

CHILLIWACK HOMELESSNESS ACTION PLAN

Background Report
February 2016

**Establishing a Comprehensive Community Response System that Helps People
Obtain and Retain Safe, Affordable, Appropriate Housing**



Acknowledgement

The City of Chilliwack wishes to thank the members of the Homelessness Action Plan Task Force, Chilliwack Healthier Community Housing First Task Team, and the many individuals and organizations who have contributed to the development of this plan:

Ann Davis Society
BC Association of Community Response Networks
BC Housing
Chamber of Commerce
Chilliwack & District Seniors Resource Society
Chilliwack Addictions & Prevention Services
Chilliwack Child & Youth Committee
Chilliwack Community Services
Chilliwack Fire Department
Chilliwack Healthier Community
Chilliwack Supportive Housing Society
City of Chilliwack Bylaw Department
City of Chilliwack Operations Department
City of Chilliwack Planning Department
CSCL Independent Living
Cyrus Centre
First Nations Health Authority
Fraser Health Authority
Fraser Valley Regional District
GT Hiring Solutions
Hope Transition Society
Ministry for Child & Family Development
Pacific Community Resources Society
RCMP
Ruth & Naomi's Mission
Salvation Army
Sean Mordon
Shxwhá:y
Tobey Sonderbang
United Way



Homelessness Action Plan

Vision & Goals

Vision

Establish a comprehensive community response system that helps people obtain and retain safe, affordable, appropriate housing

Goals

Primary goals for development of the Homelessness Action Plan are:

- To clearly communicate the reasons for, and challenges with addressing homelessness;
- To establish clear goals, measurable objectives, and specific actions to end and prevent homelessness
- To build on past and current initiatives of the City and others to increase both the supply of, and access to, affordable housing in accordance with community needs

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Introduction

In October 2015, the City established a task force to develop, in collaboration with the community, a homelessness action plan that builds on the momentum created by past and current initiatives to address housing priorities identified by the community and formalizes the City's commitment to collaborating with community stakeholders and senior government funders to prevent homelessness, wherever possible, or otherwise ensure it is a rare, brief, and non-recurring experience. This plan will be used to increase coordination amongst agencies in the community and to leverage funding from senior levels of government to prevent homelessness in Chilliwack, by ensuring a variety of affordable housing options for low income households and those who are having trouble making ends meet, and are at risk of homelessness.

Partnership Connection Guide
Communication Social Decisions
Trust **COMMUNITY** Team
Relationship Cooperation Togetherness People Members Organization
Common Location Care
Society Network Unity
Teamwork Collaboration
Support Connection Group
Neighborhood Interaction Unified

“Homelessness is not a young man’s problem, an addiction issue or a mental health issue. Homelessness impacts everyone – the individual who is homeless or at risk of homelessness and the community where homelessness exists. Homelessness and poverty is a community issue requiring a community response.”

Homelessness Action Plan
Strategic Planning Meeting
Participant

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Background

The resources required to end homelessness go beyond what any one organization, or local government can contribute. Since Chilliwack's first affordable housing strategy was adopted in 2008, significant work has been undertaken by the City, Province, non-profit organizations and the community to increase the supply of a wide range of affordable housing units, including emergency shelter beds, supportive housing, affordable rental housing to respond to local housing needs and homelessness.

While the City has supported new housing projects through permissive tax exemptions, development cost charges waivers, and site contributions, funding for building construction and long term operations (staffing, support programs, meals, building maintenance, etc) is beyond the means of local government resources, and funding is required from provincial and federal governments.

While the 2014 FVRD Homeless Survey registered a decrease in the number of homeless people in Chilliwack, homelessness continues to present multiple challenges for individuals and the community. The City has taken pro-active steps to increase collaboration with housing outreach and social service providers, to reduce barriers and to ensure services are available for individuals in seek of shelter and support.

Through the Chilliwack Healthier Community partnership, and support from the Chilliwack Social Research and Planning Council significant work has also been undertaken towards understanding the needs of people who are homeless or at risk of becoming homeless in Chilliwack, and establishing a Housing First strategy for Chilliwack, based on best practices from across North America.



Housing Roles and Responsibilities	
City of Chilliwack	<p>Facilitates partnerships to increase affordable housing</p> <p>Advocacy to senior government for funding, program support</p> <p>Affordable housing policies, zoning and development approvals</p> <p>Development cost charges and permit fee waivers (non profit housing)</p> <p>Grants permissive tax exemptions (non-profit housing)</p> <p>Monitors local housing needs</p>
Federal Government - Homelessness Partnering Strategy - Canada Mortgage & Housing Corporation	<p>Funds construction of housing projects, operations and services</p> <p>Provides market information and mortgage loan insurance</p>
Provincial Government - BC Housing - Social Development & Social Innovation - Health - Children & Family Development - Seniors	Funds construction and operation of housing projects and associated services
	Provides rent subsidies to assist low income households
	Provides employment and income assistance, including shelter allowance
	Operates health and social services, mental health, addictions
	Delivers services that support the well-being of children, youth and families, in coordination with provincially designated Aboriginal agencies, Aboriginal service partners and community social service agencies and foster homes, cross government and social sector partners to deliver services that support the well-being of children, youth and families.
Fraser Health Authority	Plans, funds, implements mental health, addiction prevention, withdrawal management services and other health programs
First Nations Health Authority	Plans, designs, manages, and funds First Nations health programs and services in BC in collaboration and coordination with Ministry of Health and Fraser Health Authority to achieve better health outcomes for BC First Nations.
RCMP	Provides law enforcement, public safety, and input on strategy implementation
Housing & Service Providers	<p>Initiates, sponsors and operates projects</p> <p>Delivers services- counselling, employment assistance, health services/outreach</p> <p>Assist with provision for basic needs - meal programs, clothing, housing</p>
Community	<p>Provide volunteer assistance with non-profit societies</p> <p>Financial donations help to fund community programs provided by non-profit sector</p> <p>Assist with community acceptance of new housing projects</p>

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Reasons for Homelessness

Every homeless person has an individual story of his or her path into homelessness. While addiction and mental illness can be a contributing factor, inadequate income and a lack of affordable, safe, appropriate housing are the primary reasons why people find themselves in a housing crisis (homeless or at risk of becoming homeless)

In Chilliwack, in the 2014 FVRD Homeless Survey, 73 people were found to be homeless:

- 64% were male; 34% female
- 34% self-identified as Aboriginal, an increase from 2011
- 43% 19 years of age or younger; 18% were 20-29 years of age

However, this is just a snap shot count. There are many more people—close to 200— that access daily meals and programs at the Salvation Army and Ruth and Naomi’s Mission, that are potentially at risk of becoming homeless, who are dependent on food and subsidized programs to meet their basic needs.



Reason for Homelessness	Number of Survey Participants	Percentage of Survey Participants
Inadequate Income	59	26.9%
Rent Too High	30	13.7%
Addictions	40	18.3%
Family Breakdown / Abuse / Conflict	31	14.2%
Criminal History	18	8.3%
Health / Disability	16	7.3%
Evicted	15	6.8%
Poor Housing Conditions	6	2.7%
Pets	4	1.8%

Households at risk of homelessness:

In 2011, 1,834 households spent more than 50% of household income on housing. By 2041, this number will increase to 2,972 households.

1. Inadequate Income & and Inadequate Supply of Affordable, Safe, Appropriate Housing

In the **2014 FVRD Homeless Survey**, the most commonly cited reasons for homelessness are inadequate income and an inadequate supply of affordable housing to match incomes. In 2015, the Chilliwack Social Research and Planning Council published the **Chilliwack Low Barrier Housing Study**, involving interviews with homeless or at risk of becoming homeless individuals. In this study, the importance of having a sufficient supply of affordable housing units is further emphasized, with 70% of study participants identifying high rental rates (and associated costs like damage deposits, and utility connections) as their primary obstacle to ending their homelessness.

Affordable housing is commonly defined as housing that costs less than 30% of total household income, is suitable in size and safe. Households-at-risk of homelessness spend more than 50% of their total income on housing, and are more likely to be dependent on food banks, and have little or no extra money to cover unexpected expenses.

Whereas the average rent for a one bedroom apartment in Chilliwack is \$644 (Spring 2015), the provincial shelter assistance rate for employable singles is \$375 (total social assistance \$610) and has not increased since 2007.

The Province, through BC Housing provides additional funding in the form of Homelessness Partnering rent subsidies through the Salvation Army

and Xolhemet Society to individuals who may not qualify for rent subsidies through other BC Housing programs like SAFER (Shelter Aid for Elderly Renters) and RAP (Rental Assistance Program for low income families). Outreach workers from these agencies indicate there are not enough subsidy dollars to meet local needs.

People with few skills and little education have low employment prospects, which hampers their ability to earn an adequate wage and access appropriate housing. In the Fraser Valley, the basic hourly wage required for a family of four with both parents working full-time year-round to meet basic needs and maintain a decent standard of living is \$17.27/hour or \$62,863/year. If both parents earn minimum wage their household income is much less, at \$38,038. The average household income for a one parent family in 2011 was ———

Lower rent housing (monthly rental rates of \$450—\$550) in Chilliwack consists mainly of older apartments located in Downtown, Sardis and Vedder Crossing. Few new rental apartment buildings have been built in recent years, and average rents for these buildings exceed \$800. In Chilliwack, the vacancy rate has decreased from 3.5% to 2.7% since October 2014. A decreasing rate means increased competition amongst renters for available units, which may lead to increases in rents, as more households seek to occupy a smaller pool of rental units. For the lowest rent apartment units, personal safety, and unsanitary conditions are ongoing issues. The shortage of affordable low rent housing has been reiterated in discussions with housing outreach workers, and a local rental property manager.

2. Barriers to Accessing Affordable Housing

Service providers report that access to the limited supply of lower rent housing units in Chilliwack is further exacerbated by concerns regarding tenant behavior, the housing application process, criminal record checks, and in the case of supportive housing, requirements of sobriety and/or agreement for treatment.

Landlord concerns about housing individuals on rent assistance include the potential for property damage, noise, and the impact of tenant behaviour (and their visitors behaviour) on other tenants and ultimately, the marketability of the rental units in a building. Problematic tenants who know the system can make an eviction very difficult for landlords. Support for landlords is necessary to address landlord concerns and provide assistance when things go sideways. Current funding for housing outreach does not allow for follow-up with clients once they are housed. In Abbotsford, funding for Assertive Case Management provides an on call person for landlords.

Application Processes: filling out paperwork for income assistance and rental applications can be a challenge, especially when this must be done online. Many clients have difficulties reading or writing and are intimidated if they don't have the skills to navigate available housing lists, government assistance and rental applications. Personal interviews are preferred, with a manager on site. For individuals in need of housing and support services, there is a lack of knowledge about what agency or organization does what and what the process is for getting that information. While each agency may try to disseminate information and connect people to resources, most people in need of services just don't know how to go about approaching these agencies what door to go in because of their feelings of inadequacy, fear of judgment, and not wanting to look like a failure. Just because an agency or program exists, doesn't mean people will find it.

In their housing searches for clients, outreach workers report that many landlords are unaware of tenancy rights. In some cases, predatory behaviour is a concern: while some landlords receive shelter allowance in accordance with a rental agreement, they may evict a tenant and continue to collect cheques and/or not return damage deposits.

Crime Free Multi-Family Housing: Many lower rent apartments are part of the Crime-Free Multi Family Housing program, and require criminal record checks for applicants to protect property owners and existing tenants. This can be a housing barrier for individuals with a criminal record. With limited available housing for these individuals, they are at greater risk of becoming homeless.

Conditions for housing: A major barrier for housing chronically homeless individuals with addictions issues is the qualification requirement (in transitional and supportive housing) for people to be "housing ready" by demonstrating sobriety or by committing to a treatment program as a requirement to access housing. A Housing First approach means providing housing with no strings attached, and having adequate support services available to assist tenants in retaining their tenancy (e.g. ensuring that typical rental behaviour expectations and rental rules are understood.)

3. Addictions

In the 2015 Chilliwack Low Barrier Housing Study produced for the Chilliwack Social Research and Planning Council, the top three topics that emerged from discussions with homeless participants was alcohol, drug dealers and “crack.” The top issues for service providers were detox, alcohol and drug dealers. While addressing these problems is necessary, addictions on their own are rarely the main reason for homelessness. Addiction is a coping solution to a much deeper problem – unaddressed trauma, often experienced in childhood. If trauma is not addressed right when it happens, through appropriate counselling and treatment, individuals seek alternative ways to cope, through the use of drugs and alcohol. Unaddressed substance use, in some cases, combined with mental illness, can keep people in a state of homelessness.

4. Family breakdown / Abuse / Conflict

Abusive family relationships and /or a lack of family supports can also contribute to an individual’s risk of homelessness. Evidence shows that many individuals who experience chronic homelessness as adults, experienced homelessness as youth. Youth homelessness may begin with trauma experienced in the home, which, unaddressed, can lead to a series of health issues, declining mental health, exploitation, greater risk of addictions, involvement with the law, dropping out of school, trauma & crime victimization, and homelessness.

5. Mental Health

Mental health can be attached to trauma, but not always. In some cases, mental health clients may be able to live independently (with some support) and work on a part time basis, but not always. Supportive Housing (housing with wrap around support services) is needed for people with mental health issues. Local data from Fraser Health indicates that 128 individuals would benefit from intensive case management,

which focusses on clients with addictions, supporting them where they choose to live.

6. Health/Disability

In the 2014 FVRD Homeless Survey, survey participants reported they suffer from a variety of chronic and acute illnesses that are aggravated by life on the streets:

- 42% are living within an addiction
- 25% have a mental illness
- 18% have a medical condition
- 13% have a physical disability

Poor diet, stress, cold, damp living conditions, along with inadequate sleeping arrangements, sanitation and hygiene, increase the risk of health problems and decrease life expectancy.

Physical health concerns raised in the 2015 Low Barrier Housing Study, include urination / defecation in open areas, head injuries, drug induced cuts and sores, bed bugs. With safe, appropriate, affordable housing, and appropriate wrap around supports for those that need them, these health issues could effectively be avoided.



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Challenges in Addressing Homelessness

1. It's a complex issue. One size does not fit all. The 2015 Chilliwack Low Barrier Housing Study concluded that homeless and at risk households are a heterogeneous group with different situations, needs and wants, some preferring integrated housing and services facilities, and others, independent subsidized rental apartments. Age, gender, and culturally appropriate models of housing and support are needed. Regardless of housing type, reputable run, safe and secure housing, and appropriate support services are needed to add stability to the lives of the homeless population.

2. Youth homelessness is distinct from adult homelessness and requires distinct approaches. In the 2014 FVRD Homeless Survey, in Chilliwack a significant portion (44%) of those living homeless were 19 years of age or younger, (and 18% were aged 20-29 years), a much higher representation than other FVRD communities. Given the high percentage of youth homelessness, it is important to understand and respond to the dynamics of youth homelessness, which are distinct from adult homelessness. Youth have different reasons for being homeless and youth seek, access, and respond to services differently than adults. As a homeless group, they are more at risk when sleeping on the street. Gender issues, blended families, family conflict and age discrimination all factor into youth homelessness. Many are couch surfing and have serious family issues, but still have family connections – however tenuous.

Different solutions are needed, and family issues and personal traumas must be dealt with. Youth

should not be living alone as an independent adult, but in a supportive, community / family-like setting where they can develop a healthy connection with a caring adult.

Local strategies are in place to reconnect youth with their immediate or extended family as soon as possible to prevent prolonged homelessness. In some cases, this is not possible, and youth must be placed in care, or in supportive housing. Chilliwack has a 5 bed youth emergency shelter (Cyrus Centre) and 11 supportive units for youth on youth agreements (the Village). However, service providers report that not all youth can be accommodated in existing beds, and in many cases youth are being turned away, due to a lack of space and/or the lack of appropriate support services. According to service providers, there is a need for second stage housing for youth, who are not ready to participate in a youth agreement, and need increased outreach supports.

Another concern is the transition youth must make as they 'age out' of the provincial support system. Service providers report that youth transitioning (at 21 years) out of the Village (a third stage supportive transitional housing project for youth in Chilliwack) need continuous provincial support for several years, until they are on their feet. However, there is no funding in place to support this need. **Other distinct groups** have different needs (ethnic groups, first nations and other) and not being able to access services can further the individual's disconnection from community.

3. Privacy legislation is a barrier to service coordination.

Partnerships are necessary, and collaboration amongst service providers is imperative; however, service providers report the provision of wrap around support services is challenged by privacy legislation, making it difficult for agencies to communicate effectively about common clients. To overcome this challenge, a client's permission to share with vested agencies in the support of that client may be requested. E.g. "Hey, can I talk to agency X about this matter? They may have a supportive resource for you."

4. Funding is limited. Provincial government funding for building and operating supportive housing is limited in any given year, with no specific allocation of funding for any given community. Each community must therefore compete with another for this funding. Most small and medium size communities are limited in the monetary support they can provide—the construction and long term operation of housing and wrap around supports is beyond the capacity of local organizations and municipal government budgets.

5. Existing resources are insufficient to support the level of outreach and intensive case management needed to support clients with complex health needs.

Increasing the supply of affordable housing is important, but people are still needed to do outreach to assist them with navigating the system to get out of homelessness. The system to get housing is confusing and homeless or at risk individuals who are already frustrated or suspicious of the system due to poor past experiences need extensive assistance and support (e.g. sitting with a youth for 2 hours at income assistance). Current funding limitations do not provide for effective case management to help people walk through the system, which can be a long process but worth the time spent to build trust, provide assistance, and follow up to prevent relapses into homelessness.

According to local service providers, there is a lack of resources to help people find the right permanent housing, and provide follow up with clients after they are housed. There is a lack of resources to support recovery / treatment, and help individuals "walk back into society." 90 days is not considered an adequate recovery time, there needs to be one year of support at the least.

Service providers are feeling the pressure: without adequate provincial and federal funding, the financial responsibility of providing services falls on service providers or the community to try to raise the funds (through social enterprise, fundraising, etc.) to provide the services. Social assistance (\$610) is not adequate for people to afford housing and basic living costs (food, clothing, transportation).

Feedback from local service providers suggests a need for case management within the Ministry of Social Development and Fraser Health Adult Mental Health, and greater investment, partnership and buy in on creating enough affordable and supportive housing for vulnerable people. A multi-agency / multi-discipline team approach, good connections and inter-agency referral are needed, and agencies must be aware of how to access services.

Building up trust with clients takes a lot of time, and is the key to helping people. If through ongoing persistent outreach efforts, you can get one or two people to come in, you may get more, as there is a sense of community amongst the entrenched homeless, and they are connected to one another."



6. Market conditions do not support the construction of new housing units that are affordable to those in need.

Without some form of subsidy, the development costs associated with new rental apartment construction require rents that exceed the threshold of affordability for many low income individuals. To stimulate more affordable rental apartment construction, the City of Chilliwack established reduced development cost charge rates for each new small unit (less than 550 sq. ft. apartments). To date, this has resulted in new units which cater to the 55+ year old demographic, in the range of \$575 - \$650 / month.

7. Public opinion / NIMBY (Not In My Backyard) can hinder the development of affordable housing:

There is a lack of public awareness about the issues related to homelessness, local services to support the homeless, what the City can and cannot do to address homelessness and appropriate approaches for dealing with homelessness. The development of appropriately located supportive housing projects that are close to services can be challenged by neighbourhood opposition where land use approvals are required. Community ownership and response to the homeless challenge is essential. A national housing strategy is required, and a higher level of commitment in planning, programs, and funding is needed from the province. Community support is needed to avoid discrimination against low income households, people on disability, addictions.

8. Safety is a primary concern for people who are homeless or at risk of homelessness, in terms of health and building safety and security, and proper management of tenants. As the 2015 Chilliwack Low Barrier Housing Study notes, “there are low-income buildings that allow people to openly remain addicted, these properties tend to be really questionable residences with questionable owners.”

For those who are unsheltered, remaining physically and emotionally safe is of primary concern. The constant fear of harm and associated emotional decline causes many individuals to lose trust and become fearful, forcing them to focus time and energy on staying safe, rather than other issues, such as addictions and mental illness, which they may be facing. “

9. Fear, anger, lack of trust amongst vulnerable groups prevents them from accessing services.

Extensive work is needed to build trusting relationships between chronically homeless individuals who struggle with addiction, medical problems, trauma and mental illness and service providers. There is a high level of fear based on an individual's personal experience, and requirements to participate in programming serve as additional barriers to housing these individuals. In many cases, individuals lack basic life skills (household budgeting, shopping, cooking, appropriate behaviours etc.) to access and retain housing, and live independently. A lack of trust and/or anger towards authority is evident both in the outreach work that has been undertaken, and in the low barrier housing study interviews.

A certain percentage of people will choose not to be housed. The fear of being harmed in caring supportive shelters is what keeps people from engaging services of any kind; shelter or not. "Just leave me alone and I'll be OK" is the mantra of many. Fear has the capacity to immobilize people, particularly those with few or no social supports.

According to one shelter provider, “most people who use shelters have pressed on through their fears and find that the place is really OK and they often express gratefulness for what they've been provided. “

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Effective Strategies—Here and Elsewhere

The following list provides examples of best practices identified by local service providers

Here

- Every Door is the Right Door (EDRD) training and inter-agency referrals
- Distribution of weekly rental housing lists
- Collaboration amongst agencies through Chilliwack Child and Youth Committee (CYC), Chilliwack Healthier Community, and (CHC) Housing First strategy development
- City supports for development of new affordable rental housing
- Coordinated multi-agency outreach approach
- Strong non-profits with history of collaboration – CYC, CHC, EDRD
- Successful housing projects & programs
- Fraser Health needle exchange bus
- Service hub models (Chilliwack Health & Housing Centre, Youth Health Clinics, Neighbourhood Learning Centre)

Elsewhere

- Housing First
- Housing for youth not ready for independent living
- Employment First – service providers canvas and offer 1 day of employment. This facilitates connections with resources, dignity and self worth, and gets people set up with medical and social insurance number, etc.
- Community empowerment – bring neighbours together to address issues.
- Resources Card – to raise awareness of free or low cost services available to low income households.
- YIMBY : Yes In My Backyard – a “pay it forward” project that fosters social inclusion and community kindness, where residents can purchase vouchers from participating businesses and offer them to the homeless / vulnerable in a dedicated spot outside the business.

6

Local Housing Needs Identified by the Community

The following housing needs have been identified by local service providers, and are listed in no particular order: all are equally important. The order in which they are acquired will depend largely on the funding priorities of the Province, and other major funders.

1. **Sobering beds.** Currently none exist in Chilliwack.
2. **Detox treatment beds.** Currently none exist in Chilliwack.
3. **Youth shelter beds.** Currently there are 5 shelter beds. A minimum of 2 additional beds are needed, with long terms plans for additional supportive youth housing for those who cannot be reconnected with family.
4. **Supportive transitional housing for:**
 - a) People leaving treatment
 - b) Youth aging out of ministry funding and services
 - c) Youth actively using substances
5. **Supportive permanent housing** for people with:
 - a) Mental illness at risk of homelessness (no family to care for them)
 - b) Brain Injury
 - c) Disabilities (mobility, sensory-blindness, or other)
6. **More affordable rental housing,** including housing for singles transitioning from homeless to fully housed states (e.g. boarding houses), youth transitioning from supportive to independent housing, and seniors on a fixed income.
7. **Housing First** – permanent affordable rental housing with wrap around supports to assist individuals plan for improving their personal situations, to help individuals think beyond the next meal, plan for the future. This approach restores individual self-esteem / self-respect.



7

Goals / Objectives & Actions

GOAL 1: Develop & Implement an Appropriate Housing First Approach for Chilliwack

This goal refers to the establishment of a coordinated system for moving people from homelessness or unsafe housing to housing that they can afford, and that is safe and appropriate for their needs, as quickly as possible, with the necessary wrap around medical and social services to help them stay housed and improve their health over time.

Objectives:

- 1.1 Continue to engage in partnerships with other levels of government to secure funding for supportive subsidized housing (dedicated and scattered site housing with appropriate operational funding) in accordance with community needs through DCC and permit fee waivers, fast tracking of municipal approvals and other contributions to site development.
 - a) rent subsidies to support existing programs,
 - b) income and rental assistance,
 - c) outreach to help navigate services, provide ongoing support for clients, in particular those with complex health needs.
- 1.2 Work closely with community partners to advocate for funding of an Intensive Case Management Team, based on best practices, with wrap around supports, centralized landlord and tenant support (through a coordinator) and appropriate training.
- 1.3 Work closely with organizations providing housing outreach support to advocate for increased funding to increase access to affordable rental housing, through increased funding for:
 - 1.4 Develop a comprehensive landlord strategy to remove barriers that prevent people from accessing affordable rental housing, that involves:
 - a) Understanding of residential tenancy rights,
 - b) Appropriate support for landlords,
 - c) Programs that prepare tenants to live independently in a rental building, Ready to Rent program.
 - 1.5 Support community-led efforts to bring key stakeholders together on a monthly basis to develop a pilot project to house one or two people effectively, using available wrap around services.

GOAL 2: Increase the Supply of Affordable Housing in Accordance with Community Needs

This goal requires support and advocacy for affordable housing that meets community needs across the housing spectrum from emergency shelter to supportive housing, to affordable rental housing and home ownership .

Objectives:

- 2.1 Advocate for funding from the Fraser Health Authority and the Province to provide the following unmet needs in Chilliwack and support clients in their recovery:
 - a) Sobering beds
 - b) Detox treatment beds
- 2.2 Support and collaborate with service providers, the community, and funders to develop funding proposals, based on a business plan, for priority housing projects that require capital (building acquisition and/or development) and operational (wrap around supports and/or rent subsidies) funding from senior levels of government, including projects that incorporate mixed housing (supported social, market housing, including private, faith-based and/or non-profit organizations), and service hubs (mixing housing with services and commercial space).
 - a) Youth shelter beds (2)
 - b) Second stage housing for youth
 - c) Housing for chronically homeless individuals
 - d) Affordable housing for families
 - e) Housing for individuals at risk of homelessness, including seniors on low income / fixed income
- 2.3 Continue to work collaboratively with community partners to monitor and prioritize housing needs on an annual basis.
- 2.4 Engage the development community in discussion regarding the potential for stimulating the development of permanent affordable market rental apartments, possibly micro units, through supportive zoning, fee waivers and housing agreements, to alleviate pressure for rental subsidies and prevent vulnerable individuals from being homeless.
- 2.5 Identify opportunities for increasing the number of affordable market rental suites (including secondary suites, micro units, and modified units for people with disability) throughout the community through supportive land use policies, relaxation of fees, and housing agreements, where permitted by legislation.
- 2.6 Engage the homeless, at-risk individuals, and their families in the development of viable housing solutions, through annual forums, project based meetings, and other means.

GOAL 3: Increase Coordination Amongst Agencies to Prevent Homelessness

This goal involves the continuation of work to build relationships with senior governments, First Nations, local non profits and faith based communities to prevent and end homelessness for individuals on a person by person basis.

Objectives:

- 3.1 Work collaboratively with community partners to develop a community strategy to avoid discharging people from institutional care (hospital, mental health, corrections, youth aging out of care) into homelessness.
- 3.2 Identify risk factors associated with homelessness and develop programs through community partnerships that focus on early / upstream intervention and increased collaboration amongst all stakeholders to prevent people from becoming homeless, including working with Schools, Ministry of Children and Family Development, Pacific Community Resources Society, and others, to advocate the importance of connections between youth and significant people, and healthy relationships with family, and early intervention & trauma counselling to prevent youth homelessness.
- 3.3 Develop strategies to address barriers that contribute to homelessness including existing housing programs
- 3.4 Bring together coordinating agencies to look at how resources can be shared and redirected to support and implement the homeless action plan.
- 3.5 Increase coordination amongst agencies to break down existing silos, address privacy concerns, and facilitate increased information sharing to more effectively, and efficiently respond to client needs.
- 3.6 Support the community in developing a multi-stakeholder plan to make Chilliwack Connect services available on an ongoing basis.
- 3.7 Develop a system for local housing and support workers to ensure follow up services with clients.



GOAL 4: Improve the Health and Safety of the Vulnerable

This goal stresses the importance of providing for the health and safety for those who are vulnerable, whether housed in poor conditions or unsheltered on the street, as well as the health and safety of the surrounding community, including businesses, clients, service providers, and residents.

Objectives:

- 4.1 Continue to work collaboratively with outreach workers to support a multi-agency homeless outreach response, increasing coordination (City – non-profits / housing outreach – provincial agencies – RCMP, Corrections) and establishing appropriate protocols as needed to ensure individual and public safety.
- 4.2 Identify, develop, and implement with others (RCMP, Crown, Restorative Justice, etc.) strategies to deter drug dealing, exploitation, and victimization of vulnerable individuals.
- 4.3 Continue to conduct building health & safety inspections of rental units to ensure tenants' basic health & safety requirements are met.

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GOAL 5: Increase Community Awareness of Homelessness and Build Support for Solutions

This goal is intended to build community support and understanding for the need for various forms of affordable housing across the housing continuum throughout the community, and increase awareness of successful programs that are already in place to support people who are vulnerable and in need of safe, appropriate, affordable housing.

The lack of sufficient affordable housing means that many individuals may find themselves in a housing crisis, unable to access affordable rentals, and unable to move forward to more stable, healthier lifestyles.

Objectives:

- 5.1 Work with community partners to develop a public education and awareness campaign directed at the public, and other levels of government, to:
 - a) raise the profile of the affordable housing needs in Chilliwack and in the Lower Mainland
 - b) the resources available to homeless or at risk individuals
 - c) cultivate a greater understanding of the risk factors associated with homelessness
 - d) early intervention
 - e) communicate how people can contribute in a coordinated way to address the needs of Chilliwack's vulnerable residents
- 5.2 Develop a resources card with information about available services in the community.

GOAL 6: Support Initiatives that Build Self Esteem and Support Economic Self Sufficiency

Through discussions with service providers, the importance of permanent, full time employment was identified as a key factor in helping people to build self esteem and become self-sufficient, and able to sustain safe, affordable housing.

Objectives:

- 6.1 The City will support community efforts to develop an Employment First initiative to encourage independence and create economic security for homeless or at-risk of becoming homeless individuals and families.
- 6.2 Continue to support initiatives that provide youth with life skills and work experience.
- 6.3 The City will help to facilitate collaborative efforts amongst all community stakeholders, including the faith community and service providers, to develop and implement initiatives that build community support and help rebuild a sense of belonging to fill the void of those who do not have a functional family. This could include the implementation of a YIMBY (Yes In My Backyard) initiative that build san understanding relationship with business owners and local residents, facilitates their purchase of gift cards or vouchers for local businesses near housing to reduce isolation of the homeless and let them feel part of the public.
- 6.4 Continue to invest in economic development initiatives, as outlined in the City's Official Community Plan to build a diverse and resilient economic base capable of providing adequate jobs including a wide array of employment prospects that meet the employment needs of youth.
- 6.5 Interact with senior levels of government to review income / shelter assistant rates and minimum wage levels to support economic self sufficiency.

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Glossary

Affordable Housing:

Commonly defined as housing that costs less than 30% of before-tax household income. Housing is not affordable when it costs so much that individuals and families have trouble paying for necessities such as food, health and transportation. For renters, shelter costs include rent and any payments for electricity, fuel, water and other municipal services. For owners, housing costs include mortgage payments (principal and interest), property taxes, and any condominium fees, along with payments for electricity, fuel, water and other municipal services

Affordable Housing Continuum:

A term commonly used to describe a full range of affordable housing options, ranging in dependence on funding from emergency housing for the homeless to supportive housing to subsidized social housing, to rent assistance subsidies in the private market, to affordable market rentals and entry level home ownership.

Assisted living

Self-contained apartments for seniors or people with disabilities who need some support services to live independently, but do not need 24-hour care. Services include daily meals, social and recreational opportunities, assistance with medications, mobility and other care needs, a 24-hour response system and light housekeeping.

People at-risk of Homelessness:

People who are living in sub-standard, unstable, or unsafe housing or whose current economic and/or housing situation is precarious or does not meet public health and safety standards. A single event, unexpected expense, crisis or trigger is all it may take for someone at risk of homelessness to lose their housing. Risk factors include precarious employment, sudden unemployment, supported housing with supports that are to be discontinued, households facing eviction, severe and persistent mental illness, active addictions, substance use and/or behavioral issues; division of household, violence/abuse, institutional care inadequate or unsuitable to the needs of the individual or family. (Canadian Observatory on Homelessness (2012) Canadian Definition of Homelessness. Homeless Hub: www.homelesshub.ca/homelessdefinition/) This includes people who are “couch surfing,” staying with family or friends, living in trailers, doubled or tripled up in small apartments or living in unsafe conditions. People who are paying more than 50% of before tax household income may be considered at risk of homelessness.

BC Housing	Provincial crown corporation responsible for funding development, management and administration of subsidized housing on behalf of the BC Government. (BC Housing website: http://www.bchousing.org)
Chilliwack Healthier Community:	A network of local community partners focused on implementation of the Chilliwack Healthier Community Strategic Action Plan focused on affordable/ accessible housing, mental health, public safety and healthy lifestyles. Partners include government, community agencies, law enforcement and business. http://www.chilliwackhealthiercommunity.ca/
Chronic Homelessness:	People who have been homeless for a long time, often a year or more. Chronically homeless represent a small percentage of the homeless population, however, their personal struggles – mental and physical health issues, addictions, legal and justice issues, discrimination – tend to be much more severe, and costly to respond to. Chronically homeless people are much more likely to experience catastrophic health crises requiring medical intervention, and a high level of run-ins with law enforcement.
Dedicated site:	Housing units that are placed in a common building where all the tenants are part of a housing program.
Detox Treatment:	A process in which one abstains from or rids the body of toxic or unhealthy substances. Fraser Health offers a range of withdrawal management services (medical withdrawal management, secondary withdrawal management, stabilization beds, secondary support recovery beds, outpatient services) to support clients through their withdrawal symptoms. In Chilliwack, the Riverstone Daytox program provides outpatient services. The closest treatment center is in Surrey.
Development Cost Charge (DCC) Waiver Bylaw:	DCCs are fees established by City Council to be collected prior to subdivision approval or issuance of a building permit to fund major capital improvements to sewer, water, drainage, and road infrastructure and acquisition of parkland. The DCC Waiver Bylaw allows Council to consider waiving DCCs for supportive housing projects as a means for leveraging funding from senior governments .
Emergency Shelter :	Short-stay housing of 30 days or less for people in crisis. (includes people living in sub-standard, unstable or unsafe housing, people who are “couch surfing”). Emergency shelters provide single or shared bedrooms or dorm-type sleeping arrangements, with varying levels of support and food to individuals. In Chilliwack, the youth emergency shelter is operated by Cyrus Centre; the adult emergency shelter is operated by the Salvation Army. Extreme weather response plan is in place and includes Cyrus Centre (youth), Salvation Army (primary adult), and Ruth & Naomi’s (overflow)

Group Home:	A home shared by a number of tenants who are generally expected to participate in shared living arrangements and activities. There is usually 24-hour support staff on site. BC Housing provides administration and property management support for some group homes on behalf of other provincial ministries and health authorities.
Harm Reduction	An approach that focusses on the risks and consequences of a particular behavior in terms of substance use, and focusses on strategies to reduce harm from high risk use, rather than insisting on abstinence. Abstinence is neither condoned nor condemned. Instead it is considered one strategy among many others. With regard to housing, harm reduction means that tenants have access to services to help them address their substance use issues. It is based on the understanding that recovery is a long process, and that users need a stable living arrangement in order to overcome their addictions. Focus is on being healthier rather than on the unrealistic goal of being perfectly healthy right away.
Housing First	Housing First is a recovery-oriented approach to ending homelessness that centers on quickly moving people experiencing homelessness into independent and permanent housing and then providing additional supports and services as needed. The basic underlying principle of Housing First is that people are better able to move forward with their lives if they are first housed. Supports are then provided including physical and mental health, education, employment, substance abuse and community connections.
Intensive Case Management (ICM)	A team model in which case workers, working alone or in teams, link individual clients to mainstream housing, and clinical and complementary supports. Case managers provide outreach, develop relationships and coordinate with other services to help people access needed services, including housing.
Low Barrier Housing	Housing where a minimum number of expectations are placed on people who wish to live there. In housing this often means that tenants are not expected to abstain from using alcohol or other drugs, or from carrying on with street activities while living on-site, so long as they do not engage in these activities in common areas of the house and are respectful of other tenants and staff. Low-barrier facilities follow a harm reduction philosophy.
Market Housing:	Refers to properties that are rented or owned by people who pay market rent to lease the property or paid market value when they bought the property. There is no subsidy for the housing. Rental units may include secondary suites, purpose built rental apartments, individually owned and rented condominiums, townhomes, single family homes, duplexes.
NIMBY (Not in My Backyard)	An acronym for the phrase "Not In My Back Yard," which describes residents' response to a proposal for a new development because it is close to them, often with the connotation that such residents believe that the developments are needed in society but should be further away from their homes.

Outreach	Outreach workers help clients to access immediate physical and safety needs, such as food, warm clothing and a place to stay; connecting them with housing and income support, making and accompanying clients to appointments; providing links to other support services, such as life skills training, personal health, household and financial management; and/or acting as a landlord liaison
Rent subsidies:	Monthly cash assistance for low income households to help pay for market rents. BC Housing rent subsidies are provided through the Homelessness Partnering Strategy (via the Salvation Army and Xolhemet Society in Chilliwack); the Rental Assistance Program (RAP) for low income families, and Shelter Aid for Elderly Renters (SAFER)
Scattered site housing:	Housing units that are spread out in apartments in various locations around the city rather than all in one common building.
Second Stage Housing:	Second stage housing is safe affordable, temporary housing, typically for 6-18 months, that provides emotional support, crisis intervention, safety planning and referrals to and assistance in accessing support services and housing, financial, medical and legal assistance
Sobering Beds	A temporary environment for people to safely sober up. Sobering beds serve individuals who are under the influence of alcohol and/or drugs.
Social Housing	Below market rental housing which may be built, operated, and owned by senior levels of government or owned and managed by non-profit organizations. For residents who can live independently, rent is lower than market rent, and may be geared to income. In Chilliwack, most social housing is occupied by seniors. There is one social housing development for families.
Subsidized Housing	Housing that receives funding from the government. Tenants that live in subsidized housing pay rent that is less than market value and may be geared to income.
Supported Housing:	Affordable housing where tenants have access to support services in addition to housing. Services vary and can include life skills training, medical care, social activities, problem substance use rehabilitation programs, case management. Common client groups include adults at risk of homelessness; women at risk of violence; seniors & people with disabilities; individuals with addictions. May be located in a purpose-designed building or scattered site apartments and be long term or transitional (stays from 30 days to two or three years, includes the provision of support services, on- or off-site, to help people move towards independence and self-sufficiency). Transitional housing is often called second-stage housing , and includes housing for women fleeing abuse.

Supportive Recovery

Housing:

Housing and support services that provides a supportive and structured environment for individuals recovering from drug or alcohol addiction, before they are ready to move into independent housing. In BC, provincial legislation allows supportive recovery homes of up to 6 residents within single family homes; larger recovery homes must be appropriately zoned and built in accordance with local and provincial legislation.

Vacancy rates:

the percentage of all available rental units that are vacant or unoccupied at a particular time. High vacancy rates indicate a high number of available rental units while low vacancy rates reflect strong rental sales or a low number of available rental units.

Wrap around

Supports / Services

Wrap-around service delivery is a team-based, collaborative case management approach. It is used to describe any program that is flexible, family or person-oriented and comprehensive – that is, a number of organizations work together to provide a holistic program of supports. In a Wrap-around approach, a team of professionals (e.g. educators, mental health workers) and key figures in a person's life (e.g. family, community members, etc.) create, implement and monitor a plan of support. A wrap-around approach is designed for people/families with complex needs. In the case of homeless individuals and families, a wrap-around approach works best with individuals/families that experience more than one barrier to remaining housed.

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Resources

- Blakeborough, Darren, Katherine Gibson, and James Robson, “Homelessness and Low Barrier Housing in Chilliwack: A Qualitative Research Report.” Chilliwack Social Research and Planning Council (2015)
- Canadian Homelessness Research Network (2012) Canadian Definition of Homelessness. Homeless Hub: 222.homelesshub.ca/CHRNhomelessdefinition/
- Mennonite Central Committee BC, “2014 Chilliwack Social Housing Inventory.” Fraser Valley Regional District (2014)
- Van Wyk, Anita, and Ron van Wyk. “Fraser Valley Regional District 2014 Homelessness Survey: Findings, Conclusions and Recommendations.” Fraser Valley Regional District (2014)
- BC Housing website www.bchousing.org

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