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2014 Smithers Homeless Count Findings

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Executive Summary

Section 1: Introduction

This report represents the findings of a mixed-methods research project commissioned by the Smithers Action Group Association (SAGA) to identify the number of homeless individuals in Smithers, the issues facing them and their service housing needs. An additional component of this report is a small survey conducted with individuals potentially facing housing affordability issues or at risk of homelessness who were accessing meal programs in Smithers. The Smithers Homeless Count was conducted on November 28, 2014. The Count provides an estimate of the Smithers homeless population *on one day* – November 28, 2014. It also provides results of key informant interviews, and the results of a survey of two meal programs hosted on November 28 and 29th, 2014.

Smithers is fortunate to have a number of community organizations that work closely with the homeless population. These organizations provide a range of services from emergency shelter, to meals and drop-in, to outreach, to support in health and well-being issues. Also worth noting, the Broadway Shelter was successful in receiving funding for an outreach worker for the winter of 2014-15. Key informant interviews noted this worker was having a significant impact on getting clients into housing and helping them maintain that housing.

Section 2: Homeless Count Findings

The 2014 Smithers Homeless Count had a number of key findings. It should be noted that typically homeless counts are undercounts, and in particular the hidden homeless population can be difficult to enumerate. The following bullets summarize some of the Count's key findings:

- The Count found a total of 22 homeless individuals: 13 in emergency shelters, 8 sleeping outside and 1 with no fixed address (NFA)
- Ages ranged between 20 and 64, and the unsheltered population was much more likely to be older (between 45 and 64) than the sheltered population.¹
- Aboriginal individuals represented a significant proportion of the homeless population, 90% overall.
- Of the homeless individuals interviewed, most (81%) had been in Smithers for more than a year, and 63% considered themselves from Smithers.
- When asked where they had been before Smithers, most individuals responded with a town in the region (Hazelton, Houston, Moricetown, Fort Babine or Terrace) showing that Smithers homeless services are serving a regional population.
- Seventy-one percent of the individuals interviewed had been homeless for more than three months, and over half the population had been homeless for more

¹ The sheltered population here refers to individuals in emergency or short-term shelters, still considered homeless. This *does not* refer to individuals who are marginally housed.

than a year, with the unsheltered population much more likely to have been homeless for a long period of time, indicating entrenched homelessness in this population.

- Health issues represented a major concern for the homeless population, with about three quarters of the population reporting some form of addiction issue.

Section 3: Survey of Food Program Findings

25 food program users were surveyed in an effort to understand some of the issues and challenges facing households with affordability issues. The survey found the following:

- 60% identified as male, 36% identified as female and 4% identified as transgender
- Most were between 45 and 64 years (68%), while 28% were between 25 and 44 and 4% were over 65
- While the majority were non-Aboriginal, Aboriginal individuals still represented more than two fifths of the individuals surveyed
- All of the individuals interviewed had been in Smithers for more than one year, and more than half identified as being from Smithers
- Three individuals interviewed (12%) had stayed in a shelter in the last 12 months
- Most respondents said their housing was not properly maintained, and while only 28% said their housing was unaffordable, nearly two thirds of respondents indicated that they paid more than 40% of their income toward shelter costs²
- Medical conditions affected 60% of respondents, while 44% had a mental health issue and 36% had a physical disability

Section 4: Key Informant Interview Findings

A number of agencies regularly come into contact with the homeless population were interviewed (see Appendix 1 for a list).

Service providers who were interviewed to provide context about homelessness in Smithers identified three core issues that represent significant challenges to the homeless population: housing affordability, service gaps and barriers and racism, discrimination and stigma. A discussion of these challenges can be found in Section 4, but the key themes are:

- Respondents felt that mental illness was vastly underreported, with stakeholders estimating rates of mental illness in the homeless population to be 40% or higher
- Rental allotments from income assistance programs are not sufficient to cover the cost of housing in the community

² Statistics Canada states that “A household paying 30% or more of its pre-tax income for housing is considered to have affordability problems.” <http://www.statcan.gc.ca/pub/75-001-x/11106/9519-eng.htm>

- Smithers struggles to provide services to vulnerable populations in the evenings and on weekends, leading to the use of costly emergency and crisis resources during those periods
- Respondents felt that racism results in discrimination against Aboriginal members of the homeless population

Section 5: Conclusions and Next Steps

The Homeless Count clearly demonstrates that a small portion of Smithers residents are in need of more significant services directed towards the challenges associated with homelessness. While the shelter is vital in meeting the short-term needs of this population, there are no medium or long-term supportive options in the town that can provide low-barrier, staffed support for individuals who are not ready to transition directly from the shelter to the private market. A significant proportion of the homeless population is entrenched (has been on the street for more than a year) and may need longer than the 15-day limit to stabilize.

While there are a number of services available to the homeless population in Smithers (in fact it serves as a regional service hub for many nearby communities), there are limitations and barriers with the services available.

- No long-term supportive or transitional housing
- Long waitlists for limited low-income housing
- Few services operate outside the 9am to 5pm hours
- There are no permanently funded outreach workers able to meet individuals where they are at
- Limited addictions treatment

Additionally not all services are low or no-barriers services, limiting how much the homeless population might access them.

The following areas represent promising areas for exploration in the development of new housing and services options for the homeless population in Smithers.³

- Housing first and supportive housing
- Inter-agency coordination and case management
- Permanent outreach workers
- Culturally responsive programming

In addition to exploring these, it is vital that homeless individuals be involved in the planning and development of new resources, as they will be most directly affected by any changes, for better or worse, to existing services and housing.

³ For more information on each of these sections please see Section 5: Conclusions and Next Steps

1. Introduction

This document presents the findings of the first Smithers Homeless Count. It provides an estimate of the Smithers homeless population *on one day* – November 28, 2014. It also provides results of key informant interviews, and the results of a survey of two meal programs hosted on November 28 and 29th, 2014. The Smithers Action Group Association (SAGA) commissioned the count so that it would have up to date information to assist with the development of new housing and service resources for the homeless population in Smithers.

1.1. Purpose and objectives

The 2014 Smithers Homeless Count was the first point-in-time count conducted in the Town of Smithers. The purpose of the Count was to provide:

- an enumeration of homeless persons in Smithers;
- a demographic profile of those enumerated on the day of the count;
- a demographic profile of some individuals who may be marginally housed
- a brief qualitative analysis of issues surrounding homelessness and poverty in Smithers

A point-in-time homeless count provides a useful quantitative data source for identifying the scope and scale of homelessness in any given community. It is a recognized and standardized approach to enumerating a homeless population and developing a demographic profile of the health issues, housing issues and services accessed by those without access to stable housing. A point-in-time count is beneficial because it can be replicated in the future, allowing for long-term changes and trends to be identified. This collection of data assists programs that serve the homeless and at-risk populations to better plan for the needs of these populations, and identify additional supports (e.g. supportive housing, outreach, etc.) that can help address and prevent homelessness.

In parallel with the count, a survey was developed for individuals who may be experiencing housing affordability issues. This was distributed at meal programs during the time of the count to identify issues that may be facing this population. This approach assumed that individuals accessing meal programs may be facing income issues, and therefore consequently housing affordability issues. The purpose of this survey was not to enumerate all individuals experiencing housing affordability issues, but rather to capture a small sample group of this population and identify their service needs and housing concerns.

Finally, the qualitative component of the project allowed key informants—local service providers who come into regular contact with the homeless and at-risk populations—to provide contextual insight into the issues and challenges around homelessness in Smithers at the time of the count.

1.2. Definitions

The count used the same definition of homeless that has been employed in homeless counts in other BC communities (e.g. Vancouver and Metro Vancouver). Someone was considered homeless for the purpose of this count if:

- they did not have a place of their own where they could expect to stay for more than 30 days and if they did not pay rent.

This included people who:

- had no physical shelter – staying on the street, in doorways, in parks/greenspace; or,
- were temporarily accommodated in emergency shelters, safe houses for youth, or transition houses for women and their children fleeing violence; or,
- were staying at a friend’s place where they did not pay rent; or,
- had no fixed address at a hospital/police station

Homelessness takes many forms, and any individuals who do not pay monthly rent (in the last thirty days) are considered homeless. For example, if an individual staying in a garage did not pay rent, they would be considered homeless, even if they considered the garage to be their home. Emergency shelters are not considered permanent housing, thus shelter clients are included in the homeless population (in many places throughout the report, shelter clients are a subsection of the larger analysis). Someone who stayed at a friend’s place (couch surfed) where they did not pay rent was also homeless for the purpose of this count, because they lacked security of tenure. People who were sofa surfing were included in the count *if we found them* (included as part of the *unsheltered* homeless population). Sofa surfers are significantly undercounted in most homeless counts. Similarly, families staying with other family members, but not paying rent, were not included if they did not visit a place where they could be counted.⁴

Unsheltered homeless - Consists of the street homeless (i.e. people who had no physical shelter, but stayed on the street, in doorways, and parks/greenspace) and people who were staying at a friend’s place where they did not pay rent (sofa surfing).

Sheltered homeless - Stayed in an emergency shelter, safe house or transition house for women and children fleeing violence.⁵

⁴ This definition of homelessness is used in the Metro Vancouver Homeless (see references for more information).

⁵ The shelter currently has a 15-day limit on stays, and clients at the transition house must meet certain criteria to be admitted.

Children - Young people under the age of 19 who were accompanied by a parent during the count.

1.3. Methods

Homeless Count

The Smithers 2014 Homeless Count used the same method as has been used in other communities across the province, such as Vancouver and Metro Vancouver. It measured homelessness from 12:01 am to 11:59 pm on November 28, 2014, and consisted of two components, nighttime and daytime, designed to enumerate the sheltered homeless and the unsheltered homeless. The same basic survey questions were used for each, with slight modifications based on context.

The nighttime component enumerated homeless individuals staying at emergency shelters, transition houses and safe houses overnight on November 27/28th. These individuals are referred to as the 'sheltered homeless'. Agency staff in shelters and transition houses used the nighttime questionnaire and shelter statistics form to gather the necessary data.

The daytime component enumerated homeless people encountered in pre-identified locations such as meal programs, drop in centres, some social services offices, parks, alleys and public spaces, who did not stay in emergency accommodation the night before, but may have slept outside, in a parkade or at someone else's place. People found in the daytime are referred to as the 'unsheltered homeless'. In advance of the count the Project Coordinator created a series of maps marking known locations frequented by potential respondents to guide interviewers in their assigned area.

Beginning in the morning (5:30am) on November 28, volunteer interviewers approached people in their assigned areas to request an interview. Individuals at these locations were asked a series of screening questions to determine if:

- a) they had already answered the survey; or,
- b) they had a place they pay rent for; or,
- c) they had stayed in emergency accommodation covered by the nighttime component.⁶

The interview ended if individuals answered yes to any of the above questions. If the interviewee agreed to participate and qualified for the survey, the interviewer proceeded to complete the questionnaire.

⁶ People who stayed in an overnight location covered by the nighttime component (shelter, safe house or transition house) were not re-interviewed.

Survey of Food Program Users

In addition to the homeless count survey, volunteers conducted a survey of food program users at two meal programs in Smithers on November 28th and 29th: the Salvation Army drop-in program and the St. James Soup Kitchen.

The purpose of surveying food program users was to gain broader insight into individuals or households who may be housed, but experiencing affordability issues. It was assumed that individuals or households accessing food programs were likely experiencing some form of income or affordability issues. The purpose of this survey was not to survey *all* households experiencing income or affordability issues, but to gain a snapshot of the needs and issues (e.g. housing conditions, service needs, etc.) facing those housed individuals and households who accessed the food programs.

Key Informant Interviews

Key informant interviews, conducted with professionals who come regularly into contact with the homeless and at-risk populations (e.g. service providers, mental health workers, bylaw officers, etc.), constituted an additional source of qualitative data. Interviews provided community and regional context to quantitative data, providing insight into the potential challenges facing homeless individuals in Smithers.⁷

⁷ For a complete list of key informants see Appendix 1.

1.4. Limitations

Homeless Count

All homeless counts underestimate the number of people who are homeless at any one time. The Smithers count is no different. It did not enumerate every homeless person in the town on November 28, 2014. Although every effort was made to enumerate all homeless people, it was not possible to assign volunteers to all parts of the town for an entire day; some people would be missed and some homeless people did not wish to be identified. Nor does this method count all people who were sofa surfing, as they are by their very nature, hidden. Notice of the Count was provided to service providers well in advance in an effort to spread the word and ensure that the hidden homeless were counted; however, this is a limitation faced by all homeless counts in BC and elsewhere.

The 2014 Count represents the first Smithers Homeless Count. It provides a baseline for future years; however, as the Count is repeated, methods of identifying where and when homeless individuals frequent could be developed to increase the volunteer coverage, and provide a more accurate count in time. It should also be noted that a point-in-time count, such as this, does not reflect the number of people who move in and out of homelessness over a longer period of time. The number of people that experience homelessness over the course of a year is much higher than the figure produced as part of this count.

Another major limitation is weather. The 2014 Count was conducted at the beginning of a significant cold snap, which service providers noted may have changed the number of visible homeless from even a week previous, as cold weather may drive the homeless to other coping strategies.

The homeless count is explicitly designed to avoid double counting. Screening questions eliminate those who have already been interviewed, who pay rent, or who stayed in a shelter, safe house or transition house where they were included in the night-time count. However, the survey is also voluntary; therefore individuals who do not want to participate are not included in the final count. Additionally, because all questions are voluntary, participants' willingness to be forthcoming about sensitive issues may impact the final results. A final limitation is rounding error. Because the total number of homeless individuals was 22 and the total interviewed for demographic data was 21, the percentages in the tables do not always add up to exactly 100%. This is simply rounding error.

Survey of Food Program Users

This survey is not intended to provide a comprehensive profile of individuals at-risk of homelessness, but instead provide additional understanding of individuals who may be facing affordability challenges. The survey therefore only makes conclusions about the particular population who responded to the survey, not to the broader population of individuals in Smithers who are facing affordability challenges.

Key Informant Interviews

The key informant interviews were limited in scope and length, due to the limited budget available.

2. Homeless Count Findings

There were 22 homeless individuals counted on November 28, 2014. Thirteen of these individuals, over 60%, were sheltered. However, eight individuals slept on the street on the night of November 27th, despite overnight temperatures of below -20°C. Additionally, there was one individual counted with No Fixed Address (NFA). No demographic data was available for this individual.

It is important to note that the ‘sheltered homeless’ were accessing short-term or emergency programs that *do not* represent a long-term shelter or housing solution.

2.1. Demographics

Men represented over three quarters of the homeless population counted in Smithers, and women less than one quarter. Women comprise a much larger share of the sheltered homeless population (30%) compared to the unsheltered homeless (13%). This indicates the importance of the Passage Transition House in addressing the emergency shelter needs of the women in Smithers.⁸

Table 1: Gender

| Gender | Unsheltered Homeless | | Sheltered Homeless | | Total | |
|--------|----------------------|------|--------------------|------|--------|------|
| | Number | % | Number | % | Number | % |
| Male | 7 | 88% | 9 | 69% | 16 | 76% |
| Female | 1 | 13% | 4 | 31% | 5 | 24% |
| Total | 8 | 100% | 13 | 100% | 21 | 100% |

⁸ Key informants also indicated that women may be more likely to find other ways of coping with a housing crisis which lead to them being part of the hidden homeless population. See Section 4 for further details.

Adults aged 25-44 years comprised the largest group of the homeless counted (62%) followed by those age 45-64 years (29%). However, the street population was much more likely to be part of the older cohort, with nearly two-thirds older than 45, while only one sheltered homeless person was older than 45.

Figure 1: Age

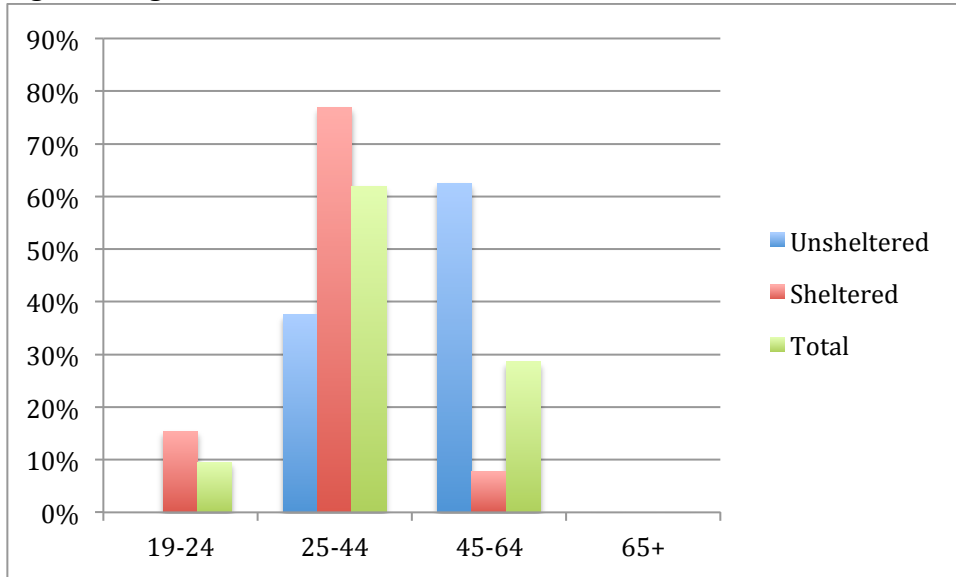
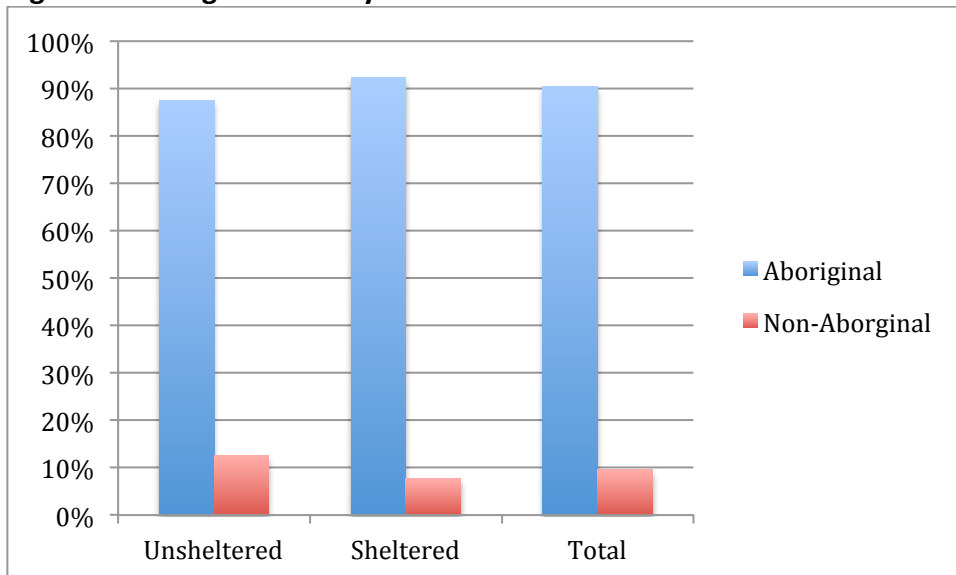


Figure 2 shows that almost all of (92%) of the Smithers homeless population identified as Aboriginal. Persons of Aboriginal identity are extremely over-represented among the Smithers homeless population, compared with the Smithers population (12%).⁹

Figure 2: Aboriginal identity



⁹ Statistics Canada, 2011.

2.2. Social and Community Connections

Of the eight individuals who were not sheltered the night before the count, four (50%) slept outside or in a vehicle, two slept at a friend’s house and two individuals slept elsewhere.

Table 2: Where the Unsheltered Slept

| | Number | % |
|-----------------|--------|------|
| Outside/vehicle | 4 | 50% |
| Friend's house | 2 | 25% |
| Other | 2 | 25% |
| Total | 8 | 100% |

When asked if they were with anyone, two unsheltered individuals responded that they were with their spouse and one indicated that they were with a friend. One sheltered individual indicated they were with their child, while two said they were with another relative.

Table 3: Social Connections¹⁰

| | Street | Shelter | Total |
|----------------|--------|---------|-------|
| Spouse/partner | 2 | 0 | 2 |
| Friend | 1 | 0 | 1 |
| Child | 0 | 1 | 1 |
| Relative | 0 | 2 | 2 |

¹⁰ Any table that does not have a row titled ‘Total’ was based on a question where multiple responses were allowed.

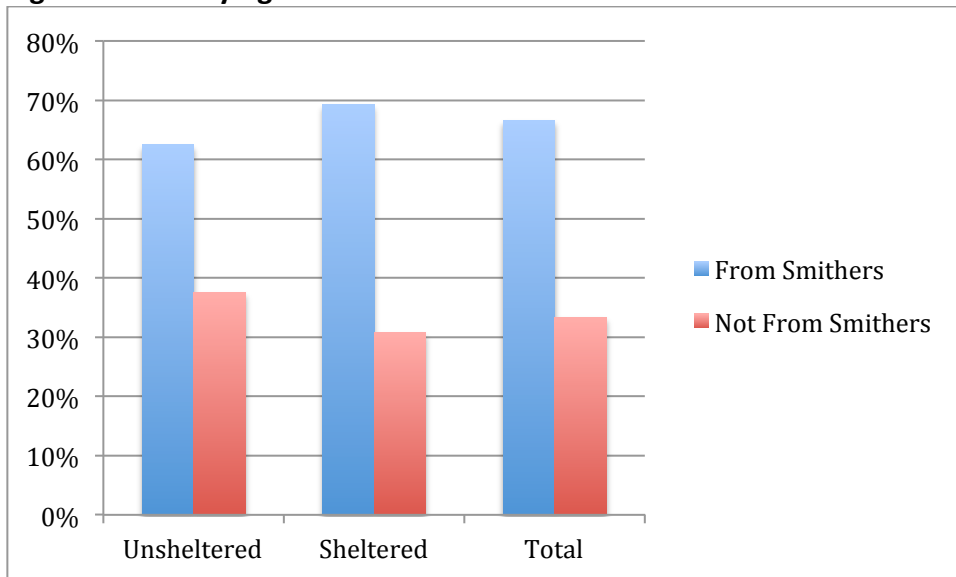
Eighty-one percent of the individuals interviewed had been in Smithers for more than a year, while two individuals (10%) had been in Smithers less than a week, and two individuals (10%) had been in Smithers for between a week and a year. This indicates that the bulk of the homeless population, both sheltered and unsheltered, are longer-term residents of Smithers, and as indicated in Table 7, many consider themselves to be from Smithers.

Table 4: Length of time in Smithers

| | Unsheltered Homeless | | Sheltered Homeless | | Total | |
|--|----------------------|------|--------------------|------|--------|------|
| | Number | % | Number | % | Number | % |
| One week or less | 1 | 13% | 1 | 8% | 2 | 10% |
| More than one week, less than one year | 0 | 0% | 2 | 15% | 2 | 10% |
| 1 to 5 years | 1 | 13% | 1 | 8% | 2 | 10% |
| 6 to 10 years | 1 | 13% | 1 | 8% | 2 | 10% |
| 11 to 15 years | 1 | 13% | 1 | 8% | 2 | 10% |
| 16 to 20 years | 0 | 0% | 1 | 8% | 1 | 5% |
| 20 years or more | 4 | 50% | 6 | 46% | 10 | 48% |
| Total | 8 | 100% | 13 | 100% | 21 | 100% |

More than two-thirds of the individuals surveyed self-identified as being from Smithers. For both the sheltered and unsheltered populations the balance was relatively similar, with less than 69% of the unsheltered population identifying as from Smithers, and 63% of the sheltered population identifying as from Smithers.

Figure 3: Identifying as from Smithers



When asked where individuals had been before Smithers there was a wide range of responses. Most (57%) had been in another BC community prior to Smithers, while several had come from other Canadian cities (one from Montreal, one from Saskatoon).

Table 5: Living before Smithers

| Unsheltered Homeless | | | Sheltered Homeless | | | Total | | |
|----------------------|--------|------|--------------------|--------|------|-------------|--------|------|
| | Number | % | | Number | % | | Number | % |
| Fort Babine | 2 | 33% | Hazelton | 1 | 11% | Hazelton | 1 | 7% |
| Montreal | 1 | 17% | Houston | 1 | 11% | Houston | 1 | 7% |
| Moricietown | 2 | 33% | Moricietown | 2 | 22% | Moricietown | 4 | 27% |
| | | | Prince | | | Prince | | |
| Terrace | 1 | 17% | George | 1 | 11% | George | 1 | 7% |
| Total | 6 | 100% | Saskatoon | 1 | 11% | Saskatoon | 1 | 7% |
| | | | Terrace | 1 | 11% | Terrace | 2 | 13% |
| | | | Victoria | 1 | 11% | Victoria | 1 | 7% |
| | | | No answer | 1 | 11% | No answer | 1 | 7% |
| | | | | 9 | 100% | Montreal | 1 | 7% |
| | | | | | | Fort Babine | 2 | 13% |
| | | | | | | | 15 | 100% |

2.3. Access to Housing

Eighty six percent of the individuals interviewed had made use of a shelter in the last 12 months (prior to the count). Three quarters of the unsheltered homeless population and 92% of the sheltered population had used a shelter.

Table 6: Stayed in a shelter

| | Unsheltered Homeless | | Sheltered Homeless | | Total | |
|-------|----------------------|------|--------------------|------|--------|------|
| | Number | % | Number | % | Number | % |
| Yes | 6 | 75% | 12 | 92% | 18 | 86% |
| No | 2 | 25% | 1 | 8% | 3 | 14% |
| Total | 8 | 100% | 13 | 100% | 21 | 105% |

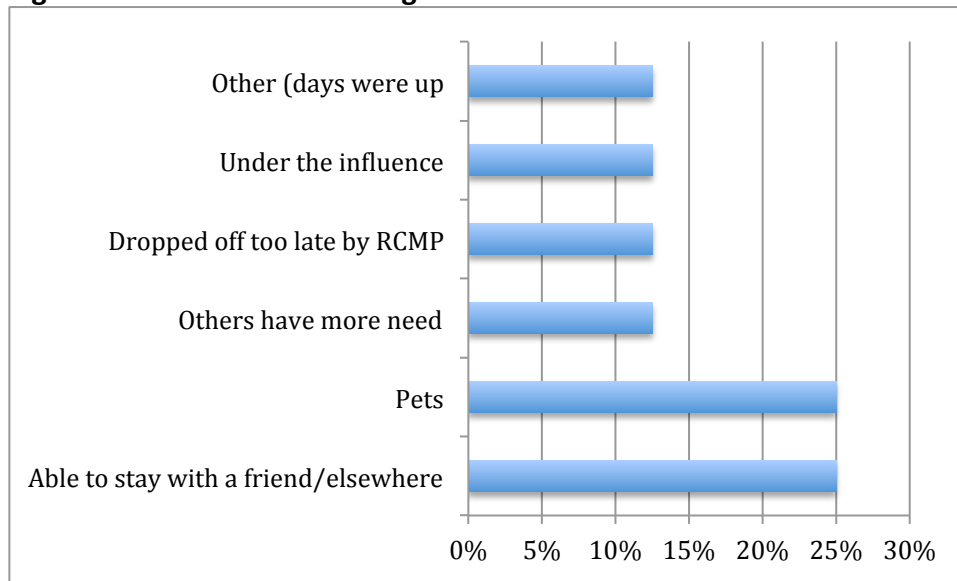
For the majority (81%), the shelter they'd stayed at was located in Smithers, while one individual had stayed at the shelter in Terrace and one had stayed at a Victoria shelter. Individuals were allowed to provide more than one answer to this question, which is why the total number of unsheltered homeless totals 7, even though only 6 stayed in a shelter.

Table 7: Location of Shelter

| | Unsheltered Homeless | | Sheltered Homeless | | | Total | | |
|----------|----------------------|-----|--------------------|--------|-----|-----------|--------|-----|
| | Number | % | | Number | % | | Number | % |
| Smithers | 6 | 75% | Smithers | 11 | 85% | Smithers | 17 | 81% |
| Terrace | 1 | 13% | Victoria | 1 | 8% | Victoria | 1 | 5% |
| | | 13% | No answer | 1 | 8% | Terrace | 1 | 5% |
| | | | | | | No answer | 2 | 10% |

Twenty five percent of the sheltered homeless said they did not stay in a shelter because they were able to stay with a friend for the evening and therefore did not need to stay in a shelter, while another twenty five percent said that they did not stay at a shelter due to pets. One individual said others have more need, one individual was intoxicated, and one individual said that they were dropped off too late by the RCMP. One individual did not access the shelter because their days were up.

Figure 4: Reasons for not using shelter



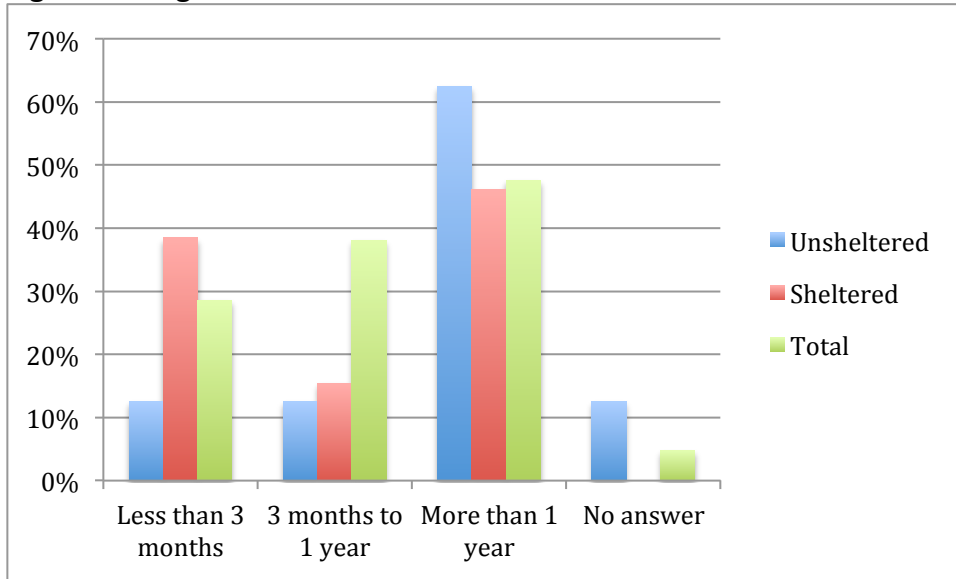
Seventy-one percent of the individuals interviewed had been homeless for more than three months, while two individuals (10%) had been homeless less than one month, and four individuals (19%) had been homeless for between one and three months. Over half the population has been homeless for more than a year.

Table 8: Length of time homeless

| | Unsheltered Homeless | | Sheltered Homeless | | Total | |
|----------------------|----------------------|-------------|--------------------|-------------|-----------|-------------|
| | Number | % | Number | % | Number | % |
| Less than one month | 1 | 13% | 1 | 8% | 2 | 10% |
| One to three months | 0 | 0% | 4 | 31% | 4 | 19% |
| Three to six months | 0 | 0% | 1 | 8% | 1 | 5% |
| Six months to a year | 1 | 13% | 1 | 8% | 3 | 14% |
| One to three years | 4 | 50% | 3 | 23% | 6 | 29% |
| Three to five years | 1 | 13% | 2 | 15% | 3 | 14% |
| More than five years | 0 | 0% | 1 | 8% | 1 | 5% |
| No Answer | 1 | 13% | 0 | 0% | 1 | 5% |
| Total | 8 | 100% | 13 | 100% | 21 | 100% |

The unsheltered homeless population is far more likely to have been homeless for a long period of time, while the sheltered population has a much higher proportion of individuals who have been homeless for less than 3 months. Sixty three percent of the street homeless had been homeless for more than a year, compared with only 46% of the sheltered population. This indicates that the bulk of the unsheltered homeless population is likely to be ‘street-entrenched’ and in need of services and supports that work with this sometimes hard to house population, while nearly half of the sheltered population are also street-entrenched.

Figure 5: Length of time homeless



Determining the cause of homelessness is difficult, given its complex and multi-dimensional nature. It is particularly challenging to capture a meaningful response in a survey setting. However, the survey asked respondents for the main reasons why they did not have their own home. The question was open-ended; interviewers could write a brief response in their own words. As expected, survey participants cited a range of reasons. The largest share reported that their homelessness was due to lack of income (43%), while others indicated that family conflict or breakdown (38%), the high cost of rent (33%), poor housing conditions (33%), addiction (29%), pets (14%), lack of income assistance (14%), discrimination (14%), eviction (10%), mental health issues (5%) or conflict with the law (5%) were the cause of their homelessness. Nine individuals indicated an ‘other’ reason for homelessness, which often overlapped with an existing category (e.g. addiction, abuse, etc.).

Table 9: Reason for being homeless

| | Unsheltered Homeless | | Sheltered Homeless | | Total | |
|---------------------------------|----------------------|-----|--------------------|-----|--------|-----|
| | Number | % | Number | % | Number | % |
| Income too low | 1 | 13% | 8 | 62% | 9 | 43% |
| Evicted | 0 | 0% | 2 | 15% | 2 | 10% |
| No income/no income assistance | 2 | 25% | 1 | 8% | 3 | 14% |
| Addiction | 0 | 0% | 6 | 46% | 6 | 29% |
| Rent too high | 1 | 13% | 6 | 46% | 7 | 33% |
| Mental health issues | 0 | 0% | 1 | 8% | 1 | 5% |
| Family breakdown/abuse/conflict | 0 | 0% | 8 | 62% | 8 | 38% |
| Conflict with the law | 0 | 0% | 1 | 8% | 1 | 5% |
| Pets | 2 | 25% | 1 | 8% | 3 | 14% |
| Poor housing conditions | 3 | 38% | 4 | 31% | 7 | 33% |
| Discrimination | 0 | 0% | 3 | 23% | 3 | 14% |
| Other | 1 | 13% | 8 | 62% | 9 | 43% |

2.4. Service Needs

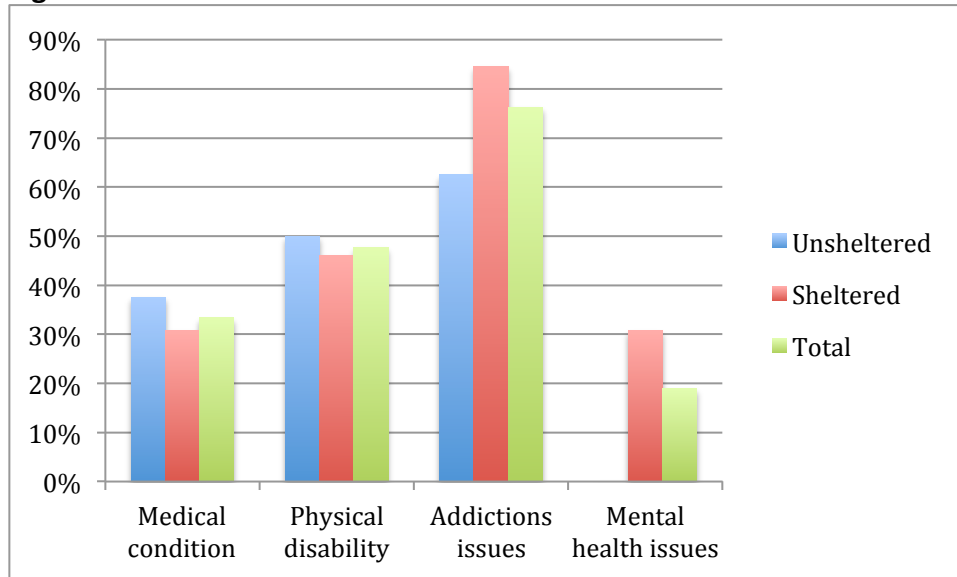
Table 10 shows the services accessed over the last 30 days by homeless individuals. Meal programs were the service used most frequently and they were used by 76% of the respondents, followed by a drop-in program (62%), the hospital (non-emergency) (52%), the emergency room (43%) and a health clinic (43%). Twenty-four percent also accessed the ambulance, employment services and addiction services, respectively, while 19% of participants used mental health service. Ten percent of respondents used a dental clinic, while five percent used parole/ex offender service and legal services respectively.

Table 10: Service Needs

| | Unsheltered Homeless | | Sheltered Homeless | | Total | |
|----------------------------------|----------------------|-----|--------------------|-----|--------|-----|
| | Number | % | Number | % | Number | % |
| Ambulance | 3 | 38% | 2 | 15% | 5 | 24% |
| Emergency Room | 3 | 38% | 6 | 46% | 9 | 43% |
| Hospital (non-emergency) | 6 | 75% | 5 | 38% | 11 | 52% |
| Dental clinic | 1 | 13% | 1 | 8% | 2 | 10% |
| Mental health services | 1 | 13% | 3 | 23% | 4 | 19% |
| Addiction services | 1 | 13% | 4 | 31% | 5 | 24% |
| Employment/job help | 2 | 25% | 3 | 23% | 5 | 24% |
| Parole/ex-offender services | 0 | 0% | 1 | 8% | 1 | 5% |
| Drop-in | 5 | 63% | 8 | 62% | 13 | 62% |
| Meal program/soup kitchen | 6 | 75% | 10 | 77% | 16 | 76% |
| Health clinic | 4 | 50% | 5 | 38% | 9 | 43% |
| Newcomer services | 0 | 0% | 1 | 8% | 1 | 5% |
| Transitional housing | 0 | 0% | 2 | 15% | 2 | 10% |
| Housing help/eviction prevention | 0 | 0% | 5 | 38% | 5 | 24% |
| Outreach | 1 | 13% | 4 | 31% | 5 | 24% |
| Legal | 0 | 0% | 1 | 8% | 1 | 5% |

Addiction was the most common health issue reported. More than three quarters (76%) of the homeless people interviewed had an addiction. The next most common health problem was a physical disability (48%), followed by a medical condition (33%). Only nineteen percent reported a mental health issue. Addictions issues were higher among the sheltered population, and diagnosed mental health issues was significantly higher, with no self-reported mental health issues amongst the unsheltered population. However, this could indicate whether an individual has been diagnosed or not.¹¹

Figure 6: Health conditions



¹¹ See discussion in Section 4 of mental health issues.

Respondents were asked to identify their sources of income, with more than one being possible. Panhandling was the most frequent response (38%), followed by income assistance (33%), and disability benefit (29%). Other common income sources were binning (24%), part-time work (14%), full-time work (10%), CPP (5%) or money from family and friends (5%). 10% of respondents said they had no income.

Table 11: Sources of income

| | Unsheltered Homeless | | Sheltered Homeless | | Total | |
|------------------------------------|----------------------|-----|--------------------|-----|--------|-----|
| | Number | % | Number | % | Number | % |
| Welfare/income assistance | 3 | 38% | 4 | 31% | 7 | 33% |
| Panhandling | 1 | 13% | 7 | 54% | 8 | 38% |
| Disability benefit | 3 | 38% | 3 | 23% | 6 | 29% |
| Binning/bottles | 3 | 38% | 2 | 15% | 5 | 24% |
| Employment insurance | 1 | 13% | 1 | 8% | 2 | 10% |
| Youth agreement | 0 | 0% | 0 | 0% | 0 | 0% |
| Money from family/friends | 0 | 0% | 1 | 8% | 1 | 5% |
| Job full-time | 2 | 25% | 0 | 0% | 2 | 10% |
| Job part-time | 2 | 25% | 1 | 8% | 3 | 14% |
| Old age security/guaranteed income | 0 | 0% | | | | 0% |
| CPP or other pension | 1 | 13% | 0 | 0% | 1 | 5% |
| No income | 2 | 25% | 0 | 0% | 2 | 10% |
| Other | 2 | 25% | 1 | 8% | 3 | 14% |

3. Survey of Food Program Users

Twenty-five individuals were surveyed regarding their housing conditions at local meal programs. The purpose of this survey was to identify key issues for individuals who may be at risk of homelessness or marginally housed.

3.1. Demographics

Men represented sixty percent of the food program users counted in Smithers, and women just over one third. One person (4%) indicated they are transgender.

Table 12: Gender

| | Number | % |
|-------------|--------|------|
| Male | 15 | 60% |
| Female | 9 | 36% |
| Transgender | 1 | 4% |
| Total | 25 | 100% |

Adults aged 45-64 years comprised the largest group of the food program users counted (68%) followed by those age 25-44 years (28%). Only one individual was over the age of 65, and no children or youth were interviewed.

Figure 7: Age

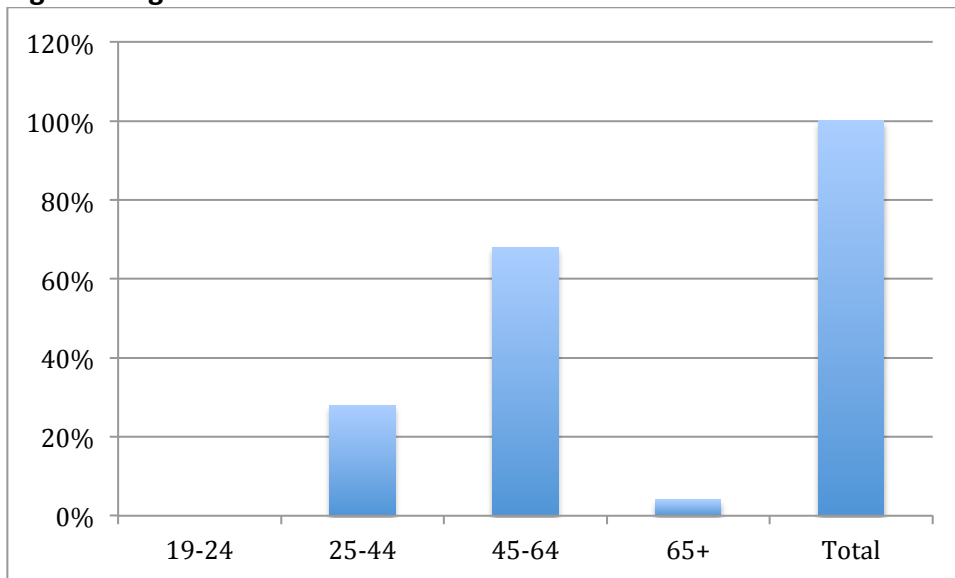
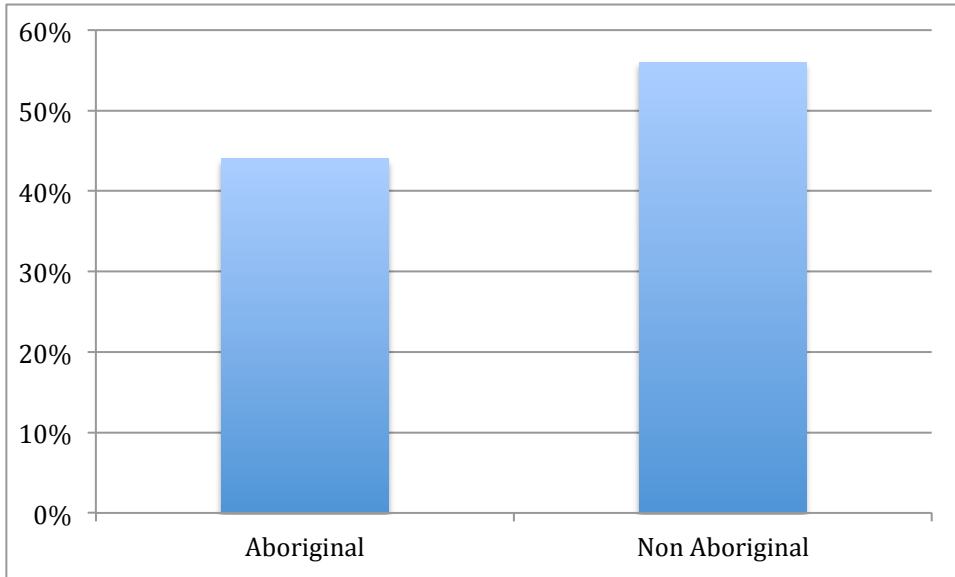


Figure 8 shows that many of food program users (44%) identified as Aboriginal. Persons of Aboriginal identity are extremely over-represented among this group, compared with the Smithers population (12%).¹²

Figure 8: Aboriginal identity



¹² Statistics Canada. Community Profile. Town of Smithers. 2011 Census.

3.2. Social and Community Connections

When asked if they were with anyone, three individuals responded that they were with their spouse and one indicated that they were with a child. Three individuals indicated they were with someone else.

Table 13: Social connections

| | Number | % |
|----------------|---------------|----------|
| Spouse/partner | 3 | 12% |
| Child | 1 | 4% |
| Other | 3 | 12% |

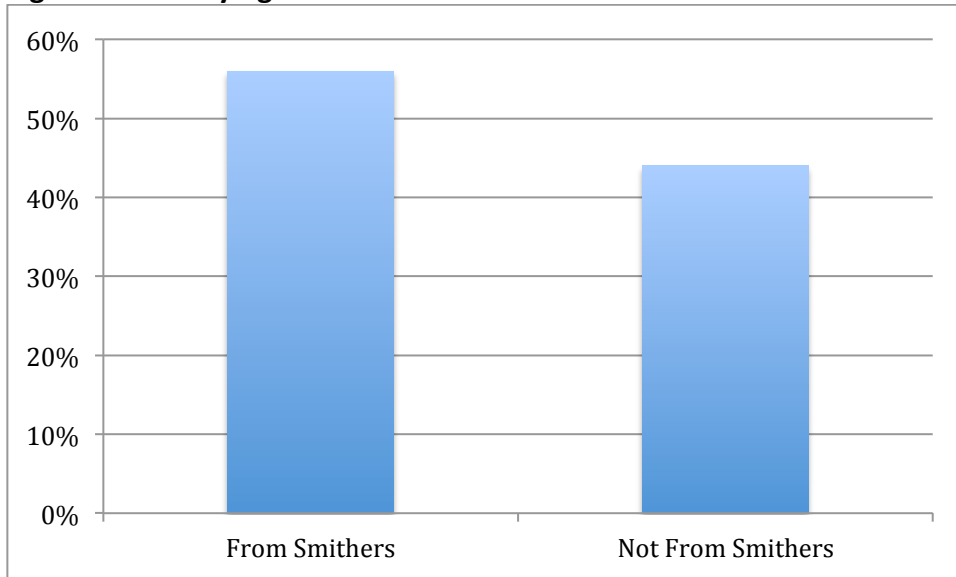
All of the individuals interviewed had been in Smithers for more than a year, while only 12% had been in Smithers for less than five years. This indicates that all of the population using food programs are long-term residents of Smithers, and more than half of the survey participants (56%) identified as being from Smithers.

Table 14: Length of time in Smithers

| | Number | % |
|--------------------|--------|------|
| Less than one year | 0 | 0% |
| 1-5 years | 3 | 12% |
| 6-10 years | 5 | 20% |
| 11-15 years | 3 | 12% |
| 16-20 years | 2 | 8% |
| 20 years or more | 12 | 48% |
| Total | 25 | 100% |

Fifty-six percent of respondents identified as being from Smithers, while 44% said they were not from Smithers.

Figure 9: Identifying as From Smithers



When asked where individuals had been before Smithers there was a wide range of responses. Most (52%) had been in another BC community prior to Smithers, while several had come from other Canadian communities (Montreal, Nova Scotia, Saskatchewan and Toronto), while one had come from Finland.

Table 15: Living before Smithers

| | Number | % |
|-----------------|--------|-----|
| Burns Lake | 1 | 4% |
| Calgary | 1 | 4% |
| DKNA | 1 | 4% |
| Finland | 1 | 4% |
| Kispiox | 1 | 4% |
| Lower Mainland | 2 | 8% |
| Moricetown | 4 | 16% |
| New Westminster | 1 | 4% |
| Nova Scotia | 1 | 4% |
| Okanagan | 1 | 4% |
| Saskatchewan | 1 | 4% |
| Surrey | 1 | 4% |
| Toronto | 1 | 4% |
| Vancouver | 1 | 4% |

3.3. Housing Conditions

Twelve percent of the individuals surveyed had made use of a shelter in the last 12 months (prior to the count), while 88% had not stayed in a shelter. One person responded that the shelter was in Smithers, while the other two did not provide a shelter location.

Table 16: Stayed in a shelter

| | Number | % |
|-------|--------|------|
| Yes | 3 | 12% |
| No | 22 | 88% |
| Total | 25 | 100% |

The large majority of survey participants (80%) had been in their home for more than 6 months. Two individuals (8%) had been in their current housing for less than a month, and three individuals had been there for between one and three months.

Table 17: Time in current housing

| | Number | % |
|--------------------|--------|------|
| <1 month | 2 | 8% |
| 1-3 months | 3 | 12% |
| 3-6 months | 0 | 0% |
| More than 6 months | 20 | 80% |
| Total | 25 | 100% |

Eighty percent of survey respondents said their housing was adequately sized for their household, while 16% said it was not. One individual did not answer this question.

Table 18: Is your current housing big enough for you and your household?

| | Number | % |
|-----------|--------|------|
| Yes | 20 | 80% |
| No | 4 | 16% |
| No answer | 1 | 4% |
| Total | 25 | 100% |

Sixty percent of respondents felt their housing was not properly maintained, while 32% said it was. Two individuals did not answer.

Table 19: Is it properly maintained?

| | Number | % |
|-----------|--------|------|
| Yes | 8 | 32% |
| No | 15 | 60% |
| No answer | 2 | 8% |
| Total | 25 | 100% |

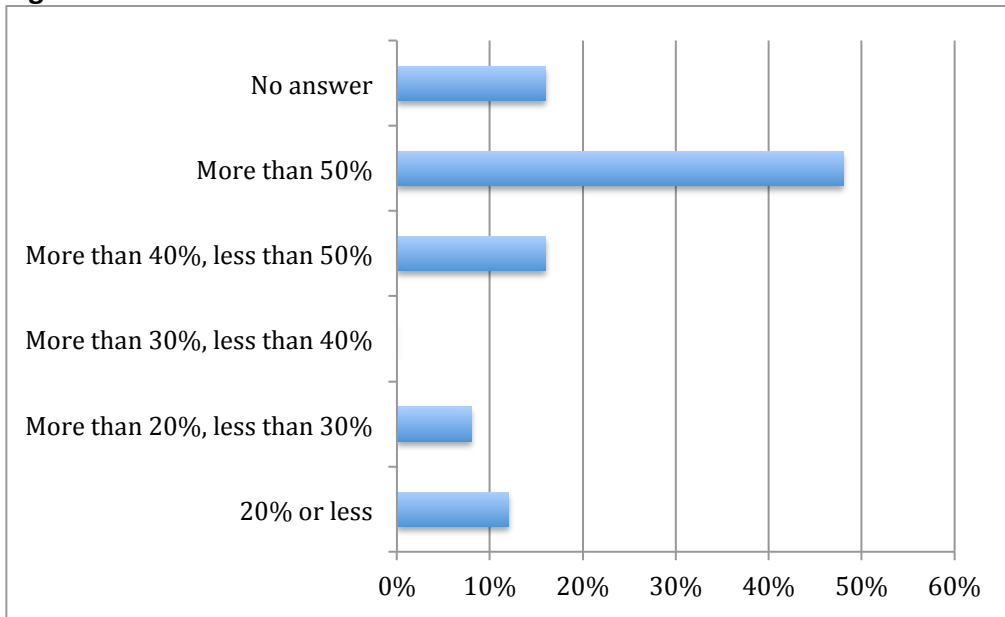
Nearly two-thirds of survey respondents (64%) felt their housing was affordable. However, as Table 20 shows, a large majority of respondents pay a high proportion of their income toward rent.

Table 20: Is it affordable?

| | Number | % |
|-----------|--------|------|
| Yes | 16 | 64% |
| No | 7 | 28% |
| No answer | 2 | 8% |
| Total | 25 | 100% |

Nearly two-thirds of survey respondents (64%) pay 40% or more of their income toward rent. Almost half (48%) pay more than 50% of their income toward rent. This indicates that the majority of households are having issues with affordable housing, and may be in core housing need.¹³

Figure 10: Income toward rent



¹³ Statistics Canada states that “A household paying 30% or more of its pre-tax income for housing is considered to have affordability problems.” <http://www.statcan.gc.ca/pub/75-001-x/11106/9519-eng.htm>

A range of reasons were given as to why better housing could not be secured; however, the two most significant responses were that the individuals did not have enough income (64%) and that rents were too high (64%). Other reasons include mental health issues (20%), family breakdown/abuse (16%) and pets (12%). Some participants also noted that discrimination (8%), poor housing conditions (8%), no income assistance (8%), addiction (8%) and eviction (4%) were contributing factors to their current housing situation. Eight percent of participants (two individuals) said they were satisfied with their current housing.

Table 21: Reasons for not finding other housing

| | Number | % |
|---------------------------------|--------|-----|
| Income too low | 16 | 64% |
| Evicted | 1 | 4% |
| No income/no income assistance | 2 | 8% |
| Addiction | 2 | 8% |
| Rent too high | 16 | 64% |
| Mental health issues | 5 | 20% |
| Family breakdown/abuse/conflict | 4 | 16% |
| Conflict with the law | | 0% |
| Pets | 3 | 12% |
| Poor housing conditions | 2 | 8% |
| Discrimination | 2 | 8% |
| Satisfied with housing | 2 | 8% |

3.4. Service Needs

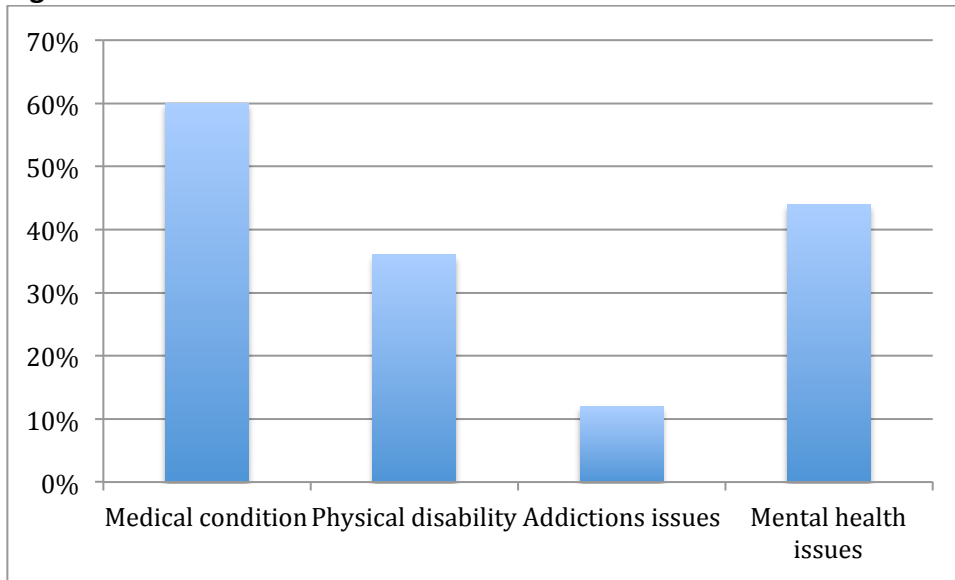
Table 30 shows that meal programs were the service used most frequently and they were used by 64% of the respondents, followed by a drop-in program (52%), the emergency room (44%), hospital (non-emergency) (32%), a health clinic (28%), and mental health services (28%). Sixteen percent also accessed the ambulance and employment services. Eight percent of respondents accessed a dental clinic, addiction services, newcomer services, housing help/eviction prevention services or outreach. Four percent accessed transitional housing or another service type.

Table 22: Service Needs

| Services Used | Number | % |
|----------------------------------|--------|-----|
| Ambulance | 4 | 16% |
| Emergency Room | 11 | 44% |
| Hospital (non-emergency) | 8 | 32% |
| Dental clinic | 2 | 8% |
| Mental health services | 7 | 28% |
| Addiction services | 2 | 8% |
| Employment/job help | 5 | 20% |
| Parole/ex-offender services | 2 | 8% |
| Drop-in | 13 | 52% |
| Meal program/soup kitchen | 16 | 64% |
| Health clinic | 7 | 28% |
| Newcomer services | 2 | 8% |
| Transitional housing | 1 | 4% |
| Housing help/eviction prevention | 2 | 8% |
| Outreach | 2 | 8% |
| Legal | 4 | 16% |
| Other | 1 | 4% |

A medical was the most common health issue. Sixty percent of the individuals interviewed had a medical condition. The next most common health problem was a mental health issue (44%), followed by a physical disability (36%). Only twelve percent reported an addiction issue. Self-reported mental health issues are higher amongst this housed group than the homeless population; however, this likely does not indicate actual rates of mental illness, but rather indicates that a housed individual is far more likely to be diagnosed.

Figure 11: Health conditions



Respondents were asked to identify their sources of income, with more than one being possible. Disability benefit was the most frequent response (48%), followed by a part time job (44%), welfare (28%) and a full-time job (20%). Other sources of income included binning (16%), CPP or other pension (12%), another form of income (12%, money from friends or family (8%), employment insurance (4%), or old age security (4%). Eight percent of participants stated that they had no source of income.

Table 23: Sources of income

| Income Sources: | Number | % |
|------------------------------------|--------|-----|
| Welfare/income issues | 7 | 28% |
| Panhandling | 0 | 0% |
| Disability benefit | 12 | 48% |
| Binning/bottles | 4 | 16% |
| Employment insurance | 1 | 4% |
| Youth agreement | 0 | 0% |
| Money from family/friends | 2 | 8% |
| Job full-time | 5 | 20% |
| Job part-time | 11 | 44% |
| Old age security/guaranteed income | 1 | 4% |
| CPP or other pension | 3 | 12% |
| No income | 2 | 8% |
| Other | 3 | 12% |

4. Key Informant Interviews

4.1. Organizations Interviewed

Individuals from six organizations were interviewed for this report. The following organizations were selected because they have significant contact with the homeless and at-risk population:

- **Passage Transition House:** Run by the Northern Society for Domestic Peace, this facility currently serves women and children in crisis or fleeing abuse, and is a level 3 foster care facility for MCFD youth and teens.
- **Salvation Army:** A faith-based charity, the Salvation Army provides a thrift store, drop-in centre, advocacy for clients, and church services on Sunday mornings. They serve a wide variety of individuals, including low-income seniors, large families, and homeless individuals.
- **Broadway Shelter:** Run by the Smithers Community Services Association, this 9-bed facility provides year-round emergency shelter services to Smithers' homeless population, including 3 meals a day for clients. The shelter also offers 2 additional extreme weather beds available during winter months. The shelter also has a short-term outreach worker position, created during the winter of 2014-15.
- **Town of Smithers Bylaw and Community Policing Officer:** The Bylaw and Community Policing Officer often comes into contact with the homeless population due to complaints and works proactively alongside other organizations to ensure that their needs are met.
- **Positive Living North:** An organization working with individuals with HIV or Hepatitis C, PLN primarily offers support navigating the health system. However, PLN also offers have a food program, drop-in, hosts group meetings for people with HIV or Hep C, and acts as a portal to other services (addictions, legal, housing). PLN in Smithers also maintains connections with the Prince George branch and connects clients who may need to travel to that branch.
- **Mental Health and Addiction, Northern Health:** Northern Health Authority serves Northern British Columbia. Their Mental Health and Addiction team provides a range of services, including crisis intervention, referrals, education and assistance in navigating the system.

4.2. Homelessness in Smithers

There is a range of services available to homeless individuals in Smithers. The following organizations were listed by key informants as agencies that regularly come into contact with homeless individuals:

- Positive Living North
- Bulkley Valley Brain injury Association
- Northern Health, Mental Health and Addiction
- Dze L K'ant Friendship Centre
- Salvation Army
- St. James Soup Kitchen
- Smithers Action Group Association
- High Road Services Society
- RCMP—daily contact with the homeless population

Additionally there are two emergency shelter options and one low-income family housing development in Smithers:

- Broadway Shelter, operated by Smithers Community Services Association
- Passage Transition House operated by Northern Society for Domestic Peace
- Alpine Court Family Housing operated by Smithers Community Services Association

Only one woman was identified as unsheltered homeless during the count, while four were identified as sheltered. This may indicate the important role of the Passage Transition House in supporting women at-risk or experiencing homelessness. It may also indicate that women find other coping strategies when facing homelessness that positions them in the hidden homeless population, rather than visible on the street. Research has shown that women are much more likely to barter sex for access to shelter and protection, while men are generally more visible on the street and in shelters.¹⁴

¹⁴ Novac *et al.*, 2002.

4.3. Service Usage Rates

During 2014, the shelter usage rate varied from about 53% (July and August) to 95% on a month-by-month basis. Summer months typically saw lower usage, while winter months saw greater usage. The night of the shelter count, the shelter was 100% full.

Table 33: Shelter Usage Rates

| Reporting Period | Occupancy Rate |
|---------------------------------------|----------------|
| Jan-14 | 74% |
| Feb-14 | 95% |
| Mar-14 | 77% |
| Apr-14 | 71% |
| May-14 | 65% |
| Jun-14 | 64% |
| Jul-14 | 53% |
| Aug-14 | 53% |
| Sep-14 | 66% |
| Oct-14 | 63% |
| Nov-14 | 55% |
| Dec-14 | 63% |
| Count Night (November 27, 2014) | 100% |

Source: BC Housing

4.4. Issues Facing the Homeless Population

Mental Health and Addictions Issues

Key informants noted that most homeless individuals in Smithers have either a mental illness or addiction. While the homeless count found that only 20% of respondents self-reported a mental illness, all key informants felt that this was low, attributing the figure to a lack of diagnosis for many street-entrenched individuals. Estimates of mental illness in the homeless population by service providers were 40% or higher. These included both severe and persistent mental health issues (e.g. schizophrenia), as well as other significant mental health issues (e.g. depression).

Individuals with concurrent disorders are particularly difficult to house, and require significant support services. Landlords are unlikely or unwilling to rent to individuals with a bad reputation, and in a smaller community like Smithers, a negative history of housing can quickly make it difficult or impossible for an individual to find housing. Many of the key informants noted the importance of the Broadway Shelter's Outreach Worker in helping individuals with mental illness or an addiction to access and maintain housing. It has been found that this type of support can have a significant impact on long-term housing outcomes for homeless individuals.¹⁵

Additionally, the homeless and individuals with a mental illness or addiction are often stigmatized, which may further lead to their withdrawal from accessing services or support.

Housing Affordability

Housing affordability also represents a significant challenge for the homeless population. Although rents are comparatively less expensive than many urban areas, the cost of even a one-bedroom is well above income assistance shelter allotments (\$375/month). Key informants estimated the cost of a one-bedroom apartment at between \$600 and \$1000 per month, and between \$1,400 and \$1,500 for a two-bedroom unit.

Several key informants noted that housing has gotten more significantly more expensive over the last five to ten years. Although some felt that the low vacancy rate was relatively new while others felt that it had existed for some time, all agreed that the low availability of rental housing represented a significant challenge for both the homeless and at-risk populations in Smithers.

Service Barriers and Gaps

While Smithers is fortunate to have a number of organizations currently serving the homeless population, another key issue facing the homeless is that many services are not readily available, while others may not provide a low-barrier environment. Key informants noted that very little is available for the homeless in the evenings and on the

¹⁵ Eberle *et al.* 2011.

weekends, and pointed out that many crises can occur during the evening or at night. In some cases the environment in which services are offered may create barriers for certain individuals: the presence of mental health and addictions offices in the Smithers courthouse, for example, may discourage individuals with a criminal record from accessing those vital services.

Other service barriers and gaps include:

- No permanent outreach workers (either from a non-profit or Northern Health) to meet individuals where they are at
- Long waitlists for limited low-income housing
- Few drop-in resources for challenging individuals
- Limited addictions treatment
- No supportive housing or permanent support workers
- No accessible housing subsidy programs
- No home for teen mothers

Racism, Discrimination and Stigma

Many key informants also felt that racism and discrimination are a major issue for the homeless population. *It should be emphasized that 90% of the homeless population identifies as Aboriginal.* As stated previously, individuals who identify as Aboriginal are extremely over-represented in the homeless population when compared to the Smithers population (12% identify as Aboriginal).¹⁶ With 90% of the homeless population identifying as Aboriginal, this level of disparity signifies a more systemic issue than can be addressed through increased access to housing and services, but it is an important aspect of the present inequality and needs to be acknowledged.¹⁷

¹⁶ Statistics Canada, 2011.

¹⁷ This research is not specifically oriented toward issues of colonialism and discrimination against First Nations and Aboriginal peoples; however, a significant body of literature exists addressing this particular issue, and the Homeless Hub provides a significant list of resources on the issue: <http://www.homelesshub.ca/about-homelessness/population-specific/aboriginal-peoples>

4.5. Cross-Sectoral Roles and Responsibilities

Local Government

Key informants felt that the Town of Smithers has been largely supportive of addressing housing and homelessness within the Town. Two key roles for the Town include playing a facilitating role (including local stakeholders and higher levels of government) and helping establish dialogue around key issues, such as the stigma around homelessness and discrimination. In many ways, the town can act as a hub connecting those who work on the frontlines and the homeless themselves with the broader community who may be unaware of the issues that service workers see on a daily basis.

An additional key role for local government is to act as an advocate to higher levels of government (the provincial and federal governments), working directly with senior government agencies and officials and also through venues such as the Union of BC Municipalities (UBCM).

Senior Government

Provincial and federal governments were seen as responsible for providing appropriate resources to address homelessness and issues such as mental health and addiction. Currently, key informants see Smithers as underserved by the provincial government when it comes to appropriate housing measures (e.g. supportive housing or housing subsidies) and social services (e.g. mental health outreach workers). Key informants saw greater resources directed toward these issues as a win-win, as prevention can reduce health care and police costs.

Local Business

Key informants also saw a role for local businesses, with many already contributing resources, time, or other supports to local service agencies. Working with local business to educate the public regarding homelessness and their needs would also be a win-win, as it would strengthen public safety, while also raising awareness of the issues faced by the homeless population.

The Homeless Population

Finally, there is a key role for the homeless themselves to play in planning any new services or housing initiatives and in the broader process of public education. Ultimately they will be the ones served by any new supportive housing or outreach services, and including them in the development of these initiatives will ensure their needs will be met.

5. Conclusions and Next Steps

The 2014 Smithers Homeless Count clearly demonstrates that a portion of Smithers residents do not have access to stable housing and are in need of significant support services in order to address the challenges that contribute to and arise from housing instability. Much of the homeless population is entrenched, and may have significant service or support needs to address health concerns. While there are a number of effective agencies and programs addressing issues associated with homelessness in Smithers, it is a small community and there are limitations to the programs and services that agencies can deliver. The following gaps emerge from the research findings:

- Smithers lacks a medium to long-term supportive housing option that can be a 'next step' after the shelter
- Services are currently limited to a 'bank hours' model of delivery, meaning that during evenings and weekends, homeless individuals do not have ready access to services beyond costly crisis or emergency responses (e.g. shelter, police, or hospital)
- While there is currently a community outreach worker operating from the shelter who has been described as very effective, this is not a permanent position and will require continuous funding applications
- Other service barriers may exist, including a lack of culturally responsive services oriented toward Aboriginal clients, and health services (e.g. mental health or outreach nurses) may not always have the resources to meet individuals 'where they are at'

There are a number of best practices and programs that may be useful in addressing these gaps.

Housing first and supportive housing

A recent nation-wide longitudinal study of Housing First initiatives in five Canadian cities showed the significant social, cultural, and economic impacts of homelessness. The study, the At Home/Chez Soi project, sought to research the impacts of the Housing First (HF) model, described as "an evidence-based intervention model...that involves the immediate provision of permanent housing and wrap-around supports to individuals who are homeless and living with serious mental illness, rather than traditional "treatment then housing" approaches."¹⁸

The study found that a Housing First approach was more effective than traditional housing models in several ways. Those study participants who had access to secure housing and comprehensive support services were more likely to achieve housing stability and had a reduced reliance on emergency and medical services, which resulted in significant per capita savings on high needs individuals. The authors of the study also

¹⁸ At Home/Chez Soi, 2014.

found that a Housing First approach worked well in communities with diverse ethnocultural backgrounds. The At Home/Chez Soi model represents the vanguard of effective approaches to addressing homelessness in Canada, and represents an effective model in the development of supportive housing for high needs individuals.

Though the majority of Housing First initiatives have occurred in urban centres, a 2014 report looked at Housing First approaches in the context of rural communities.¹⁹ The report suggested that rural communities employ a regional approach to the administration of support services, as well as to increase cooperation and cohesion amongst existing services providers. It is also suggested that invested parties work together to determine innovative ways that Housing First approaches can be implemented in specific community contexts.

Inter-Agency Coordination and Case Management

Information sharing and communication can be a significant resource between agencies, particularly in smaller communities. Coordinating agencies can ensure that services are not duplicated and allow service providers to plan beyond the conventional 'bankers hours' in terms of providing services.

Collaborative service networks can also be used to develop an inter-agency integrated case management model, in which multiple agencies work together to address clients' needs. An example of this program is Kelowna's Partners in Community Collaboration, in which 25 Kelowna service providers meet weekly to ensure that a client's needs are being met by the range of services available. PICC has been identified as a best practice in homeless outreach.²⁰

Ensure a Permanent Outreach Position

Key informant interviews highlighted the importance and success of the temporary outreach worker during the 2014-15 winter at the Broadway Shelter. Outreach workers can have a significant impact on a client's ability to access and maintain housing, access income, and address other concerns (e.g. mental health, addictions).²¹ The development of a permanent outreach position would represent a significant resource for the community of Smithers.

Culturally Responsive Programming

Because of the extremely high proportion of Aboriginal homeless individuals in the Smithers Homeless Population, the development of culturally-responsive approaches to Aboriginal homelessness that implement best practices in the field. There are a range of approaches and practices that can be implemented that are discussed more fully in SPARC BC's 2011 report, *Feeling Home: Culturally Responsive Approaches to Aboriginal*

¹⁹ Waegemeakers Schiff and Turner, 2014.

²⁰ Eberle *et al.*, 2011.

²¹ Eberle *et al.*, 2011.

Homelessness. With Aboriginal individuals less likely to access mainstream services, culturally responsive programming “is founded on providing a matched level of services for all, where everyone is capable of being served in a way that accounts for their culture.”²²

Developing guiding principles around cultural responsiveness is key starting point for the development culturally responsive service delivery. In Prince Rupert, for example, a number of principles were outlined through research with key Aboriginal stakeholders and services providers:

- Programs that serve Aboriginal people require their **participation, consultation and leadership** in all stages, from development to delivery;
- Visible Aboriginal **representation** in service agencies at all levels is key;
- **Respect and a non-judgmental approach** with regards to drugs and alcohol, mental health issues, and other personal problems is fundamental to successful service delivery and ‘meeting clients where they are’;
- **Recognition of Aboriginal history and colonialism** in Canada and BC, particularly the history of the residential schools, and a recognition of the differences between Settler and Aboriginal cultures must underpin culturally-response services;
- Culturally-responsive services must integrate a **comprehensive cultural approach into service delivery** including traditional language, medicine, arts and food; and
- Strong **partnerships between Aboriginal and non-Aboriginal organizations**, through cooperative planning and decision-making regarding services and service delivery.²³

²² MacCallum and Isaac, 2011.

²³ Thomson, 2012.

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Appendix 1: Organizations Interviewed

- Passage Transition House
- Salvation Army
- Broadway Shelter
- Town of Smithers Bylaw and Community Policing Officer
- Positive Living North
- Mental Health and Addiction, Northern Health

Appendix 2: Surveys

Shelter Survey

2014 Smithers Homeless Count

Interviewer Name (please print): _____

Individuals observed to be homeless but not interviewed:

Perceived Age: ___ Perceived Gender: ___ Reason not interviewed: _____

Nearest Intersection/Facility found: _____

Part 1: Screening

1. Have you already answered a survey today?

Yes (END) No

2. Do you currently have a place to stay that you pay rent for? If so, is it in Smithers?

Yes to both (END) No (Go to Q.3)

3. Are you staying in this shelter tonight?

Yes (Go to Q. 4) No (END)

Part 2: Survey

4. How long have you been without a place of your own? _____

10. Do you consider yourself to be an Aboriginal person?

Yes No

5. What is your age or year of birth?

_____ _____
Age Year of Birth

11. When did you last pay rent?

less than one month ago
 one to three months ago
 three to six months ago
 more than six months ago

6. Observed gender?

Male Female Transgendered
 Unknown

7. How long have you lived in Smithers?

_____ _____ _____ _____
Days # Weeks # Months # Years

12. What is keeping you from finding a place of your own? Check all that apply

Income too low
 Evicted
 No income/no income assistance
 Addiction
 Rent too high
 Mental health issues
 Family breakdown/abuse/conflict
 Conflict with law
 Pets
 Poor housing conditions
 Discrimination
 Other (specify) _____

7.a. Would you say you're from Smithers?

Yes No

8. Where were you living before you came to Smithers?

9. Have you stayed in a shelter in the last 12 months?

Yes No

In Smithers Other _____

13. Where do you get your money from?
Check all that apply.

- Welfare/income assistance
- Panhandling
- Disability benefit
- Binning/bottles
- Employment insurance
- Youth agreement
- Money from family/friends
- Job full-time
- Job part-time or casual
- Old age security/guaranteed income supplement
- CPP or other pension
- No income
- Other (Specify): _____

14. Do you have the following health problems?

(Read List) Yes No

| (Read List) | Yes | No | Specify: _____ |
|---------------------|-----|----|----------------|
| Medical condition | | | |
| Physical disability | | | |
| Addiction | | | |
| Mental illness | | | |

15. What is the main reason you did not stay in a shelter last night? Check only one.

- Able to stay with a friend
- Don't feel safe
- Turned away - Shelter full
- Turned away - Other reason
- Can't get to shelter
- Didn't know about shelters
- Bedbugs/pests
- Dislike (Reason): _____
- Other (Specify): _____

16. What services have you used in the past month?

- Ambulance
- Emergency room
- Hospital (non emergency)

- Dental clinic or dentist
- Mental health services
- Addiction services
- Employment/job help
- Parole or services for ex-offenders
- Drop-in
- Meal programs/soup kitchens
- Health clinic
- Newcomer services
- Transitional housing
- Housing help/eviction prevention
- Outreach
- Legal
- Budgeting/trusteeship
- Other (specify) _____
- None

17. Is there anyone with you today?

- Partner/spouse
- Child(ren): Ages _____
- Friend
- Pet
- Relative
- Other (specify)

THANK YOU!

Street Survey

2014 Smithers Homeless Count

Interviewer Name (please print): _____

Individuals observed to be homeless but not interviewed:

Perceived Age: ___ Perceived Gender: ___ Reason not interviewed: _____

Nearest Intersection/Facility found: _____

Part 1: Screening

1. Have you already answered a survey today or last night (with someone wearing a yellow button)?
 Yes (END) No

2. Do you currently have a place to stay that you pay rent for? If so, is it in Smithers?

Yes to both (END)
 No (Go to Q.3)

3. Where did you stay last night?

Outside or in a vehicle (GotoQ.4)
 Someone else's place (Go to Q.4)
 Parent(s)/guardian's house – If youth (END)

Shelter, Safe House, Transition House (END)
 Hospital (END)
 Own place inside (Specify): _____ (END)
 RCMP holding cells (END)
 Other (Specify): _____ (Go to Q.4)
 No answer (END)

Part 2: Survey

4. How long have you been without a place of your own? _____

In Smithers Other _____

5. What is your age or year of birth?

_____ _____
Age Year of Birth

6. Observed gender?
 Male Female Transgendered
 Unknown

10. Do you consider yourself to be an Aboriginal person?

Yes No

7. How long have you lived in Smithers?

_____ _____ _____ _____
Days # Weeks # Months # Years

7.a. Would you say you're from Smithers?

Yes No

11. When did you last pay rent?

less than one month ago
 one to three months ago
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 Addiction
 Rent too high
 Mental health issues
 Family breakdown/abuse/conflict
 Conflict with law
 Pets

9. Have you stayed in a shelter in the last 12 months?

Yes No

- Poor housing conditions
- Discrimination
- Other (specify) _____

13. Where do you get your money from?
Check all that apply.

- Welfare/income assistance
- Panhandling
- Disability benefit
- Binning/bottles
- Employment insurance
- Youth agreement
- Money from family/friends
- Job full-time
- Job part-time or casual
- Old age security/guaranteed income supplement
- CPP or other pension
- No income
- Other (Specify): _____

14. Do you have the following health problems?

(Read List) Yes No

| | Yes | No | Specify: _____ |
|---------------------|-----|----|----------------|
| Medical condition | | | |
| Physical disability | | | |
| Addiction | | | |
| Mental illness | | | |

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- Drop-in
- Meal programs/soup kitchens
- Health clinic
- Newcomer services
- Transitional housing
- Housing help/eviction prevention
- Outreach
- Legal
- Budgeting/trusteeship
- Other (specify) _____
- None

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- Child(ren): Ages _____
- Friend
- Pet
- Relative
- Other (specify)

THANK YOU!