different situations. However, if they are witnessing negative coping strategies, it can cause children to develop ineffective responses themselves. "You know, anxiety and depression typically are just – how do I say it – by-products of whatever is going on. You know? Again, if our parents have anxiety and depression we learn about it through modeling. Or, if there's something that happened to us somewhat traumatically in our past, then anxiety and depression could be a by-product of that" – Agency Member from Family Enrichment.

"I think children learn what they live and they learn to grow up and think that's the way you get what you want is to demand it by being angry. They may internalize that and may turn inward and may, depending on their personalities. They may grow up with insecure attachments to their parents. I've seen that a lot of times too where they are never able to form a secure attachment to say, a man, a father figure" – Heather from Family Enrichment.

Some agency members had experienced children that not only adopted different emotional coping strategies but grew up and continued the cycle as either the victim or perpetrator of domestic violence. "Well, I mean, it's certainly, I mean a lot of them end up being very anxious, right? Kind of hyper-vigilant, afraid of their own shadow, kind of thing. And there's the really typical, I mean you look at the statistics – girls who grow up in domestic violence, you know, households where there's domestic violence, will very often end up repeating that cycle, as in they're the victim. And boys very often will go on to, you know, fill their father's role and be the perpetrator" – Kathleen from Family Enrichment.

Children may start feeling at fault for their parents' fighting, thinking that if they could only change something, their parents would get along. It can be a very helpless and frustrating experience for children who have not yet learned how to cope with these situations or are not old enough to realize that they are not the cause of the conflict between adults. Role reversals may also occur where the children have to act as the parents in household situations where the parents are engaging in physical and verbal altercations. "Because it's what they know. That's been their model, right? Other effects? Well, I mean, a lot of times kids get very parent-ified, so taking on, like a large amount of household responsibility a lot of the time. Yeah, I mean, I can think of just different kids that have done some amazing, like taking phones away from their parents, like at seven years old, taking phones away from the parents and putting them aside and saying, "Until the two of you can learn to talk to each other, you're not getting these back" – Kathleen from Family Enrichment.

"I think one of the hardest things is that there are lots of other things, and I was going to say little but little isn't the right word 'cause they're not little. Lots of big things in terms of, like, a hierarchy of needs that aren't being met. So, whether it be housing or health, or finances, food, just access to basic human needs that when those things aren't met, honestly, the rest of it doesn't have a chance. Because there's too many other things happening at that time. And I understand that. I'm not going to be able to help a family work on some big, deep trauma that they want to unpack if they're all living crowded in a shelter and they don't have access to food, and they're in fear of different things, and there's a court process going on, and they're sick all the time. Like, those things need to be taken care of before we get to this other piece and do it justice, otherwise we're just unpacking more mess into this world that's surrounding them. And if you want to add to hopelessness, that's what you would do. But you don't want to do that, you want to instil hope" – Amanda from Wabano.

Progress and Solutions

IPV requires a complex response because it often involves several different social service sectors that are required to provide assistance and intervention: "the response and the scenario for women who are experiencing violence, the response scenario is very complicated for domestic violence in particular, it crosses over every social policy ministry. So it has to do you know justice system, child protection, housing, social income so welfare, immigration, it could have to do with Indian Affairs or reserve or Housing and Band, and reserves, and so forth. So multi-jurisdictional and very, very complex" – EVA BC Focus Group.

Group Therapy/Programs

Anger management or group therapy programs are useful for improving future outcomes. Family Enrichment and Counselling Services of Fredericton offers an anger management program for women as well as support groups for both men and women. The women's group "Changing Tides: A Support/Educational Group for Women is a free eight week program covering "Communication Skills, Healthy Relationships, Leadership Skills, Safety Planning, Self-Care and much more" (Family Enrichment website). The men's group "Changing Ways: A Program for Men" is a free 10 week program that "involves understanding and developing self-awareness to help prevent oneself from behaving in hurtful and embarrassing ways. The program focuses on successful ways to interact with friends and coworkers and is particularly helpful with anger issues in the family. The principles apply to all relationships including those at work" (Family Enrichment website).

Anger management programs such as the one at Family Enrichment are able to encourage men to analyze the root cause of their anger as well as teach them who to control it. "…It talks about people managing their stress, and managing their feelings, and being aware of their feelings, and what do you do instead of exploding in anger. But it very quickly moves into the idea that – is anger about losing control or taking control?

And the answer, according to this material, which I've come to really believe in, is; it's about taking control. In other words, every man who comes through this program, you'll say to him, "Tell me about a time when you were really angry but you didn't show it." And they'll tell you – it was with the boss, it was with the school principal, or it was with the police. So then there's question, "If there are times when you can control your anger, and other times when you don't, do you have an anger management problem or not? Seems like you're capable of managing your anger when you decide to, so why have you not decided to do that when you're with your wife?" And it has to do with control, and often it, if you could put it in a simplistic way, boils down to the spoiled child or, maybe better even, spoiled son syndrome. So boys tend to have learned from very young that they can get their way by having a temper tantrum, and unfortunately that three year-old behaviour, you know, is happening to them when they're in their thirties and forties and sixties, and fifties" - Andrew from Family Enrichment.

Diversion

There can be a link between anger management programs and court diversion as well. Some focus group participants felt that there should be rehabilitation therapy available where fathers are able to attend sessions and women are not fearful of having their husbands incarcerated. "They don't want the relationship to end, they just want him to get better so they can live in peace. So it could be a motivating factor for women to come forward to report and get help, if they thought he could get help. But the fact that the only thing that happens in BC is he gets convicted and that's the way he can get help, but the fact that there's nothing between incidents and conviction, that's no help" – EVA BC Focus Group.

The national report 'Gender Matters' - a joint report from the Native Women's Association of Canada and the Truth and Reconciliation Commission - discusses in detail the notion of court diversion and alternative sentencing. These programs, which could include mandatory attendance at one-on-one or group counselling – especially anger management – can help rebuild relationships if desired by both parties, or help prevent future occurrences of violence in other relationships. This is particularly important in Indigenous and racialized communities where there are disproportionate numbers of men involved with the criminal justice system.

Art Therapy

Art Therapy is another healing strategy for women who have experienced IPV, helping them cope with the victimization and hopelessness they have faced. "My experience has been both individually and in a group setting. That, the project that we did in the community with a group of women in another part of the province, they created storyboards to show their before and after experience of seeing themselves within the context of the abusive relationship, and then how they saw themselves as moving out and moving forward with their lives, and that re-claiming aspect. So the stories were,

they labeled their stories, they wrote very brief descriptions of each story, and they made artwork" – Agency Member from Family Enrichment.

Recommendations Related to Intimate Partner Violence

Recommendation 1.0 - We recommend that the federal government, in conjunction with the provincial, territorial and Indigenous governments, support and fund national coordinated response and action on Children's Mental Health.

Recommendation 2.0 - We recommend that the federal government, in conjunction with the provincial, territorial and Indigenous governments develop and fund a National Housing and Homelessness Strategy.

Recommendation 3.0 - We recommend that the federal government Develop and fund a National Poverty Reduction Strategy focusing on family poverty.

Recommendation 3.1 – We recommend that the federal government implement a National Housing Benefit.

Recommendation 6.0 - We recommend that provincial and territorial governments develop a province/territory-wide Plan to End Homelessness.

Recommendation 9.0 – We recommend that community agencies work to develop a system of care within their local community to provide holistic, wraparound services for clients, including coordinated assessment and common intake.

Recommendation 10.0 – We encourage community service agencies and government to develop trauma-informed services to better support clients and staff.

Children's Mental Health and Family Wellbeing

As has been noted throughout this report, the experiences of poverty and homelessness can negatively impact a child's healthy development. Prevention plays a key role in ensuring that children are healthy and happy. This section provides a brief summary of Children's Mental Health as it is related to homelessness. For a more comprehensive understanding, please see our supplemental document titled *Child & Family Homelessness: A Determinant of Children's Mental Health*.

Background

According to the Mental Health Commission of Canada (MHCC), approx. 1.2 million Canadian children and youth (1 in 5) are affected by mental health issues, yet less than 20% will receive appropriate treatment (MHCC, 2016). These numbers are even higher for children and youth experiencing homelessness. Studies into youth homelessness have shown that 40-70% struggle with mental health issues compared to 10-20% of housed youth (Gaetz, 2013). Children who are homeless – and their mothers – deal with a wide range of emotional impacts that often go unnoticed and/or untreated because of the transient nature of their lives and housing instability.

For children and youth experiencing discrimination – such as those who are from Indigenous, racialized or LGBTQ2S communities – the issue is even starker. Suicide amongst young people is the second leading cause of death – representing approximately one-quarter of deaths for those aged 15-24. For Indigenous males, the suicide rate is 126 per 100,000 and for Indigenous females it is 35 per 100,000. This contrasts with the rates for non-Aboriginal youth of 24 in 100,000 for males and 5 in 100, 000 for females (Health Canada website).

Signs and Symptoms of Children's Mental Health

A self-fulfilling prophecy can also occur when children are constantly being labeled as 'deviant' or 'different' from their peers. This can lead to children developing low self-esteem, reduced feelings of self-worth, and potentially social isolating themselves from others. "Especially if you've been traumatized. If you've been traumatized young and you've created that – you know, say, as a young person you've been criticized, you're useless, you're worthless, you're no good, this and that, or you're diagnosed with ADHD or something like that and you've gone to a doctor and you start getting this narrative about yourself, "There's something wrong with me. I need to be fixed; I'm damaged, I'm flawed." And you get that narrative and then the sooner you get that label, or you begin to get that label, people begin to only see that part of you. And every time you do something that supports that narrative" – Agency member from Family Enrichment.

Early signs and symptoms of children coping with mental health issues may manifest as behaviours such as not listening to parents, disregarding instructions, being disruptive in

social settings, etc. Adults close to the child may then label them as such, rather than inquiring further to seek proper diagnosis and treatment.

In many cases, children have been labeled and it can have a profound effect on their emotional development as they mature into a young adult. “That’s right. I don’t like to say, ‘Oh you got this, and you got that.’ I don’t label. I hate labels. Just too many people are labelled, and you’re stuck with that. Who wants to be stuck with a label on their foreheads, and this is who you are? That’s not who you are! People get well” – Linda from Wabano.

How is it related to homelessness?

Almost half of children (47%) who were homeless had been diagnosed with anxiety, depression or withdrawal, compared to only 18% of children who were living in stable housing (Hart-Shegos, 1999; National Centre on Family Homelessness, 2011; Zima et al., 1997).

In many cases, the precarious nature of homelessness, witnessing domestic violence, and the other interrelated factors associated with at-risk families can have a lasting impact on the mental development of a child. “Well, you know, basically they’ve lived through trauma. You know, in a couple of ways the trauma of whatever violence they’ve been living through, whether they were directly subjected to it or witnesses to it. So they need a lot of support around that, and re-assurance. But also, they have lived through the crisis of leaving home” – Ann from Campaign 2000.

Shame is also associated with children going to school while living in the shelter system. They will see their friends wearing new clothes, living in a nice home, without having to worry about money, and they themselves have to return home to the potentially chaotic lifestyle of not knowing where they are going to sleep that night.

Destabilized housing is another factor that can negatively affect children’s mental health. If they are constantly moving from shelter to shelter or to low-income housing, they may have to move regions and may find it difficult to establish healthy social connections. “So that, as the family transitions from a period of homelessness they’re now bouncing around from one housing to another and one community to another, and the children therefore are bouncing around from one school to another and starting school in one school and having to finish it in another, and moving around. I think that could be really de-stabilizing for, well certainly for children and I also think for parents as well” – Greg from Campaign 2000.

These destabilizing circumstances do not even take into account the stressful context of living in a shelter and being exposed to individuals who may be dealing with very

complex issues. “So within the shelter setting, there are a lot of women that are actively struggling with their addiction, there are sex-trade workers, there are people with significant mental health problems, all of which can be very impactful on children who have not experienced those things in their life up until that point” – Lynn from Campaign 2000.

Other studies have reported that growing up in precarious living conditions will affect the healthy development of children (McCoy-Roth et al., 2012; Foss, 2015). These situations can affect the physical, emotional, and psychological wellbeing of the child (McCoy-Roth et al., 2012; Foss, 2015). There is also a need for mental health supports because there is a higher incidence of mental health diagnoses amongst children who experience homelessness(Foss, 2015). This can often be attributed to the stress associated with securing housing, unstable living conditions, and a fragile social support network from moving several times throughout childhood.

Consequences of IPV on Mental Health

There are a number of issues that can arise that are dependent on the cause of homelessness. Children who witness violence between their family or caregivers, even if they have not been physically impacted themselves, have experienced a form of child abuse. As witnesses to violence, they may develop the same issues and coping mechanisms as a child who is physically, emotionally or sexually abused directly. When this happens at a very young age, it can lead to insecure attachment with parents. Other symptoms and signs include depression, anxiety, problems in school, bed wetting, sleep disorders and inability to deal with conflict.

> “Oh the impacts, they’re multiple. They’re multiple and they can be long-term. I mean, the research is clear that oftentimes children, it’s not about witnessing anymore, it’s about being exposed to. So children who live in family violence situations, it can be even seeing the impact the next day on Mom, whether they heard it or not that night, but seeing it the next day. So it’s about the exposure” – Staff member from Family Enrichment.

Growing up in a family where the parents have difficulties dealing with problems can result in children developing ineffective emotional coping strategies. “It comes with, for me, emotional management or regulation. First, if we recognize that ‘this is how I feel and it’s okay to feel this way’ then I have to know how to manage it. Again, it starts with the family. If I see my father handle his emotions appropriately or my mom, then I’ll get an idea how to handle stuff appropriately. Okay, it’s okay to cry, it’s okay to do this, whatever. And then, it’s more the – again the discussion about how it’s okay to feel this way rather than, you know. And then with that, then your coping skills, hopefully, become a little bit easier than trying to learn coping skills at an advanced age, about how to deal with your emotions”- Kelly from Port Cares.

What is Wellbeing?

> "That's a very good question. I just think it means being satisfied with your life in a number of areas like your health, your relationships, your job, or your education whatever you're pursuing in terms of a life goal in that way. I just think it involves being satisfied with who you are in a number of different areas" – Heather from Family Enrichment.

When you are living in a constant state of poverty, it is incredibly difficult to focus on anything beyond satisfying the family's basic needs. Food and shelter, according to Maslow, are two essential life needs. For children, these represent security and contribute to physical and mental health. This is true for parents as well. Caregivers concerned with providing the basic necessities for their family aren't able to focus on other personal or external challenges.

When a distressed child's parents engage with and listen to them, this can also help prevent mental health issues and strengthen a family's wellbeing. "I think a lot of it comes down to relationships, and children feeling like they're being heard, and whether it's with myself or that now they have their parent's undivided attention, and they're all acknowledging this problem that, you know, may have not been acknowledged, and everybody's talking about it, and the communication's improved, those kind of things I think are really key" – Amy from Family Enrichment.

Resiliency

Although we need to be aware of the long-term consequences associated with experiencing homelessness and how children develop psychologically and emotionally, the resiliency of children often surprised agency members. "I am always amazed. I am always amazed at children and how they bounce back and how they find the joy in whatever circumstance they're in. They have an innate ability to do that – we forget that as adults." – Heather from Family Enrichment

Promising Practices and Innovative Programs

There are a number of innovative programs that were shared with us by our community partners and focus group attendees.

Respite Care

Respite care is considered a successful Early Intervention strategy and is often a means of shelter diversion. It will be discussed in more detail in the Early Intervention component of the report. "There's no respite really around for parents. We have like for example, in the developmental sector, community living would have great services in place if you had developmental concerns. There's nothing like that for mental health, so there's no respite" - Cheryl at Pathstones.

> **"**I think that what would really help me is some type of respite or something, some way that I can have a break from the kids and know that they are safe or something too. Yea, even something like going to the cooking classes at Port Cares, I have done that in the past, but also that is difficult if you don't have child care. So for me that would help me if that was more considered" – Ashlea from Port Cares.

Play Therapy

Some of the participants talked about play therapy where traditional toys are used as tools to help children feel comfortable discussing their feelings. "Some things we do are very concrete…we have games like Candyland, those kind of games, which we use and adapt so that, if you land on a red you talk about something that makes you feel angry, if you land on a blue then you talk about something that makes you feel sad. Those kind of things; so that you're sort of playing but also talking about feelings or trying to get an understanding of 'Okay, does this child recognize feelings?' Or 'Are they identifying the right feeling with the right situation?'" – Amy from Family Enrichment.

Amy continues, commenting that sometimes play therapy is more about observing children playing with toys and seeing how they use them. She says, "I would say that our dollhouse is one that you can often just learn a lot by watching how they set it up, who they choose to put in the house and who they don't, how they interact together, what the storyline is that develops."

Self-regulation

Self-regulation is a strategy to encourage mental health and wellness amongst babies and toddlers. "Not that we see a lot of children who have autism, but sometimes with behaviour and self-regulation, that's a really buzz word now – self regulation! How are supporting parents and children with that?, Kelly from Port Cares asks. She says that they help do this by trying to slow down the parent-child interactions. "Parents are really rushed and busy. Like, they really are! The more stress parents have, the harder it is for the children."

Outdoor Time

Kelly says that outdoor time and access to nature can also help people of all ages to feel better and cope with stress. "We don't have a lot of green space, that's a gap as well. So, we've been bringing families down to [places] like Heartland Forest. Parents love that! And we get really great attendance to get there as well. Some of the other things are, we try to do some more gardening. And we know that we talk about this, we do a lot of reflective practice. It feels good to be outside. Kids do better outside. They can self-regulate better."

Cultural Programs

Traditional and cultural aspects often must be considered when developing programs to respond to children's mental health and family wellbeing. For example, Indigenous families may respond more positively to a program that has integrated traditional teachings and methods to address specific issues. "Some of my families are quite traditional, quite attached to particular practices and they want that to be a part of our therapy. And so, I normally ask them what they would like. So, that might be smudging either at the beginning of the session or maybe the end. Sometimes we use a feather or a talking stick, that way people can pass it around and people have different opportunities to speak. So, when you're holding on to the feather or the talking stick, it's your turn. Often times, we're sitting in a circle or a semi-circle format. We don't typically have barriers between us, like I wouldn't have a desk or something like it. It's an equal playing field, even in terms of chair height. If there are two different size chairs, I will sit in the smaller chair unless, you know, the 5 year old wants to sit in the little chair. That's okay. But, just those kinds of pieces. Sometimes smudging, sometimes those talking instruments, sometimes rocks for grounding. Different techniques as well. We've been trained in some Aboriginal focus oriented therapies, and so even just using some of those practices and incorporating some land based things, even when you're in a session. Plus, we liaise a lot. So, bringing in elders when appropriate, especially with circle of care or also referring to different sweats, different things that are coming up with our culture team" – Amanda from Wabano.

Physical Activity

Other preventative programs for children's mental health include subsidized sports leagues. Physical activity has been recognized as an excellent preventative strategy to maintain children's mental health but in many cases low-income and homeless families cannot afford to pay for enrollment. "Yeah, I think you see, probably, stress in the parents, and, you know, obviously that has an impact on the kids as well. When they're not sure, you know, where the next meal is coming from, or how they're going to pay for whatever it is that's coming down the line. A lot of kids that don't have any kind of extra-curricular activities either, like they're not in any kind of organized sports or any kind of; and it's a child that clearly could use some energy outlets, and, you know, burning some energy and they're in a small apartment, and that is the issue" – Amy from Family Enrichment.

Meditation and Mindfulness

Many agency members discussed the use of mindfullness within their counselling practice. By becoming aware of one's emotions, realizing that certain situations elicit those emotions, and modifying behaviours to decrease negative affective feelings, clients were better able to manage their thoughts and actions. One agency member at Family Enrichment stated, "So we just try to put a lens on that and have them notice what's going on – and that's really the key, is noticing, because if they're not noticing

then they're on automatic pilot and they're just doing, repeating the patterns that they've come to use their defense mechanisms, all of those things. And once they begin to notice and be comfortable or feel safe with noticing what's really going on for them, then they have that space in which to make choices differently."

Parenting Classes

Many at-risk parents grew up in dysfunctional families and had never been given the opportunity to learn effective parenting skills. Agency members at Wabano recognized this and realized that parenting services were a critical aspect that needed to be addressed amongst their clientele. "That it only takes one-time. When babies are born, because a lot of people don't have that knowledge, they haven't grown up with that. There's no dictionary saying how to be a parent. We have to go to school to get our BA for this, our PhD for this, but we don't go to school to learn how to be a parent" says Belinda from Wabano. For those individuals who didn't witness healthy parenting in their family of origin, she asks "how do you expect them to learn if you don't offer them programs to teach them about bonding and attachment. So, when you do that bonding and attachment, when their babies are growing and afterwards when babies are born, when you're learning these things, when you're doing these things, then that builds mental health. And not only does it help the baby, but it helps mom and dad too."

Recommendations Related to Children's Mental Health and Family Wellbeing

Recommendation 1.0 - We recommend that the federal government, in conjunction with the provincial, territorial and Indigenous governments, support and fund national coordinated response and action on Children's Mental Health.

Given the high levels of mental health problems amongst children generally, and specifically amongst homeless children, we feel that the development and implementation of a coordinated response to children's mental health is critical.

Committed individuals and organizations across Canada have already done significant work in this area, and there are a number of documents which provide a framework for action in this area such as:

- Evergreen: A Child and Youth Mental Health Framework for Canada
- School-Based Mental Health in Canada: A Final Report
- CHANGING LIVES, CHANGING DIRECTIONS: The Mental Health Strategy for Canada
- The Mental Health Strategy for Canada: A Youth Perspective

However, we also feel that existing materials have not sufficiently addressed the issues of concern in this report: children and their families experiencing homelessness. This report – and particularly the supplemental document – is our attempt to help bridge that gap and fill in the holes in this area in the Evergreen Framework. Given the large

number of children living in poverty or currently homeless, a mental health response must have significant focus on this population. Similarly, children who have been witness to IPV or who have experienced abuse directly must be included as a priority in any coordinated response to children's mental health. Finally, a national response to children's mental health must recognize the unique experiences of Canada's diverse cultural groups including, but not limited to, immigrants, refugees and Indigenous Peoples.

We recognize that there is a need for input from a variety of providers, end users and all levels of government in order to address all possible barriers and to implement solutions in this area. As such, we recommend that the federal government, in conjunction with provincial, territorial and Indigenous governments, support and fund the development and implementation of coordinated action and response to children's mental health. We further recommend that they involve key players in this action, including the Mental Health Commission of Canada (MHCC), given their previous history and knowledge in this area. The goal would be to build on the existing frameworks (such as the Evergreen Framework), and develop a coordinated response to key priority areas (including child, youth and family homelessness).

The implementation of projects and initiatives related to this recommendation will require increased funding to community organizations for staff and volunteer training as well as program development, implementation and evaluation.

Recommendation 10.0 – We encourage community service agencies and government to develop trauma-informed services to better support clients and staff.

Given the significant overlap between poverty and mental health, housing and mental health, family violence and mental health etc., we feel that there are links between many of the other recommendations including the call for a National Housing Strategy (Recommendation 2.0) and the calls for a National Poverty Reduction Strategy and National Housing Benefit program (Recommendations 3.0 and 3.1)

Stigma

Although clearly tied into the issue of discrimination, a large barrier that must be addressed in order to end family homelessness is stigma. A general narrative exists within the consciousness of the general public as to what poverty is and what homelessness is, along with what the causes are. These narratives tend to consist of "victim-blaming" and speculations of individual behavior rather than considering structural causes and system failures. If there is a public consensus that homelessness and poverty are 'choices' or the result of individual deficits, pressure or advocacy for policies that support solutions to these social concerns will prove difficult. It also empowers landlords, employers and others who may refer to these negative stereotypes instead of empowering those who have experienced homelessness.

In many cases, agency members suggested that one of the biggest barriers preventing them from accomplishing their organization's mandate was a societal belief that homelessness and poverty are unsolvable problems. This misconception can result in decreased advocacy and support for community services. As such, evaluation should continue to be an integral component of services, in order to provide evidence-based research that supports the efficacy of these programs and illustrates the societal benefits from a health, social, and economic lens.

Stereotypes and stigmas can depict poverty as an individual's concern, failing to investigate the larger social barriers that prevent families from supporting themselves: "I think people, I think there's a sense of individual, individuality or individualistic interest that we, that I think is growing, actually. Yeah. So I think there's, you know,

there's sort of these ongoing challenges and then, you know, there's, like your previous questions alluded to - there's sort of a 'who cares?' or there's a poor bashing as well. And, you know, poverty is often framed as something that is an individual, an individual deficiency rather than a systemic problem that has institutional roots that can therefore be remedied" - Laurel and Anita from Campaign 2000.

Young Parents

One group that experiences significant barriers – simply by virtue of their age – is young parents. Barriers include incomplete education, limited earning power/potential, lack of knowledge concerning basic life skills, etc. They often face discrimination in housing because of their age or due to family status (pregnancy or presence of young children).

Frequently, there is a lack of social support for young parents at-risk of homelessness as they have been ostracized from their families and have few friends who are willing (or capable) to support them through their pregnancy and when they have a young child.

A barrier to providing support services for pregnant women is that they are often considered to be part of the invisible homeless population. They do not typically spend time on the streets due to safety concerns, thus support programs must consider alternative methods for contacting and supporting young moms who are at-risk of or experiencing homelessness.

Oftentimes, young fathers are also not readily identifiable as in-need of support programs. Although they have not traditionally been considered in the delivery of services, it is an issue that needs to be addressed. "So young dads is an area that I think we all struggle with and quite honestly, some people are afraid of, even workers are afraid of. So that is another challenge that we are working on -- more education in our network members around working with young dads because it's like this boogeyman out there type of thing but they are part of the picture. You can't keep them out of the picture because they often want to be involved but they don't feel invited or they are involved but might not be healthy in their involvement so how do we help them with that" – Yvette from YPNFA.

Children's Services Interactions

An important area of need is educating young parents who incorrectly assume accessing services will result in their children been apprehended by children's services. Yvette adds, "Their biggest fear of course is connecting to agencies because their biggest fear is that someone is going to report them to Children's Aid. And yet, as I try to tell them all the time, not connecting to services is what's going to lead to your baby being apprehended by Children's Aid."

One of the concerns raised at the Child & Family Homelessness Summit was the interaction between child welfare systems and families when substance use is involved. One summit participant disclosed that their Toronto-based agency works with women who are too often afraid of losing their children to child welfare due to their use of substances, along with the consequential sense of being a 'bad mom'. Child welfare generally does not focus on how families arrived at their situation and *why* a parent might use drugs. Instead, the children are removed from the home, which often results in parents using substances more heavily as an attempt to cope with the loss of their children. The participant suggested that child welfare should focus on the cycle of drug-use and providing non-judgmental support to respond to the addiction, while making every effort to avoid removing the child(ren).

Those who have grown-up in foster care or have been involved with the child welfare system are at a higher risk of experiencing youth homelessness. By fully addressing substance use issues while attempting to keep families together, we would contribute to supporting the health and wellbeing of both parents *and* children, while decreasing further instances of youth homelessness.

Grief counselling for parents who have had their child apprehended by children's services is also important. An agency member at YPNFA discusses the value of providing services specifically for women who have had their child(ren) removed by Children's Aid: "There's lots of grief counselling for people who've lost a baby to death. I can only think of one service that provides any kind of counselling and support for women who have lost a baby to Children's Aid. I think that's a huge deal because the grief and loss process really indicates whether or not they are going to have another baby really quickly after this one to replace that baby. There is definitely a marked difference if they've a lot of that support after the baby's apprehended."

Young Parents and Support

Support for all parents is a vital necessity. Some very effective programs have been developed to respond specifically to parents under the age of 25 however, once a single mother ages out of these programs, availability of support becomes much more limited.

There are a number of difficulties associated with a young woman becoming pregnant. A member of the YPNFA focus groups says, "I think that is the key because of a lot of young parents become pregnant to escape a situation without having things set up in place so they want to leave their situation that may have involved poor parenting, and trauma and addiction and parental mental health. So they want to escape that place but then they don't have their own housing stability routines, finances in place. So you're stuck between a rock and a hard place really."

In addition to these types of difficulties, young parents can also endure a great deal of stress. "And anybody parenting alone at any age, it is a challenge because you don't get any time for yourself, and so compounded with potentially current or past addiction issues, the mental health, not knowing how you are going to pay your bills, creditors calling you, all these things you know is just an overwhelming situation I think. And then being afraid to ask for help because you don't want to lose your child to care for a variety of reasons including potentially your own past trauma in care" – YPNFA Focus Group.

Additionally, systemic barriers pose challenges to young parents, including:

- Lack of medical services sympathetic to their needs. This includes being judged by medical professionals or having restricted access to services because their health card was lost or stolen.
- Social service restrictions can also exacerbate hardships.. Service users are required to have a fixed address in order to access social assistance however, they may not be able to secure housing without proof of income. There have also been cases where welfare workers have failed to inform young parents of their rights, including special diet allowances.

- Upon becoming pregnant, young women attending high school are often told by their school that they must leave their school and go to an alternative program in order to attain their diploma.
- Because most youth shelters do not serve couples, some young parents choose to live elsewhere, including on the streets, in order to not be separated.
- Shelters that require intensive intake processes which may seem intrusive, while a heavy focus on treatment plans can be deterrent for young parents. This can detract from what is truly needed, especially for pregnant mothers: a safe place to stay.

Recommendations Related to Stigma

Due to the interconnectedness of stigma with mental health, poverty, homelessness and trauma, several of our recommendations align with this pillar. This includes; a national coordinated response and action on Children's Mental Health (Recommendation 1.0), a National Housing Strategy (Recommendation 2.0), a National Poverty-Reduction Strategy (Recommendation 3.0), a National Housing Benefit (Recommendation 3.1) and the development of trauma-informed services (Recommendation 10.0).

Partner Agency Spotlight: Young Parents No Fixed Address (YPNFA)

Young Parents with No Fixed Address (YPNFA), a program of Oolagen Community Services, is a network of Toronto-based service providers who have been collaborating since 1997 to address service needs and barriers faced by pregnant or parenting homeless youth.

YPNFA consists of 34 agencies including Young Parent Resource Centres, shelters, Toronto Public Health, child welfare, hospitals and youth mental services among others. This network provides general advocacy and community engagement to address the needs of this vulnerable population. The coordination of this network also ensures that young parents are able to have their needs met quickly and efficiently. The network meets monthly to discuss current trends in the city and any gaps in services provided in Toronto. They then work to develop appropriate programs to address these gaps via research or advocacy and shared education/training.

Some of their achievements to date include:

- **Passport to Parenting** - developed at St. Michael's Hospital in an attempt to ensure that young women experiencing homelessness were receiving suitable pre-natal care. Social workers, nurses and doctors provide wrap-around services to at risk women who come to the hospital including providing incentives such as bus tokens, clothing, hygiene products and gift cards. To date, 80% of babies born from women in this program have been born full- term and at a healthy weight.
- **1900 Sheppard Ave W**. - YPNFA worked with Toronto Community Housing Corporation to develop a 27-unit apartment building for young single mothers, especially for those under the age of 19. The apartments are subsidized and the young families can stay for up to four years, with the expectation that they are working on furthering their education or career.
- The network has supported the development of a free **Weekend Respite Program** for young parents in Toronto. They have also been involved for several years assisting in the annual **Birth Count to Homeless Women** in Toronto. The network is now collaborating with a group of pediatricians and offering **Pediatric Clinics** to young parents and their children at various locations across the city.

Systems-Based Response

What Are Systems-Based Responses?

Systems-Based Responses, often known as "systems integration" or "systems of care", refers to addressing the issue of homelessness – and all of the interconnected issues – in a collaborative and cross-sectoral manner. As discussed in the overview, a "system of care is a strengths-based, culturally relevant, participatory framework for working with individuals with complex needs. A system of care approach utilizes inter-agency collaboration, individualized programming and community-based service provision" (Homeless Hub).

> System integration can be defined broadly as the provision of services with high levels of coordination, communication, trust, and respect among service agencies so that they are better able to work together to achieve common objectives.
>
> (Greenberg and Rosenheck, 2010, p. 185)

Systems can refer to varied levels of community – municipal, provincial/territorial or national. Often, community service agencies have a desire to engage in systems work but are challenged because of pressures from funders and lack of resources. Conflicting demands of funders, sometimes due to a lack of collaboration, may mean that programs are evaluated by different and often competing standards.

Systems-Based Responses are a means of coordinating services in order to reduce duplication, increase efficiency, improve communication and make services more seamless (Homeless Hub).

The Systems Spectrum

Systems Integration occurs along a spectrum that ranges from fragmentation through to full integration, both within the homelessness sector and externally. A fully integrated system includes strategic cross-sectoral planning, standardized assessments and shared agendas.

Figure 7 – Stages of Systems Integration Spectrum
Source: Homeless Hub.

There are five stages of the Systems Spectrum:

Fragmentation – This refers to complete separation between agencies and therefore, is the least desirable and least positive state of being. Organizations have no communication and clients must continually retell their stories.

Cooperation – This is the first stage of joint partnership and is often limited to communication and information-sharing. It may lead to referrals between agencies. It is a bottom-up form of integration.

Collaboration – This refers to loose networks of affiliation or more formal partnerships including professional networks, community roundtables or working groups. While it is a clear sign of partnership, there is no need for formal infrastructure at this stage. Collaborations are often time-limited or are focused on a particular problem. "Although people use tools such as shared terms of reference, memoranda of understanding, or co-created working principles to solidify a collaborative relationship, collaborations are not associated with the types of formalized structures that promote integration (e.g. universal assessment protocols, shared performance standards, and pooled funding) (Homeless Hub).

Coordination – "Collaboration and coordination are related. Collaboration refers to links among people. Coordination refers to links among organizations. Collaboration facilitates and is facilitated by coordination" (Homeless Hub). Coordination is a more formal means of partnership and includes developing common processes and procedures across various organizations. It could involve co-located services – a health unit or ID clinic having offices at a drop-in centre – but where full integration has not been achieved.

Integration – This refers to "a range of strategies and frameworks for improving collaboration and coordination between people, organizations and sectors" (Homeless Hub). It includes shared terms of reference and a much more formalized partnership. Agencies and organizations apply jointly for funding, may merge together, share common performance standards and may develop a common assessment and intake process.

> "In most communities, homelessness services operate in the middle of the spectrum: cooperation, collaboration or coordination. Often, there is a great deal of systems work happening within the sector, but less cooperation, collaboration or coordination outside of the sector (i.e. with the education, corrections or health sectors) (Homeless Hub).

Why Are Systems-Based Responses Important?

Our current system is very fragmented and, in many ways, broken. Clients have challenges navigating the system but workers also face challenges in ensuring the needs of their clients are met completely. Agency members recognized the limited collaboration and coordination between systems and spoke about how frustrating it was for families to try and navigate. Ashley from Homeward Trust Edmonton says that a systems response is definitely needed. “It’s not something where you can build one team to fix this whole issue. It’s a fragmented system in Edmonton, it really is; between income support and the health system, and the justice system and all the homeless serving agencies. There are so many catch 22’s or systemic barriers that once somebody gets into homelessness, it is so hard for them to get out. There are all these things, like you can’t even apply for income support without having an address. How are you supposed to get an address unless you...it’s this whole cycle.”

Often agencies have the same end goal but different strategies to accomplish their program’s mandate. This can lead to tension between agencies and in deciding what the optimal approach is to respond to populations in need. “The thing is, all of our agencies are very good but they have different mandates, they have different focuses” says Renee from Homeward Trust Edmonton. By providing some coordination, common language and tools, Homeward Trust’s agencies are better able to work together.

The lack of systems integration takes a toll on families. All agencies noted that without integrated services, families were much more likely to fall through the cracks and not be able to access the services they desperately require.

Institutions that make up our social services must reconceptualise the process for discharging clients to ensure better integration and avoid discharging families and children into homelessness. For example, many individuals become homeless after being discharged from hospitals, corrections facilities, mental health facilities, addictions services, or when youth ‘age out’ of child welfare support. This is because there is a lack of support services available to help transition these individuals into a stabilized setting.

The majority of agency members and families interviewed agree that although affordable housing is a necessary step in the right direction, it cannot be the only support that is offered. Additional supportive services must be in place to not only help individuals maintain housing, but enable them to address other concerns in their lives, both in a formal and an informal sense. “People need adequate incomes to be able to pay for their housing as well as, you know, the other expenses for daily living, and then there’s also the need for community supports…formal supports like access to healthcare, and education, and community services, but also informal supports” - Greg Campaign 2000.

Coordinated Intake and Coordinated Assessment

There are two ways to approach Coordinated Intake or Centralized Intake. One method includes the development and use of a common intake form that enables families to enter the homeless or social service sector through any agency, knowing that their information will be shared through a centralized database. Rather than having to repeat their story over and over at each point of service – which can revive trauma – coordinated intake stores information for future access by service providers. This also ensures consistent assessment using the same process no matter where an individual or family enters the system. Standardized assessment reduces the length of time a family is homeless and can facilitate prevention by recognizing risk factors and addressing them early. The other method uses one location, number or team to fulfill the same function. This information is then shared widely as needed. In this case, a family can call the centralized intake number, provide their information and then be referred to the appropriate services.

This process also provides a standardized assessment of an individual or family's needs. If the intake and tools used to measure acuity are comprehensive, it can result in a more effective response to homelessness.

Coordinated intake and assessment also reduces the problems that arise when multiple service professionals and agencies are involved in working with a family. There may be a file at the doctor's office cataloguing poor nutrition, while the file at the school records outbursts and failing grades, and the police file records the number of times they have been called to a house because of IPV. When agencies can share information, a more holistic picture emerges.

At the Child and Family Homelessness Summit, many people spoke about the need for a "One Child, One Case" approach. While there may be legal and privacy restrictions prohibiting some organizations from taking part, greater involvement in shared knowledge production will increase the capacity and impact of services. One Summit participant from New Brunswick spoke about the effectiveness of partnering with schools: community agencies and the educational sector each shared some information, but maintained confidentiality. As a result of this cooperation, absenteeism is on the decrease.

> "The coordinated access team is in development and is meant to fulfill a vision of the no wrong door approach. So any individual experiencing a homelessness issue should be able to walk into or call any multitude of places and get access to the same information. Standardized assessment for housing programs or resources geared towards addressing their situation" –Ashley from Homeward Trust Edmonton.

Case Management

> "Case management refers to a collaborative and planned approach to ensuring that a person who experiences homelessness gets the services and supports that they need to move forward with their lives. Originating in the mental health and addictions sector, the strategies and tools of case management can be used more broadly to support anyone who has experienced homelessness overcome challenges. It is a comprehensive and strategic form of service provision whereby a case worker assesses the needs of the client (and potentially their family) and, where appropriate, arranges, coordinates and advocates for delivery and access to a range of programs and services designed to meet the individual's needs" (Homeless Hub).

When case management is client-centered (which is a good practice), it ensures that the individual or family has a say in drawing up their goals and needs for services, rather than having these imposed by the case manager. Good case management is strengths-based and empowers individuals. In the long-term, this helps clients develop skills and resiliency which can in-turn aid in housing stability.

Case management is almost always a part of Housing First and usually a part of Rapid Re-housing approaches. There are different levels of case management based on the client's acuity, and often it is provided by a team to allow for a more holistic approach to meeting all of the client's different needs including health, financial support, addictions issues, etc.

There is a strong link between case management and systems-based responses. "A case management approach, then, necessarily works best with a system of care approach, where links are made to necessary services and supports, based on identified client need. That is, once a person becomes homeless, or is identified as being at risk, they are not simply unleashed into the emergency services sector. An intake is done, risks are identified, goals are established and plans are put in place. Individuals and families therefore become 'clients' not of specific agencies, per se, but rather, of the sector. They are supported from the moment they are identified as (potentially) homeless, right through to the solution stage, and then after they have either returned home, or moved into a place of their own if there is need for continued support" (Homeless Hub).

Wraparound Services

Wraparound services recognize the voice, choice and ownership of the client and include the client's perspective in developing services. It is a process that is catered to the needs of the child and family, and includes both informal supports (i.e. family, friends and neighbours) and professionals.

In some agencies, case management and wraparound are different but complementary services. In these instances, the case management process is top-down whereas the wraparound facilitator works with the client to build a bottom-up support system.

Co-located Services

Co-located services helps improve the coordination between separate groups and offers a more accessible and streamlined response for clients. Port Cares provides several different services including housing support, meal programs, employment services, mental health support, counselors, lawyers, and child care all under one roof. By offering several services in one building, agency members are able to use a 'soft hand-off' to ease the client transition between services. Clients no longer have to struggle to contact different programs and secure transportation between locations, but are able to find comprehensive support from one organization.

As Amanda and Marissa from Port Cares discussed co-located services, they identified the inherent benefit of offering multiple programs at one location: "Well, if someone's for example having a hard time paying their rent and they are looking for alternative housing options, certainly, there's us here, the food banks, the meal programs, for basic support so those basic needs are addressed, so that they are better able to go through the housing process, or go through the ID clinic, they have that stability at least, that they don't have to worry about 'where's my next meal gonna come from', so maybe in that respect, whereas other independent offices that simply address housing might not have that kind of connection available to them right on the same site, if that answers your question. I think we serve the clients better when there is no disconnect. We get the whole picture so we can better address, 'okay, these are your needs overall'."

Port Cares Executive Director Christine Clark Lafleur understands that homelessness is a complex issue that cannot be solved by providing housing alone. There is an interaction of issues that must be addressed, otherwise families and children will have a difficult time managing their situation. "It's huge, every minute or every hour of every day, we work. Canadian Mental Health clients are our clients as well, significant professional collegiality that goes on to work on. Even two outside the building, with the Community House Centre, we have a lot of ongoing dialogue. Again, it is client specific, when there is a situation that manifests, then folks are on it. So it's part of the oxygen, lifeblood that goes on. Because, our clients, there is huge complexity with poverty, there is huge complexity with the clients that we serve. You have to have those partnerships, because you are dealing with a whole person, and all the elements of their life reality."

One reason why Port Cares is able to provide such a comprehensive service is due to the personal connections and relationships between services. The service is offered in a rural context where many agency members have lived for their entire lives. Individuals are very supportive of one another, and that cohesive element is directly related to the close-knit community of passionate agency members who are providing services on a daily basis.

“I guess the biggest thing is just that the referrals are so easy and that we can make that soft handoff to other programs. And we also have the support there. It’s not necessarily always just referrals, but we’re constantly walking over to the other agencies office and asking them questions. Whether it’s the Member of Parliament, or the Canadian Mental Health Association, or it is Service Canada. We’re able to go there and get our questions answered instantly while the client is our office, rather than waiting on hold on a phone call or emailing somewhere and waiting for them to get back to you because a lot of times, if I send a client out of my office, that might be the last time I see them cause I can’t get a hold of them, they don’t have a phone number, they don’t have access to the internet. I may never see them again. So, if I am able to hook them up with services the first time they’re in my office, then I feel like they have a much better chance” – Port Cares Focus Group.

Another benefit of having co-located services under one roof as opposed to offering the same programs from one organization is that services have greater access to funding and grant opportunities. The agency members recognized that by applying for financial grants as separate agencies, they are able to secure additional funding that they otherwise would not have been eligible for if they were operating as one entity.

Leadership and Collaboration

Lack of coordination and leadership from government has often left local advocates and agencies shouldering the responsibilities of developing and ending homelessness in their community. Despite the local and provincial buy-in taking place in many communities, the lack of federal involvement was identified as a concern by several agency members. “I think one of the big things is that Canada doesn’t have a federal anti-poverty plan” says Michelle from Campaign 2000. She explained that under the previous Conservative government there was no recognition of coordination of poverty reduction being a priority issue.

Systems-based responses involve breaking down the silos that exist between agencies, between sectors and between various levels of government. Many agencies felt that while the research is in place to show what needs to be done, political will to move to the next step was lacking.

“You know, every social change initiative needs a champion. I mean, that's kind of the bottom line. Our job is to cultivate a group of champions and you will have to have, probably, one or two champions at the local level to get that started. To develop the respect from the other members at the table, and to animate the other champions, to enlighten them, and to encourage them to become leaders” – CCWS Focus Group.

At the local level, collaboration can be a beneficial strategy for agencies but is also a means to provide more comprehensive support for clients. For example, Homeward Trust created a Housing First Advisory Council to bridge services that otherwise would

not have been communicating together. They recognized that the sum of their collective parts were greater than their individual contributions and were able to modify their entire service delivery model to offer more supportive and complete services to Housing First clients. The management team at Homeward Trust recognized that no individual service had the capability to end homelessness alone, and realized that by bringing together representatives from different sectors, they would be able to discuss strengths and weaknesses of the current system while fostering innovative ways to improve service delivery.

Community-wide collaboration was a critical element for Homeward Trust in establishing a response to Edmonton's ten-year plan to end homelessness. Having active participants as collaborators promoted city engagement and advocacy, resulting in a reduction of homelessness and an increase in the number of at-risk individuals who have been housed. For example, at the half way mark of their plan, Edmonton had housed 2,909 previously homeless individuals in 2,178 permanent homes. Moreover, collaborative services had enabled 84% of individuals who were formerly homeless to retain their housing (Edmonton Homeless Commission, 2014).

Yvette from YPNFA speaks to the fact that collaboration is not only beneficial for clients but has been a supportive environment for agency members as well. "One of the things we have been talking about too is this whole collaboration and creating resiliency of workers. We talked so much about resiliency of youth but no one is focusing on how we make workers more resilient." If workers understand that they are part of a network of support systems, they can trust the process and focus on the services they are responsible for. Agency members are also able to explore alternative avenues of support through collaborative efforts with other services.

Limits and Barriers

This is not to say that forming collaboration between services removes all limitations and barriers. Some agency members suggested that a collaborative effort between several different agencies can cause some difficulties. Separate agencies may have separate service model delivery philosophies, which can make it challenging to decide what strategy will provide the most positive outcomes for clients. "It was just along the same track of what are some of the problems we're seeing as far as just the continuum of care. We were talking about the idea that we have a lot of different social enterprises, social services that have different philosophies, different models, and different staffing within those agencies that have buy in to those specific models. So when we're coming at it from our angle of harm reduction and kind of the Housing First push, we're seeing a lot of resistance and a lot of push from that because our philosophies don't align. What we're doing and the way that we're doing it goes against the grain of what may get taught and what they know. And so they're just so far entrenched in those attitudes that really creates problems, barriers and getting services for our people. Not just getting services, but getting services that empower people in order to come out of poverty" – E4C Focus Group.

Systems-Based Responses and Children's Mental Health and Family Wellbeing

Services must transition from reacting to homeless and at-risk families and move further upstream in an attempt to prevent these precarious circumstances, as opposed to merely managing them. Services that are integrated within pre-existing systems can provide comprehensive support and ease the system navigation process for families. For example, some communities employ counselling services to provide programming within elementary schools for children who have been identified as having mental health concerns or are at-risk of developing mental health issues later in life. "And he could also take kids out of class and work with them if they needed it, and was totally aware of their progress. So it was really functional for the school to have that, and I think probably a little more affordable, to have one person who could work a number of schools – and he supported those kids all the way through that school – than to have the shelters try and maintain that" – Ann from Campaign 2000.

Ann suggests that these programs can move even further upstream and be integrated into subsidized daycare services where one counsellor would be responsible for managing five or six separate programs and can meet with both children and families to improve children's mental health and family wellbeing. "They get those kinds of supports, and you could put into daycares the same kind of supports we were talking about with, you know, in schools for kids that are coming out of traumatized situations. The same thing; you could have a counsellor who worked five or six daycares and worked with those kids. You see this stuff now, you know, when you're talking about the Elliot Rodger's[6] of the world and stuff like that. You know, you'll get educators who say, "We can tell who those kids are." You know, not that they'll necessarily go to that extreme but the ones who are headed for trouble, you know, you can pick them out in kindergarten and in grade one."

While the social service systems responding to the unmet needs of children experiencing mental health issues require integration, there is also a need for investment in resources and education to encourage social integration and support between individuals. The complex needs of these children can be addressed only when there is support from family, friends, and other individuals in their communities (Kutcher & McLuckie, 2010). Supportive networks are more likely to identify early signs and symptoms of mental health related concerns, enabling an intervention before they have progressed too far. Early consultation and screening can be encouraged among young families, but can also be integrated into existing support systems such as schools or general healthcare settings where counsellors and physicians can link families to mental health organizations for additional support (Kutcher & McLuckie, 2010).

[6] Elliot Rodger killed six people and injured 14 in Isla Vista California on May 23 2014.

The most effective way to integrate multiple systems is to focus on collaboration within existing systems responding to children's wellbeing. These support systems can include: schools, mental health organizations, recreation agencies, and social services.

Systems-Responses to IPV

There is a need for increased coordination between social services. "Everyone knows something, no one knows everything – e.g. child protection may know about a threat he's made to kids, police know record, etc. – with full knowledge better able to assess risk, better safety plan," says Tracy at EVA BC. Building collaboration between different services is also important. "I think part of what we do is…we mentor people to cultivate those relationships between systems people, RCMP and community-based anti-violence workers. We try to facilitate the creation and the ongoing helpful relationship so that they've got to the point now where many communities can work collaboratively, and the trust is built so that they can do some information sharing, especially about high-risk cases without violating any privacy or legislation" – Debby from EVA BC.

Recommendations Related to Systems-Based Responses

Recommendation 1.0 – We recommend that the federal government, in conjunction with the provincial, territorial and Indigenous governments support and fund a national coordinated response and action on Children's Mental Health.

Recommendation 4.0 – That the provincial and territorial governments implement a "One Child, One Case" policy for all government services.

Recommendation 5.0 - That the provincial and territorial governments develop a Ministerial Homelessness and Housing Secretariat/Roundtable for Preventing and Ending Homelessness.

Recommendation 6.0 - That the provincial and territorial governments develop a province/territory-wide Plan to End Homelessness.

Recommendation 9.0 – We recommend that community agencies work to develop a system of care within their local community to provide holistic, wraparound services for clients, including coordinated assessment and common intake.

Partner Agency Spotlight: Port Cares

Port Cares is a community organization located in Port Colborne, Ontario that provides front line support, leadership and resources to individuals and families to help them achieve a better quality of life. The agency provides wrap-around services including housing, homelessness prevention, food support through food bank and meal programs, crisis intervention, literacy and basic skills, pre-employment and employment services, youth justice, child development and parenting support all under one roof.

The agency provides services through two main locations and three satellite centres.

Port Cares mandate is:

- To relieve poverty by providing food and other basic needs through [their] food bank, meal programs, housing and utility supports.
- To provide crisis support and advocacy as well as information and referrals to those in need.
- To operate an employment centre with resources for both job seekers and employers.
- To deliver skills training, workshops, literacy and education programs to reach personal and employment goals.
- To operate child and youth resource centres and programs.
- To partner with outside agencies to deliver additional vital programs and services at our Port Cares locations.

Along with the comprehensive roster of services provided by the agency, Port Cares also houses in its facilities a number of partner programs including advocacy services, mental health services and legal and judicial services. Pathstone Mental Health is the primary provider of child and youth mental health services in the Niagara region. A representative from Pathstone is stationed at Port Cares to provide closer to home service to local families. For the adult population mental health professionals from the Canadian Mental Health Association are also on site three days a week.

Port Cares offers a trusteeship program that assists individuals in remaining housed by ensuring that their housing-related expenses are paid, for example rent and heat. All of the individual or family's income and household expenses are forwarded to Port Cares who facilitates the payments and assists the client with budgeting the remainder of their funds.

Yvon, a Port Cares client says, "…I wish I had known sooner that this program was available because I wouldn't have stressed out as much as I did. You know what I mean? I would have known, okay hard times are coming but these people can help me out. I was stressed out, depressed and hating life, contemplating suicide, thinking I don't want to be here anymore. There's no light at the end of the tunnel. But I didn't know that there were those programs for people in a predicament."

Port Cares accesses funding and grants for homelessness prevention and basic needs programs through a competitive request for proposal process with awarded funds tied to short term contracts, typically for 12 to 24 months. “[With] time limited funding, sometimes you feel that you have hardly got a project off the ground, and if you don't have the numbers that they are looking for, you are not going to able to continue and sometimes you need more time, to build it up, build the interest, to develop the program. So that’s definitely a barrier…” Amanda and Marissa from Port Cares.

Residents of the community do not always understand the dimensions of poverty and homelessness. Ensuring ongoing education and awareness about the nature of homelessness is an important factor in diminishing stigma associated with homelessness and poverty and to leveraging local support. Judy from Port Cares says “homelessness [certainly exists] in Port Colborne [but] one of the things that makes the toques a hard sell here is that people don't believe that there's homelessness because they don't see it. Because there's not someone sitting on a heat vent on the sidewalk. So, we really try to make sure people are aware that, just because you don't see them doesn't mean they're not homeless, couch surfing. I mean, they don't have a steady place to go. They don't know if they know they're going to get kicked out the next night and they're not going to have some place to stay. They don't know where their next meal is coming from. And so, all of that is still homeless and that's the awareness.”

Early Intervention

As mentioned previously, early intervention is also known as “secondary prevention”. Unlike primary prevention, which is intended to avert people from becoming homeless, early intervention is intended to stop the problem from escalating once it occurs or when a family is at extreme risk of experiencing homelessness. By intervening early and preventing escalation, the goal is to ensure that families do not experience homelessness for a long period of time or are diverted from the shelter system entirely.

Early intervention is tied to systems prevention. That is, ensuring mainstream institutions are not causing people to become homeless upon discharge. A significant amount of homelessness can be traced to people exiting health or mental health institutions, jails, prisons or detention centres, detox or rehabilitation facilities and the child welfare system. By ensuring systems failures do not lead to homelessness, we can reduce the number of people who become homeless.

There are a number of proven early intervention strategies, tactics and programs, especially within the United Kingdom, United States and Australia. These countries are ahead of Canada in developing early intervention (and prevention) responses to homelessness.

These include:

- Shelter Diversion
    - Host Homes/Respite Accommodation
    - Family Reconnect
- Rapid Rehousing
- Transitional or Second-Stage Housing
- Housing First

Shelter Diversion

In many cases, organizations suggested that there was a need for more protective measures to be implemented within existing systems to prevent families from experiencing homelessness and entering the shelter system. These ideas included providing rent arrears, utility arrears, or working with a case manager to manage finances and other challenges so that families can maintain housing.

Some community agency members have suggested that although they understand the temporary nature of shelters, there will always be a need for some emergency support services for families that experience unforeseen housing circumstances. Judy from Port Cares says "Do you know what, this is old school, but a shelter. Where do we put individuals that are homeless? I know shelter isn't the word that anyone wants to hear, but what do we have that's alternatives? Motels used to be an alternative. They're too expensive now. And there's only so many families, because of the situations with the individuals - their behaviours, whatever - that will take the family member and it would be very short term. And then they end up out on the street again. I'm saying no fault to the individual because the individual's mental health has nothing to do with the choices that they're forced to make."

Shelter diversion has several benefits according to Lynn from Campaign 2000. She says, "And it costs less. It's kind of a perfect storm of goodness, in that it's good social policy, it's good economic policy, and it's good human policy. We very rarely have programs that do all of that and cost less at the same time."

The lack of resources – both physical and human – can act as a barrier for programs and services aimed at diverting families from entering the shelter system. If a family requires a high-level of support, there may not be sufficient support workers to meet those needs and families will often have to resort to moving into a shelter setting.

Host Homes/Respite Accommodation

Host Homes (as they are more often called in Canada and the United States) or Respite Accommodation (as it's known in the United Kingdom) is an approach primarily used with young people. It is a method of shelter diversion that offers an alternative to couch surfing or staying in a shelter. While it is primarily used for singles, it would be possible

to modify the program to suit families, especially young single parents who need some support or a break away from their current living situation. By providing breathing room –especially if it offered along with some counselling or other supports –the family may have the time to reassess and find a more permanent living situation. The Calgary Boys and Girls Club (CBGC) recently announced that it was creating a Host Homes program for LGBTQ2S youth, a sub-population that is over-represented in the youth homelessness sector. Known as Aura Host Homes, the program will provide host homes for 16 LGBTQ2S youth between 14 and 24.

Family Reconnect

Family reconnection (also known as family reunification) is another method of early intervention that has primarily been used with youth. It could be easily adapted to address spousal issues or to provide supports for young parents who have been living with their family. Family Reconnect is a client-driven approach that provides case management services between two sets of people – usually a young person and their family. The goal is to resolve conflicts and rebuild the existing relationship and support structures so that the family can be reunified. This could also be used in conjunction with a Host Homes program to allow a safe place for one party to stay during the case management and counselling process.

Rapid Rehousing

Rapid Rehousing offers an alternative for low or moderate acuity families who are able to be permanently rehoused within a short timeframe and who require minimal supports. Each Rapid Rehousing program works a little bit differently too. At Homeward Trust Edmonton, Ashley says that Rapid Rehousing is primarily based on the timeframe that supports will be needed. "…whereas Housing First intensive case management is really one year case management following the housing, the rapid rehousing is 6 months. So it is meant to serve people with lower acuity, lower complexity. More of them for a shorter period of time."

Rapid Rehousing can often act as part of a housing continuum along with transitional housing and Housing First programs. Most Housing First programs are designed to serve individuals with high acuity and provide intensive case management supports.

Rapid Rehousing can be used to prevent homeless families from becoming entrenched in the homelessness system when the barriers to housing are minimal. If the barrier to successful housing is financial, combining some housing assistance, basic case management services and a rent supplement or housing voucher can be a means of moving families into housing quickly.

Transitional and Second Stage Housing

Many housing programs offer transitional housing or second stage housing that is intended to serve as a stop-gap measure between shelters and

permanent housing. The limited availability of social housing in many communities and the long waiting lists – especially for subsidized housing – means that many families wait several years before having access this housing. Transitional housing is a tool to provide a better living environment during this waiting period.

Transitional housing may also be tied to a certain program. Upon "graduation", families are expected to move into a more permanent housing situation, which may or not be available because of low housing vacancies. Agency members suggested that there is a need to move away from the transitional housing model towards housing families in permanent homes. The instability associated with moving from home to home had a tendency to wear down family members and added to the emotional stress of the entire family unit. Finding permanent housing would also allow families to manage other challenges such as securing employment, long term financial self-sufficiency and strengthening the overall stability of the family unit.

Following the decline of federal investment in building affordable housing in Canada, program dollars allocated to homelessness response allowed for the development of transitional housing units but not permanent housing. This meant that agencies had to develop housing to meet the urgent needs of homeless families but could not create permanence. (Many got around this by saying that the "housing was transitional until permanent housing was available").

Housing First

A Housing First approach is based on the belief that people can successfully move out of homelessness and address underlying issues in their lives if they are first housed. It is "a recovery-oriented approach that involves moving people who experience homelessness into independent, permanent housing as quickly as possible and with no preconditions, and then providing them with additional services and supports as needed" (Gaetz, Scott & Gulliver, 2013, p. 2).

Traditional responses to homelessness have often required individuals and families to become "housing ready", in particular by addressing issues such as mental health or addiction. Yet, given that the experience of homelessness can create negative mental health or exacerbate mental illness and/or addictions, maintaining people in an emergency shelter and continuing their homelessness is counter-intuitive.

In Housing First programs, "people who are homeless are presented with the option of housing that is not conditional upon lifestyle, behavioural, or treatment expectations and have some say in the type and location of the housing, with the expectation it is of reasonable quality" (Gaetz, Scott & Gulliver, 2013, p. 2). This reduces time in emergency shelters or on the street and improves the overall standard and quality of life. While important for everybody, this is particularly important for children and youth. After

housing, ongoing supports are provided on an individualized basis to help address the factors that originally led to homelessness.

Once people have their basic needs – such as housing and food – met, they can begin to address other issues they may be facing and experience a sense of empowerment in being able to care for their family. "You give them housing. And food and shelter and all their basic needs. You are able to help put them on a path of self-determination where once they have their rights restored they are able to get to a point where they can choose what they want for themselves. Which again is another human right. Like all the warm fuzzy stuff, like it is really hopeful and really awesome to watch people transform their lives. And some of the people seeing what they are going through when you first meet them to seeing them a year later is just like why everybody does this work" – Ashley from Homeward Trust Edmonton.

Core Principles of Housing First

There are 5 core principles of a Housing First approach (based on Gaetz, Scott & Gulliver, 2013)*:*

- *Immediate access to permanent housing with no housing readiness requirements* – that is, housing is provided as quickly as possible and without hoops to jump through. Individuals and families are placed into housing as soon as affordable and suitable housing is located.
- *Consumer choice and self-determination* – the individual or family has the ability to have input into the type and location of their housing.
- *Recovery orientation* – while Housing First focuses on helping people maintain housing by addressing underlying issues in their lives, sobriety or other issues do not have to be addressed ahead of time. Working from a harm reduction perspective, some people may choose to continue their substance use while others may want to seek abstinence-only housing.
- *Individualized and client-driven supports* – there is no "one-size-fits-all" solution to housing. Each client is respected and recognized as an individual and supports are developed *with* the client in order to best suit their needs.
- *Social and community integration* – exiting homelessness (which is often very communal) can feel isolating. Housing workers must focus on connecting their clients to community activities including education, recreation, social activities and local supports.

Does it Work?

The largest, research-based Housing First initiative was the At Home/Chez Soi project operated by the Mental Health Commission of Canada. It showed that Housing First is effective with many different populations and communities. Housing First saves money and, more importantly, improves the lives of individuals. The At Home/Chez Soi project, while considered a best practice, did not examine family homelessness specifically, instead focusing primarily on adults and independent youth. More research may be

required to show the effectiveness of Housing First with family populations, although the Family Options Study performed in the United States emphasizes the need for Rapid Re-housing and use of Housing Vouchers.

Problems with Housing First

Housing First programs – when showing true fidelity to the model – are ongoing and can continue for the life of the client or for as long as the client needs support. Unfortunately, most Housing First programs are not adequately funded and supports, including case management, counselling and rent supplements, are time-limited. This has resulted in most Housing First programs having an end date or "graduation" requiring clients to become fully independent.

Many families spoke about a sense of trepidation when thinking about graduating from their Housing First Program after 12 months. Debra from the YWCA Yellowknife said she was afraid of her pending graduation. "[I'm] ummm, scared. Scared because I don't know how financially stable I am going to be when I do graduate the program; because I mean welfare does not give enough for the single parent to live on. If I wasn't working I would get $997 a month for me and two kids. I am sorry, that is fricking ridiculous."

In many cases, agency members were trying to maintain the fidelity of the Housing First model but found it difficult working within conflicting systems: "The entire system is actually a barrier. So how do you pull yourself out of poverty when you're on income support? It's like nothing. So how do they pay their bills? How do they get out of debt? When they're making like $700 a month or less. Like yeah we want to take these women out of poverty, but we put them on income support which keeps them in poverty. The majority of our clients have their issues with addictions because of abuse and trauma. That's probably – so we try to be non-oppressive and trauma-informed, but we're a system as well. So we can say we empower, so it's difficult – we want to be in the spirit of Housing First and meeting people where they're at, and letting them taking control. But again, we work within systems and it's a frustration. Well, also we as you know "the helpers" and I say that lightly, have trouble accessing some of the resources because of the way the systems are set up, they make it very difficult. I mean that's one of the problems is that they make it difficult for us, never mind someone who is in a situation" – E4C Focus Group.

Evaluation is a key component that must be integrated in Housing First programs. Without evaluation, agency members will have no way to assess the effectiveness of their program in helping families maintain housing and will be unable to identify weaknesses or areas that need to be modified to better respond to their clientele. Renee from Homeward Trust Edmonton stressed the critical nature of implementing evaluation tools within existing programs: "Yeah, you know if we are going to expect our clients to take on that philosophy, we need to have that philosophy across that program and we cannot compromise that with our workers or ourselves we have to be willing to

look at ourselves and our program and always evaluating it if it needs to be changed because if we don't, then things start stagnating."

Housing First for Families

Housing First is based on a model where individuals with complex needs –especially those living on the street and not using shelters -- are housed and then surrounded with support systems to help them manage their issues. However, the trajectory of homelessness amongst women, youth and families does not always follow the same path as those experiencing chronic, visible homelessness.

In many cases, women, youth and families are fearful of being found on the street because they risk harassment, victimization or harm, and will often resort to living in shelters or couch surfing. Therefore, these groups are often not identified as high-risk individuals who require Housing First services and are not able to secure housing using this evidence-based approach. Ann from Campaign 2000 says, "where they're driving all the resources over to Housing First, and Housing First is not a good fit, per se. Like, on the surface it's not, it's a program that's largely grew out of trying to get people off the street and into housing. Well, that's not the shape of women's homelessness, right? We know a lot of it is coming out of shelters, women aren't safe on the street so the shape of their homelessness is hidden homelessness, where they're couch surfing, they're not visible."

The report "Beyond Housing First: A Holistic Response to Family Homelessness in Canada" helped to begin the conversation on the challenges of Housing First for families, pointing instead to a more holistic solution. When changing the focus of response from individuals experiencing chronic homelessness to families with children, the report stressed that Housing First programs would need to change and adapt accordingly. Family-focused Housing First would also require shifting the trajectory of Housing First from a response ***to*** homelessness to being a means of ***preventing*** homelessness.

Ending family homelessness requires an emphasis on prevention and providing better support structures to assist participants into a Housing First program when necessary. It also requires an understanding that the varieties and levels of support provided to families may be different; the focus may not be on addictions or mental health, but the impacts of poverty, Intimate Partner Violence and discrimination.

Family-based Housing First also necessitates that support organizations and teams focus on the needs of the entire family, not just the head of household. This means ensuring that children's workers and children's mental health specialists form part of the response.

"Homelessness is not a social concern that occurs in a vacuum, but one that intersects with multiple social concerns. This includes poverty and Canada's declining social safety

net. It is the contention of this report that by addressing the root causes of homelessness – such as affordable housing, income, food security, discrimination, and violence – we can prevent the cycle of poverty and homelessness experienced by families and eventually eliminate the need for Housing First" (Noble, 2015, p. 5).

Housing Vouchers/Rent Supplements

Housing vouchers, housing allowances or rent supplements are a means of providing support to low-income families or individuals who require additional funds to maintain or obtain and sustain housing. Often a housing allowance is portable and paid to the renter whereas a rent supplement may be tied to the housing itself and is paid directly to the landlord. The importance of rent supplements is emphasized through the results of the study below.

Family Options Study

Initial results from a study conducted in the US by Gubits et al. (2015) for the Department of Housing and Urban Development (HUD) have shown that providing a permanent subsidy has been extremely successful in keeping homeless families housed. The study investigated four possible interventions for homeless families:

- Permanent housing subsidy
- Project-based transitional housing
- Community based rapid re-housing
- Usual care.

At the 18-month mark, it was determined that housing vouchers significantly reduced the length of time families experienced homelessness (from 5.2 months to 3.1 months). It was also noted that the vouchers were cost-effective and the cost of the voucher was negated by the reduction in other services including shelters. There was a significant positive impact on the well-being of children and adults. This could be due in part to the fact that vouchers were offered almost immediately after a family becoming homeless, reducing the amount of time spent in shelters or living in crowded, rundown housing.

Rapid re-housing was also found to be extremely successful in reducing homelessness, and was cost effective. Rapid re-housing – if offered without any form of financial assistance or limited financial assistance – works best with families who have other forms of income.

Recommendations Related to Early Intervention

Recommendation 2.0 to develop a National Housing and Homelessness Strategy, Recommendation 5.0 to develop a Ministerial Homelessness and Housing Secretariat and Recommendation 6.0 regarding a provincial/territorial Plan to End Homelessness are all relevant to the Early Intervention area. The development, funding and implementation of early intervention

tools as mentioned above are critical to preventing homelessness. While Housing First is currently identified as a government priority we encourage the expansion of Housing First from a focus on chronically and episodically homeless individuals to also include families.

Recommendation 8.0 speaks to the need to develop new shelters, transitional and permanent housing for children with families. Housing – especially permanent housing – is the primary solution to homelessness. However, often the units that get developed are aimed at singles. This recommendation, by focusing on families, necessitates the development of child-friendly accommodation and larger housing units.

Creating a National Poverty Reduction Strategy (Recommendation 3.0) and the implementation of a National Housing Benefit (Recommendation 3.1) are both recommendations that will address the risk factor for families and therefore can be considered early intervention strategies. By increasing the amount of money families have access to and lowering housing costs through the National Housing Benefit, families will experience increased housing stability.

Partner Agency Spotlight: Homeward Trust Edmonton

Homeward Trust Edmonton was created from the merger of two longstanding community advisory and fund administration organizations prior to release of Alberta's and Edmonton's 10-year Plans to End Homelessness. There are no family shelters in Edmonton; homeless families can access temporary accommodation in hotels or motels through Alberta Works, the primary income support program in Alberta. This has resulted in hundreds of families living in often unsuitable accommodation, with great pressure on community agencies and mainstream systems to support them and assist in finding permanent housing options.

Homeward Trust became a pivotal access point for these families, as they lead and fund seven teams who provide Housing First services with intensive case management. Two of these teams have specialized staff to support families. Additionally, there are two Assertive Community Treatment (ACT) teams that typically do not serve families, and three Rapid Rehousing teams that offer less intensive supports for a shorter length of time. All ICM teams serve families, and some have been provided with additional resources focused on getting families out of hotels/motels. Since the implementation of these additional resources in December 2014, 218 homeless families (many of whom were once living in hotels) were housed. 64% of clients in families identified as Aboriginal, and 87% of families were headed by a lone female.

In addition to facilitating important services, Homeward Trust works in various partnerships to develop new supportive housing units and access market rentals for supported and supportive housing. They facilitate community planning and research and raise awareness of homelessness (and the plan to end homelessness) in Edmonton.

According to their website, Homeward Trust has:

- funded the creation of more than 1,900 new units.
- provided $82 million in funding to 84 housing developments.
- helped clients access more than 1,237 supported units in the marketplace.

The Graduated Rental Assistance Initiative (GRAI) program is "basically a subsidy program for people who have graduated from the Housing First program" says Deanna with Homeward Trust. "So we provide a rental assistance to them in order for them to keep maintaining their housing because that would be one factor they wouldn't have the ability to [pay for themselves]." The GRAI program has recently been rolled into the general Rental Assistance Program for all Housing First clients. Homeward Trust staff keep regular contact by phone with landlords and clients to ensure graduates are stable in their housing.

A member of the Homeward Trust YMCA Focus Group adds, "they continue to get the financial support [after graduation] that they receive day to day and what they get from their support worker is limited quite a bit because these are stable clients. They have worked through what they needed to work on and their needs are much lower so they don't need to see someone on a weekly basis."

Conclusion

Ending child and family homelessness is possible; however, it will take commitment from all levels of government and cooperation between all human sectors. By addressing the issues identified in the eight pillars and using the various components of the framework, solutions are within our grasp. We have the ability to do it; the question is do we have the will to do it?

> "I think there are two main thrusts that we need going forward, one is we need ideological change. We need abandonment of this extreme individualism, we need a broader societal recognition that we are a community, that we do have shared responsibilities and we have shared interactions and that in fact I am my brother's keeper, at least to some extent. And how do we get that ideological change? Well you know it has to sort of percolate up, it has to come from communities but it also has to come top down. We have to stop having governments that play off the rich against the poor or one group against another or one community against another so governments have an important role to lead but communities also have a piece to play" – Ernie from Campaign 2000.

The framework of Primary Prevention, System-Based Responses and Early Intervention is critical in moving away from reactive responses to homelessness. In Canada, we currently spend over $7 billion on emergency services and homelessness response. Implementing long-term solutions will, over time, be more cost-effective. Without a focus on prevention or early intervention, we will continually face a flow of people into homelessness, even as we solve it more quickly for people once they have become homeless. More importantly, this approach is more humane and will reduce the number of children and their families suffering from mental health issues.

> "The whole thing is reactive. So it's always after the fact. So even from a governmental standpoint, federally, it follows us like a hot potato, so there's not a lot of investment into prevention, or into things like going before the problem and providing infrastructure" – E4C Focus group.

It is important for us as a society to recognize the interconnectivity of the systemic factors that create and maintain homelessness. Rather than viewing them in isolation, we need to develop cross-sectoral responses that create systems change. We must also understand that due to the diversity of needs that homeless families have, we cannot use a one-size-fits-all response and expect to succeed. There are many pathways into

homelessness; we must develop a variety of pathways out of homelessness to achieve the greatest results.

This means thinking of housing as a continuum and developing a range of housing options including transitional housing, supportive housing, family-based Housing First and permanent housing – with and without subsidies. We will never end homelessness without a concerted effort to develop a National Housing Strategy that includes significant investment in building of new, safe and affordable social housing in communities across the country.

There is an unfortunate perception that human service agencies and the employees of service providing organizations will reject changes due to fear of job loss. In reality, many of these jobs will transition. Homeless outreach workers can become housing support workers. Children's workers can become child educators or support counsellors for housing programs. Human service employees generally accept this change as a positive force because of the improvements in the lives of their clients.

We must work together to develop coordinated partnerships that enable a holistic response to addressing child and family homelessness. Through collaboration, we will have the skills, resources and opportunities to make a difference. We know the answers and have the solutions to put an end to one of Canada's biggest crises. Now, let's make it happen.

Recommendations

Recommendations for ALL Levels of Government

We recommend that the federal government, in conjunction with the provincial, territorial and Indigenous governments:

1.0 Support and fund National Coordinated Response and Action on Children's Mental Health.

2.0 Develop and fund a National Housing and Homelessness Strategy.

Recommendations for the Federal Government Only

We recommend that the federal government:

3.0 Develop and fund a National Poverty Reduction Strategy focusing on family poverty.

3.1 We further recommend the implementation of a National Housing Benefit.

Recommendations for the Provincial/Territorial Governments Only

We recommend that provincial and territorial governments:

4.0 Implement a "One Child, One Case" policy for all government services.

5.0 Develop a Ministerial Homelessness and Housing Secretariat/Roundtable to Work on Preventing and Ending Homelessness.

6.0 Develop a province/territory-wide Plan to End Homelessness.

Recommendations for Municipal Governments Only

We recommend that municipal (or regional where relevant) governments:

7.0 Review bylaws and municipal practices to ensure a focus on "inclusionary zoning" and development of affordable housing.

8.0 Develop, in partnership with other levels of governments and/or non-profit or private developers, new emergency shelters, transitional and/or permanent housing aimed at families with children.

Recommendations for Community Agencies

9.0 Work to develop a system of care within your local community to provide holistic, wraparound services for clients, including coordinated assessment and common intake.

10.0 Develop trauma-informed services to better support clients and staff.

Summary of Recommendations

These recommendations are drawn from the international research, country-wide interviews and discussions at the Child and Family Homelessness Summit held in September 2015. We have also drawn extensively from the work of the Canadian Observatory on Homelessness, Campaign 2000, and the Mental Health Commission of Canada respectively.

We recognize that there is a great deal of overlap between the recommendations, and this is intentional. Solving homelessness requires extensive investment and ongoing cooperation between the various levels of government. We also recognize that some of these recommendations will take a great deal of time to fully implement but feel that there are some areas where small steps can be taken towards a greater goal. For example, the realization of an end to child poverty is likely years away, but concrete steps such as increases to the Child Tax Benefit or to social assistance rates could be undertaken almost immediately.

We also understand that community agencies are often under-resourced, under-staffed and have huge client caseloads. At the same time, they are the first faces that families and children see and do amazing work at supporting their clientele. We have included a small list of recommendations for community agencies, but see these as suggestions that they should work towards **as feasible** until they are supported to do so financially by the various levels of government and other funders. While we have not included a specific recommendation to increase funding to community organizations, this concept is embedded throughout several of the individual recommendations.

Recommendation 1.0 – National Coordinated Action and Response on Children's Mental Health

According to the Mental Health Commission of Canada (MHCC), approximately 1.2 million Canadian children and youth (1 in 5) are affected by mental health, yet less than 20% will receive appropriate treatment. For children who have experienced homelessness the numbers of those impacted is significantly higher, while those who receive treatment is concurrently lower.

Committed individuals and organizations across Canada have already done significant work in this area, and there are a number of documents which provide a framework for action in this area such as:

- Evergreen: A Child and Youth Mental Health Framework for Canada
- School-Based Mental Health in Canada: A Final Report
- CHANGING LIVES, CHANGING DIRECTIONS: The Mental Health Strategy for Canada
- The Mental Health Strategy for Canada: A Youth Perspective

However, we also feel that existing materials have not sufficiently addressed the issues of concern in this report: children and their families experiencing homelessness. This report – and particularly the additional supplement – are our attempts to help bridge that gap. Given the large number of children living in poverty or currently homeless, a mental health response must have significant focus on this population. Similarly, children who have been witness to IPV or who have experienced abuse directly must be included as a priority in any coordinated response to children's mental health. Finally, a national response to children's mental health must recognize the unique experiences of Canada's diverse cultural groups including immigrants, refugees and Indigenous Peoples.

We recognize input is needed from a variety of providers, end users and all levels of government in order to address all possible barriers and to implement solutions in this area. As such, we recommend that the federal government, in conjunction with provincial, territorial and Indigenous governments, support and fund the development and implementation of coordinated action and response to children's mental health and involve key players in this action, including the MHCC (given their previous history and knowledge in this area). The goal would be to build on existing frameworks (such as Evergreen Framework), and develop a coordinated response to key priority areas (including child, youth and family homelessness).

The implementation of projects and initiatives related to this recommendation will require increased funding to community organizations for staff and volunteer training, as well as program development, implementation and evaluation.

Recommendation 2.0 – National Housing and Homelessness Strategy

Ending homelessness requires building of new housing and the development of supports. In order to achieve these efficiently, we need an orchestrated system of commitment to developing new affordable and social housing and supporting programs that will end homelessness. This strategy needs to be spearheaded by the federal government, but must be developed and funded in partnership with the provincial, territorial and Indigenous governments and in meaningful collaboration with people facing homelessness, including parents and families who have experienced homelessness.

As with the area of Children's Mental Health in Recommendation 1, we feel that programs and policies are failing to reflect the populations discussed in this document. Recent homelessness strategies have focused on chronically and episodically homeless populations and have failed to recognize or respond to the increasing numbers of children, youth and families experiencing homelessness. Housing needs to be developed to provide a healthy, safe and affordable living environment for homeless families. Finally, a national housing strategy must recognize the unique experiences of Canada's diverse cultural groups including immigrants and refugees and Indigenous Peoples.

In developing this recommendation, we have drawn heavily from the State of Homelessness in Canada: 2014 (Gaetz, S., Gulliver-Garcia, T., Richter, T., 2014) which has outlined a comprehensive program of resolving the homelessness and housing crises in Canada.

A national Housing and Homelessness Strategy should include the following:

- A common definition of homelessness that will be used nationally. Two existing definitions – The Canadian Definition of Homelessness (2012) and the Canadian Definition of Youth Homelessness (2015) are already widely accepted across the country and would provide the easiest starting point for a consistent definition.
- A commitment that ending homelessness is the desired outcome of any housing program. This should include measurable criteria for determining success. The authors of SOHC: 2014 suggest "One approach to measuring this national outcome could be that an end to homelessness in Canada will be achieved when no Canadian individual or family stays in an emergency homeless shelter or sleeps outside longer than one week before moving into a safe, decent, affordable home with the support(s) needed to sustain it.[7] This new housing could include independent permanent housing, transitional housing or supportive living.

[7] There may need to be exceptions made to support women and children fleeing violence who need the protection and security of an anonymous shelter or transitional living environment to protect them from further harm.

- Agreed upon measures including “milestones, outcomes and performance expectations along with an agreement on regular evaluation and reporting” (SOHC: 2014).
- The development of targeted strategies and plans to address family homelessness, youth homelessness and violence against women. The unique needs of this population, particularly homeless women and children, needs to be recognized in the implementation of this strategy.
- A focus on the elimination of homelessness amongst Indigenous peoples. Homelessness reductions for Indigenous Peoples should be both embedded within mainstream plans at all levels of government, but also be focused on as a separate and distinct area sensitive to the specific multi-generational and systemic injustices of our country’s Indigenous communities. These strategies must be developed in conjunction with Indigenous organizations and communities.
- Implementation of a family-based Housing First strategy.
- Plans for an annual Point-in-Time count of homelessness using a consistent national methodology **as well as** regular prevalence studies in communities to identify the hidden homeless population(s).
- Investment in a range of rent supplement programs as a means of preventing family homelessness (or the National Housing Benefit in Recommendation 3.1).
- Development of an intensive and extensive new social housing capital building program and investment in repairs and maintenance for existing social housing stock.
- Increased funding to community organizations for human and physical resources to enable them to provide necessary supports, in assisting homeless families to find and maintain housing.

Recommendation 3.0 - National Poverty Reduction Strategy

The majority of provinces and territories have developed provincial poverty reduction strategies. Federally, a national-level poverty reduction strategy appears imminent. If we are serious about ending child and family homelessness, it is critical that this strategy proceeds immediately.

We are calling for the federal government to develop, fund and implement a national poverty reduction strategy and to mandate that all provinces and territories do the same. We feel that these should be broad strategies to cover a wide-range of individuals and families living in poverty, but we would also like to see specific strategies that target issues concerning family and children's poverty, based on the recommendations from Campaign 2000: End Child and Family Poverty in Canada and its partner organizations.

These include:

- A legislative commitment to the reduction and eradication of poverty that includes both targets and timelines to ensure government accountability for stated commitments.
- One of the easiest ways to eliminate, or at least reduce, poverty is to increase incomes and access to both good jobs and affordable housing. Improving the spectrum of income supports including social assistance, minimum wage, disability payments, and other federal benefits as well as increasing the amount of subsidized child care and affordable housing available will go a long way towards decreasing child and family poverty.
- Ensuring that the new Canada Child Benefit (CCB) design reduces the child poverty rate by 50% in five years. The federal government should enter into agreements with the provinces and territories that will ensure no claw backs are permitted on any portion of the CCB from social assistance benefits (Campaign 2000, 2015).
- A focus on the elimination of poverty in Indigenous communities. All plans (national, provincial and territorial) should embed poverty reduction strategies for Indigenous Peoples within their mainstream plans but also focus on Indigenous poverty as a separate and distinct area. These plans must be developed in conjunction with Indigenous organizations and communities and be resourced with adequate funding.
- The development of a national Early Childhood Education and Care (ECEC) program "which includes a well-developed policy framework based on the principles of universality, high quality and comprehensiveness, and is guided by targets and timelines" (Campaign 2000, 2015, p. 2). This would include:
    - New, regulated child care spaces across the country.
    - Increased funding for child care, especially for low-income parents.
    - Increased availability of alternate care hours to meet the needs of working families (particularly those working shift work or non-traditional 9-5 hours).

- Address issues with the federal Employment insurance program to “expand access, duration and levels of benefits” (Campaign 2000, 2014)
    - This would include enhanced maternity/parental leave benefits that pertain to all new parents (adoptive, student, trainee, self-employed parents, part-time and casual workers) that are more flexible and include a secondary caregiver benefit (Campaign 2000, 2015).
- Develop and fund employment equity programs to reduce the wage gap experienced by Indigenous and racialized people, immigrants, people with disabilities and women.
- Develop and fund targeted employment programs to support the needs of women fleeing violence, families experiencing homelessness, new immigrants and refugees, and Indigenous and racialized communities.

Recommendation 3.1 - National Housing Benefit

In the S*tate of Homelessness in Canada: 2014* the authors proposed the development of a housing benefit to support low-income individuals and families who are homeless or at risk of homelessness.[8] This benefit would be a new program to support those who have issues of severe affordability in their current housing and would be administered through the Canada Revenue Agency, in a manner similar to the Child Tax Benefit, GST payments, etc.

This benefit would be available to both homeowners and renters and would differ in amounts based on the cost of housing, size of the family unit and household income. The housing benefit could be deposited directly into the recipient's bank account on a monthly basis. According to Londerville and Steele (2014) "the maximum income for a family of two adults and two children would be under $36,000 while a single would need to make less than $22,000. Recipients would be expected to make a reasonable contribution towards the cost of their housing – for example 30% of their income – and the housing benefit would cover 75% of the difference between the actual housing costs and the contribution" (as cited in SOHC: 2014).

Londerville and Steele have calculated the cost of this housing benefit at $871.08 million annually for renters and $247.92 million annually for low-income homeowners. A further breakdown follows:

Renters:
$428.28 million for renter families (215, 000 recipients)
$388.8 million for renter singles (360,000 recipients).
$54 million into reserve funds for the homeless (50,000 recipients).
TOTAL: $871.08 million (625,000 recipients)

Homeowners:
$146.16 million for families (105,000 recipients)
$101.76 for singles and childless couples (106,000 recipients)
TOTAL: $247.92 million (211,000 recipients)

While these numbers would need to be updated to reflect point of implementation, they provide a clear indication of the extent and severity of the problem.

[8] For more information on the concept of the Housing Benefit, the impact, costs etc. see both Gaetz, Gulliver & Richter (2014) & Londerville & Steele (2014).

Recommendation 4.0 – One Child, One Case (or One Family, One Case)

Currently, the disjointed provision of children's services means that children and their families are served in a disconnected manner and risk getting lost in the system, thereby failing to receive necessary supports. Several provincial/territorial ministries provide services that impact families including social services, education, children's services and health care. By developing a system to share information between agencies and ministries, children and their families will be cared for more holistically.

The "One Child, One Case" concept was widely supported by attendees at the Child & Family Homelessness Summit in September 2015. This has been expanded to also account for multiple children in one family by using the concept "One Family, One Case" where applicable. By creating a system of care in which children's needs are addressed comprehensively, homelessness can be prevented and resolved more easily.

This recommendation consists of several different components:

- Development (or implementation) of a common database system that can be accessed by a variety of providers. Implementation will require development of the various components of the system and ensuring it is useful for all participants[9].
- Develop a common and shared intake form that is available in the central database and accessible to all entities.
- Develop guidelines to sharing information and release of confidentiality forms that would allow for joint information gathering/sharing.
- Provide funding to enable training for all participants.
- Rollout a pilot project in both a small community and a larger city to test implementation.
- Create and fund multi-agency Service Hubs which (like Port Cares) bring a number of services under one roof. This enhances service collaboration and coordination and also makes it easier for families to access needed supports.

[9] In Ontario, some services providers use Child and Youth Information System (CYSIS) which allows for integrated data collection and management within Ontario's Ministry of Children and Youth Services Transfer Payment agencies. "CYSIS provides a secure web-based approach to using data to maximize care, reduce duplication, optimize programming and meet the detailed requirements of funding partners (Mothercraft, 2015).

Recommendation 5.0 – Homelessness and Housing Secretariat

The Province of Alberta currently has an Interagency Council on Homelessness (previously known as the Alberta Secretariat for Action on Homelessness). This council provides oversight to the province's Ten Year Plan to End Homelessness and provides for coordinated decision-making, information-sharing and cross-sectoral partnerships.

The size and scope of the Council/Secretariat would vary depending upon the size of the province/territory and the extent of homelessness in that area. The framework of Alberta's Council provides a promising practice for implementation in other communities.

The composition of the Council/Secretariat should include:

- Representatives of municipal, provincial/territorial and federal governments
- People facing homelessness, particularly representatives from grassroots anti-poverty groups and self-advocacy organizations
- Representatives of community-based organizations, housing providers and emergency shelters
- Representatives from distinct sub-populations (as applicable in that community) i.e. youth organizations, women's shelters/domestic violence programs, health/mental health, substance use, agencies working with racialized communities and newcomers)
- Representatives from Indigenous (First Nations, Métis, Inuit) organizations
- Representatives from the business community involved in housing (i.e. apartment associations, property management companies, developers, construction)
- Representatives from government services (in Alberta, an Assistant Deputy Minister is assigned from several core Government of Alberta ministries including Human Services, Municipal Affairs, Health and Justice and Solicitor General)

Recommendation 6.0 – Plans to End Homelessness

Some provinces and territories have developed housing and homelessness strategies or other forms of "10 Year Plans to End Homelessness". The depth, comprehensiveness and execution of these plans vary across the country.

We are recommending that each Province/Territory, depending upon the extent of the homelessness crisis in their area, develop 3, 5 or 10 Year Plans to End Homelessness. While allowing for local variation, there should be some consistency in what these plans are required to include. Significantly, it is important that Provincial/Territorial Plans align with any federal strategies that are developed. At minimum, we feel that these plans should include:

- A stated commitment to ending homelessness in a set period of time.
- A definition of homelessness that aligns with a federal definition and/or the Canadian Definition of Homelessness.
- Agreed upon measures including "milestones, outcomes and performance expectations along with an agreement on regular evaluation and reporting" (SOHC: 2014).
- An analysis of the most at-risk populations and the development of targeted strategies to address them (for example, family homelessness, youth homelessness, violence against women and homelessness amongst Indigenous people).
- Implementation of a family-based Housing First strategy.
- Investment in programs to support prevention including housing support and eviction prevention programs, rent supplements, energy programs, increased social assistance rates, increased minimum wage, services for women facing violence and subsidized child care programs.
- Support for the development of new affordable and social housing and repairs to existing social housing stock.
- Where relevant, changes to planning or zoning legislation to allow municipalities to implement inclusionary zoning (see Recommendation 7 for more information).
- Development of provincial/territorial rent control guidelines and rental tribunals that support clients' rights.
- Evaluation methods including Point-in-Time counts, shared databases, ongoing analysis.
- Monitoring and governing mechanisms that include meaningful leadership and input by persons facing homelessness and representatives of grassroots anti-poverty organizations.

In addition, municipalities[10] should be required to develop their own plans to end homelessness that are approved by the Province/Territory, and evaluated annually or bi-annually.

[10] This could be all municipalities or apply only to "designated communities" – the 61 communities that receive funding from the federal government through the Homelessness Partnering Strategy.

Recommendation 7.0 – Inclusionary Zoning & Development of Affordable Housing

Historically, many communities in Canada (and throughout the world) have practiced "exclusionary zoning" when it comes to affordable housing or emergency shelters. They limit the locations of developments, make it difficult for social housing to be developed by imposing fees and support opposition from neighbours.

By contrast, inclusionary housing programs or inclusionary zoning allows municipalities to change their development regulations and processes to require private developers to include affordable housing units or to pay into a fund to provide for the development of such housing elsewhere[11]. This enables municipalities to move forward on affordable housing initiatives even in the absence of funding from higher levels of government. By ensuring that their zoning bylaws and practices are enabling, rather than restricting, housing development, municipalities can support reducing homelessness.

Some of the inclusionary housing practices will require approval from the province or territory the municipality resides in while others can be directly implemented by the municipality. We encourage municipalities to implement as many changes as they can in developing their inclusionary housing programs and to collaboratively lobby their higher level government for changes to the respective legislation.

Below are some examples of possible changes that could allow a municipality to develop more inclusionary zoning. For more information please see Inclusionary Housing Canada and The Wellesley Institute's Inclusionary Housing reports.

Affordable Housing Requirements

Inclusionary housing programs often require developers to build affordable housing units as a percentage of the total number of units being developed or to provide alternative community benefits. In Ontario, this is covered under Section 37 of the Planning Act. By mandating affordable housing – and providing clear guidance – as to what this entails, municipalities could increase the number of units available in their communities. **Currently, implementation of these requirements often sees the provision of community benefits (i.e. a playground) rather than housing, or the housing is geared towards home ownership, rather than rental.**

Cost Offsets

To assist developers in including affordable units in their developments municipalities can provide a number of cost offsets. The most effective of these is likely "density

[11] Inclusionary zoning must exist in concert with funding and mechanisms to enable non-profit organizations to operate the resulting housing as Rent-Geared-to-Income (RGI) units. Most existing inclusionary zoning programs create "affordable" housing i.e. 80% of market price which is not affordable to families facing homelessness.

bonuses", wherein an increased number of units can be built, outside of the density restrictions. Other cost offsets could include reducing the number of parking spaces required, fast tracking approvals or reducing/waiving certain development fees.

Elimination of Bylaw Restrictions

Restrictions have been developed in many communities that prohibit the number of shelters in one area or provide a set distance between certain residential care facilities. Toronto's Dream Team was successful in convincing four communities – Toronto, Kitchener, Sarnia and Smiths Falls – to amend their exclusionary by-laws after filing cases against them at the Human Rights Tribunal of Ontario.

The "tiny home" movement is also restricted from reaching its full potential because of bylaw restrictions governing size of units, access to services etc. By allowing for implementation of tiny home communities or by permitting individuals to allow a tiny home on their property, thousands of individuals and families can be housed quite easily and cheaply.

Limits on Strata Conversions

Strata (or condo) conversions refer to the development of condominiums in previously rented buildings. This is popular in urban centres where land may be expensive or unavailable, but it then reduces the number of rental units available in that community. Several communities in British Columbia (including North Vancouver, Victoria and Coquitlam) restrict condo conversions if the vacancy rate is below 4%. This therefore allows these municipal governments to ensure that needed rental housing is not diminished at a time of high demand/low availability.

Second Suite Housing

Many communities have restrictions against second suite housing or prevent people from renting out units in their home by limiting the number of unrelated people who may reside in one residence. For families with children experiencing homelessness, sharing a home with a couple other families may be a necessary and useful first step towards independence. In other cases, accessing a basement apartment often provides the cheapest kind of affordable housing and yet, often these places are illegal. By allowing homeowners to legally rent out spaces in their homes, or by permitting sharing of facilities, families can be quickly and easily put on a track to recovery.

Recommendation 8.0 – Development of Housing Spaces

While Recommendation 7.0 discussed the various ways that municipalities can support the development of housing through regulatory policy, this recommendation is more specific to the development of a variety of types of housing spaces.

In an ideal world, we would have no need for emergency shelter spaces. However, even if we were to see the development of a fully funded national housing strategy with thousands of units in the pipeline, implementation to the point of addressing the numbers of people currently homeless, those living in hidden homelessness and those at extreme risk of becoming homeless is several years away.

In the meantime, municipalities should be working with a variety of community partners to develop the types of shelters that their community needs. Many communities have an insufficient supply of adequate family shelters and shelters for women fleeing violence.

Municipalities can donate surplus lands to developers and/or non-profit groups to use for the development of shelters, transitional housing or permanent residences. Developers and property management companies can also be encouraged to donate (aside from any tax rebates or incentive programs listed in Recommendation 7.0) units in each of their buildings to families exiting homelessness.

Recommendation 9.0 - Coordinated System of Care for Community Agencies

Community agencies often bear the second biggest burden of homelessness, next to their clients. They deal with complex issues, often while being under-resourced, and lack sufficient supports to deal with the demands and needs of their clients. Many agencies would like to cooperate amongst each other and yet struggle with the competition for the donor/funder dollar. We would like to encourage the development of local systems of care to help to focus on providing coordinated supports for clients. Some possible methods include:

- Develop a common intake form with a shared database. Clients do not need to repeat their stories over and over, while agencies providing different services can work together to holistically meet the clients' needs.
- Support the development of a coordinated access centre/access point. Taking a common intake form one step further, coordinated access allows for centralized intake of clients and then referrals to the most suitable and relevant agencies. Intake teams could be staffed by workers seconded from various services.
- Provide cross-sectoral training to other agencies. Every organization has its strengths. Share the promising practices and skills from one organization with others. Homeless agencies can provide training for mainstream support organizations on tips for working with vulnerable populations.
- Conduct joint advocacy on campaigns to improve the lives of clients that all the agencies serve.
- Joint fundraising activities to support specific projects that cross agencies and client groups.

Recommendation 10.0 – Trauma-Informed Services

Homeless individuals have been severely impacted by trauma and homelessness in and of itself can lead to PTSD. The provision of trauma-informed services means recognizing the complexity of issues that may arise in client's lives and working to address these in addition to whatever other services are being provided.

- Meet clients where they are at – both literally and metaphorically. Outreach programs allow clients to meet with workers in spaces where they feel safe. Enable staff to be able to meet with clients in their homes, workplaces, schools, coffee shops, faith communities etc. This also means recognizing that a client may face challenges in meeting obligations and understanding this as part of their trauma. Children may act out and parents may miss appointments or be late for a scheduled meeting. Rather than penalizing a client for an absence, develop flexible drop-in hours for program delivery.
- Provide ongoing training and support for staff on promising practices of providing trauma-informed care.
- Staff burnout is extremely high in organizations working with vulnerable populations. Developing extensive staff self-care supports including staff recognition, personal time off, flex time, employee counselling, and debriefing counsellors after traumatic incidents can help mitigate this.

While this recommendation is primarily aimed at community-based agencies, government service providers also need to be trauma-informed. For example, child welfare or family services staff should also have training in trauma-informed care. This is particularly important as family homelessness can be a flag for child welfare involvement and may result in family separation.

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