CAEH Canadian Alliance to **End Homelessness**

A Plan, Not a Dream
How to End Homelessness in 10 Years

Contents

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A Plan, Not a Dream is a declaration that we, as Canadians, are no longer willing to accept as inevitable the homelessness of any of our neighbours. This is a challenge to our fellow citizens and communities to take the initiative to end the un-natural disaster of homelessness in Canada once and for all.

The Canadian Alliance to End Homelessness has been formed to build a national movement to end homelessness from the community up. Many communities have already started the work of building community plans that identify local issues and needs, and set in place workable solutions.

We believe we can end homelessness in Canada. We believe we can do it one person, village, town, city and province at a time. What's needed is a Plan.

There are plenty of people at the local level across Canada that have the knowledge and the expertise to get the job done. Everything you need to know to end homelessness is known in your communities or is available from others. There are many effective partnerships at the community level that engage government, non-profit agencies and private sector groups in innovative initiatives. And the financial resources exist.

What's missing is a practical community-based approach that shifts the focus from managing homelessness, to a system focused on ending it. We need to move from crisis responses (like shelters and soup kitchens) to solutions -permanent, appropriate, safe and affordable housing with the support necessary to sustain it.

A Plan, Not a Dream is directly derived from a document of the same name developed by the National Alliance to End Homelessness (NAEH) in the United States (U.S.). The NAEH has successfully mobilized over 240 U.S. communities to begin the hard work of ending homelessness across their country and lead the U.S. federal government to commit to ending homelessness nationwide. The NAEH's success inspired a growing number of Canadian communities to follow their lead and has inspired us to create the Canadian Alliance to End Homelessness.

We'd like to acknowledge and thank the NAEH for their leadership in ending homelessness and for their support of, and encouragement for the Canadian Alliance to End Homelessness.

Four Core Elements of a 10 Year Plan
to End Homelessness

1 **Plan for outcomes.** In order to end homelessness you need a Plan. Successful community plans are evidence-based; have measurable and ambitious outcomes and key milestones; are learning, living and adaptive documents; cover the 10 Essentials; and critically, are the product of an inclusive community process that engages key players in the local homeless system, including people with lived experience.

Research and data management are central to developing effective responses, coordinating systems and measuring outcomes. If you want to move forward, you need to understand the problem. You also need to be able to tell if you are having an impact. Basic research on homelessness in terms of causes, lived experience and solutions makes for better policy and practice. Information management systems, such as Homeless Management Information Systems (HMIS), are being applied in Canada. HMIS allows for system-wide data collection and sharing across the system, and ensure that you can really measure progress. Instituting a culture of program evaluation within the system means that we can highlight practical and effective program models and practices, and also demonstrate results.

2 **Close the front door.** The most cost effective way to end homelessness for people is to stop it before it begins with effective prevention. Homeless people travel a predictable path into homelessness. On their way into homelessness, every single individual or family comes into contact with a person, program or system that could prevent their homelessness. In order to end homelessness, communities need a thoughtful and methodical prevention strategy that includes: early detection; emergency assistance; policy and practice reforms to mainstream systems that inadvertently contribute to homelessness; system coordination; housing and support services; and, access to income necessary to sustain housing through employment or mainstream income support as required.

3 **Open the back door.** For the vast majority of homeless Canadians, homelessness is a short-term phenomenon. A small but significant minority become trapped in homelessness or cycle in and out of homelessness throughout their lives. There are effective initiatives that move people from homelessness to a stable home. These need to be a cornerstone of a Plan to End Homelessness. Successful community plans include strategies for rapid re-housing, housing support services and coordinated systems with the express intent to shorten the duration of homelessness.

Core to effective community plans is the concept of Housing First. Housing First is a successful and transformational housing model used in a number of Canadian and American communities. Housing First puts the priority on a rapid and direct move from homelessness to housing, instead of requiring people to graduate through a series of steps before getting into permanent housing.

Housing First is not housing only. Integral to the Housing First philosophy are the services and supports necessary to sustain that housing and create long-term independence.

4 **Build the infrastructure.** While systems can be changed to prevent and shorten the experience of homelessness, ultimately people will continue to be threatened with instability until the supply of affordable housing is increased; incomes of people living in poverty are sufficient to meet their basic needs; and, disadvantaged people receive the support services they need.

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Quantifying Homelessness in Canada

Homelessness defined

Canada does not yet have a nationally-accepted definition of homelessness and there are no reliable national counts on the number of Canadians who experience homelessness. In 1987, the United Nations declared International Year of Shelter for the Homeless and proposed a two-part definition:

Absolute homelessness – people who 'sleep rough' in public parks, along with people living in temporary accommodation, such as homeless shelters

Relative or 'hidden' homelessness – people living in temporary or grossly substandard homes, such as people who 'couch-surf' by staying temporarily with family or friends, or those who live in structures without proper sewer and water connections.

Canada's federal government has estimated that 150,000 Canadians experience homelessness, but there is no scientific basis for this number. Some researchers say the real count of people who are absolutely homeless – using prevalence numbers developed through more rigorous research methods in other countries – could be as high as three percent of the overall population on an annual basis. That would translate to as many as one million Canadians annually who experience homelessness – a staggering number. The variance between 150,000 and 1,000,000 is large and underlines the urgent need for a reliable national count of homelessness. Without more accurate numbers, we cannot know the scale and scope of our national homelessness crisis – nor will we be able to measure results from government and non-governmental investments in homeless solutions.

Homelessness counted

There are a number of methods used to quantify homelessness. It is critical that Canada develop a national measurement system to quantify and track changes in homelessness across the country. The U.S. government requires local communities to be actively engaged in the nation-wide effort to end homelessness and to adopt a set of similar methods to count homelessness in their communities. These numbers are then rolled up to the national level. Street counts combined with service utilization numbers (a measure of the number of people using homeless shelters and other services for people who are homeless) can provide an important baseline over time. A key priority for Canada is to adopt a common definition of homelessness and develop a strong baseline of indicators.

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Measuring the Costs of Homelessness

There is ample evidence from across Canada that indicates keeping people who are homeless in emergency services (i.e. the shelter system) not only has a negative impact on their health and well-being, but it is also expensive. We know from research that the longer people are homeless, the more likely they are to experience declining health, mental health problems and addictions. In addition, people who are homeless often cycle in and out of prison.

While at first glance, relying on emergency and charitable services may seem to be a reasonable way to respond to homelessness – and these services do play an important role in keeping people alive and providing them with necessary supports – there is a growing body of evidence that suggests it is much cheaper to prevent homelessness and/or provide people with the opportunity to move out of homelessness through supportive and affordable housing, than it is to let them remain homeless (Laird, 2007; Eberle, 2001; Halifax, 2006; Shapcott, 2007; Pomeroy, 2006; 2008).

Steve Pomeroy's numerous studies in communities across Canada show that reliance on emergency services is a very expensive way to address homelessness. The cost of homelessness does not only derive from our emergency shelters, soup kitchens and day programs, but also from the health care system and correction services. In a review of the cost of homelessness in four cities, Pomeroy found that the annual basic costs were:
- institutional responses (prison/detention and psychiatric hospitals): $66,000 to $120,000;
- emergency shelters (cross section of youth, men's, women's, family and victims of violence): $13,000 to $42,000;
- supportive and transitional housing: $13,000 to $18,000; and
- affordable housing without supports (singles and family): $5,000 to $8,000.

Allowing people to remain chronically homeless leads to even higher costs, as health deteriorates and there is a greater likelihood of incarceration. A report by the Calgary Homeless Foundation suggests that the annual costs for a chronically homeless person may reach over $130,000 (CHF, 2008).

The costs of homelessness are not just borne by those who directly experience homelessness. Everyone pays at least some of the personal, health, social, economic and governmental costs of homelessness. Homelessness disrupts families, neighbourhoods and communities. Homelessness is a drag on local economies. Homelessness costs individuals and it costs all of us through increased spending on health care, social services, policing and other programs.

Personal and Health Costs of Homelessness

A growing body of research across Canada and internationally sets out the devastating impact of homelessness (and insecure housing) on the health of people who directly experience it. Homelessness has staggering health costs measured in terms of increased illness and early death.

Toronto's Street Health report concludes that homeless people don't suffer different illness than those who are properly housed, but that they experience a higher rate of a wide range of physical and mental health issues. There is considerable evidence that homelessness is associated with poor health, compromised immune systems and barriers to accessing health services (Boivan et al. 2005; Frankish, et al. 2005, 2009; Hwang, et al. 2001; Khandor & Mason, 2007). Approximately 30% of people who are homeless suffer from mental illness, which may undermine their ability to obtain and/or maintain housing, income and other necessary supports (Nelson, et al. 2007; CPHI, 2010). While some people become homeless because of illness, we also know that the experience of homelessness can lead to new mental health problems for many people, including addictions. Children and youth who are homeless have increased difficulty thriving in school and their future life circumstances are threatened.

Research reveals a complex set of links between homelessness and health. People who are homeless are poorly nourished, they are unable to get proper rest, when they do get sick they are unable to engage in proper health practices (such as following a drug or treatment regime), they live in congregate settings and are exposed to communicable diseases, they frequently move and this instability threatens their health, they are unable to maintain a healthy social network necessary for good health, they are vulnerable to a higher level of physical and sexual violence, inadequate social programs trap people in their homelessness, and a downward cycle of despair along with sleep deprivation can lead to chronic depression and serious mental health concerns.

Safe, affordable, and healthy housing is not only a basic necessity for human health and human life but also a means to reducing systemic health inequities and lowering associated long-term health care costs.

Affordable housing is one of the most fundamental requirements for good health. In his annual report to Canadians in 2009, Canada's chief public health officer, Dr. David Butler-Jones, drew the connection between housing and health:

> "Shelter is a basic need for optimal health. Inadequate housing can result in numerous negative health outcomes, ranging from respiratory disease and asthma due to moulds and poor ventilation, to mental health impacts associated with overcrowding."

The 10 Essentials of Your Community Plan to End Homelessness

In order to end homelessness, a community needs a clear, deliberate and comprehensive strategy. The 10 essentials to a successful Plan to End Homelessness are:

1. planning;
2. data, research and best practice;
3. coordinated system of care;
4. income;
5. emergency prevention;
6. systems prevention;
7. housing-focused outreach;
8. rapid re-housing;
9. housing support services; and
10. permanent housing.

1. Planning

Successful community Plans to End Homelessness are evidence-based; have measurable and ambitious outcomes and key milestones; are learning, living and adaptive documents; cover the 10 Essentials; and critically, are the product of an inclusive community process that engages key players in the local homeless system, including people with lived experience.

While planning, it's important to have representatives and input from all the groups with a role in the issue, as well as informed outsiders - the unusual suspects. Your planning committee should include: political leaders and government officials from the three levels of government, business leaders, community activists, Aboriginal peoples, faith leaders, researchers, funders and people with lived experience.

Ten Year Plans are a challenge to the status quo and will not be without controversy, detractors and difficult conversations. Don't expect a smooth ride! Your planning process should anticipate some conflict, so ensure your planning committee has a measure of independence, a balance of perspectives, a focus on action and results, an agreed upon process and, importantly, a deadline.

The planning process offers a unique opportunity to have open dialogue, take a fresh look at an old problem, engage the public and re-engage government partners on neutral ground.

Many communities have gone before you in writing 10 Year Plans and there are many excellent examples to draw from. The U.S. National Alliance to End Homelessness maintains a database of the existing American plans.[1]

Links to Canadian 10 Year Plans can be found on the website of the Canadian Alliance to End Homelessness.[2]

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[1] http://www.endhomelessness.org/section/solutions/community_plans
[2] http://www.caeh.ca

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2. Data, research and best practices

Ending homelessness can feel like an impossible task given the overwhelming scope of the problem and its apparent complexity. But with recent research, planning and experience with ending homelessness in Canada, the U.S., the European Union and Australia, everything you need to know to begin ending homelessness exists.

In Canada, there is no nationally-accepted definition of homelessness and there are no reliable national counts on the number of Canadians who experience homelessness. However, every community will have some local information on homelessness. Most communities conduct a biannual point-in-time census or have participated in the Homeless Individuals and Families Information System required by Human Resources and Skills Development Canada as part of the Homeless Partnering Strategy.

Even in the absence of substantial local data, enough is known about homelessness to make assumptions on the local homeless and at risk population, as well as the dynamics of homelessness in your community.

That said, putting in place an effective means of collecting homelessness data in your community and information on the functioning of your homeless system of care is essential. Developing and implementing a Homeless Management Information System (HMIS) in your community is a critical first step in any Plan to End Homelessness.

An HMIS is a locally administered, electronic data collection system that knits together the homeless-serving system. Calgary is the first city in Canada to have an HMIS.

In the U.S. where HMIS systems have benefited from 20 years of development, HMIS systems are now being used by more than 400 communities to co-ordinate service delivery. These HMIS systems are web-based software applications that record and store client-level information on the characteristics and service needs of individuals and families at risk of or experiencing homelessness.

By gathering consistent information, homeless-serving agencies can apply common assessment tools to appropriately match a client with services, co-ordinate and monitor assistance provided across agencies and to ultimately identify where there are opportunities to improve the system overall.

Effective 10 Year Plans are rooted in evidence-based practice and solid research. Building a research capacity into community Plans to End Homelessness provides a means of understanding the dynamics and effectiveness of your local homeless-serving system and the needs of homeless or at risk people in your community. Research also provides a means of identifying established best practices that can be adapted to meet the needs of your community.

One outstanding resource for Canadian communities is the Canadian Homelessness Research Network Homeless Hub.[3]

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[3] http://www.homelesshub.ca

3. Co-ordinate the homelessness system of care to end homelessness

In every community there are dozens, and often hundreds, of public and non-profit programs and systems that serve poor and homeless individuals and families. It becomes a patchwork of emergency responses that are not effectively coordinated into a system of care designed to end homelessness.

A successful 10 Year Plan to End Homelessness organizes and co-ordinates the system of care to ensure homeless or at-risk families and individuals have access to the housing and support services necessary to achieve independence as quickly as possible. This often requires immediate access to housing, home-based case management and incentives to promote these outcomes.

10 Year Plans should identify:
- a single point of accountability for implementation;
- a process for systems organization, planning and coordination;
- a process for monitoring the effectiveness of the homeless-serving system; and
- a plan for adapting to environmental changes, learning, best practices and improved information.

4. Income

In order to maintain housing, people exiting homelessness must have income. Financial assistance programs, including rent supports, are available through provincial governments, and career-based employment services can help formerly homeless people build the skills necessary to increase their income. Mainstream services should be used for this purpose.

5. Emergency prevention

The most economic and efficient way to end homelessness is to prevent it from happening in the first place. People travel a predictable path into homelessness. On their way into homelessness, every single homeless individual or family will come into contact with a person, program or system that could prevent their homelessness.

In order to end homelessness, communities need a thoughtful and methodical prevention strategy that includes: early detection, emergency assistance, system coordination, housing and support services, and access to the income necessary to sustain housing (through employment or mainstream income support programs as required). Many existing social programs connect vulnerable populations with emergency services, temporary cash assistance and case management. Consider ways to integrate with these existing systems or adopt your own.

6. Systems prevention

Many people who fall into homelessness do so after release from state-run institutions, including jails and the child welfare system. Others come to homelessness from mental health programs and other medical care facilities. By creating a clear path to housing and support from those institutions – in the form of case management, access to services or housing assistance programs – we can reduce the role that state-run institutions play in creating homelessness.

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7. Housing-focused outreach

An important role in ending homelessness is outreach to people experiencing homelessness. A key ingredient to outreach is the ability to connect the homeless population with housing and support. When considering outreach efforts, it's important to understand that many people living on the streets exhibit mental illness, addiction and other negative behaviour patterns. Therefore it's important to consider low-demand housing that does not mandate sobriety or treatment.

8. Rapid re-housing

Navigating the housing market, especially on behalf of clients with lower incomes and higher needs, is a difficult task. A successful homeless-serving system has housing staff that help with just that. Housing locators search local housing markets and build relationships with landlords. Successful program components include:
- incentives to landlords to rent to homeless households;
- creative uses of housing vouchers and subsidies to improve affordability; and
- links to resources to help clients maintain their housing.

9. Housing support services

Many services already exist in the community. In many cases, homeless individuals can access mainstream programs. Connecting families and individuals exiting homelessness to these programs is imperative to ensuring their continued independence.

In a Housing First-based community plan, the provision of high quality housing support services tailored to the needs and wishes of clients is a critical success factor. There are a range of Housing First programs to address different populations' needs, from Assertive Community Treatment to Intensive Case Management. Housing First can also exist within a range of different housing forms; from scattered site housing in the private rental marketplace, to housing in mixed affordable housing, to permanent supportive housing. The housing form appropriate for your client will be dictated by client choice, needs and the housing market in your community.

At its heart, there are four core principles to Housing First that you should observe in your community plan:
- consumer choice and self-determination;
- immediate access to permanent housing, with the support necessary to sustain it;
- housing not conditional on sobriety or program participation; and
- the ultimate goal of social inclusion, self-sufficiency and improved quality of life and health.

10. Permanent housing

At its root, homelessness is the result of the inability to afford and maintain housing. Any Plan to End Homelessness must incorporate an investment into creating affordable housing. The majority of people experiencing homelessness can be successfully housed with support services in subsidized market rental housing. Some people, as a result of severe health, mental health, behavioural and/or addictions issues may require permanent housing coupled with onsite supportive services.

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