

Who is homeless in Yellowknife?

Estimates suggest that 90 to 95% of homeless people in Yellowknife are Aboriginal: Dene, Métis, or Inuit. Research shows that social and economic factors are major causes of homelessness. People are more likely to be homeless if they:

- Have poor job skills.
- Are unemployed. In the NWT, Aboriginal people are four times more likely to be unemployed than non-Aboriginals.
- Lack access to affordable housing.
- Receive too little support from social assistance.
- Experience mental health problems.
- Use / abuse drugs and alcohol.

Homelessness puts people at risk and contributes to high health care costs. Crowded living conditions in shelters probably played a part in the 2007-08 tuberculosis out-break, with 14 active cases. The estimated costs of the outbreak are \$500,000 so far. Homeless people account for a large number of emergency room visits, mostly with drug and alcohol problems. Homeless people are more likely to suffer HIV infection.

Programs and funding for homeless people in Yellowknife

Yellowknife offers the following program options for homeless people: emergency shelters, daytime drop-in, transitional housing, and supported housing. Public housing is generally not available to homeless people. A single person must have a physical disability or be more than 60 years old to qualify for public housing in Yellowknife.

Federal and territorial governments provide most of the funding for programs that respond to homelessness. Yellowknife programs receive about \$417,000 in annual federal funding. The City provides in-kind support, including financial administration, legal services for property transfers and contracts, and a waiver of certain fees and taxes.

Yellowknife Homelessness Coalition

The Yellowknife Homelessness Coalition formed in January 2000. To qualify for federal funding, community partners came together to coordinate the City's response to homelessness. The Coalition includes representatives from nongovernment organizations, three levels of government, Aboriginal groups, and interested citizens.

Every three years the Coalition develops and submits a community plan to the federal government. The plan aims to respond to homelessness, with priorities that meet federal funding guidelines. At first emergency shelters received most of the funding. After 2005 the funding focus shifted to capital costs for transitional housing. Federal funding pays for the Coalition's full-time staff person.

Daytime Drop-In

A daytime drop-in centre opened in November 2009 as a three-year pilot project. This co-ed facility is open seven days a week, from 7am to 7pm. The John Howard Society administers the project. BHP Billiton, the GNWT Department of Health and Social Services, and the City of Yellowknife together provide \$184,000 annual funding for operation and maintenance.

Emergency Shelters

On any given night more than 100 homeless people may seek shelter, or stay outside in Yellowknife:

- Centre for Northern Families:
 23 women.
- Salvation Army: 30 men on mats; 20 men in bunk beds.
- YWCA, Rockhill: 10-15
 adults and children in five
 emergency units; stay for up
 to three months.
- RCMP detachment: 8 men, rough estimate of homeless portion.
- Side Door: 3 male or female youth on couches.
- Outside: 0-50 men and women, rough estimate, mostly summer.

The Government of the Northwest Territories' (GNWT) Department of Education, Culture, and Employment pays for emergency shelter beds: \$42 per night per bed, including one meal. Compare this with \$1600 to \$2000 per day to keep a person at the hospital. Community agencies use funding from private donations and other sources to support these programs.

Supported Independent Living Homes

The YWCA operates homes for persons with a mental health diagnosis: two homes with four people each, with staff on site 24 hours; one home with two people, with staff on site overnight. The GNWT pays \$60,000 to \$120,000 per resident per year, plus income assistance. There is a five-year waiting list of about 30 people for placement in these homes. Even if the government decides to fund more of these homes, there are staffing challenges. The YWCA has trouble finding qualified staff for existing homes.

Eighteen NWT residents with a mental health diagnosis live in homes in Alberta, Manitoba, and Saskatchewan. The GNWT pays more per person than for Yellowknifebased homes.



Adults with children: The YWCA operates 32 units where people can stay for up to one year, including those with a poor tenancy record. These people pay \$1,150 to \$1,350 rent. This represents more than 50% of their monthly income; Canada Mortgage and Housing Corporation considers 30% to be an affordable rent.

Men: The Salvation Army opened Bailey House in February 2009. They have space for 32 men who can live there for up to three years. The men pay \$800-\$900 rent per month for a bachelor unit. Residents must be 'clean and sober'. Staff people test the men and search their rooms about once a month. The City donated the land for Bailey House; territorial funding pays operation and maintenance costs - \$200,000 per year for five years, starting 2009-10. Federal and territorial governments each gave almost \$2 million for capital costs.

Men and women separately: Oxford House has one place for men and one for women, each with room for four people. There are no fixed limits on length of stay; but very strict rules about 'no drugs and alcohol', and 'no visitors'. Men or women who break the rules can be forced to leave. Oxford House receives no ongoing government funding; they received a one-time \$50,000 contribution for the down payment for the men's house.

Women, with or without children: The YWCA hopes to open BETTY House by 2014. Federal funding paid for the land and will cover some capital costs. BHP Billiton committed \$700,000 for capital costs and \$100,000 for in-kind support. The schedule and the number of people BETTY House will serve depend on the success of fundraising efforts.

Independent Living Support

The YWCA provides staff support for people with a mental health diagnosis who live in Independent Living Support units. A staff person visits each home twice a day to give out medication, and spends three to five hours once a week to help clients with grocery shopping, banking, appointments, and social activities. The GNWT pays about \$17,000 per person per year, plus income assistance (including rent) to each individual.

Independent living support offers more independence than transitional housing. It is a relatively inexpensive model of supported housing for persons with a mental health diagnosis. Territorial legislation that protects tenants applies to these units. Many homeless people in Yellowknife would be suitable tenants for this type of housing if the GNWT made more units available.

Other Territorial Funding

Individuals can apply to the GNWT Department of Health and Social Services for up to \$3000 in one-time funding to pay for rent or utility debts, or one-way transportation to their home community. A community agency must refer any individual who wants to apply. In recent years the \$125,000 annual budget was used up within the first six months.



This section offers a short discussion of each of five policy issues. The table at the end of the section summarizes the recommendations.

GNWT accountability

In recent years the GNWT has developed funding programs to support groups and serve homeless people, but has no dedicated position to manage or oversee the overall response to homelessness. The GNWT does not gather or publish statistics related to homelessness, or monitor or set standards for emergency shelters.

Collaboration with Yellowknife Homelessness Coalition

The Yellowknife Homelessness Coalition was not formally involved in discussions about (or funding for) the daytime drop-in centre. This is the first time a major homelessness initiative in Yellowknife was announced without the Coalition's direct input.

Emergency shelter standards

Existing conditions create some health and safety risks for staff and homeless people. For example, emergency shelters have only one overnight staff person to deal with any problems that arise. Sleeping arrangements are often overcrowded. On any given night several men may not have access to shelter because there is no room, or because their past behaviour means they are banned.

Affordable and supported housing

Research shows that permanent housing for homeless people with mental health conditions - supported housing or public housing - costs much less than emergency shelters, hospitals, or jails. Permanent housing also gives these individuals much greater quality of life.

Public health response to substance use

Homeless people have high rates of drug and alcohol use. Unsafe drug use represents a public health risk. Stakeholders must work together to understand the challenges. They need good information about users' needs and how to respond, to improve health outcomes for heavy drinkers and substance users, especially among homeless people.

How can you help?

CONTACT

your MLA; encourage the GNWT to consider the policy recommendations in this report.

JOIN

the Yellowknife Homelessness Coalition.

VOLUNTEER

at an emergency shelter.

DONATE

food, money, furniture, or other items to emergency shelters or transitional housing programs.

READ

the main report 'Homelessness in Yellowknife'.



For more information, visit: www.homelesshub.ca/yellowknife

Summary date: May 2011

Summary of Five Recommendations		
Who is responsible	Recommendation	Start time
GNWT Minister Responsible for Homelessness	Create a Homelessness Secretariat.	Jan. 1, 2012
All funders	Inform and involve the Yellowknife Homelessness Coalition with all planned funding initiatives.	Immediately
GNWT Minister Responsible for Homelessness	Establish a working group to develop shelter standards; provide enough funding to implement the standards.	Oct. 1, 2011
GNWT Ministers Responsible for NWT Housing Corp. and Health and Social Services	Create more affordable housing, including more Independent Living Support units.	March 1, 2012
GNWT Minister of Health and Social Services	Start up a Public Health Task Force on substance use/abuse.	Oct. 1, 2011