Innovation in Homelessness System Planning

A scan of 13 Canadian cities

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About the author

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Abstract

Officials in Canadian cities have been working to prevent and respond to homelessness during what is both a public health and an economic crisis. During this time, most such officials report seeing an increase in visible outdoor sleeping; however, partnerships between the health and homelessness sectors have been flourishing. Several cities have expanded existing eviction prevention programs, and many have made progress on coordinated access (i.e., triage arrangements for prioritizing a variety of housing and related supports). The impact of Canada's National Housing Strategy varies. While Reaching Home enhancements have been welcomed, the impact of the Canada Housing Benefit has been mixed. Regrettably, it is still not clear what is happening with the benefit in some provinces and territories, even though it was supposed to have launched by 1 April 2020. While most of the cities profiled in this 13-city report have received Rapid Housing Initiative funding, supported projects are still awaiting word on whether their respective provincial governments will provide operating dollars, which will in turn determine the degree of ongoing professional staff support that can be provided to tenants (and therefore which specific households can be accommodated). Meanwhile, the impact of the National Housing Co-Investment Fund on each city's homelessness sector has been modest. This report makes seven policy recommendations pertaining to the need to: improve the enumeration of outdoor sleeping; showcase promising healthcare practices in each city's homelessness sector; encourage cooperation from the corrections sector; increase funding for homelessness prevention; encourage transparency with respect to the Canada Housing Benefit; provide operating funding for the Rapid Housing Initiative; and provide increased grant support to the National Housing Co-Investment Fund.



Executive Summary

This report provides an overview of major developments with respect to homelessness planning across 13 Canadian cities over the past year. These cities are: Toronto, Montreal, Vancouver, Calgary, Edmonton, Ottawa, Winnipeg, Quebec City, Hamilton, Regina, Victoria, St. John's and Yellowknife. During this time, officials in Canadian cities have been working to prevent and respond to homelessness during both a public health crisis (related to COVID-19) and an economic crisis. While most Canadian cities do not quantify the size of their outdoor homeless population in a rigorous manner, most have seen an increase in visible outdoor sleeping during the pandemic. The degree to which social support infrastructure for encampments is set up by service providers varies across cities, as does the extent to which permanent housing is being offered to outdoor sleepers. One technological innovation worthy of attention is the City of Ottawa's new GIS mapping system, used to both identify encampments and keep case notes pertaining to encampment residents.

The pandemic has allowed partnerships between the health and homelessness sectors to flourish. Examples in Toronto include pharmacists keeping regular hours at some of Toronto's emergency shelters, and frequent 'wellness checks' carried out at most Toronto emergency shelters (with a harm reduction focus). An Indigenous-led vaccine clinic in Calgary, which includes the onsite presence of Elders, is also worthy of attention, as is a massive increase in the use of licensed practical nurses (LPNs) and paramedics at Calgary's largest emergency facility. Indigenous-led testing and vaccine clinics in Winnipeg have also been well-received. In Ottawa, supervised consumption services and a safe supply of cannabis are both offered at an isolation site designated for persons experiencing homelessness. Also in Ottawa, some persons experiencing homelessness who receive the COVID-19 vaccine receive complimentary cannabis after each dose. Finally, territorial officials in Yellowknife have been distributing alcohol at the city's isolation centre for persons experiencing homelessness.

The pandemic has been a time of improved partnership among the various sectors that can assist in both preventing and responding to homelessness. A larger share of Toronto's emergency facilities are seeing primary health care—i.e., service provision by family physicians and nurses—provided directly on site. It is also worth highlighting the positive working relationship between corrections officials in Edmonton and a local health centre, whereby discharged inmates are often given a 'warm transfer' to health services (which often leads to a connection to housing).

During the pandemic, several cities profiled in this report expanded existing eviction prevention programs using short-term financial assistance to pay a variety of costs allowing households at risk of homelessness to either remain housed or to get rehoused quickly. Such costs can typically include rental arrears, utility arrears, first month's rent, the securing of damage deposits and moving costs. While most of the initiatives themselves are not new, the pandemic has given officials reason to use increased funding to expand their use.



'Coordinated access' refers to centralized triage that prioritizes placement into a variety of housing and related supports. When it comes to progress here, Canadian cities appear to fall into one of the following three categories: 1) those where it is established; 2) those where it is in development; and 3) those that appear to be resisting it. Vancouver, Calgary, Edmonton, Ottawa, Hamilton, Victoria and St. John's all have some version of coordinated access already established. However, coordinated access is still 'in development' in Toronto, Winnipeg, Regina and Yellowknife. Montreal and Quebec City, by contrast, do not appear to be on the way toward having coordinated access in place any time in the near future, and it is not clear what implication this will have for Reaching Home funding.

The impact of the National Housing Strategy varies from one city to another. While Reaching Home enhancements have been welcomed and put to use by each city's homeless-serving system, the impact of the Canada Housing Benefit (CHB) has been mixed. Cities have typically targeted it to a combination of households experiencing homelessness and to households at risk of experiencing homelessness. Several provinces have incorporated it into existing housing affordability schemes (and it is feared that some have used it as a substitute for previous provincial or territorial funding). As of May 2021, well-placed homelessness officials in neither St. John's nor Yellowknife had received any indication as to what was happening with the CHB in their respective jurisdictions.

Ten of the 13 cities considered in the present report have received funding through the first \$1 billion funding phase of the Rapid Housing Initiative (RHI), which provides grant support for the up front (i.e., capital) costs associated with new modular housing, the acquisition of land, the conversion of existing non-residential buildings, and the reclamation of closed or derelict properties. (Regina, St. John's and Yellowknife had not received funding through this initiative as of May 2021.) These supported projects will house both persons currently experiencing homelessness and persons at risk of experiencing homelessness. Many projects are still awaiting word on whether their respective provincial government will provide operating dollars, which will in turn determine what kinds of social work (i.e., 'wraparound') support can be provided, and which specific households can be accommodated. Some approved projects have received commitments of municipal support, typically in the form of waived fees, free land or discounted land. Having said that, the RHI is viewed as being the best federal housing initiative right now to target chronic homelessness.

Meanwhile, the impact of the National Housing Co-Investment Fund on each city's homelessness sector has been modest at best. It has assisted some projects in some cities that do serve households experiencing homelessness—for example, in Toronto and Quebec City. However, this appears to be more the exception than the rule.

This report makes seven policy recommendations pertaining to the need to: better enumerate outdoor sleeping; showcase promising healthcare practices in the homelessness sector; encourage better cooperation from the corrections sector; support homelessness prevention; promote transparency with respect to the Canada

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Housing Benefit; provide operating support for the Rapid Housing Initiative; and provide increased grant support toward the National Housing Co-Investment Fund.



Introduction

Over the past year, officials in Canadian cities have been working to both prevent and respond to homelessness during a two-part crisis: on the one hand, a public health crisis (related to COVID-19) that has resulted in the loss of lives and profound changes to the day-day-operations of homelessness programming; and 2) an economic crisis resulting in reduced income from employment, job loss and evictions, all of which will lead to new homelessness over the course of the next several years.

This report provides an overview of major developments with respect to homelessness planning across 13 Canadian cities over the past year. These cities are: Toronto, Montreal, Vancouver, Calgary, Edmonton, Ottawa, Winnipeg, Quebec City, Hamilton, Regina, Victoria, St. John's and Yellowknife. It begins by discussing the rise of outdoor sleeping associated with these phenomena, and profiles innovative work being done to relocate outdoor sleepers into safer spaces. It then discusses the degree to which there has been healthcare innovation for persons experiencing homelessness across Canadian cities.

The report then turns to a consideration of improved levels of cooperation between homelessness officials on the one hand, and provincial and territorial health officials on the other. It also sheds light on a lack of cooperation from correctional officials who typically remain disengaged from homelessness planning (with some important exceptions).

A consideration of new prevention initiatives ensues, followed by a look at ongoing efforts by homelessness planners to create more sophisticated triage systems whereby persons experiencing homelessness are prioritized into the limited number of housing and related supports available in the city in question. Such a triage system, typically referred to as either 'coordinated access' or 'coordinated access and assessment,' has taken on new urgency in light of the fact that the Government of Canada has recently stipulated that communities wanting to receive federal funding for homelessness must have such triage arrangements in place by 31 March 2022.

The report then discusses the National Housing Strategy by assessing the impact on homelessness of the following four programs: 1) Reaching Home; 2) the Canada Housing Benefit; 3) the Rapid Housing Initiative; and 4) the National Housing Co-Investment Fund.

This report concludes by making seven policy recommendations. They pertain to the need for: better enumeration of outdoor sleeping; the showcasing of promising healthcare practices; improved cooperation from the corrections sector; the encouragement and support for homelessness prevention initiatives; improved transparency with respect to the Canada Housing Benefit; operating support for the Rapid Housing Initiative; and the enhancement of grant funding for the National Housing Co-Investment Fund.



Outdoor sleeping

Officials from most Canadian cities report growth in outdoor sleeping (also known as 'rough sleeping') during the pandemic. One important reason for this growth stems from concern about disease transmission in congregate settings, including in both emergency facilities and shared housing arrangements. Having said that, most cites do not regularly quantify rough sleeping in a manner that would be considered methodologically rigorous.¹

Increased rough sleeping has typically resulted in complaints from nearby community members and often garnered significant media attention. Encampments have also created fire-related risks, as many have open flames, unsafe wiring, gasoline and propane. In 2020, Toronto Fire Services responded to 253 encampment fires.

Homelessness officials across Canada have worked hard to provide safer indoor options for outdoor sleepers. However, they do not want to create the impression that a person showing up at an encampment will be fast tracked into permanent housing.

As this section makes clear, not every city has taken the same approach to encampments, which the present report defines as arrangement of at least 20 persons setting up sleeping arrangements in one area at the same time.

Toronto

Toronto has seen substantial growth in visible outdoor sleeping during the pandemic. As of May 2021, municipal staff estimated that between 300 and 400 people were staying in encampments. Municipal staff were aware of 368 tents or other temporary structures located across 59 different City parks, as well as 53 tents or other temporary structures located across 41 other locations.

However, the city has also seen large numbers of outdoor sleepers being assisted with moves inside—both into emergency facilities and into permanent housing. As of May 2021, more than 1,600 unique individuals in encampments had received an offer of a bed at an emergency facility since the start of the pandemic (a small percentage did not follow through with the offer). In 2020, outreach workers secured permanent housing for more than 300 rough sleepers.

Municipal officials in Toronto have prioritized four "priority" encampments. They are: 1) Trinity Bellwoods; 2) Moss Park; 3) Alexandra Park; and 4) Lamport Stadium. The City of Toronto has also funded both its own outreach staff and outreach staff

¹ Point-in-Time Count estimates, which do include outdoor sleeping enumeration, typically take place just once every two years.



from community agencies to visit these four encampments on a daily basis to offer referrals to both emergency and permanent housing. Additionally, there are some non-profit agencies that do not receive municipal funding that do additional outreach. Municipal outreach staff provide water (but not food) to people staying at encampments.

For people moving from encampments into indoor arrangements, municipal officials store belongings. Some items (including tents) can be stored for up to six months. Items can be retrieved by calling a centralized phone number; they can be returned within 48 hours, upon request.

Montreal

Outdoor sleeping in Montreal has increased during the pandemic; in late summer 2020, an encampment saw more than 100 people (and many of those staying at the encampment accepted referrals to other options, including a downtown hotel). However, the City of Montreal has taken a rather hard line against encampments in recent months. After a fire at one encampment in December 2020. municipal officials closed it. When a new encampment then emerged in May 2021, authorities closed it within 24 hours (on the pretext of it being a fire hazard). As of early June 2021, Montreal had no major encampments; however, there was still outdoor sleeping.

Vancouver

An encampment began to form at Strathcona Park in June 2020. At its height, Strathcona had between 100 and 300 persons. BC Housing set up a warming tent and showers, with the goal of having the camp close at the end of April 2021 (the last person left on 27 May 2021). There was a staggered process, with officials closing off certain parts of the park in increments. Outreach workers helped with housing offers, including supportive housing. According to one well-placed official: "Everyone originally in the camp got a housing offer, while everyone who came subsequently got a shelter offer."

For those housed, various types of permanent housing were offered. Some was subsidized, some was supported with BC Housing-funded rent supplements, and some was in hotel rooms (mostly in hotels purchased by BC Housing during the pandemic). Some of it had wraparound (i.e., social work) support, but some did not. Attempts were made to move small groups of residents together to the same facilities.

A warming tent (a place residents could go and warm up) had staffing, washrooms and showers operating 24 hours a day, seven days a week. This was all funded by BC Housing, and operated by Atira Women's Resource Society. The warming tent allowed the opportunity for outreach staff to build rapport with campers to discuss housing. Many other types of services were provided as part of the relocation effort. They are discussed later in this report in the section titled "Intersectoral cooperation."



As of late May 2021, there were no major encampments in Vancouver (though many people were still sleeping rough)

Calgary

It is not clear that outdoor sleeping has risen in Calgary during the pandemic. As of June 2021, there were no major encampments in Calgary; the largest known encampment in Calgary did not have more than 15 residents at any one time during the pandemic. That is quite remarkable for a city that large. Factors that may account for this include Calgary's relatively soft rental market and a less-developed grassroots advocacy movement (much of the growth of encampments in other cities has been led by social justice activists).

Edmonton

Last year, Edmonton had a large encampment in a very visible part of the city called Camp Pekiwewin. According to one well-placed official: "It was also a protest camp. There was a considerable amount of activism amongst its leadership. It was very organized from an activist perspective. At its max, I think it got to over 200 people." Further, Homeward Trust Edmonton now funds 16 FTE positions for outreach and related services. Homeward Trust Edmonton has also implemented a new 'bridge housing' arrangement whereby residents can be referred directly from encampments into hotels, provided the person works diligently on a search for permanent housing (this model is also used in Edmonton for people not coming from encampments). Edmonton's City Manager has recently

been tasked with providing a biweekly report to City Council on encampments; City Council issued this directive in May 2021.

Ottawa

Ottawa has seen substantial growth in outdoor sleeping since the start of the pandemic, including in very visible parts of the downtown. According to one well-placed source interviewed in May 2021: "Pre-pandemic, Ottawa saw 70-90 people or so sleeping rough in Ottawa, this time two years ago. At the height of the pandemic in the fall of 2020, that number rose to 225."

In the fall of 2020, City of Ottawa Housing Services convened a multidepartmental Unsheltered Task Force to develop a coordinated response to the rise in outdoor sleeping. The task force includes representation from Housing Services, various other city departments, Ottawa Police, outreach service providers, the National Capital Commission, the Ontario Ministry of Transportation, VIA Rail Police Service, and the Coalition of Business Improvement Areas and Crime Prevention Ottawa. Members of the task force still meet monthly. Detailed procedures have been developed on how exactly each encampment will be dealt with, according to four stages: 1) identification and notification; 2) site assessment; 3) support services assessment; and 4) dismantlement. The City of Ottawa does not set up physical infrastructure at encampments (e.g., hand washing stations and porta potties); but they do fund outreach staff who provide some supports to the encampment (e.g., bottled water, sleeping bags, socks) and who build rapport with



encampment residents, especially with a view to helping them find housing.

Among Task Force accomplishments has been a GIS mapping system for identifying encampments. This includes a cloud-based system that allows client information to be accessed only by outreach staff; outreach staff can log in and write case notes. City departments and other partners such as the Ottawa Police Service and the National Capital Commission can only see the location of each camp and do not see protected client information.

This concerted effort has resulted in a notable decrease in the unsheltered population from 225 in 2020 to 125 in May 2021. However, the unsheltered population is expected to increase during the summer months.

Winnipeg

While there has been a substantial amount of rough sleeping in Winnipeg since the start of the pandemic (especially in warmer weather) there are no accurate estimates of its growth.

June 2020 saw the launch of Kíkininaw Óma — A Strategy to Support Unsheltered Winnipeggers. It was drafted by a group facilitated by End Homelessness Winnipeg, with representation from City of Winnipeg officials, first responders, outreach workers, homeless-serving agencies and people with lived experience. Now, when the City receives a complaint about a new encampment, outreach workers are the first to respond (unless

there is an urgent safety concern). Previously, it would have been police responding first.

According to one well-placed source, Winnipeg also has "a very controversial bus shack problem. Lots of people are taking over bus shacks." Over the past year, this topic has garnered increased public attention, with the problem becoming more visible than previously.

Quebec City

While there are no major encampments in Quebec City's downtown core, rough sleeping has increased there since the start of the pandemic, which means municipal officials are facing pressure to do more about it. In terms of how to address this rise, a well-placed local official offered the following: "There's still lots of tension among advocates, police and municipal officials as to the right way to deal with these. Advocates, city officials and law enforcement officials do not see eye to eye on exactly how to handle this. There is no common vision. Having said that, communication among these bodies has improved."

Hamilton

During the pandemic, Hamilton has seen an increase in rough sleeping in prominent public spaces, and this has turned into a "very thorny political issue." In 2020, City outreach services were onboarded onto HIFIS 42 as part of the city's coordinated access implementation plan. HIFIS allows outreach staff to enter client data in a system-wide database. GIS Mapping is

database system supported by Employment and Social Development Canada.

² HIFIS stands for the Homeless Individuals and Families Information System, a client-level



in development to track site specific information and complement the client data already held in HIFIS.

The City of Hamilton coordinates an Encampment Response Team that meets weekly. This team coordinates a multi-sector response including Housing Services Division, the Social Navigator Program, Municipal Law Enforcement, Parks and Waste Management, other street outreach programs and representation from persons with lived experience. Since the start of the pandemic, the City has adopted an Encampment Protocol which supports the City outdoor camping by-law and provides parameters on where tents can be erected.3

Regina

As of May 2021, Regina had no major encampments, though anecdotal accounts from front-line workers suggest there has been an increase in outdoor sleeping during the pandemic. Awasiw, a 24/7 warm up space, was developed through a partnership with All Nations Hope Network and the YWCA and operated throughout the winter months. It aimed to offer outreach and access to culturally-safe spaces in the context of the pandemic, where many were reluctant to access shelter space or could not meet behavioural requirements to be placed in a hotel through Regina's Cold Weather Strategy. This space served upwards of 300 people per night throughout the winter and ensured individuals sleeping rough or without stable

https://www.hamilton.ca/sites/default/files/medi

housing had somewhere to access temporary space. The space continues to operate with reduced hours overnight and offer access to basic needs (e.g., food, water, shelter) by All Nations Hope Network, an Indigenousled organization. The City of Regina provided initial start-up funding; the initiative was also supported by Reaching Home through additional COVID-related emergency funding.

Victoria

While there has been no formal quantification of rough sleeping in Victoria, it has been a major area of policy attention. According to one well-placed source: "We take the approach that encampments aren't safe and that we should work to bring people inside. In the past year, we've moved about 500 people in from encampments. We've moved them into both emergency facilities—including hotels—and permanent housing."

Outreach has increased to encampments during the pandemic, with BC Housing being the most important funder. Other funders have included the Government of Canada through Reaching Home, the Vancouver Island Health Authority, the Victoria Foundation and the United Way.

The team of workers that physically goes into Victoria's encampments is called the Housing Action Response Team. Its membership includes staff from the following entities: BC Housing; the Victoria Police Department; the City of Victoria Bylaw

<u>a/browser/2020-09-</u> <u>30/bylaw_enforcement_protcol.pdf</u>

³ More information on this protocol is available here:



Department; BC's Ministry of Social Development and Poverty Reduction; Pacifica Housing; Island Health and 713 Outreach; and Beacon Community Services.

St. John's

St. John's did not have encampments prior to the pandemic and it has not had encampments since the pandemic's outset. The city sees a very small amount of outdoor sleeping, typically fewer than five people per night. Having said that, one official with strong knowledge of street

outreach stated the following: "I'd say we've seen an increase in the number of people sleeping outside during the pandemic. We used to get a call every couple of months; now pretty regularly. We have no hard numbers though."

Yellowknife

Yellowknife has no sizeable encampments, but does have some rough sleeping, especially during warmer weather. There have been no major changes in outdoor sleeping over the past year.

In sum

Most Canadian cities do not quantify the size of their outdoor homeless population throughout the year (notwithstanding Point-in-Time Count estimates, which typically take place just once every two years). Having said that, most large cities have seen an increase in visible outdoor sleeping during the pandemic. The degree to which social support infrastructure is set up by service providers varies across cities, with Vancouver being rather innovative for setting up a warming tent, washrooms and showers at one large encampment. Vancouver's offer of permanent housing to all persons initially staying at one large encampment was also rather remarkable. A technological innovation worthy of attention is Ottawa's GIS mapping system, used to both identify encampments and keep case notes pertaining to encampment residents.



Healthcare innovations

A 'bright light' associated with the COVID-19 pandemic has been the degree of healthcare innovation for persons experiencing homelessness. Historically in many Canadian cities, health officials have not regarded homelessness as a 'health issue' and have therefore not fully engaged with the homelessness sector. The pandemic has changed this, with health professionals now more engaged.

Further, innovations have happened in terms of *how* healthcare is delivered to persons experiencing homelessness. During the pandemic, many community-based health workers have found innovative ways to encourage adherence with recommended public health measures pertaining to testing, isolation and vaccination. Yet, they have also had to tailor their approaches to a population that can be rather mobile and that does not always fit mainstream healthcare norms and expectations.

Toronto

The City of Toronto increased funding for mental health case management supports in emergency shelters, keeping in mind that many community supports (e.g., daytime drop-in services) have closed their spaces during the pandemic. The City did this through its Multi-Disciplinary Outreach Team,⁴ a team that had previously limited its mental health outreach to rough sleepers only. For the current calendar year, this additional funding has amounted to \$1.5 million.

Toronto has also seen improved partnerships with local pharmacies. Several pharmacists are physically

going to emergency facilities, including to repurposed hotels, to fill prescriptions written by medical professionals who work for Inner City Health Associates.⁵ During the pandemic, pharmacists have even started keeping regular hours at several emergency facilities.

Homes First Society is a large provider of both emergency services and permanent housing in Toronto; they also operate three hotels that were repurposed during the pandemic. Homes First has been particularly innovative with respect to harm reduction. Building on an approach to 'wellness checks' that they had begun approximately 10 years earlier, Homes First staff working at hotels check all bathrooms and showers every 15 minutes.⁶ Homes First has also been

⁴ More information on this team can be found here: http://www.tnss.ca/the-access-point/multi-disciplinary-outreach-team-m-dot/.

⁵ More information on Inner City Health Associates can be found here: http://www.ichatoronto.ca/.

⁶ Most Toronto emergency shelters have similar wellness checks, and the City of Toronto has recently released a new directive and toolkit that includes 'best practice' guidance on their operation: https://www.toronto.ca/news/city-oftoronto-launches-new-toolkit-to-respond-to-



providing \$50 gift incentives to persons experiencing homelessness who wait on site for 15 minutes after receiving the COVID-19 vaccine.

Montreal

Montreal Public Health's COVID-19 testing is a healthcare innovation. Their staff go to major shelters every five days to test both staff and clients. According to one official: "Over past four months, we've had some people tested 18-19 times. This has been the case since January 2021—in response to several outbreaks last year. It's a similar situation at all emergency shelters in Montreal."

Vancouver

Intensive Housing Outreach Teams, known as 'IHOT teams,' support people transitioning from homelessness into housing (i.e., including into hotels, modular housing, and supportive housing). Vancouver Coastal Health, the local public health authority, has received additional funding during the pandemic to create an additional IHOT team focused on encampments.

Calgary

One recent health care innovation in Calgary's homeless-serving sector pertains to two Indigenous-led vaccine clinics. Features of these clinics include: all staff being Indigenous; the onsite presence of Elders; and signage in Indigenous languages. Partner agencies include the Aboriginal

an-increase-in-overdoses-in-the-homeless-population/.

Friendship Centre of Calgary, Siksika Health Services, Okaki and Seven Brothers Circle.⁷

Also during the pandemic, a large number of licensed practical nurses (LPNs) and paramedics began working on site at the Calgary Drop-In, the city's largest emergency facility. This staffing component increased from 3.5 to 22.0 FTE positions during the pandemic. Services provided by these professionals include: rapid testing, screening, wound care, counselling, assessments, and now immunization. This staffing enhancement has been funded by the Government of Alberta (specifically Community and Social Services). The Calgary Drop-In is also receiving physician oversight from The Alex Community Health Centre, which allows for: referrals to other specialists: referrals related to income assistance applications, specifically for social assistance for persons with serious disabilities: and access to The Alex's Rapid Access Addiction Medicine (RAAM) clinic.8

Edmonton

During the pandemic, Alberta Health Services (AHS) funded, and in some cases provided, front-line health services at several of the large temporary facilities, in collaboration with local non-profits. AHS has also funded Boyle McCauley Health Centre to operate the isolation shelter. AHS has also been more 'on site' in emergency shelters due to vaccine roll out, and AHS set up a vaccine centre at

https://www.youtube.com/watch?v=Jln4FWKW Tlo.

⁷ A three-minute video providing an overview of this clinic's services can be found here:

⁸ More information on The Alex's RAAM clinic can be found here: https://www.thealex.ca/raam-clinic/.



the Edmonton Convention Centre (before it closed).

One well-placed source stated that the pandemic created an opportunity to clarify the shelter expectations, noting that the Government of Alberta's funding arrangements with emergency shelters stipulate that some beds are to be reserved for persons who are ill and need to recover from the illness in bed (these are sometimes referred to as 'convalescence beds' or 'sick bay beds'). According to the official: "They were always supposed to exist; but with COVID, it came to light that they didn't really exist. It made existing shelters more accountable for what they were supposed to be doing."

Ottawa

According to one well-placed official, in addition to comprehensive primary and mental health services, Ottawa's isolation program for persons experiencing homelessness "offers a full range of harm reduction interventions—Managed Alcohol, a supervised consumption program, cannabis distribution, tobacco, Safer Supply (opiates and stimulants)." The isolation site is operated by Ottawa Inner City Health, and all of the interventions have been authorized by Health Canada.

Ottawa's vaccination program includes various items "to thank people for their patience in cooperating with the process and staying for monitoring post injection." Such items have included t-shirts, one gram of cannabis, personal care items and candy bags. According to one official: "Additionally, Ottawa Inner City Health

nurses took vaccine to the streets and were able to meet with individuals outdoors, answer questions that if otherwise not explored, would have prevented people from being vaccinated. Once service users had information from professionals with whom they already had a rapport, many agreed to be vaccinated on the spot."

Winnipeg

The pandemic has resulted in an increase in local leadership by Indigenous-serving organizations in Winnipeg's community-based healthcare system. A COVID-19 testing facility at Thunderbird House on Main Street was operated by the Aboriginal Health and Wellness Centre with support from Winnipeg Regional Health Authority; it focused on people either experiencing homelessness or at risk of homelessness. According to one source: "It wasn't just for Indigenous people, but it's a strongly populated Indigenous part of town." Another primarily Indigenous-serving organization, Ma Mawi Wi Chi Itata Centre, began operating a testing site in early 2021.

Aboriginal Health and Wellness and Ma Mawi also operate two urban Indigenous vaccination clinics in collaboration with the health authority. Focusing on Indigenous patients, the clinics offer walk-in vaccinations and do not require identification (in order to better support persons experiencing homelessness).

Winnipeg has also seen increased connections between public health nurses and physicians going to encampments alongside outreach



workers offering first aid, health information and vaccination supports. According to one local service provider: "I have a nurse going to encampments delivering naloxone. She and others have been doing primary wound care and assessments in encampments."

There are also Indigenous physicians doing COVID-related commercials and outreach. According to one local source: "They've been on TV and radio to educate, including in First Nations communities. They've helped build trust vis-à-vis vaccinations."

Quebec City

Quebec City has seen advances pertaining to harm reduction, including the launch of the city's first supervised consumption services. According to one well-placed official: "The supervised consumption site, implemented in Quebec City in April 2021, allows people who inject drugs to have a safe and supervised place with the presence of nurses and peer helpers at all times. This project enables people experiencing homelessness who wish to use in a safe environment to do so, and contributes to improvements in public safety."

Hamilton

One health care innovation in Hamilton has involved partnership with a research lab at McMaster University. Medical professionals have been distributing 'self swabs' to emergency facilities once a week. This testing is for residents and the swabs are administered by staff. Testing is voluntary, and results are returned

within 24 hours. This is considered a 'low barrier' approach to testing.

Regina

During the pandemic, the Saskatchewan Health Authority (SHA) launched community-based testing and vaccination clinics, as well as rapid testing at community agencies. All of these interventions have been targeted toward lower socioeconomic groups. This is an alternative to Regina's mainstream forms of testing and vaccination, which have been happening via 'drive-through' based arrangements (and therefore not practical to most persons experiencing homelessness). The SHA has also led a process of weekly rapid testing and vaccine administration at several emergency shelters.

There was also an Indigenous vaccination clinic that was put on in partnership between the SHA and Regina Treaty/Status Indian Services to serve urban Indigenous peoples.

Victoria

According to one local source: "We've learned that people don't want to be observed using in common areas; they'd rather be observed in their own units. The local health authority (Vancouver Island Health Authority) is therefore changing their harm reduction model accordingly, including an element of peer support."



St. John's

During the pandemic, a harm reduction team for persons experiencing homelessness was developed in partnership between End Homelessness St. John's and Eastern Health, the local health authority. Medical supports were brought to persons experiencing homelessness who needed to isolate. According to a local official: "We worked together to identify existing harm reduction programs, and we accessed a nurse practitioner and four nurses. Additional services, such as blood testing and pap smears, are also now being provided by this team. A pharmacist and occupational therapist may be added to the initiative as well." Another noted: "They'll show up anywhere. They'll go to people outside. They have needles, water, pipes and other paraphernalia for safer drug use. There are both nurses and nurse practitioners on this team. If someone has a chest infection, they'll write the person a script, or make a referral, or both." This initiative is jointly funded by End Homelessness St. John's and Eastern Health.

Another local healthcare innovation pertains to flu shots and COVID-19 vaccinations. Eastern Health reached out to new agencies working with vulnerable populations to increase the number of sites where this was done. In the words of one well-placed official: "They wanted to make it as low barrier as possible. This was quite innovative for them."

Yellowknife

During the pandemic, Yellowknife made major inroads with respect to harm reduction. An isolation centre was opened for people experiencing homelessness. Since many heavy drinkers would need to access it (and remain on site), territorial officials purchased alcohol for residents to consume on site; they also allowed residents to use cannabis on site but did not purchase it for residents. According to one well-placed official: "We felt this would be necessary in order to follow public health guidelines and prevent outbreaks. We knew we had to limit movement from one facility to the next, and we had to find a way to make sure people had incentive to stay put." While physicians were involved in the development of site policy (e.g. quantity of alcohol offered), there was no medical supervision per se. This harm reduction initiative was made somewhat easier by the fact that the local hospital already offers some alcohol to patients in some situations. A similar arrangement is in place at Yellowknife's day shelter and sobering centre, operated by the Northwest Territories Disabilities Council as well as at Spruce Bough, which is operated by the Yellowknife Women's Society and the Government of the Northwest Territories.



In sum

The pandemic has allowed partnerships between the health and homelessness sectors to flourish. Examples in Toronto include pharmacists keeping regular hours at some of Toronto's emergency shelters, and frequent 'wellness checks' carried out at most Toronto emergency shelters (with a harm reduction focus). An Indigenousled vaccine clinic in Calgary, which includes the onsite presence of Elders, is also worthy of mention, as is a massive increase in the use of LPNs and paramedics at Calgary's largest emergency facility. Indigenous-led testing and vaccine clinics in Winnipeg has also been well-received. In Ottawa, supervised consumption services and a safe supply of cannabis are both offered at an isolation site designated for persons experiencing homelessness. Also in Ottawa, some persons experiencing homelessness who receive the COVID-19 vaccine receive one gram of cannabis after each dose. Finally, territorial officials in Yellowknife have been distributing alcohol at the isolation centre for persons experiencing homelessness.



Intersectoral cooperation

During the COVID-19 pandemic, homelessness officials in many Canadian cities have reported improved levels of cooperation with provincial and territorial health authorities. By contrast, cooperation from correctional officials remains virtually non-existent in many cities.

Toronto

A well-placed official in Toronto noted very important levels of cooperation received from the Toronto Region of Ontario Health, the local health authority. This has included a considerable amount of coordination with respect to COVID-19 testing, isolation and vaccinations among persons experiencing homelessness.

Another official attributed increased cooperation from health officials to advocacy from the Toronto Shelter Network in asking for more front-line healthcare staff to come into emergency facilities. The official elaborated: "With COVID, they've finally started providing primary health services [i.e., service provision by family physicians and nurses]. They started with the hotels, and now they come into most Toronto shelters." Most of these healthcare workers are employed by local health centres, Toronto Public Health, Unity Health Centre, and Unity Health.

Regrettably, one official also noted that local corrections officials still do not typically reach out to homelessness officials to coordinate the releases of persons without housing.

Montreal

Every region of the province of Quebec has an interdepartmental body coordinated by the Quebec Ministry of Health called the *Comité Directeur Régional en Itinérance* that meets monthly to discuss homelessness planning. It brings together representatives from both non-profit organizations and ministries of the provincial government. In Montreal, this body is co-facilitated by the City of Montreal.

In terms of innovation, a recent partnership involving the Centre intégré universitaire de santé et de services sociaux du Centre-Sud-de-l'Île-de-Montréal (the local health authority) is worth highlighting. Beginning in early 2021, hospital officials began transitioning people from addictions treatment into short-term, self-contained housing arrangements as they recover. This involves a partnership with Welcome Hall Mission, whose staff work with the individuals to get them into more permanent housing. The hospital pays for the unit and the support staff. As of May 2021, 10 individuals were supported in this way. Each individual typically remains in the short-term housing for between two weeks and three months. According to one wellplaced official: "We're in the process of developing a long-term contract."



Vancouver

An important example of intersectoral cooperation in Vancouver pertains to the relocation of persons from encampments. Vancouver's encampment response involved the following entities: BC Housing (they secured the housing, made allocation decisions and funded the housing operators); the City of Vancouver (their outreach team supported the relocations, municipal sanitation crews helped remove debris, and municipal fire staff helped to remove devices that could catch fire); Park staff (they have regulatory authority over the park and they assisted with fencing); Vancouver Coastal Health (their IHOT team, discussed earlier, supported health needs of residents, including with COVID-19 testing and the provision of PPE); Kílala Lelum Health Centre, an Indigenous health collaborative, provided health supports to residents;9 Atira Women's Resource Society (they provided staffing at the warming tents and washrooms in trailers; they also operate one of the hotels recently purchased); PHS (formerly known as Portland Hotel Society, they provided outreach in the park, including provision of meals); various housing operators (e.g., Luma Native Housing Society, Community Builders Group, Atira); and the Vancouver Police Department (which played a very minor background role — no actual arrests were made).

Calgary

A well-placed official in Calgary's homeless-serving sector praised

⁹ More information on Kílala Lelum Health Centre can be found here: https://kilalalelum.ca/.

provincial health officials for their more engaged role with respect to homelessness over the past year. They stated: "Alberta Health Services has gotten much better with respect to persons experiencing homelessness during the pandemic. That continues. They've really taken ownership and have taken a coordinated approach with vaccines. They've performed well here." However, another well-placed homelessness official noted that there is still much room for improvement, and pointed out that the enhanced funding for LPNs and paramedics discussed earlier in this report was provided by Community and Social Services.

One homelessness official noted that provincial justice officials have "been more engaged on phone calls" during the pandemic, but that there is still very little ongoing communication between them and local homelessness officials, including with respect to discharge planning from correctional facilities.

Edmonton

One well-placed official interviewed for this report highlighted a very positive working relationship between corrections officials and the Boyle McCauley Health Centre, noting that inmates being discharged from the Edmonton Remand Centre are often given a 'warm transfer' to Boyle McCauley for health services (and that staff at Boyle McCauley can help connect recently-discharged inmates to housing and other services). According to the official: "This has a lot



to do with efforts by Boyle McCauley's Medical Director, who has pushed for this collaboration."

Ottawa

Since 2018, the City of Ottawa, in collaboration with the Canadian Mental Health Association, Ottawa Branch, the Ottawa Hospital, the Royal Ottawa Hospital, the John Howard Society and the Elizabeth Fry Society, has had a coordinated access system in place for individuals who experience homelessness and are discharged from inpatient psychiatry or from correctional facilities. Individuals are prioritized and matched to housingbased case management supports and services in the community. While these services are showing some success, more resources are needed as the demand far outweighs the supply. According to one well-placed source: "We'd need a lot more positions to do this better."

The City of Ottawa also funds three 'in reach' positions at John Howard Society of Ottawa, and one at the Elizabeth Fry Society of Ottawa. These positions help inmates with their transitions into community; this includes assistance with housing searches. Again, demand for these services far outstrips supply.

Winnipeg

Like many other Canadian cities, Winnipeg has seen increased collaboration between health officials and homelessness officials during the pandemic. According to one local homelessness official: "There's been great collaboration with health—both provincial health officials and officials with the local health authority. The local health authority has been especially helpful with COVID-related stuff in our homelessness sector."

As for justice officials, the following statement from a local official is informative: "While justice reps have not been involved directly in COVID-19 response planning for people experiencing homelessness specifically, provincial justice reps have been actively collaborating on coordinated access planning and prevention initiatives."

Quebec City

As noted above, every region of the province of Quebec has an interdepartmental body coordinated by the Quebec Ministry of Health called the *Comité Directeur Régional en Itinérance* that meets monthly to discuss homelessness planning. Approximately 15-20 people attend each meeting. This type of cooperation has existed for many years.

In terms of recent innovation at the city level, however, collaboration has improved between homelessness planners, municipal officials, police officers and provincial health officials. For the past year, a five-person working group with representation from all of these sectors has been meeting weekly in Quebec City, with meetings focused on homelessness during the pandemic.

A well-placed local official also reports an improved relationship between homelessness officials in Quebec City and corrections officials. There are three or four community agencies from Quebec City that go into



correctional facilities, where their staff build rapport with inmates. Much of the focus is mental health and harm reduction. Upon discharge, the inmate can have a plan in place—and sometimes this involves a housing referral. According to the official: "It's a better relationship with provincial facilities than with federal ones."

Hamilton

One recent example of intersectoral cooperation involving Hamilton's homelessness sector pertains to a privately-run rooming house. In October 2020, officials "decanted" a building with approximately 30 residents: most of those residents have since been rehoused. This involved cooperation from Good Shepherd front-line staff, the City's Housing Services Department (who handle licensing), senior health officials at St. Joseph's Healthcare Hamilton, staff from the St. Joe's Assertive Community Treatment (ACT) Team, 10 and the housing providers who provided new housing for the displaced residents. This was also a good example of homelessness prevention.

Regina

The City of Regina leads a Community Well-Being Table that meets weekly. Between 15 and 25 groups attend each week, including staff from the Ministry of Social Services and the Saskatchewan Health Authority (SHA), as well as staff from primarily Indigenous-serving organizations. According to one local source: "It is mainly senior people from each

¹⁰ More information on ACT Teams in the Ontario context can be found here: https://www.ementalhealth.ca/Ontario/Assertiv

organization [e.g., CEOs, Executive Directors] that take part in the meetings but there are some front-line workers who take part in the meetings as well. Homelessness is discussed each week and stakeholders share information on how they are dealing with various issues, and they also share information on how agencies can obtain resources when available." The provincial Minister of Social Services joins the call once every three months.

The City of Regina has also been hosting special meetings with the Ministry of Social Services, as well as the Minister, to provide an opportunity for community groups to share back their experiences and what they are seeing during the pandemic, and pose questions to the Ministry.

Cooperation between corrections officials and homelessness officials remains suboptimal. According to one well-placed official: "We're hearing that corrections facilities are discharging people to the local Salvation Army shelter without even a courtesy phone call."

Victoria

One recent example of innovative cooperation across sectors in Victoria has involved health care providers. Indeed, as people have been relocated from encampments, health services have been provided at the new sites, including in hotels. This has included mental health case management, harm reduction, overdose prevention and clinical services (e.g., health services for diabetes).

<u>e-Community-Treatment-ACT-teams/index.php?m=heading&ID=113.</u>



There is some positive cooperation between corrections officials and local homelessness officials in Victoria. Through a program called Integrated Offenders Management, three \$300/month rent supplements are earmarked for persons leaving corrections. According to a well-placed homelessness official in Victoria, however, more engagement from corrections would be helpful. The official noted: "I wouldn't say corrections are a part of the larger homelessness planning community."

St. John's

Early in the pandemic, the provincial government struck a Vulnerable Persons Task Force, with representation from several departments, including: Children, Seniors and Social Development; Justice and Public Safety; and the Newfoundland and Labrador Housing Corporation. Its mandate is to discuss, plan and problem-solve regarding persons expected to be most affected by the pandemic. The lead department is the Department of Health and Community Services, and staff from several community agencies attended. The group met every week in the early days, and then began meeting biweekly. According to one official: "This was very important. We all got to learn what other systems were doing."

All meetings took place virtually, with approximately 60 persons from across the province attending each one.

Yellowknife

Good intersectoral cooperation has taken place in Yellowknife during the pandemic. The local health authority has operated an overflow service referred to as a "temporary day shelter"—which had the effect of improving the integration of territorial health and social supports. In effect, the staff working there every day also had clout at the territorial level. resulting in increased supports secured for the facility, including two outreach nurses providing care across the local shelter network (which is very out of step with previous territorial practices). According to one wellplaced official: "This accidental outcome has therefore been a blessina."

Also, the territorial government's major social service departments now have representation at the City of Yellowknife's Community Advisory Board (CAB) table. This has been a development in the past year. Yellowknife's CAB has also recently acquired representation from Indigenous organizations, namely from the Arctic Indigenous Wellness Foundation and the Dene Nation.



In sum

The pandemic has been a time of improved partnership among the various sectors that can assist in both preventing and responding to homelessness. Far more of Toronto's emergency facilities are seeing primary health care—i.e., service provision by family physicians and nurses—provided directly on site. And while not a new practice, it is worth shining light on the fact that every region of Quebec has an interdepartmental body coordinated by the Quebec Ministry of Health that meets monthly to discuss homelessness planning. Finally, it is worth highlighting the positive working relationship between corrections officials in Edmonton and a local health centre, whereby discharged inmates are often given a 'warm transfer' to health services (which often leads to a connection to housing).



Prevention

In Canada, homelessness prevention has been receiving more attention in recent years. This is especially important in light of the fact that some cities will likely see a rise in homelessness due to the pandemic-induced economic crisis. This section of the report will discuss new prevention initiatives—specifically, proactive measures with the view of preventing new homelessness onset.

Toronto

During the pandemic, the City of Toronto has allocated increased funding to the Toronto Rent Bank (using provincial funding). Prior the pandemic, this initiative was receiving \$1.5 million annually; during the pandemic, its annual allocation has increased to \$6 million.

The City of Toronto has also shifted the approach used by the Eviction Prevention in Community initiative, which provides prevention services aimed at helping tenants facing imminent risk of eviction. This program helped more than 300 people to remain housed in 2020. In the past year, the initiative has shifted the way it engages with tenants due to the move to online hearings; staff are now engaging with tenants by telephone and virtually. Also, more outreach is being done directly with landlords earlier on in the process. In the words of one well-placed official, staff with this program "now get landlords to refer tenants for support, even in advance of going to a hearing."

Montreal

While recent initiatives pertaining to homelessness prevention are lacking in Montreal, the Québec Homelessness Prevention Policy Collaborative (Q-HPPC) formed in early 2021. This involves a partnership between the McGill Institute for Health and Social Policy and the Old Brewery Mission. The initiative, led by a steering committee and featuring several working groups, will focus on developing policy options in specific areas such as mental health, Indigenous homelessness, immigration and refugees, corrections, and youth and child protection.

Vancouver

Well-placed officials interviewed for this report were not able to point to any innovations pertaining to homelessness prevention that has occurred in Vancouver in the past year. One of them noted: "We've been very much in crisis response mode in the past year."

¹¹ For more on this phenomenon, see this recent blog post: https://nickfalvo.ca/the-long-term-impact-of-the-covid-19-recession-on-homelessness-in-canada/.



Calgary

A Calgary official noted that increased flexibility associated with Reaching Home funding during the pandemic has allowed Calgary system planning to be more innovative. For example, the Calgary Homeless Foundation has increased funding for diversion from local emergency shelters. Over roughly the past year, approximately1,400 people were diverted from Calgary shelters with assistance from such 'flex funds.' Such funds can be used for first month's rent, security deposits and moving costs.

Edmonton

Homeward Trust Edmonton has recently expanded its homelessness prevention fund, Supported Referrals, which provides households at imminent risk of being homeless with short-term resources (e.g., money for damage deposit, first month's rent). Community agencies incur the costs and then charge Homeward Trust Edmonton for the costs after the fact. Each agency is given a cap on the number of people it can assist each year. A maximum of approximately \$2,600 per household can be drawn on each time. These recent enhancements to the program were made possible thanks to Reaching Home funding enhancements during the pandemic. In the past year, Homeward Trust Edmonton allocated approximately \$300,000 towards this initiative.

Ottawa

The City of Ottawa has an \$8 million (annual) fund administered by Employment and Social Services staff

to help social assistance recipients acquire or maintain accommodations. The fund, which consists entirely of municipal dollars, covers rental and/or utility arrears, reconnection fees, moving costs, first/last month's rent, beds and start-up kits (basic pots & pans, dishes and linens). Staff must complete an assessment with the client to determine if the accommodations are suitable, affordable and sustainable and that no other resources are available to meet the need. Arrears prevention options such as available energy credits, 'pay direct' arrangements and budget counselling—are also discussed and staff may refer clients to other services or programs for support. Households requesting help to maintain their accommodation must be in arrears. Singles and couples are typically eligible for up to \$800 and families up to \$1500 within a 24-month period.

The City of Ottawa's Housing Services is the Service Manager for an integrated housing and homelessness service system, whereby homelessness prevention programs are administered through Federal, Provincial and Municipal funds. Funding is provided to several Indigenous agencies to serve Indigenous single adults and youth, as well as families for various types of housing loss prevention initiatives. These initiatives include general housing assistance, Housing First support workers to prevent housing loss, outreach and drop-in initiatives that offer resources, supports and referrals.

The Indigenous agencies collaborate with each other on prevention strategies with stakeholders through the Aboriginal Community Advisory Board. The Indigenous agencies'



Housing First program tenants are supported by various prevention strategies and staffing interventions with landlords and property managers, including the Landlord Damage Fund. This initiative was implemented by the City of Ottawa in 2018 and reimburses landlords for damages, preventing evictions and maintaining landlord partnerships. The City's Community Funding stream is also extended to Indigenous agencies and supports sustainability and homelessness prevention.

As with the Indigenous agencies, homelessness prevention for newcomer-specific organizations in Ottawa is funded and supported through the City of Ottawa's Housing Services. Funding is provided to several newcomer agencies that serve adults, youth and families for various types of housing loss prevention initiatives, including general housing assistance services, supported housing, outreach and drop-in initiatives that offer resources, supports and referrals to other newcomer resources such as language and skills training, legal and health services as well as employment opportunities

Winnipeg

Winnipeg has seen an important homelessness prevention initiative during the pandemic. Organizations serving mostly youth and women have established partnerships with hotels for people either unsheltered or at risk of eviction. Such individuals were provided with temporary housing in the hotels until they could be moved into permanent housing. Participants were connected with income assistance as well as housing opportunities; those who were

chronically homeless were referred to Doorways (Housing First intake). This was funded with Reaching Home enhancements announced last fall: \$1,057,806 has been distributed for this initiative since April 2020 (across four organizations focused on supporting youth, women and Indigenous people).

Further, in March 2021, the Government of Manitoba also announced the creation of a \$5.6 million rent bank, to be administered by the Manitoba Non-Profit Housing Association (MNPHA). Interest-free loans will be provided to tenants who are in rental arrears or who need to move to housing that is more suitable.

Quebec City

In the past year, the City of Quebec has implemented a telephone service for people who have just lost their housing; the goal of the telephone line is to divert people away from the emergency shelter system. Previously, such a telephone line was only offered once a year, coinciding with the July 1 province-wide moving date; now, it is available Monday to Friday during regular business hours. Staff answering the telephone line will often refer the caller to income assistance programs/opportunities designed to quickly help the person. There are sometimes non-financial resources as well (e.g., psychosocial follow-up support).

Hamilton

A Reaching Home-funded homelessness prevention program, administered by Good Shepherd, assists families, single women and youth. While it has been operating for



several years, it expanded to single women and youth in the past year. Households applying for the benefit have their cases reviewed by a case manager and then approved by a manager. Beneficiaries receive Flex Dollars typically ranging from \$200-\$300 per household in most cases. These funds can assist with first and last month's rent, rental arrears, utility areas and moving costs.

Good Shepherd also runs a diversion program. While it has been operating for over a decade for youth and families, it received additional funding from the City of Hamilton during the past year to expand to singles. This intervention begins when a person tries to access an emergency facility. Questions are asked about the person's situation (with the help of a script). Sometimes this takes place in person, sometimes by telephone. According to a well-placed official: "We explore options. We only divert if they have a safe and viable option. It begins at first contact, and engagement continues after admission." As an alternative to entering an emergency facility, Flex Dollars are sometimes offered for such things as groceries, taxi fare, work boots, and even airline flights.

In addition, the Housing, Outreach and Preventing Eviction for Seniors (HOPES) program administered by St. Matthew's House expanded their team in 2020 to include a licensed paralegal with a specialization in evictions. This program works specifically with older adults (55+) at risk of homelessness with a VI-SPDAT score of 4-7. The team consists of three staff, a specialist in gerontology, a registered social service worker, and (now) a licensed paralegal.

Regina

There have been no major improvements to homelessness prevention in Regina over the past year. However, the entire province of Saskatchewan has suffered a major setback in this respect as the full impact of the Saskatchewan Income Support (SIS) program, launched in 2019, is still taking effect. SIS was launched with the ostensible goal of making recipients more independent.

With the previous income support scheme, landlords could be paid directly by income assistance officials; but with SIS, such direct payment options are not possible. This is making it challenging to find landlords willing to rent to very low-income households; it may also be putting tenancies in jeopardy for those individuals lucky enough to find willing landlords. While SIS is intended for people who are expected to work, many SIS recipients have major disabilities, including serious mental health challenges. This includes a large number of recipients who receive SIS while waiting for their applications to be approved for the Saskatchewan Assured Income for Disability program, intended for persons who are not expected to work.

Victoria

According to a well-placed homelessness official in Victoria, there have been no major innovations pertaining to prevention in the past year. The official noted: "I think it needs to be more of a priority."



St. John's

St. John's has a prevention initiative called Supported Referrals for people at risk of becoming homeless; it is modelled off a similar initiative offered at Homeward Trust Edmonton. Though the initiative was launched in St. John's in June 2018, funding was increased by 20-25% over the past year due to the pandemic. Funds help pay rental arrears and utility arrears. People access it via the city's centralized coordinated access system. Agencies accessing it for their clients pay costs up front, and then submit claims to End Homelessness St. John's after the fact (who in turn reimburses the agency).

Yellowknife

YWCA NWT received Reaching Home funding to help pay rent for families that became homeless during the pandemic. Between \$200,000 and \$250,000 was allocated for this in April 2020. In addition, approximately \$300,000 was allocated to YWCA NWT in February 2021 to work with individuals and families to pay off rental arrears so that they could remain housed.

In sum

During the pandemic, five of the cities profiled in the present report expanded existing eviction prevention programs that use short-term financial assistance that can be used to pay a variety of costs allowing households at risk of homelessness to either remain housed or to get rehoused very quickly. Such costs can typically include rental arrears, utility arrears, first month's rent, the securing of damage deposits and moving costs. Those cities are Calgary, Edmonton, Ottawa, Hamilton and St. John's. While the initiatives themselves are not new, the pandemic has given officials reason to use increased funding to expand their use. It is also worth noting that a large non-profit agency in Hamilton expanded its shelter diversion program during the pandemic.



Triage into permanent housing

When people leave emergency facilities and outdoor arrangements for housing in Canadian cities, they either find the housing by themselves or with the assistance of front-line staff. Having said that, homelessness officials in most Canadian cities have also been working toward more centralized triage processes whereby specific persons experiencing homelessness—often ones who are deemed most in need of social work support once housed—are prioritized for the limited number of housing and related supports available in the city in question. Such a triage system, typically referred to as either 'coordinated access' or 'coordinated access and assessment,' has taken on new urgency in light of the fact that the Government of Canada has recently stipulated that communities wanting to receive federal funding for homelessness through Reaching Home must have such a triage system in place by 31 March 2022.

Proponents of such systems typically encourage common intake processes across the city's homeless-serving sector, a shared database system, an agreed-up ranking system to determine priority, and a By-Name List (which lists all persons in the city need of such supported arrangements). For such arrangements to work, providers of subsidized housing and related supports must agree to receive applications via the centralized system (in some cases, housing providers can be *mandated* to accept such referrals).

This section of the report will discuss recent developments pertaining to each city's move towards such improved coordination.

Toronto

All programs within the City of Toronto's emergency homeless service system (of which there are more than 100) use a common intake and shared client database system. However, different emergency facilities have different ways of moving people into permanent housing. Many have housing workers funded by the City of Toronto; many of them also use an intake assessment tool called STARSS (developed by the City in consultation with community).

The City of Toronto's coordinated access system refers approximately 200 people to housing each month. Having said that, the system is still in

development. According to one wellplaced official: "We're taking a staged approach; it's evolving as we seek to get more housing providers to the table." An interim prioritization approach is in place based on chronicity or length of homelessness, while a formal prioritization policy is in development. The goal is to ensure implementation of the Reaching Home directives by 31 March 2022 and ensure at a minimum that all Reaching Home-funded projects are integrated into coordinated access by that date (after which point the system is expected to expand to include more service providers).



The City of Toronto already has a By-Name List that includes every person who accesses a City-funded emergency shelter bed. There are more than 100 such shelters; this includes beds in facilities set up in response to the pandemic.

The City has also partnered with Toronto Community Housing on the Rapid Rehousing Initiative, whereby persons experiencing homelessness are prioritized for social housing units. In 2020, more than 450 people were housed through that process. Another 450 such units will be made available in 2021.

Montreal

Montreal still lacks a city-wide coordinated triage system that moves people experiencing absolute homelessness into permanent housing. In the words of one wellplaced official: "There's a lack of a common intake process across the city, a lack of system planning, a lack of a By-Name List, a lack of coordinated access, and a lack of common training." In the absence of such coordination, each emergency facility makes its own housing arrangements with some of their clients. Having said that, three of Montreal's four major homeless-serving agencies do use the same homelessness management software (HIFIS 4).

Montreal does have *Projet Logement Montréal*, a partnership involving Maison du Père, Welcome Hall Mission, the Old Brewery and the Accueil Bonneau. Funded entirely by Reaching Home, this project provides subsidized housing (mostly with private landlords) with social work supports to persons experiencing homelessness (either

episodic or chronic). This program currently supports about 450 people at any one time.

Vancouver

Vancouver has had a city-wide coordinated access system in place for approximately 10 years. According to one well-placed official: "All supportive housing units [of which there are approximately 2,000] are tenanted through this process." To assess people for housing priority, they use the Vulnerability Assessment Tool. All BC Housing-funded shelters use HIFIS 4 as a contractual requirement; that comprises more than 90% of the city's emergency shelters. All BC Housingfunded outreach programs also use HIFIS 4 as a contractual requirement. In terms of who gets prioritized for placement into housing, Vancouver does not have designated priority groups. However, according to one well-placed source: "We now have the additional challenge of housing the folks who've been brought into the newly-created facilities."

Calgary

Calgary has a city-wide a coordinated access system to triage persons experiencing homelessness into housing. In the past year, approximately 1,500 persons were housed through this system.

Approximately 30 agencies refer clients through this system. Most of the client-level data used as part of this process is stored in a software system called ServicePoint.

Referrals are made to a wide range of support models, including: Prevention Supports (i.e. support with rental



arrears, finding more affordable rentals with moving supports); diversion (i.e., no need for Intensive Case management, just need help with system navigation and some limited financial supports); and Intensive Case Management (usually for a couple of years), which would include a rent subsidy. Most referrals are for scattered site housing programs, meaning most of the units in the building are not for a designated population.

During the pandemic, Calgary has been prioritizing coordinated access referrals based on: how long each person has been homeless; whether they are in a congregate setting; whether they have health needs that make them more vulnerable to COVID-19; their own engagement in a pursuing a housing plan; whether they are being discharged from a public system; and whether they are pregnant.

Most placements from Calgary's emergency facilities into housing happen outside of the coordinated access system (for example, just 10% of the people housed from the Calgary Drop-In are housed through coordinated access). Staff at the Calgary Drop-In help their residents find housing, often through relationships they have developed over the years with some private landlords. Drop-In staff then often provide case management for perhaps the first three months after a placement. While such referrals usually happen without an ongoing rent supplement, 'flex funds' provided by the Calgary Homeless Foundation assist referred tenants with first and last month's rent, and sometimes with utility arears.

During the pandemic, Calgary has used Reaching Home funding to develop a new model of transitioning singles and youth out of their COVID-19 isolation site into temporary housing at which point there is a strong focus on undertaking a search for more permanent housing. The Assisted Self Isolation Site (ASIS) is a partnership with The Alex Community Health Centre and the Government of Alberta. The temporary housing happens at a 30-unit apartment building. Most individuals participating in this initiative have been identified as needing intensive case management or a place-based supportive housing, so the timing of their placement depends on availability of resources.

Edmonton

While Edmonton has had a city-wide coordinated access system in place for roughly the past decade, the system has evolved over time. The system uses the VI-SPDAT as a tool to assess priority for housing placement. Their client-level software is called Efforts to Outcomes. People in temporary facilities created during the pandemic also go through Edmonton's coordinated access system.



Ottawa

Ottawa has had a coordinated access process and a By-Name List in place since 2015 to assess and prioritize chronically homeless individuals for Housing First services. This process was adapted in 2017 to accommodate unaccompanied youth at risk of or experiencing homelessness; it was adapted again in 2019 to include a process for and by Indigenous peoples.

A triage assessment determines if people can be diverted from entering shelter and provided with general housing assistance. If people cannot be diverted, a more in-depth assessment is completed to prioritize and match people to housing support services based on their needs and choice in housing, including housing-based case management support or City-funded intensive supportive housing that have been in existence since 2014. People's acuity (high, moderate or low) determines the type, intensity and duration of supports required to help them become housed and retain that housing over the long term.

Through this system, participants have access to a portable housing allowance through the Canada-Ontario Housing Benefit (i.e., the Ontario version of the Canada Housing Benefit) and other types of benefits for housing in the non-profit or for-profit sectors.

Persons experiencing homelessness in Ottawa can also access the city's social housing registry system; indeed, persons experiencing homelessness (i.e., sleeping in a city-funded shelter) are a local priority for that registry.

Winnipeg

End Homelessness Winnipeg became the Community Entity for Reaching Home funding in 2019 and over the past year has engaged the community and people with lived experience to develop a governance structure and guiding principles for implementing coordinated access. Winnipeg expects to have a centralized coordinated access system in place by 31 March 2022 (as per Reaching Home directives). Further, as of 31 March 2021, 17 agencies had been onboarded onto Winnipeg's HIFIS 4 system, up from just six agencies as of 31 December 2019. While providers have been using a common assessment tool (namely, the VI-SPDAT) a new tool, based in an Indigenous world view, is in development by the Indigenous Community Entity caucus and under consideration.

Quebec City

Quebec City has a centralized waiting list for social housing, coordinated by the City's (specifically, by the Office Municipal d'habitation de Québec). This is a relatively new development, having started in the past two years. For housing that is not social housing, there are various possible pathways into housing. Some people are able to access a rent supplement in private market rental housing (some rent supplements allow tenants to pay no more than 25% of their income on housing indefinitely). People staying in emergency shelters access rooming houses, often with assistance from front-line workers.

Quebec City's homelessness sector does not have a centralized



coordinated access system, nor does there appear to be much tangible progress made towards such a system. According to one well-placed homelessness official in Quebec City: "We're actually opposed to this. Nor do we want to do common assessment tools or a By-Name List."

Hamilton

Hamilton has a city-wide coordinated access system. This system allows people to access City-supported Intensive Case Management programs (ICM), which have 344 program spaces funded each year. In terms of who gets to be placed into those programs, in 2020 the City of Hamilton made a stipulation that one-third of those spaces are for people coming out of the city's temporary hotels, one-third for people coming from emergency shelters, and one-third from encampments. Priority is also based on acuity based on the VI-SPDAT (to be eligible for a space in an ICM program, a person needs an acuity level ranging from 8-12).

Hamilton's coordinated access system also has rapid rehousing options, which involve time-limited financial assistance, typically to persons experiencing episodic or transitional homelessness. On an annual basis, this assists 133 men, 87 women, and 86 families. Priority is based on acuity. Eligible persons require a VI-SPDAT acuity level of between 5 and 7.

Indigenous service providers have their own prioritization criteria as part of this coordinated access system, and Indigenous people experiencing homelessness in Hamilton can be linked to an Indigenous provider.

The City of Hamilton is currently implementing HIFIS 4 across all funded programs. As of June 2021, shelters, shelter overflow, ICM and rapid rehousing programs, outreach, drop-in programs and a transitional living program had all been onboarded.

Regina

Regina's centralized coordinated access system for Housing First placements, known as the Centralized Housing Intake Process, continues to develop. According to one well-placed official: "We have someone contracted through Reaching Home to design it. They'll help create buy-in and create policy and procedures around it. They'll also look into finding out how to assign a temporary lead agency for each person assessed [i.e., the worker responsible for person at any given moment]. Also, how to prioritize."

Regina already has a centralized intake system for its social housing sector. Applicants are first assessed using the VI-SPDAT assessment tool. They are then assessed with the SPDAT assessment tool if they score high on VI-SPDAT. The higher a person's score, the higher the perceived need, and the higher the priority they receive for Housing First.

The local HIFIS data management system also continues to develop and will eventually allow for client-level data sharing among agencies.

According to one official: "We expect it to be implemented later this year, but no firm dates are in place. Neither is it clear yet on which exact agencies will use it."



Victoria

Victoria has a coordinated access system that gives priority to three groups: Indigenous households, people who are aged 55 and over, and persons who have been living in an emergency shelter for more than two years. Local officials report no major changes to this system in the past year.

In terms of the management of clientlevel data, Victoria is expected to have HIFIS 4 in place, city-wide, by end of 2022 (as per Reaching Home agreements). BC Housing currently uses HIFIS 4 for its own resources, and it may prove challenging to create an integrated data system. According to one well-placed source: "It's not easy to plug data from other data systems into that. Several non-profits in Victoria are now interested in creating their own HIFIS system that's expandable to other systems. BC Housing [which has the provincial HIFIS licence] only wants to use it for their own funded programs; so we can't add programs funded by other funders onto it. BC Housing won't prioritize this. They cite concerns about resources and privacy."

Victoria has not made any recent progress in terms of the creation of a By-Name List.

St. John's

Most of the city's formal coordinated access system has been on hold since March 2020, with the pandemic being one of the reasons. Meanwhile, local officials are "working on improving the way that assessments take place (e.g.,

¹² VAT stands for Vulnerability Assessment Tool, a questionnaire determining a person's level of vulnerability.

inter-rater reliability). We also need to sort out how many units of housing are being made available by which non-profit agencies. It will likely begin again in spring 2021." In the absence of this formal system, placements into Housing First have been taking place informally. Moreover, VAT assessments have not been administered to new clients.¹²

St. John's has made progress in the past year in terms of implementing HIFIS 4. As of September 2020, there has been a full-time staff person "ushering it through;" that person works for End Homelessness St. John's. HIFIS 4 is currently being piloted by two programs: The Gathering Place and Connections for Seniors.

Yellowknife

Yellowknife currently lacks a centralized coordinated access system. According to one well-placed official: "There's a serious lack of flow out of emergency shelters into permanent housing." However, Reaching Home requires that all Designated Communities (including Yellowknife) implement such a system by 31 March 2022. According to one local official: "We're working with the Canadian Alliance to End Homelessness [CAEH] on this. They'll guide us through the governance structure process. They've already written a report for us. They worked with NGOs to find out their hesitations and to get a sense of the fears/holdbacks." CAEH is funded by Employment and Social Development Canada to do this work.



In sum

When it comes to progress on coordinated access, Canadian cities appear to fall into one of the following three categories: 1) those where it is established; 2) those where it is in development; and 3) those that appear to be resisting it. Vancouver, Calgary, Edmonton, Ottawa, Hamilton, Victoria and St. John's all have some version of coordinated access already established. Coordinated access is still in development in Toronto, Winnipeg, Regina and Yellowknife. Montreal and Quebec City, by contrast, do not appear to be on the way toward having coordinated access in place any time in the near future, and it is not clear what implication this will have for Reaching Home funding.



The National Housing Strategy

The National Housing Strategy (NHS) was unveiled by the Government of Canada in November 2017, and has since received multiple funding enhancements. The present section of the report discusses four components of the NHS, namely Reaching Home, the Canada Housing Benefit, the Rapid Housing Initiative, and the National Housing Co-Investment Fund. Particular emphasis will be placed on the degree to which each program has had a direct impact on persons experiencing homelessness in each city.

Reaching Home

On 21 September 2020, the Government of Canada announced an additional \$236.7 million for Reaching Home in light of the current pandemic. Persons interviewed for this report were asked how much their community received and, in rough terms, how they spent it.

Toronto

The City of Toronto received approximately \$26 million and allocated it toward initiatives that had already begun, including at the 26 new locations providing approximately 2,500 temporary spaces. This includes funding for outreach, mental health and harm reduction supports. The City's overall COVID-19 response budget for homelessness was \$260 million annually, with approximately \$160 million of this total coming from provincial sources.

Montreal

Officials interviewed in Montreal did not know the precise amount of Montreal's share of the enhanced Reaching Home funding (keeping mind that, in the province of Quebec, Reaching Home funding goes directly to provincial health officials). Local officials are under the impression that it was used mostly on emergency facilities, including staffing costs.

Vancouver

Homelessness officials in Vancouver, while not aware of the specific dollar amount received by Vancouver, noted that some of their Reaching Home enhancement was used to fund renovations and lease costs associated with a new 60-bed shelter. Some of the funds were also used to develop a washroom trailer strategy. There are now three or four such trailers located throughout Vancouver's downtown.

Calgary

Calgary received an additional \$13 million through this enhancement. It was used for a combination of prevention, diversion, short-term housing (as people search for more permanent housing), medical supports, basic needs, research, capital improvements, vehicles, rapid rehousing, a pandemic-related bonus for front-line staff and software licenses.



Edmonton

Edmonton received an enhancement of approximately \$13 million. Initiatives receiving these funds included: large site pandemic responses (e.g., staffing, food); hotels for 'bridge housing' (discussed above); First Nations (enabled by increased pandemicrelated flexibility in Reaching Home rules); and Supported Referrals (also discussed above).

Ottawa

The City of Ottawa received \$8,932,731 in Reaching Home COVID-related funding in October 2020. It was used for physical distancing, respite centres, COVID-related renovations, street-outreach/harm reduction, and COVID-related expenses for homelessness programs and residential services homes.

Winnipeg

Winnipeg's share of the 21 September 2020 enhancement was \$7.9 million. It allowed for 24/7 outreach teams, which have been very helpful during winter months. It also supported additional daytime drop-in facilities during the winter. Much of it also went to capital funding (including topping up some of the funding received through the Rapid Housing Initiative). Some of it was also used to provide temporary shelter to people in hotels until they were transitioned into permanent housing.

Quebec City

Local officials interviewed for this report were not clear on the precise amount received by Quebec City as

part of this funding enhancement. However, they did state that part of it was used for salary increases for people working in the sector (roughly in line with inflation). The precise salary adjustments varied across agencies, as each homeless-serving organization has its own salary grid.

Hamilton

Hamilton's enhancement was \$4.2 million. It was used for a capital procurement project that will create 12 new units of permanent supportive housing for Indigenous households. The project is a partnership between Indwell and Sacajawea Non-Profit Housing, with the precise nature of supports yet to be determined. According to a well-placed source: "This collaboration in affordable housing between a mainstream and Indigenous agency aims to set a new and ground-breaking precedent for the housing industry in Hamilton."

Regina

Regina received \$3,032,705 in additional Reaching Home funding. Through two separate Call for Proposal processes, six organizations funded by Reaching Home during the 2020-21 funding period received additional funds and nine additional agencies received funding for homelessness programming and capital investments projects. One beneficiary of this enhanced Reaching Home funding was Awasiw, an Indigenous-run 24hour low-barrier 'warm up' space. Food was served, and several local agencies did outreach there. This was open during very cold weather, keeping in mind that many public spaces such as libraries closed due to the pandemic.



Other groups used funding for capital improvements to their facilities; some others opened warm up space (just not 24/7). This funding was also used for staffing enhancements—e.g., to assist with caseloads/extended outreach, etc.

Victoria

Victoria received an enhancement of \$3.23 million. Approximately \$2.1 million was allocated under the Designated Communities funding stream, while approximately \$913,000 was allocated via the Indigenous Homelessness funding stream. Funds supported 25 sub-projects with a focus on three priority areas: 1) the extension of pandemic-related measures (including for basic needs such as food); 2) permanent housing; and 3) helping to reduce new homelessness through such activities as prevention and diversion.

St. John's

St. John's received an additional \$1.5 million. This went towards initiatives that included: the harm reduction supports for Eastern Health (discussed earlier in the report); personal protective equipment; food security

initiatives; housing stability and support funds; and the development of a specific COVID-19 site.

Yellowknife

Yellowknife's Reaching Home enhancement, which amounted to \$1,469,258, was allocated as follows: YWCA NWT for additional housing leases, food, utilities and essential items (\$236,100) and Rental Arrears, Prevention & Shelter Diversion, Q1 Housing First (\$593,200); Side Door Youth Ministries for staff overtime and shelter supplies (\$43,250); Salvation Army for additional shelter cleaning (\$18,000); Yellowknife Women's Society for additional shelter food (\$3,000) and for Housing First for Adults (Q1) & Operation Support for Women's Shelter (\$125,000.00); various homeless-serving agencies for a COVID-related staff wage top up of \$2/hour (\$319.145): Arctic Indigenous Wellness Foundation for its On the Land Breakfast Program (\$112,084); Yellowknives Dene First Nation for its On the Land Program (\$ 363,230) and for its Community Hunt (\$100,298); and City of Yellowknife for the expansion of service hours for downtown public washrooms (\$55,000).



The Canada Housing Benefit

The Canada Housing Benefit (CHB) consists of financial assistance to help low-income households afford the rent in both private and social housing units. The benefit, contingent on each province and territory signing a cost-sharing agreement with the Government of Canada, was supposed to launch on 1 April 2020.

Toronto

Over 1,100 Toronto households were assisted through this program in the first year. However, it is not directed specifically to persons experiencing homelessness; rather, it targets households who are on the city's existing social housing wait list (in exchange for agreeing to come off wait list, as required by provincial requirements under the Canada Ontario Housing Benefit regulations). While some recipients have likely experienced absolute homelessness, that was not a requirement. Each recipient household in Toronto is receiving approximately \$740/month based on a formula whereby they spend 30% of income on rent, while achieving rents worth 80% of market rent. (This in turn is based on a formula determined by the provincial government). In Toronto, this benefit lasts seven years—however, the Government of Canada's messaging suggests it may continue beyond seven years. It is 'portable,' and can be used in any Ontario municipality.

Montreal

In the province of Quebec, the CHB was not distributed in the same way as other provinces. Quebec has many units of social housing that are still

managed by the federal government; and most of Quebec's CHB allocation was integrated to help fund these existing social housing units. While well-placed officials in Montreal interviewed for the present report did not have details related to this allocation, it is not believed to have had much of a direct impact on persons experiencing homelessness.

Vancouver

In Vancouver, the CHB was used to enhance existing rental programs. It was targeted to women, people leaving corrections and youth. It was not just for people experiencing absolute homelessness; it also went to people at risk of homelessness.

Calgary

The Government of Alberta recently released a newly-designed financial assistance framework for renters. The Rental Assistance Benefit will be similar to a program previously operated; it is a long-term subsidy intended for those in highest need (identified through social housing wait lists). The Temporary Assistance Program is a newer program intended for people with stronger labour market attachment; it is a shallower subsidy and is time limited. In Calgary, both programs are administered by the



Calgary Housing Company (the city's largest provider of affordable housing).¹³ It is expected that the CHB will flow to Calgary through this scheme and will involve contributions from both the provincial and federal governments.¹⁴ It is not clear what if any direct impact this benefit will have on people experiencing absolute homelessness in Calgary.

Edmonton

As noted above, the Government of Alberta recently redesigned its financial assistance framework for renters. The Rental Assistance Benefit will be similar to a program previously operated; it is a long-term subsidy intended for those in highest need (identified through social housing wait lists). The Temporary Assistance Program is a newer program intended for people with stronger labour market attachment: it is a shallower subsidy and is time limited. In Edmonton, both programs are administered by Civida (a non-profit housing provider). It is expected that the CHB will flow to Edmonton through this scheme and will involve contributions from both the provincial and federal governments.15 It is not clear what if any direct impact this benefit will have on people experiencing absolute homelessness in Edmonton.

Ottawa

The City of Ottawa has targeted its CHB allocation to single women and lone female-led households who are either experiencing homelessness or who are at risk of homelessness. Some recipients were housed directly out of homelessness (through the aforementioned coordinated access system) and others were housed from the aforementioned social housing wait list. As per a provincial stipulation, people receiving the benefit had to agree to remove their name from the social housing wait list (even though the CHB is time-limited until 2028). This made some households reticent to accept the CHB. The average level of subsidy for the first year of the program is \$617/month; thus far, it has housed 343 households. As with all housing benefit programs there is an annual renewal process for each recipient. It is 'portable,' and can be used in any Ontario municipality.

Winnipeg

Initial details of the CHB's rollout in Winnipeg were publicly announced in December 2020.¹⁶ One stream is for people either experiencing homelessness or at risk of homelessness; another is for youth aging out of care; and a third stream is for people with mental health and substance use challenges living in designated supportive housing buildings. End Homelessness

¹³ More information on both of these programs is available here:

https://calgaryhousingcompany.org/applicants/rent-assistance/

¹⁴ More information on this new framework can be found here:

https://www.alberta.ca/affordable-housing-programs.aspx.

¹⁵ More information on this new framework can be found here:

https://www.alberta.ca/affordable-housing-programs.aspx.

¹⁶ Those details are available here: https://www.cmhc-schl.gc.ca/en/medianewsroom/news-releases/2020/announcingcanada-manitoba-housing-benefit.



Winnipeg is administering the stream for persons experiencing homelessness or at risk of homelessness. Up to \$250/month per person is available for that stream, and funds are expected to be in place for the duration of the National Housing Strategy (i.e., for approximately seven years). Allocation through this stream is taking place via the local coordinated access system.

Quebec City

As noted above, most of Quebec's provincial CHB allocation was integrated to help fund existing social housing units, assisting with affordability. It is not believed to have had much of a direct impact on persons experiencing homelessness in Quebec City (or elsewhere in the province).

Hamilton

City of Hamilton officials have found this initiative to be very helpful. According to one well-placed source: "In less than two months, we exhausted our entire allocation of about 200 vouchers [valued at \$1.15] million annually]. We then received an additional allocation for about 52 to 58 households." Local officials first focused on households who had been supported by housing allowances that were expiring, making this a very worthwhile homelessness prevention mechanism. They then prioritized persons experiencing absolute homelessness who were on the city's By-Name List. The benefit aims to have

17 More information on the SHB can be found here:
https://www.saskatchewan.ca/government/ne
ws-and-

each recipient paying 30% of their income on rent, at rents worth 80% of market rent (based on a formula determined by the provincial government). According to a local official: "The initial financial commitment by the provincial and federal government for this benefit is for nine years. However, the aim is for recipients to continue to receive support beyond the nine years." The benefit is 'portable,' and can be used in any Ontario municipality. All recipients of the benefit must consent to being removed from the local social housing wait list (according to provincial regulations).

Regina

An online search reveals that a bilateral agreement has indeed been signed in 2019 between the Province of Saskatchewan and the Government of Canada, allowing the CHB to be in the province through the newly-created Saskatchewan Housing Benefit (SHB). The SHB is a portable benefit available to households paying more than 50% of their income on housing. "All eligible renters receive a flat, monthly benefit based on their household. For example, a single person or couple in a onebedroom apartment will receive \$150 per month; a family in a two-bedroom apartment will receive \$200 per month; and a family living in an apartment with three bedrooms or more will receive \$250 per month."¹⁷ Interviews conducted for the present report suggest that the SHB may not be well-advertised in Regina's

media/2020/december/21/government-of-canada-and-saskatchewan-expand-housing-benefit-to-make-renting-more-affordable-for-mor.



homelessness sector. According to a well-placed local official: "SHB is currently only available to households in community housing developments, leaving many who are homeless unlikely supported by the CHB in Regina."

Victoria

Local officials used the CHB to 'bridge' people out of supportive housing into units owned by for-profit landlords (where no social work would be provided). Placements took place via the city's centralized coordinated access system. Each benefit had a maximum value of \$450 per month (based on 30% of rent). According to one local official: "I'm not aware of a time limit on them." Local officials were able to allocate 56 of the 60 CHB rent supplements they were initially allocated—regrettably, they were not able to allocate the other four within the designated time frame. According to one local official: "We started to receive access to these benefits in

October 2020, and we had to have people placed by end of March. We were somewhat constrained by availability of landlords."

St. John's

Well-placed homelessness officials in St. John's have no knowledge of progress pertaining to the CHB in their province. As of May 2021, no announcement had been made as to whether a bilateral agreement between the provincial government and the federal government had even been signed.

Yellowknife

The CHB does not appear to have had any direct impact on homelessness in Yellowknife. As of May 2021, local homelessness officials did not even know if a bilateral agreement had been signed between the Government of the Northwest Territories and the Government of Canada.



The Rapid Housing Initiative

In September 2020, the Government of Canada announced the Rapid Housing Initiative (RHI), committing \$1 billion for modular housing, the acquisition of land, and the conversion of existing buildings into affordable housing. Initial funds were allocated for fiscal 2020/21 only and were to be committed by March 2021. RHI provides large capital grants per unit—averaging over \$300,000 per unit—rather than primarily loans.

Half of the initial RHI allocation (\$500 million) consisted of a Major Cities Stream, with funds allocated to designated municipalities with high rental needs and homelessness. The other half was a Projects Stream, for which eligible applicants include non-profits, provinces, territories, municipalities, and Indigenous organizations.

This section of the report discusses the experiences of each city with RHI, especially as it relates to the local homelessness sector.

Toronto

The City of Toronto received \$203 million under the Major Cities Stream. City officials expect this to result in approximately 540 units on a mix of acquisitions and modular housing. The City has also received confirmation of operating dollars from the provincial government. Indeed, the Ministry of Municipal Affairs and Housing has committed \$15.4 million for 2021 (prorated based on when units are coming online); on an annual basis, that would represent \$26.35 million. This amount is based on \$2,000 per person per month in support dollars, based on a range of need across buildings (tenants will include low-, moderate- and highneeds clients). The Ontario government has not yet committed operating funding past 2021. However, some operators also have separate operating commitments with other funders (some from the Ministry of

Health, some from the Local Health Integration Network). The units are targeted toward people experiencing chronic homelessness.

Montreal

Montreal received \$57 million through the Major Cities stream. This will assist 200 units across 12 projects. Approximately 90% of persons moving into these units are considered 'hard to house.' This will include persons experiencing absolute homelessness. It is anticipated that all units will be assisted with provincially-funded rent supplements so that no RHI tenant will pay more than 25% of their income on rent.¹⁸ The City of Montreal contributes 10% of the cost of most of these rent supplements. The City has also contributed steeply-discounted city land for one of the projects. The City of Montreal has asked Quebec's Ministry of Health for approximately \$2.5 million

¹⁸ According to a well-placed official interviewed in May 2021: "We're close to an official announcement, but not quite there yet."



in annual funding to assist with supports. In terms of building structure, some of these units will be new modular units, while others will be converted hotels. According to one well-placed official: "We went with rather small buildings, which we feel will be good for community integration."

Vancouver

City of Vancouver received \$51.5 million through RHI's Major Cities Stream, which is expected to create 133 units from the conversion of two hotels and leased by the City to non-profit operators at nominal rates to deliver supportive housing. Most of these units will be for people experiencing absolute homelessness. Additionally, BC Housing was successful through the Projects Stream with three additional projects, amounting to \$53.1 million for 188 additional units.¹⁹ Details on provincial operating dollars supporting Vancouver's RHI units have not yet been released. It does not appear that any municipal funding has supported any of these projects.

Calgary

Approximately \$24.6 million in RHI funding was approved for Calgary through the Major Cities Stream. The Government of Alberta has not yet contributed any funding toward these units. The City of Calgary has provided assistance through their Housing Incentive Program, which includes grants and municipal fee rebates towards new non-market developments (this is an ongoing

¹⁹ The media release for the Projects Stream announcement is available here: https://www.cmhc-schl.gc.ca/en/media-

program available to any non-profit developer). The rebate is a predevelopment grant of up to \$50,000 per development and each of these RHI projects received that full amount. This is expected to result in 174 units of housing across three non-profit partner projects: one is a hotel conversion (for older adults); one is a modular building (targeted at women and children fleeing domestic violence); and one involves the reclamation of a former congregate space (for Indigenous singles). It is not yet clear how many of these tenants will be persons experiencing homelessness. However, one wellplaced source noted: "All people served will align with RHI criteria around being in severe housing need or at risk of experiencing homelessness."

Edmonton

Edmonton received \$17.3 million via the Major Cities Stream and \$17.8 million via the Project Stream for a total of \$35.1 million. In total, 210 units of modular housing will be delivered across five buildings. The Government of Alberta is providing a capital contribution of \$16.3 million via the municipal stimulus program. There has not yet been an operating commitment from the Government of Alberta, despite a request from the City for \$5.8 million. The City of Edmonton provided a capital contribution of \$18.9 million and provided discounted land to all five sites. The City of Edmonton is doing the project delivery in order to meet the RHI's aggressive timelines and then handing the sites to Homeward Trust to operate. All units

newsroom/news-releases/2021/canadasupports-rapid-housing-british-columbia



will be targeted to persons experiencing absolute homelessness and will require 24/7 onsite staff support. According to a well-placed source: "Alberta Health Services will provide some of the wraparound support—they'll have their own team. In addition, a staff cohort will be hired to support these sites, hired by community agencies who will be contracted to provide supports on site."

Ottawa

The City of Ottawa received \$31.9 million through the Major Cities Stream. This will result in 117 units across three supportive housing projects and one family project for households experiencing homelessness with a focus on newcomers. The family project will consist of 32 modular stacked townhome units targeted to families in the emergency shelter system, with a focus on newcomers (including refugees). However, one of the developments received free municipal land that had been declared surplus to city needs. Additionally, Shepherds of Good Hope (a local non-profit) has received RHI funding for two projects. One of these projects consists of 48 units of new builds that will prioritize Indigenous persons experiencing chronic homelessness, especially women. The other consists of eight units of supportive housing (effectively adding space to an existing supportive housing building). Shepherds of Good Hope has received a commitment from the City of Ottawa for operating funding for the low barrier drop-in component of their RHI-supported work; they are also negotiating a contribution agreement with the City to help support the aforementioned 48 units. As of May 2021, no provincial dollars had been committed for any of the above projects.

Winnipeg

Winnipeg received \$12.5 million through the Major Cities Stream, which will result in 90 units across five projects. Two of the projects are offered by groups (Salvation Army and Siloam Mission) that deal directly with people experiencing homelessness; those units will indeed be for people experiencing homelessness. A third project will be operated by New Directions; it will be targeted to persons with developmental disabilities. Winnipeg Housing Renewal Corporation, a non-profit providing a range of affordable housing, will handle the fourth project; they will offer rents at 50% of median market rent. The fifth project, operated by Shawenim Abinoojii (a First Nations child and family support services agency) will be for youth aging out of care. Thus far, no operating funding has been committed to any of these units by any order of government. The City of Winnipeg did not provide any land towards these RHI-approved units (either free or discounted). One local official expressed disappointment that just one of the above five projects will be operated by an Indigenous organization, noting that approximately 70% of Winnipeg's homeless population is Indigenous. The same official further noted that several Winnipeg-based Indigenous housing providers applied for RHI funding but were turned down. The official also stated that most of the approved projects are not low-barrier: "Two of the buildings are run by 'dry' organizations, so no alcohol or drugs



can be used on site. Most of the organizations are not harm reduction focused."

Quebec City

Quebec City received \$7.1 million for two projects. One project, a new build, will have 15 supportive housing units for persons with serious mental health challenges. The other project, a renovation, will have 12 units (rooms) for youth leaving child protection. Neither project received provincial or municipal contributions; nor did either project receive donated or discounted land.

Hamilton

Hamilton received \$10.7 million through the Major Cities Stream. This will create 46 units of housing, with all units going to people on either the city's By-Name List or the city's social housing wait list (most of whom would be at risk of homelessness). As of May 2021, no provincial funding had been committed towards these projects.

Regina

According to one official with strong knowledge of homelessness planning in Regina: "I'm not aware of any approvals for RHI occurring in Regina. We were not included in the Major Cities funding. I don't know if any Regina proponents got approved for Projects Stream."

Victoria

Victoria received \$13.1 million through Major Cities Stream. This will assist two projects for a total of 91 units. All units will be prioritized for persons currently in temporary facilities—including emergency shelters that have existed for years, as well as facilities that were created during the pandemic. All units will be congregate supportive housing with 24/7 staff support, and all will be for people currently experiencing absolute homelessness. BC Housing will soon release a Request for Proposals for non-profit operators. While BC Housing is providing operating funding through their Supportive Housing Fund, the dollar amount is not yet publicly known. There were no municipal contributions to these units—neither cash nor discounted land.

St. John's

As of May 2021, the City of St. John's had received no RHI funding, even though several applications had been submitted. According to one well-placed official, this may have been somewhat self-inflicted: "Our provincial government was not supporting any operating dollars to RHI applications. Nothing at all." Further, the City of St. John's did not offer cash or land toward any of the applications, in part because RHI's tight timeline made it challenging for local officials to secure own-source resources that could have been offered for such an effort.

Yellowknife

As of May 2021, Yellowknife had received no RHI funding. This was in spite of having submitted five proposals—one from the City of Yellowknife and four from local housing providers.



The National Housing Co-Investment Fund

The National Housing Co-Investment Fund was announced in 2017 with the release of the NHS. It includes both grants and loans. It has been criticized for having an onerous application process. CMHC has also been criticized for both taking too long to approve applications and then taking too much time to disburse funding once it is awarded. What is more, funding levels are often insufficient to enable rent levels that are truly affordable for low-income tenants, unless additional support is provided from other orders of government.

Toronto

While the impact of the Co-Investment Fund on homelessness has been modest in Toronto, it is expected to fund the redevelopment of an existing supportive housing building operated by Homes First Society. The project, which has received \$150,000 in grant money and a \$350,000 interest free loan, will have a focus on older adults. Details have yet to be worked out as to how many units will be supported.

Montreal

It is difficult to assess the impact of the Co-Investment Fund on homelessness in Montreal, largely because approved projects are not publicly known. Even when housing officials have asked Canada Mortgage and Housing Corporation (CMHC) for a list of projects approved in Montreal, CMHC invoke confidentiality as a reason they cannot disclose this information.

Vancouver

While Vancouver has benefitted from some Co-Investment funding, a well-placed source noted: "The Co-Investment Fund is a loan first program, so deeply affordable housing is best achieved when combined with other programs—in our case, some of

the BC Housing grant programs. That's where you get more affordable housing." It is not clear what (if any) direct impact these projects have provided direct assistance to persons experiencing absolute homelessness in Vancouver.

Calgary

The Co-Investment Fund has not had much direct impact on homelessness in Calgary. Calgary units supported through the Co-Investment Fund do not seem to have been able to achieve rents below \$600 per month, making them unaffordable to most persons leaving absolute homelessness.

Edmonton

The Co-Investment Fund does not appear to have had much direct impact on persons experiencing absolute homelessness in Edmonton. According to one source: "We haven't had a lot of success with Co-Investment yet. It requires provincial contributions and we have hit roadblocks there...We're aware of no Co-Investment housing project in all of Edmonton..."



Ottawa

Under the Co-Investment Fund, Ottawa Community Housing has received a \$167.9 million financial commitment in the form of a mortgage from the federal government, \$10.8 million of which is a forgivable loan, for the construction of approximately 700 new units. This is the largest single investment awarded to a social and affordable housing provider for the development of new affordable housing in Ottawa under the National Housing Strategy. With the help of the National Housing Co-Investment Fund (NHCF), Ottawa Community Housing's affordable housing developments will be built in Ottawa and are located in areas close to public transit, community centres, and support services. Of the proposed 698 units, a total of 211 units will be earmarked at affordable rents lower than 80% of median market rent for the neighbourhood). Under the Co-Investment fund, Ottawa Community Housing will also receive \$165.6 million, \$65.4 million of which is forgivable, for repairs to community housing. The funding will see repairs and upgrades to roughly 11,060 units across 800 improvement projects throughout Ottawa. This program will also help Centretown Citizens Ottawa Corporation with both repairs and new builds, including with some tenants who were recently homeless.

Winnipeg

The Co-Investment Fund does not appear to have had a major impact on homelessness in Winnipeg. Having said that, the Co-Investment Fund did support two shelter expansion projects several years ago. Also, for some

proponents whose RHI proposals were turned down, there have been conversations about using Co-Investment funding to support them. One local official noted that the City is currently developing a program consisting of grants and tax incentives called Affordable Housing Now which will be designed specifically to leverage federal funding opportunities under the NHS such as the Co-investment Fund. Many CMHC-supported affordable housing programs require support from another order of government, and this program is intended to provide those missing municipal supports. The City of Winnipeg and CMHC have signed an MOU which serves as the basis for collaboration on shared objectives.

Quebec City

One project assisted by the Co-Investment Fund has had a direct impact on people experiencing homelessness in Quebec City. This is for a 131-room shelter called *Projet de Lauberivière*, which received a \$4.3 million Co-Investment grant, representing 14.5% of the project's total cost. This project also benefited from provincial funding.

Hamilton

Local officials interviewed for this report were unclear as to whether the Co-Investment Fund had provided direct assistance to Hamilton's homelessness sector. Nor were they clear on what role (if any) the initiative has played in assisting supportive housing developments.



Regina

The direct impact of the Co-Investment Fund on homelessness in Regina is difficult to assess. According to one local official, to receive support from the City of Regina's new rental repair program, proponents must participate in the Co-Investment Fund.

Victoria

The Co-Investment Fund does not appear to have had a direct impact on homelessness in Victoria. According to one local official: "For us, we're just starting to look into using Co-Investment Fund. It's an onerous program. You need zoning in place and it has pretty specific time constraints. Also, much of the risk is shouldered by the proponent."

St. John's

It does not appear that the Co-Investment Fund has had a direct impact on St. John's homelessness sector. However, it is possible that some Co-Investment Funding may have been approved for some developments in St. John's.

Yellowknife

The Co-Investment Fund does not appear to have had a direct impact on homelessness in Yellowknife. It is not even clear if any housing providers in the city received any assistance from this fund at all.

In sum

The impact of the NHS varies from one city to another. While Reaching Home enhancements have been welcomed and put to use by each city's homeless-serving system, the impact of the CHB has been mixed. Cities have typically targeted it to a combination of households experiencing homelessness and to households at risk of experiencing homelessness. Several provinces have incorporated it into existing housing affordability schemes (and have hopefully not used it as a substitute for previous provincial or territorial funding). Well-placed homelessness officials in St. John's and Yellowknife have received no indication as to what is happening with the CHB in their respective jurisdictions.

Ten of the 13 cities considered in the present report have received RHI funding (Regina, St. John's and Yellowknife had not, as of May 2021). These supported projects will house both persons currently experiencing homelessness and persons at risk of experiencing homelessness. Many projects are still awaiting word on whether their respective provincial government will provide operating dollars, which will in turn determine what kinds of social work support can be provided (and which specific households can be accommodated). Some approved projects have received commitments of municipal support, typically in the form of waived fees, free land or discounted land.

One well-placed official interviewed for the present report, in discussing the RHI, noted "it's probably the best positioned federal housing initiative right now to target

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chronic homelessness. It's a significant step forward compared to some of the other federal programs." However, the same official was quick to add the following:

CMHC needs to think about how their existing initiatives fit together and where the gaps are. I wouldn't say we have a comprehensive suite of programs that helps us plan over the long term. It's hard to chase the money like this. It would be nice if it could be more predictable and comprehensive. It sometimes feels like feast or famine. There's a better way to do this. Maybe RHI could be coupled with Reaching Home operating dollars. Make it offered as supportive housing right off the bat, without municipalities having to chase provincial dollars.

Meanwhile, the impact of the National Housing Co-Investment Fund on each city's homelessness sector has been modest at best. It has assisted some projects in some cities that do serve households experiencing homelessness—for example, in Toronto and Quebec City. However, this appears to be more the exception than the rule.



Policy recommendations

This report makes seven policy recommendations stemming from its findings. They pertain to: the enumeration of outdoor sleeping; the showcasing of promising healthcare practices; cooperation from the corrections sector; homelessness prevention; transparency with respect to the Canada Housing Benefit; support funding for the Rapid Housing Initiative; and the National Housing Co-Investment Fund.

1. Enumeration of outdoor sleeping

This report has revealed that most Canadian cities lack a reliable method of quantifying outdoor sleeping throughout the year. While outdoor sleeping may diminish as vaccination rates increase, this very important phenomenon needs to be better understood by local planners. One approach would be to have outreach workers formally estimate its prevalence on a weekly basis in cooperation with bylaw officials. Each community's approach would vary according to existing capacity of outreach workers and bylaw enforcement officials. A dashboard could be made publicly available that could include the following estimates: average number of outdoor sleepers on a weekly basis; gender breakdown; and approximate ages of rough sleepers. The City of Ottawa's GIS mapping approach (discussed earlier in this report) should be explored as an emerging best practice.

Reaching Home directives could be revised to require that such an estimation and reporting requirement be in place as a condition of funding. Reaching Home funding could also support such estimating techniques, including those involving GIS technology (while such expenses are already eligible for Reaching Home funding, a newly-created enumeration stream might encourage their use for this). Further, Employment and Social Development Canada could set parameters guiding such estimation techniques (not to be confused with parameters they set for Point-in-Time Count estimates, which take place just once every two years).

2. Showcasing of healthcare innovations

In light of the healthcare innovations highlighted in this report, it would be worthwhile for Employment and Social Development Canada, in partnership with the Public Health Agency of Canada and the Canadian Network for the Health and Housing of the Homeless, to convene a three-day conference highlighting these emerging practices. This would provide communities with ideas on how to better serve the healthcare needs of persons experiencing homelessness; it would also allow for invaluable professional networking. A public report summarizing the innovations could follow.

This could be a one-time event that would likely require a budget of no more than \$200,000. It could either be organized by ESDC or outsourced to a non-governmental organization with strong knowledge of both homelessness and health.



3. Improved collaboration with corrections

This report has made clear that, with a few exceptions, corrections officials across Canada do a poor job of engaging with homelessness officials. Ideally, discharge planning from correctional facilities should involve a housing plan for each released inmate. Federal, provincial and territorial officials all have a role to play here. It would therefore be worthwhile for Canada's Minister of Public Safety and Emergency Preparedness to organize a roundtable discussion with his provincial and territorial counterparts with the view of developing an action plan supporting an improved focus on appropriate discharge planning for inmates without permanent housing.

Ideally, this should be done in collaboration with Employment and Social Development Canada, the Canadian Association of Elizabeth Fry Societies, the Canadian Mental Health Association, and the John Howard Society of Canada.

4. Enhanced federal funding for prevention

During the pandemic, many Canadian cities expanded existing eviction prevention programs that use short-term financial assistance to pay a variety of costs allowing households at risk of homelessness to either remain housed or to get rehoused very quickly. Such costs can typically include rental arrears, utility arrears, first month's rent, the securing of damage deposits and moving costs. The fact that many communities have chosen to expand these initiatives during the pandemic is indicative of greater need—a need that will likely increase in light of the lag effect known to exist between an economic crisis and increased homelessness onset.²⁰

Prevention is already an eligible activity under Reaching Home. Employment and Social Development Canada should therefore consider enhancing their annual funding for Reaching Home, and possibly develop a new stream of Reaching Home dedicated solely to prevention (this latter option might have the effect of encouraging communities to engage in more prevention).

5. Greater transparency pertaining to the Canada Housing Benefit

The impact of the Canada Housing Benefit on homelessness has been mixed. Many communities have targeted it to a combination of households experiencing homelessness and to households at risk of experiencing homelessness. Several provinces have incorporated it into existing housing affordability programs; though, in some cases, it is not known if the provincial/territorial government in question has used this federal cash injection as a substitute for previous provincial funding. There were specific clauses and requirements in each bilateral agreement requiring that provincial/territorial funding toward this initiative be 'new money,' though at least one province is known to have terminated an existing program and then reinstate it as a 'work around.' Further, homelessness officials in some cities are still unclear as to whether the CHB even exists in their respective jurisdictions.

²⁰ To learn more about a recent report on this, see this overview: https://nickfalvo.ca/the-long-term-impact-of-the-covid-19-recession-on-homelessness-in-canada/.



One way to improve transparency would be for the Minister Responsible for the Canada Mortgage and Housing Corporation to write to his provincial and territorial counterparts, asking for transparency on the use of the CHB across Canada (including on its direct impact on each city's homelessness sector). Each minister's response could be made public. Further, each provincial and territorial minister could request an audit of the funding's use in their respective province and territory (especially to ensure that it was not simply used to replace provincial or territorial funding) and that auditor's report could be made public.

Alternatively, a request could be made for the Office of the Parliamentary Budget Officer to explore the use of CHB funds in each province and territory, especially with the view of assessing whether new provincial/territorial funds were indeed used to support it.

6. Operating support for the Rapid Housing Initiative

The September 2020 Federal Throne Speech includes a commitment to "completely eliminate chronic homelessness." And the Rapid Housing Initiative (RHI) appears to be the best positioned federal housing initiative targeting this demographic. Having said that, most projects supported by the RHI lack the necessary operating funding to provide appropriate supports to tenants who have experienced chronic homelessness.

Such supports are already an eligible activity under Reaching Home. Employment and Social Development Canada should therefore consider enhancing their annual funding for Reaching Home, and possibly developing a new stream of Reaching Home dedicated solely to operating funding that would fund ongoing social work support (often known as 'wraparound support') for tenants who have experienced chronic homelessness. A new stream might have the effect of encouraging communities to use more Reaching Home funding for such supports.

7. Enhancement of the National Housing Co-investment Fund

A central feature of the National Housing Strategy unveiled in November 2017 was the National Housing Co-investment Fund (NHCF) intended to support both new units and repairs. Over 10 years, this federally-managed initiative was to be worth \$15.9 billion (including \$4.7 billion in capital grants and \$11.2 billion in low-interest loans from Canada Mortgage and Housing Corporation). Primarily a loan program (as opposed to a grant program), the NHCF has been criticized for providing insufficient funding to make rent levels truly affordable for low-income tenants. As a result, its impact on homelessness has been modest at best.

The Canada Mortgage and Housing Corporation should therefore enhance the NHCF with additional grant money, which could help achieve lower rent levels suitable for persons experiencing homelessness.



Conclusion

Officials in Canada's cities have been working to both prevent and respond to homelessness during what is both a public health and economic crisis. During this time, most such officials report seeing an increase in visible outdoor sleeping. The degree to which social support infrastructure is set up by service providers varies across cities, as does the extent to which outdoor sleepers have received permanent housing.

It is worth noting that the pandemic has allowed partnerships between the health and homelessness sectors to flourish. For example, several cities have seen primary health care—i.e., service provision by family physicians and nurses—provided directly on site at emergency facilities in ways not seen before the pandemic.

Several cities expanded existing eviction prevention programs using short-term financial assistance that can be used to pay a variety of costs allowing households at risk of homelessness to either remain housed or to get rehoused quickly. Such costs typically include those associated with rental arrears, utility arrears, first month's rent, the securing of damage deposits and moving costs. While the initiatives themselves are not new, the pandemic has given officials reason to use increased funding to expand them.

Most cities considered in this report have made progress on coordinated access (i.e., triage arrangements for prioritizing persons for housing and related supports). It is noteworthy, however, that neither Montreal nor Quebec City appears to be on the way toward having coordinated access in place any time in the near future.

The impact of Canada's National Housing Strategy varies across cities. While Reaching Home enhancements have been welcomed and put to use by each city's homeless-serving system, the impact of the Canada Housing Benefit has been mixed. Regrettably, well-placed homelessness officials in some cities have still not received any indication as to what is happening with the benefit in their cities, even though it was supposed to have launched by 1 April 2020.

While most of the cities profiled in this report have received Rapid Housing Initiative funding, supported projects are still awaiting word on whether their respective provincial government will provide operating dollars, which will in turn determine what kinds of social work support can be provided (and therefore which specific households can be accommodated). Meanwhile, the impact of the National Housing Co-Investment Fund on each city's homelessness sector has been modest at best.

This report makes seven policy recommendations. They pertain to the need to: improve the enumeration of outdoor sleeping; showcase promising healthcare practices; encourage cooperation from the corrections sector; support homelessness prevention; encourage transparency with respect to the Canada Housing Benefit; provide operating funding for the Rapid Housing Initiative; and provide grant support to the National Housing Co-Investment Fund.



Appendix 1: Method

This report is based on virtual interviews conducted with 43 officials across 13 Canadian cities. All interviews took place in May 2021. An effort was made to interview three officials in each city—two with very strong knowledge of homelessness planning, and one with very strong knowledge of newly-developed permanent housing. With some cities, just two individuals were interviewed, as a third research participant either could not be identified or did not agree to an interview. With other cities, more than three individuals were interviewed, as the research participants requested that one or more colleagues join them for the interview. Interviews typically lasted between 30 and 60 minutes. In an effort to help preserve confidentiality, specific dates of interviews and the specific number of persons interviewed in each community are not being provided.

Selection of cities. The specific cities were chosen based on two main criteria: 1) size of city's total population (with larger cities being favoured); and 2) geographical representation. Regina was included in order to have one city in Saskatchewan. St. John's was included in order to have one city in Canada's Atlantic Region. Victoria was included due to its extensive levels of outdoor sleeping. And Yellowknife was included in an effort to capture one community in Canada's North.

Selection of research participants. Individuals were approached based in part on the researcher's familiarity with them (keeping in mind that he carried out a similar exercise in 2020). In some cases, he asked them to suggest other individuals to interview. In most cases, either the specific individual invited to participate complied, or they referred the researcher to a colleague who could answer the questions. After each interview took place, the researcher often sought clarification with the research participant on various points via email.

Review process. In June 2021, each research participant was emailed a draft version of this report and asked to provide written feedback to the researcher; some research participants were more responsive than others. Also in June 2021, the researcher sent the report to 15 public policy experts across Canada, inviting them to provide feedback.



Appendix 2: Interview guide

Target

Persons with very strong knowledge of homelessness system planning in the city in question. Ideally, this would consist of three persons: one who plays the role of 'system planner;' another with strong knowledge of the Rapid Housing Initiative; and one who is a major provider of services for persons experiencing homelessness.

Anticipated length of each interview

60 minutes

Opening script

"Thanks again for agreeing to this interview. As you'll recall, I'm undertaking a 13-city scan for the Calgary Homeless Foundation in which we're asking select individuals in Canadian cities about major developments with respect to homelessness planning in the previous year. Results will be shared with all research participants. We will not attribute any comments you make directly to you; in other words, your name will not appear directly beside anything you say in the report. So this is a confidential discussion."

Draft questions

[***A version of each question will be asked, but wording may be modified, and some questions may be skipped. For example, with most cities, one person with very strong knowledge of housing is being interviewed strictly about permanent housing (and those interviews are expected to last just 30 minutes). In many cases, there will be probing.***]

General

- What is your role in relation to homelessness planning in your city?
- In the past year, what have been the major developments with homelessness system planning in your city?
- What have been the major successes in the past year?
- What are the outstanding challenges now?

Encampments/rough sleeping

• In the past year, what major developments have there been in your city with respect to encampments/rough sleeping? Have you been seeing major changes in these numbers? Or do you even track such numbers in a formal manner?



- Are you seeing any interesting trends with respect to the flux of people between encampments/sleeping rough and other facilities (e.g., emergency shelters, temporary facilities created for COVID, etc.)?
- What kind of plan do you have in place to deal with encampments/rough sleeping? Are you engaging in any new types of planning in this respect in light of COVID?

Permanent housing

- How are you prioritizing the flow of people out of all of your spaces (including newly-created ones) into permanent housing? Any innovations here in the past year?
- What kind of impact has the Canada Housing Benefit had on your homelessness sector? What specific groups have been targeted, and how generous has the assistance been?
- What kind of impact has the Rapid Housing Initiative (RHI) had on your homelessness sector?
- How much RHI money got approved in your city? What did the provincial/territorial/municipal matching commitment look like (esp. re: operating dollars)? How many RHI units have been approved for your city?
- What about the impact of other initiatives stemming from the National Housing Strategy? For example, the National Housing Co-Investment Fund? The Rental Construction Financing Initiative?
 - On 21 September 2020, the Government of Canada announced an additional \$236.7 million for Reaching Home. How much of this did your city get, and what did you do with this enhancement?

Collaboration

- In the past year, what innovations have taken place in your local homelessness sector with respect to prevention (including diversion)?
- What kind of cooperation are you seeing across sectors (e.g., health, justice, child welfare)? What kind of cooperation is lacking across those sectors? Any new developments here in the past year?
- To what extent has the COVID-19 pandemic resulted in health care innovations in your local homelessness sector?
- What support (both planning and budgetary) is being provided by each order of government? What's changed in the past year? What's lacking from each order of government?



New normal

- You had increased physical distancing as a result of pandemic. What's happening with that? Are those extra spaces closed now? Are they in the process of closing?
- To what extent do you now feel it's realistic to move to a 'new normal' that maintains distinctly new physical distancing norms?

Closing

• Is there anything else you'd like to say?



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