



A Response to Homelessness in Nanaimo: A Housing First Approach

Situational Analysis

Prepared for City of Nanaimo | May 2008



CITY  SPACES

Planning | Project Management | Applied Research

EXECUTIVE SUMMARY

Overview

Homelessness is a growing area of concern in the city of Nanaimo. Despite the efforts of dedicated service providers and agencies, there continues to be a gap in the city's capacity to provide housing and support services to the city's most vulnerable. In particular, a shortfall in low-barrier housing and services for the most street-entrenched individuals has been identified.

This situational analysis report provides a snapshot of the current housing and service context for Nanaimo's homeless and population at-risk of homelessness. The report references the need for a range of housing and service options to respond to the varied needs of Nanaimo's homeless population. The particular focus is on a philosophy and service model that emphasizes housing first and harm reduction.

The report will be used to help inform the *Housing First and Harm Reduction Strategy and Action Plan*.

Nanaimo - A Hub City

- Nanaimo is a **major centre** on Vancouver Island and a transportation hub. Nanaimo's role as a hub has implications for homelessness.
- Nanaimo's residents have **lower employment rates** and greater reliance on government assistance compared to the rest of BC's residents. Median incomes are lower, particularly in South Nanaimo where residents earned 23% less than BC residents. Single parent families and single person households receive the least income on average and subsequently have the least amount of choice in the housing market.
- Economic growth and rising real estate prices have resulted in **low rental vacancy** rates and increased pressure on affordable rental units. The rental apartment stock is seeing a decline of an average of 57 units per year and vacancy rates have been consistently under 2% since 2003. Compared to larger centres, average rents for apartments remain relatively low, but are still out of reach for individuals receiving income assistance and the working poor.
- There are between 90 and 150 buildings in Nanaimo considered **rooming houses** that contribute to the stock of low-income housing units. Concerns about high occupancy numbers and fire and safety standards have resulted in a heightened awareness around these houses and a number of them being inspected.
- Secondary suites offer an affordable rental alternative and are recognized as a permitted use in all areas of the City. Many existing suites continue to be illegal, however, and require significant upgrades to comply with current bylaw requirements.

Homelessness in Nanaimo

- The City of Nanaimo has experienced an increase in visible homelessness in recent years. The extent of transience and seasonality among the population makes it especially difficult to estimate the size of the population. Recent estimates suggest there are between 150 and 300 absolute homeless individuals.



A Response to
Homelessness
in Nanaimo:
A Housing First
Approach

Situational Analysis

Prepared for
City of Nanaimo

April 2008

- In the past few years, one area of downtown Nanaimo had become known for open drug use and drug trade and had deteriorated both socially and economically. A number of measures to combat the problem were introduced: fast-tracking through the courts; good neighbour agreements; urban design features; and the Red Zone. This approach of policing, enforcement and design resulted in a reduction in the intensity of drug activity and visible homelessness, although the number of homeless remained constant.
- The homeless are a heterogeneous group with a wide range of housing and service needs. On average, they are reported to be in their **mid 20s to mid 40s**. Seniors and youth among the homeless have been increasing in numbers. The most street-entrenched individuals are typically drug users and many have mental health challenges and are involved in criminal activity.

The Service Context

- A broad range of services are available for the homeless and population at-risk ranging from meals, drop-in services, treatment, medical, outreach, harm reduction, lifeskills and employment related services. Some programs face funding instability and others have capacity constraints.
- Many services and programs are provided on a conditional basis, i.e. require a commitment to sobriety. While there continues to be demand for abstinence-based programs, they inherently restrict access to certain individuals.
- A strong need for minimal and low-barrier housing and services - a harm reduction approach - has been identified. The introduction of these services would ensure that the most vulnerable and the most street-entrenched individuals have access to a range of services that will minimize harm and enable them to pursue their goals towards recovery and stability.
- The need for the following new facilities and expansion of services has been identified as a priority by the Vancouver Island Health Authority (VIHA) and other agencies: a living room or drop-in centre; a mobile Assertive Community Treatment Team; expansion of Downtown Crisis Response Team; and improved access to Addictions Services; among others.

The Housing Context

- The high costs of housing have led to a disproportionate share of incomes being spent on shelter-related expenses and the basic food and nutritional needs of the population at risk of homelessness are not being met.
- There is a shortage of supported housing and evidence of a need for low-barrier housing. In total, there are currently 76 emergency shelter beds, 65 units of supported housing and 99 transitional beds. These totals include 23 beds in safe houses for victims of violence.
- Several groups have prepared housing project overviews and are looking for suitable properties and funding for various housing projects.

Challenges and Opportunities

A number of challenges and opportunities related to the *Housing First and Harm Reduction Strategy and Action Plan* have been identified:

- Interest in balancing the needs of enforcement and service delivery;



A Response to
Homelessness
in Nanaimo:
A Housing First
Approach

Situational Analysis

Prepared for
City of Nanaimo

April 2008

- Community acceptance of a housing first and harm reduction approach to addressing homelessness;
- Addressing the problem while the scope and magnitude is still manageable;
- Need for an operational implementation structure; and
- Informed public discourse about harm reduction that involves good communication plans and community engagement.

Current Organizational Framework

The City of Nanaimo has taken proactive steps towards addressing homelessness and related issues of mental illness and addictions. The City's commitment towards a *Housing First and Harm Reduction Strategy and Action Plan*, along with the considerable efforts on the part of local service providers, the Vancouver Island Health Authority, RCMP and local business community, have set the groundwork for a coordinated response.

- A number of committees are in place to respond to homelessness - the Safer Nanaimo Committee, the Working Group on Homelessness, and the Housing Coalition.
- VIHA has completed a plan - *Breaking the Cycle of Homelessness* - that provides a basis for concrete action.
- There is a relatively small non-profit housing sector, but there is generally good co-operation among agencies and levels of government.
- No overarching structure is in place to ensure that initiatives are coordinated. The lack of a formalized housing and homelessness plan has resulted in some redundancy of efforts and difficulty in procuring sufficient funding to make a real difference in terms of housing people who are currently homeless.



A Response to
Homelessness
in Nanaimo:
A Housing First
Approach

Situational Analysis

Prepared for
City of Nanaimo

April 2008

TABLE OF CONTENTS

1.0 Introduction.....	1
1.1 A Situational Analysis for Nanaimo.....	1
1.2 Project Overview.....	1
1.3 Approach.....	2
2.0 Nanaimo - A Hub City.....	3
2.1 Employment and Income.....	3
2.2 Rental Housing.....	4
2.3 Rooming houses.....	5
2.4 Secondary Suites.....	5
3.0 Homelessness in Nanaimo in Recent Years.....	6
3.1 Ground Zero.....	6
3.2 Profile of Nanaimo's Homeless.....	8
3.3 Transience.....	10
4.0 The Service Context.....	11
4.1 Existing Services.....	11
4.2 A Harm Reduction Approach to Service Delivery.....	12
4.3 The Service Gap.....	13
5.0 The Housing Context.....	15
5.1 The Housing Gap.....	16
5.2 Proposals and Projects in the Pipeline.....	16
6.0 Challenges and Opportunities.....	17
7.0 Current Organizational Framework.....	18

Appendices

Appendix A: Data Sources and References

Appendix B: List of Key-Informants and Participants of Focus Group Discussions

Appendix C: Discussion Guides



A Response to
Homelessness
in Nanaimo:
A Housing First
Approach

Situational Analysis

Prepared for
City of Nanaimo

April 2008

ToC

1.0 INTRODUCTION

1.1 A SITUATIONAL ANALYSIS FOR NANAIMO

Homelessness is a growing area of concern in the city of Nanaimo and outlying regions. There is growing demand for comprehensive and appropriate services that target the needs of the homeless. Despite the efforts of dedicated service providers and agencies, there continues to be a gap in the city's capacity to provide housing and support services to the city's most vulnerable.

The homeless population in Nanaimo is heterogeneous and has varied housing needs. There is a shortage of housing across the continuum of housing types and some sub groups among the homeless have been under served. In particular, the City and the Working Group on Homelessness have identified a shortfall in low-barrier housing and services for the most street-entrenched individuals.

This situational analysis report provides a snapshot of the current housing and service context for Nanaimo's homeless and population at-risk of homelessness. The report refers to a service continuum and the need for a range of housing and service options to meet the varied needs of Nanaimo's homeless population. The particular focus is on a philosophy and service model that emphasizes housing first and harm reduction. The situation analysis aims to:

1. set the stage for a service strategy and action plan for the City of Nanaimo;
2. identify the housing and service delivery gaps; and
3. describe the level of integration and framework within which services are delivered.

1.2 PROJECT OVERVIEW

CitySpaces Consulting was contracted by the City of Nanaimo to prepare a Harm Reduction and Housing Action Plan (the Plan) to address the increasing problems of homelessness and the related challenges of mental illness and drug addiction. The results of this work will be a pragmatic plan with targets and timelines, capital and operating cost estimates and a clear outline of the role and necessary contributions of the City of Nanaimo and of other governments and agencies. The Plan will form the basis for accessing available provincial and federal funding.

The following are the main tasks - completed and underway - involved in developing the strategy and action plan:

- **Best Practices:** To inform the research and strategic planning process, a summary paper was prepared of the current best practices in addressing homelessness through a housing first and harm reduction approach.
- **Situational Analysis:** This report provides a description and analysis of the current situation in Nanaimo and reflects on the current capacity for service delivery and housing according to the housing first and harm reduction approaches described in the Best Practices document.
- **Service Delivery Strategy:** Following the situational analysis, the next steps will be to identify a preferred approach to addressing homelessness in Nanaimo within a Service Delivery Strategy and Action Plan. This will involve approaches for the



A Response to
Homelessness
in Nanaimo:
A Housing First
Approach

Situational Analysis

Prepared for
City of Nanaimo

April 2008

integration of best practices into the local context and for securing affordable housing.

- **Workshop:** The advice and direction of the Steering Committee will be sought in confirming the preferred housing and service model to best meet Nanaimo's needs and in developing the components of the Plan.
- **Public Open House:** The strategy and action plan will be introduced to the public via an open house and additional feedback and input incorporated into the final plan at that stage.

1.3 APPROACH

To prepare the Situation Analysis, a background review of current data sources and documents was conducted. This included pulling together information from the multiple needs assessments and studies on homelessness specific to Nanaimo and tabulation of statistics on local demographics, housing, homelessness counts, and crime rates. A list of complete data sources and references are included in the Appendices.

In addition, the consultants conducted numerous interviews and focus groups with a variety of stakeholders between January and March 2008:

- **Focus group discussions:** A discussion was held with members of the downtown business community on one occasion and with service providers on another.
- **Interviews with homeless individuals:** The consultants held informal discussions with several homeless individuals. Formal interviews were conducted with five individuals at the 7-10 Breakfast Club and at the Street Outreach Clinic. Individuals interviewed were acknowledged with a Tim Horton's coupon.
- **Key-informant interviews:** Phone interviews were conducted with representatives of the Vancouver Island Health Authority, the RCMP, and service providers unable to attend the focus group discussion. Interviews were also conducted with the presidents of the neighbourhood associations for each of the three inner city neighbourhoods (Southend Neighbourhood Association, Neighbours of Nob Hill and Old City Quarter Association).

The list of focus group participants and key-informant interview guides are included in Appendix A.

The research undertaken in this report provides a good basis for a strategy that will enable the City to move forward on homelessness and harm reduction, assist the City in securing partnerships with other levels of government and agencies and support the years of service delivery efforts of non-profit agencies.

1.4 DEFINITION OF HOMELESSNESS

For the purposes of the analysis and plan, the following definitions of homelessness have been adopted.

Absolute Homeless

- Individuals and families who are living in:
 - public spaces without legal claim (e.g., on the streets, in abandoned buildings, in tent cities);
 - a homeless shelter; or



A Response to
Homelessness
in Nanaimo:
A Housing First
Approach

Situational Analysis

Prepared for
City of Nanaimo

April 2008

- a public facility or service (e.g., hospital, care facility, rehab or treatment centre, correctional facility) and can not return to a stable residence.
- Individuals and families who are financially, sexually, physically or emotionally exploited to maintain their shelter.

At Risk of Homelessness

- Individuals and families who are living in:
 - temporary accommodation where they do not have control over the length and conditions of tenure (e.g., couch surfing, name not on lease) and do not have adequate personal space;
 - time-limited housing designed to help them transition from being homeless to living in a permanent form of housing, e.g., transitional housing or second-stage housing; or
 - accommodation where tenancy will be terminated within three months of application, (e.g., given notice by landlord or pending release from prison).

2.0 NANAIMO - A HUB CITY

2.1 EMPLOYMENT AND INCOME

Nanaimo benefits from its role as a hub city and its central geographic location and accessibility. It is a major centre on Vancouver Island and a transportation hub, which has implications on homelessness.

- Nanaimo has benefited from BC's strong economy and has experienced declining unemployment rates. In 2007, unemployment in Nanaimo fell to 5.9%, down from 6.8% in 2006. However, unemployment continued to be higher than the rest of the province, which reached a low of 4.2% in 2007.
- Nanaimo's residents have greater reliance on government assistance compared to residents of the Province. As of June 2007, there were 1,536 recipients of Income Assistance (IA) in Nanaimo, representing 1.8% of the population of working age (between 19 and 64). The percentage of recipients in Nanaimo is higher than the province as a whole where 1.1% were on IA.
- Based on 2007 income estimates, Nanaimo's median household income was \$40,700, which was 5% less than the median income estimate for BC (\$42,900).¹ Within the city, the residents in North Nanaimo were reported to have 34% higher incomes than those in South Nanaimo (\$44,200 vs. \$33,000). This suggests that South Nanaimo residents typically earned 23% less than BC residents. Such low median incomes are a reflection of the large percentage of people on IA.
- Couple-based families have comparatively better incomes than the median income for the City overall and are the most likely to become homeowners. Single parent families and single person households receive the least income on average and subsequently have the least amount of choice in the housing market. With a median income of \$1,740 per month, single person households will face the most challenges finding suitable and affordable housing.



A Response to
Homelessness
in Nanaimo:
A Housing First
Approach

Situational Analysis

Prepared for
City of Nanaimo

April 2008

¹ The income levels are based on the most recent taxfiler reported statistics (2005), which were adjusted to 2007 levels using average wage increases reported in the Labour Force Survey. Calculations by CitySpaces.

Table 2.1: Median Incomes and Affordable Rent by Family Type

Family Types	All Households	Couple Families	Single Parent Families	Singles
Median Income Estimate (2007)	\$40,658	\$58,622	\$27,475	\$20,874
Monthly Income	\$3,388	\$4,885	\$2,290	\$1,740
Affordable rent @ 30% of Income	\$1,016	\$1,466	\$687	\$522

- It is noteworthy to observe the difference in median incomes between the residents of North Nanaimo and those of South Nanaimo. The median incomes for residents of the North is 34% higher than those in the South, allowing them to spend approximately \$300 more per month on rent.

Table 2.2: Median Incomes and Affordable Rent by Nanaimo Region

Nanaimo Region	South Nanaimo	North Nanaimo
Median Income Estimate (2007)	\$33,033	\$44,221
Monthly Income	\$2,753	\$3,685
Affordable rent @ 30% of Income	\$826	\$1,106

2.2 RENTAL HOUSING

Economic growth and rising real estate prices have resulted in low rental vacancy rates and increased pressure on affordable rental units. Based on Canada Mortgage and Housing Corporation's Rental Market Survey, in 2003 there were 3,902 units of privately initiated rental apartment buildings and row units of three units and more. By 2007, the number dropped to 3,616, a 7% decline or loss of 286 units. This represents an annual loss of 57 units per year.

Vacancy rates in the apartment stock also dropped to 1.0% in 2007 from 1.9% in 2006, although rates have been consistently under 2% since 2003. Please note that this does not include units in the secondary rental market, i.e. those rented out directly by private property owners in the form of secondary suites, houses, rooming houses and condominium units.

Table 2.3: Apartment Rental Market

2007	Bachelor	1 Bedroom	2 Bedroom	3+ Bedroom	Total
Average Rents	\$460	\$581	\$700	\$810	\$625
Vacancy Rates	1.5	0.8	1.1	2.6	1.0
Total # Units	275	1646	1350	116	3387

- The average apartment rents are relatively low compared to other major centres in BC. Based on average rents for apartments, couple family households earning the median income would have affordable options. However, it has been reported by service providers that the existing rental stock is of poor quality and that there is limited choice in terms of size and location. Of the purpose-built apartment building stock, 89% are in one and two bedroom suites. There are 275 bachelor suites suitable for singles and 116 units with three or more bedrooms, which may be suitable for families with children.



A Response to
Homelessness
in Nanaimo:
A Housing First
Approach

Situational Analysis

Prepared for
City of Nanaimo

April 2008

- Single parent families and single persons would have less choice within the apartment rental stock. In particular, single persons earning median income could only afford a studio unit of which there were fewer than 300.
- Individuals receiving IA are further restricted by a \$375 shelter allowance. There are practically no private market units in Nanaimo that rent for that amount.

Putting a Face on Homelessness: Daniel's Story

Daniel* arrived in Nanaimo a couple of months ago. He had been working as a heli-logger and came to town with lots of money. It was gone in the first month on accommodation and crack cocaine. "When you have money, you have lots of friends." He has been homeless for a month.

* Names have been changed to protect individual's privacy

2.3 ROOMING HOUSES

Rooming houses form part of the rental stock available for lower income households. These buildings are essentially large older houses that accommodate five or more unrelated individuals or multiple households (renters pay their rent directly to a landlord). The City estimates there are between 90 and 150 buildings in Nanaimo considered rooming houses. A formal definition is currently being developed by the City to be introduced into the zoning bylaw along with appropriate standards. The majority of the rooming houses are in the established older areas of the city.

The City's Fire Department and Nuisance Property Group were concerned about the fire and health safety standards of rooming houses and initiated some enforcement action to respond to the heightened perception of risk associated with these properties. The challenge will be to enforce health and safety standards without displacing low-income renters who have limited choice in the rental market.

2.4 SECONDARY SUITES

Secondary suites have become the affordable rental alternative in many municipalities in BC. In a context of rising rents and real estate prices, they act as a mortgage helper for homeowners and increase the stock of affordable rental units. Nanaimo recognized secondary suites as a valuable component of the housing market and established them as a permitted use in all areas of the city where one principal dwelling and no other uses are sited on a lot. Suites, however, are subject to the requirements of the Building Bylaw, Zoning Bylaw and Building Code.

To upgrade an existing suite to legal status, there are many zoning and life safety requirements necessary. Drawings are to be presented that indicate the location of all buildings on site, setbacks, parking, building elevations and floor plans. Other documentation to demonstrate BC Building Code compliance including electrical permit are also required. Upon inspection by City staff, existing suites are expected to comply with parking requirements (one additional off-street parking stall), size restrictions (maximum 40 percent of the living space to a maximum area of 968 square feet), and a maximum of two bedrooms. Additional provisions related to safety also apply including smoke alarms, ceiling heights (minimum 6' 7"), means of egress, and fire separations between the suite and the main portion of the building and between the furnace room and suite, and electrical upgrades.

There are approximately 1,400 homes in Nanaimo with double utility charges, an indicator of secondary suites, not all of which are registered. The City continues to inspect about one unlicensed secondary suite per week as part of their enforcement efforts. While 30% of all new single detached dwellings constructed are estimated to



A Response to
Homelessness
in Nanaimo:
A Housing First
Approach

Situational Analysis

Prepared for
City of Nanaimo

April 2008

Page 5

have secondary suites in them, the closing down of existing suites risks a further reduction in the stock of affordable rental units. The need to ensure public safety and the prevention of slum dwellings has to be balanced by the demand for affordable and rental housing.

To minimize the potential loss of secondary suites, the City may review and consider best practices from other municipalities. Considerations may include a reduction of the bylaw restrictions and definitions to include lower ceilings, lenience with parking requirements, the allowance of stand alone buildings such as coach houses and suites above garages among others.

3.0 HOMELESSNESS IN NANAIMO IN RECENT YEARS

3.1 GROUND ZERO

Around 2000, a process of increased homelessness was beginning to occur in Nanaimo and by 2004, one particular area of downtown Nanaimo became known for open drug use and drug trade. The area, which was termed VCAND in the Neilson Welch report, had deteriorated both socially and economically.² It became the “ground zero” of intense problems downtown and was to become the first Red Zone. There was increasing violence among the street population and more and more of the transient homeless would come to the area and stay and assimilate.

In response to this growing problem, the RCMP, along with key stakeholders, introduced a number of measures to combat the problem.

- ***Fast-tracking through the courts.*** Efforts were made to fast track offenders through the court system and people were prosecuted. Prior to this, the lengthy time period to get people through the court system was resulting in offenders recommitting crimes before going to court.
- ***Good neighbour agreement(s).*** Stakeholders would typically include the service provider, funder, City, police and immediate neighbours. The agreements serve to create an environment where businesses and agencies feel safe.
- ***Urban design features.*** Applying Crime Prevention Through Environmental Design (CPTED) principles to buildings and dark places in the urban environment that were seen to contribute to the concentration in that area. Sessions on how to incorporate CPTED were given to local businesses.
- ***The Red Zone.*** A Red Zone was established that encompassed the VCAND problem area. Individuals who were *Red Zoned* would be arrested for breach of court orders if they were found in the area and large numbers of people were arrested when it was first started. The original Red Zone did not include many services, with the exception of the Street Outreach Clinic and primary needle exchange in the City. Given the effectiveness of the first Red Zone, a second large area covering a large portion of the Business Improvement area was also designated a Red Zone.
The Red Zones are used for the 5% to 10% of street-entrenched individuals considered to be *chronic predatory offenders* and have been effective at diffusing the drug market which was previously concentrated in the one area. Originally,



A Response to
Homelessness
in Nanaimo:
A Housing First
Approach

Situational Analysis

Prepared for
City of Nanaimo

April 2008

² Neilson Welch Consulting. 2005. *City of Nanaimo Social Services Study*. Prepared for the City of Nanaimo. The VCAND term was based on the streets that surrounded the area: Victoria, Cavan, Abbott, Nichol, and Dunsmuir.

hundreds of names were put on the Red Zone list, but this number is currently reduced. Due to the seasonal nature of homelessness in Nanaimo, it is anticipated that the numbers will increase as summer approaches and the RCMP's efforts intensify.

This multi-pronged approach of policing, enforcement and design diffused the intensity of drug activity. Many of the visible homeless and street-entrenched population were pushed out of downtown and into neighbouring areas, but at a more fragmented scale. Overall, the population became less *street evident* and there was a reduction in the level of petty crime and concentration experienced four years previous. There is no evidence that the number of homeless individuals was reduced.

Downtown business people and the Neighbourhood Association representatives have noted a marked reduction in visible homelessness and open drug use over the last few months. This is attributed to the cooperative efforts of the Safer Downtown Working Group - with increased security and enforcement - and an improved collaborative relationship with the Neighbourhood Associations. The City and business associations have also dedicated significant efforts towards the revitalization of the downtown core and re-establishing the downtown as a safe and vibrant urban core. The reduction of visible homelessness is an important aspect of achieving Nanaimo's objectives of downtown revitalization.

There is acknowledgement that problems are being *moved around* rather than being addressed and that this approach (of increased security and enforcement) is only part of the solution. Service providers note that the Red Zone prevents some individuals from receiving the services they need that are located downtown and that there is a further *criminalization* of problems like addiction and mental illness.

Homeless individuals report that they have nowhere to go and are constantly wandering. Some individuals report that sleeping spots are moving farther out of the core and that they sleep in the daytime when it is safer and wander all night. The situation is particularly unsafe for women. Individuals are not allowed to congregate outside of New Hope Centre because of complaints by neighbours and drop-in services are restricted to certain hours of the day. Due to the existing Good Neighbour Agreement, the service provider at New Hope Centre has to ask clients to leave the vicinity in order to limit the tensions with the local residents and businesses. Similarly, the meal programs at New Hope Centre have been changed from two free meals per day to only one free meal per day to limit the number of individuals coming to the site in the evenings.

Putting a Face on Homelessness: Bobby's Story

Bobby* is in his early twenties and has lived in Nanaimo all his life. He has been homeless since the end of January when his landlord took his rent but then sold the building. He and his ex-girlfriend shared the apartment - rent was \$800 per month. He stayed with a friend in his mobile home for a while, but the city told his friend he could not have anyone else there, so he left. He has stored most of his stuff with his parents, but won't stay in the shelter because anything else he has will be stolen.

He would like to have safe, secure housing, preferably not in the downtown - in his last place, the door was kicked in three times. He is addicted to crystal meth - not currently receiving any treatment. He tried to go to Narcotics Anonymous, but was told that he needed to go the Crystal Meth group that "meets somewhere out at Country Club." He spends most days binning for recyclable items.

* Names have been changed to protect individual's privacy



A Response to
Homelessness
in Nanaimo:
A Housing First
Approach

Situational Analysis

Prepared for
City of Nanaimo

April 2008

3.2 PROFILE OF NANAIMO'S HOMELESS

Nanaimo has experienced an increase in visible homelessness in recent years. It is generally difficult to get reliable estimates on the number of homeless, but this is further exacerbated in Nanaimo by the extent of transience among the population. The high mobility results in numbers that are always in flux - increasing in the summer time and dropping in the cold and wet season. In 2007, three sets of count estimates were reported, offering a range between 150 and 300 individuals.

The most recent homeless count (*Continuing and Shifting Patterns*, September 2007) found 173 persons to be homeless in the City.

Recent estimates done by the VIHA based on clinician client loads suggest that the absolute homeless population and the population at risk of homelessness due to their unstable or inadequate housing approximates 301 individuals.

This past winter (December 2007 to February 2008), client statistics compiled by the Downtown Crisis Response Team offered a baseline estimate between 160 and 203 individuals who were homeless and generally living in or near the Downtown area.

**Table 3.1: Downtown Team Client Statistics - Demographics
(December 2007 - February 2008)**

Demographics	#	%
Men	158	61%
Women	100	39%
First Nations	36	14%
Adults 18-64 years	253	98%
Total Clients	256	100%

- Among the Downtown Team's client base, 52 individuals were living outdoors and another 108 were staying at shelters and/or couchsurfing. That is, 160 individuals who were absolutely homeless. There were other clients considered to be "marginally housed" which, if included, expands the population to 203 individuals considered absolutely homeless and at-risk of homelessness.

**Table 3.2: Downtown Team Client Statistics - Length of Homelessness
(December 2007 - February 2008)**

Length of Homelessness	#	%
Under 3 months	65	25%
Under 1 year	82	32%
Under 5 years	48	19%
Over 5 years	64	25%

- Among the Downtown Team's client base, over one quarter were homeless for a period of less than three months and one third were homeless between three months and one year and 43% were reported homeless over one year. That is, there were 112 individuals who were homeless over one year (64 over 5 years) and are the most street-entrenched - have the greatest challenges. It is this group who have the greatest challenges accessing housing and support services. It should be noted that there was a 70% increase between the winter and fall statistics of clients who had been homeless for over a year. This further supports the reports of a highly transient population that cycles through Nanaimo in the warmer months.



A Response to
Homelessness
in Nanaimo:
A Housing First
Approach

Situational Analysis

Prepared for
City of Nanaimo

April 2008

Absolute Homeless

The overall size of the population remains manageable compared to other major centres in BC, indicating that it can be addressed with adequate services and supported housing. Nanaimo's population has varied needs and unique challenges and, as in most communities, the response will require not only housing units, but also training and capacity building, as well as a re-tooling of health services and support systems. The homeless people are a heterogeneous group with a wide range of housing and service needs. This review confirms previous conclusions that there is a high degree of drug use, particularly crack cocaine, and many people have complex health (particularly, mental health) issues.

- **Age Range:** On average, the homeless are reported to be in their mid 20s to mid 40s, although they range from the early teens to 50s in age.
- **Seniors:** There is a growing number of seniors among the homeless and population at risk that have dementia and other age-related disorders.
- **Youth:** There is a teen population at risk of homelessness; they are largely Aboriginal and tend to couch surf and not sleep outside.
- **Addictions:** The population that is most street-entrenched and known to sleep outside are typically drug users. While the population at-risk of homelessness includes lower income households, the absolute homeless and those living on the streets are most typically those who are involved in substance abuse.
- **Dual Diagnoses:** A large share of the homeless population has mental health and addictions issues and it is reported that many are heavily-street-entrenched individuals with multiple barriers. The Downtown Team reported less than ten clients were not actively using substances (4%). The majority of clients use a variety of substances with the most prevalent being: stimulants (57%), alcohol (21%), opiates (12%), and injection drug use (8%). A large proportion were known to use multiple substances (44%).
- **Health:** Among the Downtown Team's clients, 14% were known to have HIV or Hepatitis C, 20% had a mental illness, and 9% had a physical disability.
- **Mental Illness:** Many individuals have mental health challenges and those who spend the longest amount of time on the streets are reported to have the more intense symptoms of mental illness. This is attributed to the fact that they are constantly in crisis.
- **Criminal Behaviour:** At least 25% of the Downtown Team's clients were reported to be engaged in criminal activity. Among the homeless, criminal activities are usually associated with drug use and maintaining their addictions. There has not historically been a relationship between violent crime and the homeless population. A small number of drug dealers are known to prey on the more vulnerable among the homeless, making it particularly challenging for those individuals to find stable housing and pursue service plan goals.

While there is a highly visible homeless population around which much of the public concern and focus revolves, it is reported that there is also a large population of individuals who are ***relatively homeless or at-risk of becoming homeless***. These individuals are reported to be living in substandard conditions and in unstable tenure situations.



A Response to
Homelessness
in Nanaimo:
A Housing First
Approach

Situational Analysis

Prepared for
City of Nanaimo

April 2008

3.3 TRANSIENCE

While the homeless population in Nanaimo appears to be more transient than those in other communities, there are many long-time Nanaimo residents who are without housing and in need of ongoing services. There are multiple ways to define transience and mobility. Some groups consider two or more years in Nanaimo to be time enough to be considered “local” while others would consider individuals to be newcomers for many years after that. For the purposes of service provision and planning, a one year stay will be considered a reasonable period of time to include in future programming numbers.

- Many homeless individuals have been in Nanaimo for decades, and many others cycle in and out from smaller communities such as Port Alberni and First Nations reserves on the north and west coast of Vancouver Island.
- When the warm weather begins, it's been estimated that around 50% of the homeless are newcomers who have arrived from somewhere else and most of whom are expected to cycle in and out of the city.
- According to the September 2007 homeless count (a time of year known to have higher levels of out-of-towners), 40% of the sample were reported to have been in Nanaimo less than one year - 16.5% for less than a month and 23.5% between a month and a year.
- The level of mobility among the population is relatively high compared to the rest of BC. Nanaimo residents are more likely to move within the municipality, with 29% having moved in the past five years compared to 23% of British Columbians who changed address during that same period. Residents of Nanaimo also have a slightly higher propensity to move between provinces with 6% of the population coming from a different province between 2001 and 2006 compared to only 4% of BC residents migrating across provinces. Despite slightly higher rates of mobility among the population, the figures estimated by service agencies and reports indicate much higher levels of mobility among the homeless population.

Comments and Suggestions from Homeless Clients

- *Build housing - quick, for both singles and families, there are lots of single parents out there. And don't trust the numbers from the homeless count. Each team had a cop on it. I'm not going to tell them where I am sleeping, because the cop will come the next day, so people just vanish for the count.*
- *Build more affordable housing outside of the downtown. There are only rooming houses downtown. The model for Youth Housing works, where the front door is monitored and there are counsellors available.*
- *Build safe housing for women. Neighbours turn a blind eye to problems in their neighbourhood and then say they don't want housing for 'these' people in their neighbourhood. - but they are from your neighbourhood!*
- *More nutritious food should be provided for the homeless. Everything at the Sally Ann is sugar and wheat products.*
- *Homeless people need to have dry feet - give out boots.*
- *There is nowhere for homeless to go, cops just keep moving people on. The New Hope does not function according to their mandate. The best thing there is the showers and laundry. We need a safe place to go.*



A Response to
Homelessness
in Nanaimo:
A Housing First
Approach

Situational Analysis

Prepared for
City of Nanaimo

April 2008

Page 10

4.0 THE SERVICE CONTEXT

A broad range of services are available for the homeless and population at risk. The following table is not intended to be comprehensive, but illustrative of the array of services required and currently available to meet the basic needs of the most vulnerable and the services needed to assist people to gain some stability and move towards independence.

Figure 4.1: Spectrum of Services and Programs

Meals/ Food	Drop-in Services	Detox/ Treatment	Medical/ Dental	Harm Reduction	Outreach	Counselling/ Lifeskills	Employment Services
↕	↕	↕	↕	↕	↕	↕	↕
<ul style="list-style-type: none"> • 7-10 Club • Community Food Bank (weekly) • New Hope 	<ul style="list-style-type: none"> • New Hope • Nanaimo Women's Resource Centre 	<ul style="list-style-type: none"> • Clearview detox 	<ul style="list-style-type: none"> • Outreach Clinic • AIDS Vancouver Island 	<ul style="list-style-type: none"> • Tillicum Lelum mobile needle exchange • Private methadone clinic • Needle exchange at Cavan St. 	<ul style="list-style-type: none"> • Crisis response team • MEIA Outreach • CMHA street outreach team 	<ul style="list-style-type: none"> • Willow Wai • Wrap Around Program • Athena 	<ul style="list-style-type: none"> • MEIA • Triumph • VIVRS

4.1 EXISTING SERVICES

The following list of services is not exhaustive, but these are particularly prominent in the community serving the identified population of homeless and at-risk individuals.

- **Alcohol and Drug Services.** Intake, counselling and related addictions services are provided by the Vancouver Island Health Authority.
- **Needle Exchange.** Three days per week at the street outreach clinic. Needles exchanged by a mobile team (Tillicum Lelum) on Thursdays.
- **Outreach Teams.** Outreach has been recognized as a key aspect of the service continuum to assist people to get off the streets and maintain their housing. The crisis response team based out of the New Hope Centre identifies individuals who need support and provides outreach support as needed. A Canadian Mental Health Association outreach team funded by BC Housing also works out of New Hope to assist people to get on income assistance and to find and maintain housing.
- **Post Recovery Support Programs.** An example of a medium-barrier program, the Willow Wai, has been running since October 2004. It provides housing and support services for women involved in the sex trade and serves as second stage housing for women who are in recovery. It commits women to day programs based on case management model for a six month period and assists women with their transition following the program - 82% were reported to maintain their housing for three months after the program. Each house accommodates three women and a volunteer house manager. While the houses are dry (do not tolerate any drug or alcohol use), they are considered medium barrier housing in that women do not lose their housing if they relapse. Program funding runs out in August 2008.



A Response to
Homelessness
in Nanaimo:
A Housing First
Approach

Situational Analysis

Prepared for
City of Nanaimo

April 2008

- **Women's Resource Centre.** The Centre serves women and children through drop-in programs and the building bridges program, a free education workshop series.
- **Wrap Around Program.** A service that offers participants access to housing support dollars to secure housing and to assist them to stay in housing. Participants are also linked with a support network that reflects their individual service and recovery goals.
- **Samaritan House.** An emergency shelter for women with 20 beds. Residents of the house can be active substance users when staying at Samaritan, but are not allowed to use in the house.
- **Treatment Programs.** VIHA operates an acute detoxification treatment at Clearview Centre and Athena is a post-acute treatment transitional housing program for women.
- **Youth House.** Nanaimo Youth Services has 21 apartments for youth at risk of homelessness (15 for singles and 6 for single parents under 19).
- **7-10 Club.** A family soup kitchen that used to feed around 300 people per day when it was based out of the St. Peters Catholic Church. It now operates out of a temporary location at 285 Prideaux St. Patrons include seniors on limited incomes, low-income families, college students, youth, the unemployed or under-employed, people with disabilities and the homeless.
- **Street Outreach Work.** The Downtown Crisis Team (funded by the Vancouver Island Health Authority) consists of two nurses and works in partnership with the Canadian Mental Health Association outreach team (funded by BC Housing). They target the homeless, namely the mentally ill and addicted population, in Downtown Nanaimo. The team offers crisis management support and works with individuals at various stages of engagement to help connect them to services. They have an average of 260 clients, street-entrenched and marginally housed. The outreach workers continue to engage with clients once they are housed to assist them in maintaining their housing or finding better housing over time.

Some programs are at risk of closure due to unstable funding. As funding through the federal Supporting Communities Partnership Initiative (SCPI) program winds up, these programs have been unable to secure regular funding. Other programs have reached their capacity to provide service.

4.2 A HARM REDUCTION APPROACH TO SERVICE DELIVERY

The health of every community is affected by drug use - with the risks affecting families and community members, and not just the individuals who use drugs. (Harm Reduction: A BC Community Guide). The social harms range from a loss of public space due to open drug use, criminal activity and a real or perceived decrease in public safety. There are social and fiscal costs for families, health and service providers and businesses. Effective interventions to minimize the negative consequences of active drug use and dependence have been identified as an essential part of a comprehensive response to problematic substance use - one that includes prevention, treatment and enforcement.

- A harm reduction approach is a pragmatic response that focuses on keeping people safe and minimizing death, disease and injury. Examples include needle exchange programs, methadone maintenance treatment, outreach and education



A Response to
Homelessness
in Nanaimo:
A Housing First
Approach

Situational Analysis

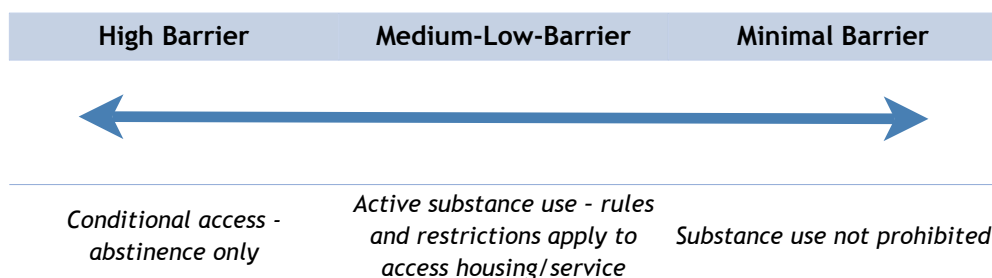
Prepared for
City of Nanaimo

April 2008

for high risk populations, law enforcement cooperation and supervised consumption facilities.

- A number of harm reduction services designed to prevent the spread of disease and harm have been implemented in Nanaimo. Of note are the needle exchange at the Street Outreach Clinic, the mobile needle exchange by Tillicum Lelum, and a private methadone clinic.
- The homeless population that is most street-entrenched are reported not to use the Salvation Army services and other addictions services. The most high-risk individuals and those who need the services the most are often the ones that will not seek assistance, but need to have the services taken to them. This amplifies the importance of outreach services, mobile needle exchanges and similar programs.
- New harm reduction programs can result in a perception risk on the part of neighbours and business owners concerned about the dangers associated with the client population who would benefit from the service. This can lead to sensitivities around location of housing or programs managed according to a harm reduction philosophy. Efforts to raise awareness and engage the community - the residents, businesses and broader public - about the type and method of service delivery is critical to ensure that new initiatives are suitably integrated and generally supported by the community.

Figure 4.2: Housing First and Harm Reduction Continuum



4.3 THE SERVICE GAP

There is a need for sober facilities and services for those who are actively in recovery (high barrier) and other services that are available to individuals who are at various stages of their addiction (minimal, low and medium barrier). In Nanaimo, there are many services and programs that are provided on a conditional basis - where users are required to follow rules and restrictions around substance use - and are considered medium to high barrier services. While there continues to be demand for such programs, they inherently restrict access to certain individuals. In fact, it has been identified that there is a strong need for minimal and low-barrier services - a harm reduction approach - to be woven into the service continuum. The introduction of these services would ensure that the most vulnerable and the most street-entrenched individuals have access to a range of services that will not only minimize harm but also enable them to pursue their goals for stability and then recovery.

To respond to the shortfall of minimal barrier housing and services, agencies and facilities need to be appropriately resourced and equipped with a level of staffing and training that is appropriate to the client population served. This would typically require additional funding and higher levels of training than medium to high barrier programs.



A Response to
Homelessness
in Nanaimo:
A Housing First
Approach

Situational Analysis

Prepared for
City of Nanaimo

April 2008

A need for the following services has been identified by VIHA and other service providers:

- **Community-based Medical Response Team:** An existing crisis response team with a street outreach focus has been active in Downtown Nanaimo for three years. It has been identified that there is a need to expand this service for more hours during the day and on weekends in order to become more accessible to the street-entrenched population.

- **Drop-in Centre:** A living room or drop in centre used to be operated by Island Crisis Care Society and this function was passed on to the New Hope Centre when

constructed. The move of this service to the new facility was found to reduce the usage numbers because the New Hope is a medium barrier facility that inherently will exclude the most high-risk and most street-entrenched individuals. The need for this service has been repeated on numerous occasions by service providers and clients alike. In addition, the physical size of the New Hope Centre is not able to accommodate the increase in clients demanding the service.

- **Crackpipe Mouthpieces:** It was recently announced that mouthpieces for crack pipe users will be included in the provincially available harm reduction supplies beginning in April 2008. A large share of drug users smoke crack cocaine, a practice that often results in users sustaining burns. These burns, along with the habit of sharing crack pipes put users at risk for abscesses and the spread of communicable diseases such as Hepatitis C. The distribution of sterile mouthpieces is viewed by VIHA as a simple and inexpensive approach to help prevent the spread of disease. The distribution can also be a point of contact for marginalized and vulnerable street people to access health care and addiction treatment services that they might not otherwise receive. VIHA had initiated distribution in Nanaimo in 2007 which resulted in negative feedback from the media and the public followed by a request by the City of Nanaimo to suspend the service. A new distribution plan has not yet been developed.
- **Mobile ACT Team:** The VIHA has identified that there is a need for an Assertive Community Treatment (ACT) team. This ACT team would provide client-centred, intense, multiple services to 85 complex mental health and addictions clients who are homeless or at risk of homelessness and who, because of limitations of traditional mental health delivery models have been unable to access and maintain involvement with these services.
- **Health Access Centre:** The Vancouver Island Health Authority (VIHA) has reported the need for client-centred mental health and addictions services to be provided at one location with other complementary services and programs for the homeless

Putting a Face on Homelessness: Frank's Story

Frank* is in his late twenties, and receives disability benefits because of a brain injury and mental health issues. Originally from northwest BC he moved to Nanaimo in 2002 where his family felt he would receive better services. "I'm a lot better off than others I know. I have a place to live - \$525 a month plus hydro and phone for a bachelor (16 ft x 33 ft.). It's very hard to get established with \$375 a month and not having your own kitchen or living space. I was evicted from my last place for having a friend staying with me." If he had a choice, he would not live in the downtown.

He feels that slumlords are the biggest problem and that the city and police turn a blind eye. He uses the 7-10, but doesn't go to the New Hope Centre because of the \$2 meal charge.

** Names have been changed to protect individual's privacy*



A Response to
Homelessness
in Nanaimo:
A Housing First
Approach

Situational Analysis

Prepared for
City of Nanaimo

April 2008

such as: activity centre, life skills programs, literacy and employment readiness programs, medical and dental assistance, housing search and harm reduction.

- **Meal Programs:** The 7-10 program no longer has access to cooking facilities and is offering a limited breakfast program in a temporary location. Mention free lunch. The evening meal at New Hope charges \$2.00, which is a barrier to those without funds. There continues to be strong neighbourhood resistance to accommodating the 7-10 program.
- **Support Services for Sub-groups:** A number of sub-groups among the homeless do not have access to appropriate services, e.g., elderly individuals with mental illnesses, persons with fetal alcohol spectrum disorder (FASD), persons with concurrent health and addictions issues, women with children.
- **Addictions Services:** While services are open to all individuals, the method of service delivery (e.g., by appointment, waitlists) for intake, detox, counselling, and case management services are in some situations unintentionally prohibitive. Individuals living on the streets are often unable to keep appointments and service providers are often unable to contact clients because they don't have a telephone. This situation calls for a review of the service delivery approach to ensure that all clients are able to access needed services.

5.0 THE HOUSING CONTEXT

There is a shortfall of housing and support services that target the city's most vulnerable. In total, there are 76 emergency shelter beds, 37 for women (including those for women fleeing abuse), 23 for men, and 16 unspecified. There are 65 units of supported housing in three complexes and 16 transitional units at the New Hope Centre. An additional 81 transitional beds are available at eight different recovery and group home locations throughout the city.

Figure 5.1: The Housing Continuum

Emergency shelter	Transitional Housing	Supported housing	Non-Profit Housing
↕	↕	↕	↕
<ul style="list-style-type: none"> • New Hope Centre - 23 beds (men) • Samaritan House - 20 beds (women) • Safe Harbour & Crescent House - 11 beds (men/women) • Haven House - 17 beds (women) • Friendship House - 5 beds (youth) 	<ul style="list-style-type: none"> • New Hope Centre - 16 beds (men/women) • Samaritan House - 3 beds (women) • Willow Wai - 12 beds (women) • Wesley/Thunderbird Houses - 12 units (men leaving corrections) • Columbian Centre Society 5 group homes - 30 beds (men/women) • Athena House - 6 beds (women) • Surfside Recovery House - 20 beds (men) 	<ul style="list-style-type: none"> • Nanaimo Affordable Housing: 350 Prideaux, 153 Wallace for single persons with a disability - 44 units; • Nanaimo Youth Services Association: 1001 Waddington Ave - 21 units for youth 16-19 years 	<ul style="list-style-type: none"> • Family Housing: 281 units • Seniors Housing: 378 units
Total: 76 beds	Total: 99 beds	Total: 65 beds	Total: 659 units



A Response to
Homelessness
in Nanaimo:
A Housing First
Approach

Situational Analysis

Prepared for
City of Nanaimo

April 2008

Given the size of the City of Nanaimo, its role as a geographic hub, its lower incomes and the scale of its homelessness problem, an immediate need for additional supported housing units has been identified. The higher costs of housing have led to a disproportionate share of incomes being spent on shelter-related expenses and the basic food and nutritional needs of the population at risk of homelessness are not being met. As a result, there is a strong demand for units and related services along the housing continuum, namely supported housing, but also low demand or low-barrier housing.

5.1 THE HOUSING GAP

Based on the consultation to date, a number of emerging housing needs have been identified. There is evidence of a particular need on the low-barrier end of housing and support services spectrum.

- **Shortage of subsidized housing including supportive units.** There is a need is for additional housing units - all along the continuum. There are long waitlists for subsidized units. There is no supported low-barrier housing and a very limited supply of supportive units for those individuals who are in recovery from drug and alcohol misuse.
- **Affordability.** There are few housing subsidies available. Due to the tight supply, it is a “landlord’s market” and it is reported some landlords make demands that are not legal e.g. first and last month’s rent, key deposit, etc. There is a very limited supply of market units that are affordable to low income people. There has been very little private rental construction, both nationally and locally, and this has a direct impact on homelessness.
- **Quality of the Rental Housing Stock.** Many individuals and families are reported to be living in substandard housing conditions.
- **Housing Registry.** There is no central registry where individuals seeking housing or agencies assisting individuals to obtain housing can find out what is available.

It is worthwhile to note the importance of partnerships in the implementation of new housing for the homeless or population at risk of homelessness. To support housing initiatives, the Province has outlined expectations around the involvement of multiple players, such as the municipality, the regional health authority and a non-profit operator. Memorandums of understanding (MOUs) are signed between different partners to outline the level and type of commitment. Numerous successful partnerships and MOUs have been initiated around the Province in recent years.

5.2 PROPOSALS AND PROJECTS IN THE PIPELINE

There are several groups actively involved in preparing proposals and looking for suitable locations and funding for various housing projects.

- The John Howard Society is looking at acquisition of existing apartments for the hard to house, transitional housing with supports for clients.
- Nanaimo Affordable Housing Society (NAHS) and Columbia Centre Society jointly submitted a proposal in 2006 to BC Housing for 24 units of medium barrier, long term housing for singles with psychiatric disorders. This proposal was not funded under the proposal call at that time, but could be re-activated.



A Response to
Homelessness
in Nanaimo:
A Housing First
Approach

Situational Analysis

Prepared for
City of Nanaimo

April 2008

- A small working group of housing providers has been meeting on a regular basis to discuss housing needs in Nanaimo. They came together to develop concepts for housing projects that will work towards meeting the targets outlined in the Mental Health and Addictions plan. Preliminary concepts have been put forward:

- Island Crisis Care Society has suggested a 10-bed substance free supported housing project through purchase and redevelopment of a house that they are currently leasing.
- Women's Resource Centre is working on a proposal to house street-entrenched women in supported low barrier housing.
- NAHS suggests acquisition of an existing 14 unit motel as low-barrier (wet) housing. A self-contained suite and view area could accommodate support staff. As part of this proposal, a permanent health clinic to serve the street population has been suggested and could potentially be attached to such a low-barrier housing project, similar to the Cool-Aid clinic in Victoria.
- NAHS is also developing a concept for 40 units of extreme low-barrier housing for street-entrenched individuals. Residential hotel-type management is being considered as part of the model.
- NAHS has also expressed interest in responding to the need for a drop-in/ recreation centre that would also allow street-entrenched individuals to connect to other services.
- NAHS is also working on the concept of 8 additional units for street-entrenched youth. They could be built as part of another project, but with separate entrance, higher security and separate staffing.
- Canadian Mental Health Association (CMHA) is actively seeking a building to be converted to low-barrier housing for a hard-to-house population. CMHA is interested in managing the project (approximately 20 units) according to a harm reduction philosophy.

Putting a Face on Homelessness: Mary's Story

Mary* has had no housing since the end of January. She has been staying with a friend and deals crack. Originally from California the US, she has been in Nanaimo now for over 15 years. A former drug and alcohol counsellor, she is a mother of 4 and a diabetic.

She believes there is a need for housing with supports for wherever people are at. She wants to live with dignity - "we are not bad people trying to get good, we are sick people trying to get well."

* Names have been changed to protect individual's privacy



A Response to
Homelessness
in Nanaimo:
A Housing First
Approach

Situational Analysis

6.0 CHALLENGES AND OPPORTUNITIES

A number of challenges and opportunities related to the development and implementation of the Housing First and Harm Reduction Strategy and Action Plan have been identified:

Balancing enforcement and service delivery. A significant challenge for a successful Action Plan will be balancing security and law and order needs in the downtown while providing access to needed services for homeless clients. Downtown business people and representatives of the inner city neighbourhood associations have noted and appreciate the improved cooperative relationship with enforcement officials at the City and the RCMP. They appreciate the resulting decrease in the visibility and related issues of individuals with addictions and/or mental health issues including those who are homeless. Service providers and homeless individuals, on the other hand, are

Prepared for
City of Nanaimo

April 2008

Page 17

concerned about the limited availability and access to needed services resulting from the increased “red-zone” and concurrent enforcement initiatives.

Adopting a housing first and harm reduction approach to addressing homelessness.

While it is well known and accepted by the health and social service sector and well-supported by best practices research (as highlighted in CitySpaces’ previously submitted paper *A Response to Homelessness in Nanaimo: A Housing First Approach, Relevant Best Practices*) that *pre-conditions* to offering housing and support services, perpetuate the cycle of failure and enduring homelessness for many of the most ill, there is still a community reluctance to *reward bad behavior*. Along with this view is a belief that addicts choose their lifestyle and therefore are not deserving of help until they *clean themselves up*. Harm reduction-based programs are often perceived to result in added stresses on a neighbourhood.

Addressing the problem while the scope and magnitude is still manageable. A key advantage that Nanaimo has over larger centres such as Victoria and Vancouver is that the homelessness and related issues have not yet gone beyond what would be seen as solveable. There is an existing network of service providers with a good level of cooperation and much planning work has been done.

Neighbourhood improvement and redevelopment. The small scale of Nanaimo’s current problem is partly related to the extent of affordable, if poor quality, housing in the city. This is largely concentrated in the southern part of the city. Although north Nanaimo has long been favoured over the south by the marketplace, this will change over the next ten years. The City and Port Authority’s various initiatives in and around the downtown will stimulate interest in redevelopment in the south. The south is conveniently located to the downtown but also has a number of intrinsic qualities - views, character, sense of place - that may not be currently recognized but will become more apparent to home buyers and developers. Rapid change to neighbourhood character (often called gentrification) is a common feature of North American cities and Nanaimo will not be an exception. As this change occurs, it will likely raise the demand for and decrease the supply of affordable housing.

Need for an operational implementation structure. The Action Plan will need to identify a body/mechanism/structure to implement the plan. Currently several groups are working on pieces of the homelessness issue and some communication gaps and competing agendas exist. A successful strategy will require a single focus on ensuring that it moves forward.

Informed discourse. Informed public discourse is important to achieving an effective response to a harm reduction and housing first approach. Neighbourhoods and community groups need to be engaged. Good management practices and good communication plans are key aspects of the process.

7.0 CURRENT ORGANIZATIONAL FRAMEWORK

Nanaimo has taken positive and proactive steps towards addressing homelessness and the related issues of mental illness and addictions. The City of Nanaimo has had a progressive approach to supporting affordable housing initiatives - both market and non-market - from legalization of secondary suites to tax relief and reduction of fees for non-profit societies to build non-market housing.

The City’s commitment towards a Housing First and Harm Reduction Strategy and Action Plan, along with the considerable efforts on the part of local service providers, the Vancouver Island Health Authority, RCMP and local business community, has set the



A Response to
Homelessness
in Nanaimo:
A Housing First
Approach

Situational Analysis

Prepared for
City of Nanaimo

April 2008

ground work for a coordinated response. This current initiative to develop an Action Plan is based on a housing first and harm reduction model. What is currently missing is a formal plan and monitoring framework, one that has been developed jointly by all key stakeholders.

Several organizational structures, both formal and less formal have been formed to coordinate aspects of addressing homelessness. These include:

- **Safer Nanaimo Committee** - Initiated by the City, this committee focuses on prevention and enforcement.
- **Working Group on Homelessness** - This group was struck to respond to the federal government's National Homelessness Initiative and recommends projects for funding from that program. This group oversees the annual homelessness counts. A **Housing Coalition**, of housing providers has recently been recognized as a sub-committee of the Working Group on Homelessness.
- The **Vancouver Island Health Authority (VIHA)** - through the Nanaimo Mental Health and Addictions Services provides direct service as well as leadership in planning to address homelessness. The Downtown Crisis Team, including two VIHA nurses, has operated since 2005. The recently completed plan *Breaking the Cycle of Homelessness: Proposals for Housing and Support Services for Nanaimo's Homeless* provides the basis for concrete action. It does not, however, provide a structure for implementation. VIHA has received criticism for failing to consult adequately with residents about harm reduction initiatives.
- **Service providers** in Nanaimo work cooperatively and communicate regularly compared to larger centres. Some of the agencies are experiencing unstable funding and many services are stretched to the limit. There is a relatively small non-profit housing sector in Nanaimo. They have recently begun to meet regularly to develop housing concepts in response to VIHA's plan and have been accepted as a sub-committee of the Working Group on Homelessness.

While there is generally good cooperation among agencies and levels of government, there is no **overarching structure** in place to ensure that initiatives are coordinated and that a concerted effort to end homelessness is realized. In fact, as in other centres, there are silos of interest and effort resulting in a lack of communication and overlaps. The lack of a formalized housing and homelessness plan has resulted in some redundancy of efforts.



A Response to
Homelessness
in Nanaimo:
A Housing First
Approach

Situational Analysis

Prepared for
City of Nanaimo

April 2008

APPENDICES



A Response to
Homelessness
in Nanaimo:
A Housing First
Approach

Situational Analysis

Prepared for
City of Nanaimo

April 2008

APPENDIX A: DATA SOURCES & REFERENCES

BCStats. June 2007. *Table: Population 19-64 Receiving Basic Income Assistance or Employment Insurance*. Prepared by BCStats using data from Ministry of Employment and Income Assistance and BCStats population estimates.

Canada Mortgage and Housing Corporation. 2003 - 2007. *Rental Market Reports*.

City of Nanaimo. *Secondary Suites Policy*. Development Services - Building Inspection Division. Zoning Bylaw amended February 7, 2005.

Jones, B. November 2007. *Continuing and Shifting Patterns in Nanaimo's Homeless Population: Based on the September 2007 Homeless Count*. Conducted by the Nanaimo Working Group on Homelessness.

Ministry of Public Safety and Solicitor General. July 2007. *Municipal Crime Rate Report*. Policing and Community Safety Branch.

Statistics Canada. 2006 *Community Profiles - Community Highlights for City of Nanaimo*.

Vancouver Island Health Authority. Fall 2007. *Breaking the Cycle of Homelessness: Proposals for Housing and Supports for Nanaimo's Homeless*. Nanaimo Mental Health and Addictions Services.

Vancouver Island Health Authority. September 2007 - February 2008. *Downtown Crisis Response Team Client Statistics*.

Working Group on Homelessness Planning Session. March 15, 2007. *Facilitator's Report*. Nanaimo, BC.



A Response to
Homelessness
in Nanaimo:
A Housing First
Approach

Situational Analysis

Prepared for
City of Nanaimo

April 2008

Appendix A

APPENDIX B: LIST OF KEY-INFORMANTS & PARTICIPANTS OF FOCUS GROUP DISCUSSIONS

Organization/Agency	Name	Type of Service(s)
Canadian Mental Health Association	Christina Martens	Service provider
Haven Society - Willow Wai Program	Shelly Maunula Dawn Clark	Housing provider
John Howard Society, Nanaimo Region	Frances Tellier	Housing provider
Nanaimo Affordable Housing Society	Jim Spinelli	Housing provider
Nanaimo and Area Resource Services for Families (NARSF)	Gordon Cote	Community health clinic; Wrap Around program
Neighbours of Nob Hill	Graham Shuley	Residents Association
Old City Quarter Association	Rob Humpherville	Residents Association
RCMP	Cpl. Dave Laberge	Policing, Safer Working Group
Salvation Army New Hope Centre	Rob Anderson	Emergency shelter
South End Neighbourhood Association	Douglas Hardie	Residents Association
Tillicum Lelum Aboriginal Society	Inga Neilsen Cooper	Aboriginal friendship centre; Youth safe house
VIHA Nanaimo Mental Health and Addictions Services	Alison Milward Marg Fraser	Health Authority
VIHA Downtown Crisis Response Team	Karen Lorrette Brian Young	Health Authority/ Service provider
Housing Coalition	Representatives from: NAHS, Haven Society, Women's Resource Society, John Howard Society, Columbia Centre Society	Housing providers

Business Name	Name	Type of Business
Painted Turtle Guest House	Bruce Barnard	Visitor accommodation
DTZ Barnicke	Bob Moss	Property management
Ed Poli & Associates	Ed Poli	Management consulting
Buy Sell & Trade	Kathleen Erickson	Newspaper
Downtown Nanaimo Partnership	George Hanson	Downtown revitalization & promotion

* Five homeless individuals were interviewed. Their names will not be disclosed for confidentiality purposes.



A Response to
Homelessness
in Nanaimo:
A Housing First
Approach

Situational Analysis

Prepared for
City of Nanaimo

April 2008

Appendix B

APPENDIX C: DISCUSSION GUIDES

Service Providers:

- Please introduce yourself and describe your programs/services.
- What is your perception of the profile of the Nanaimo homeless? Please describe the population.
- What is your perception of the level of mobility of the homeless population?
- How do the homeless access housing and services? What are the barriers to accessing the services that already exist?
- What services are missing if any? What services/housing do you need more of and for whom?
- What projects/initiatives are currently in the pipeline/planned?
- What is VIHA's role in housing and support service delivery? Would the health authorities support on-site services for supportive housing? Other services?
- Is there the local capacity to provide supportive housing?
- What is the funding situation for service providers? Is there adequate and sustainable funding?
- What is the relationship/level of cooperation between service providers and other agencies?
- Are there specific service providers we should contact?
- We would like to engage homeless individuals/clients in informal conversations on this topic. Do you have any suggestions of where/how we can set up these discussions?

Clients:

- How long have you lived in Nanaimo? Why do you choose to stay in Nanaimo?
- What is your current housing situation?
- What kind of housing would you like to obtain?
- Do you have a preference as to where in the City of Nanaimo that you live? Why do you prefer that area?
- What are some of the barriers to finding and keeping the kind of housing that you need/want?
- What services do you access regularly in the city? How well do those services meet your needs?
- How do you find out about services?
- What services are missing in the community?
- Do you have trouble accessing the services that are available? If yes, what are the barriers that you face?



A Response to
Homelessness
in Nanaimo:
A Housing First
Approach

Situational Analysis

Prepared for
City of Nanaimo

April 2008

Appendix C

Downtown Business Community:

How much of an issue is homelessness to you? How does it affect your business?

Do you attribute criminal activity and break-ins to the homeless population?

Do you think that the homeless situation is deterring people from coming downtown?

What are the homeless people like? Aggressive, panhandling, etc.

What types of services would you support?

Residents' Associations:

- How much of an issue is homelessness to you? How does it affect your neighbourhood?
- Do you attribute criminal activity and break-ins to the homeless population?
- Do people in your neighbourhood feel unsafe because of the homeless situation ?
- What are the homeless people like? Aggressive, panhandling, etc.
- What types of services would you support?



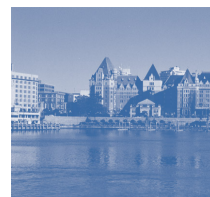
A Response to
Homelessness
in Nanaimo:
A Housing First
Approach

Situational Analysis

Prepared for
City of Nanaimo

April 2008

Appendix C



Planning | Project Management | Applied Research

5th floor, 844 Courtney Street, Victoria BC V8W 1C4 | 250.383.0304 | 866.383.0304

Suite 910, 688 West Hastings Street, Vancouver BC V6B 1P1 | 604.687.2281 | 888.687.2281

www.cityspaces.ca

