



Community Plan for Homelessness in London

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Executive Summary

London’s homelessness problem poses a serious challenge for everyone—citizens, leaders, agencies and, above all, those whose daily lives consist of hunger, distress, fear, and scorn. This community plan transforms the overall goals and mission of the London Homeless Coalition (LHC) into a to-do list—an action plan to preserve and increase London’s supply of supported, transitional, and affordable housing stocks, shift the focus from reactive, emergency responses to proactive, long-term homelessness reduction and prevention strategies, and encourage cooperative and collaborative initiatives that provide a continuum of supports to homeless people. This includes recognizing the relationship between health and poverty, ensuring that adequate supports are in place, and ensuring that the homeless can access all relevant services.

London urgently needs more shelters and street-level supports to meet the needs of people living in shelters and on the street, as well as those whose housing situation is unstable, uncertain, or at-risk. Also needed are shelter-avoidance solutions that help people find, get, and keep housing. These include advocacy with landlords and other housing providers. Ending the “revolving shelter door” syndrome requires agencies to support homeless people as they make the transition from shelters to stable housing. Comprehensive and long-term solutions must include the provision of permanent, affordable housing, supported housing, and transitional housing. Resources are scarce and populations are diverse; agencies and organizations serving the homeless must communicate and work together. And finally, unless the community as a whole comes to a better understanding of homelessness and related issues, London cannot hope to alleviate or prevent homelessness in the long-term.

Every night in London there are people sleeping outside in alleys, behind buildings, in parks, and in wooded areas. Every night, there are hundreds of people, including the elderly, the disabled, and children, who stay in emergency shelters or are placed in motels because they have no other place to go. Others “couch surf”, sleeping on the floors or couches of friends and relatives. More alarmingly, some trade sex for housing because they see no other choice. Thousands more are those who have been identified as “at risk”. These are people who have their own places, but are paying so much of their monthly incomes on rent that even a minor crisis could result in homelessness. Too often it does.

The London Homeless Coalition exists to advise, shape and coordinate community responses to homelessness and related needs, for the London area

LHC Mission Statement

“Homeless people are at much higher risk for infectious disease, premature death, acute illness, and chronic health problems than the general population. They are also at higher risk for suicide, mental health problems and drug or alcohol addiction”

Golden, 1999

In 2001, members of the London Homeless Coalition (LHC) undertook to implement a long-term strategy that aimed to eliminate homelessness in our community. The centrepiece of this strategy was the development of a blueprint for action in the form of the Community Plan for Homelessness. To ensure the plan remains a relevant and useful tool, the LHC decided to review and revise the plan on a regular basis. Each revision should reflect the community's progress in addressing needs as identified in the previous Plan, as well as set out new priorities and strategies to meet new challenges and address emergent issues. Since the release of the original Community Plan for Homelessness in 2001, members of the LHC have made significant progress in addressing many of the identified community priorities. More importantly, communication, cooperation and collaboration have improved in the community since the formation of the coalition. Over the last year there has been more information sharing among sectors than ever before. Through participation from members of the public, service providers and the municipality, coordinated responses are being developed to ensure that needs—both urgent and long term—are addressed. As a result, homelessness issues are addressed in a more comprehensive manner, and London's capacity to strengthen the continuum of supports is enhanced.

"Another problem is the term homelessness itself. It is a fluid and confusing label for a set of social problems. It involves socio-economic arrangements that exist quite apart from those troubled by them. It is a confusing term due to conceptual imprecision, fuzzy boundaries, the influence of political agendas, the heterogeneity of the homeless population, and the assumptions and attitudes of the housed population".

*Homelessness – Causes and Effects,
The Relationship Between
Homelessness and the Health, Social
Services and Criminal Justice Systems,
The Eberle Group, Vol 1, February
2001*

Other areas in which London has made significant progress include: emergency shelters, including "crash beds" for homeless women experiencing mental illness; homeless prevention and shelter diversion initiatives; specific activities to meet the concerns of organizations that serve Aboriginal peoples, as well as those serving youth; resources for affordable and transition housing creation; co-ed and collective alternative shelter spaces, new partnerships and increased private sector involvement; increased community awareness and understanding of the issues of homelessness and the extent and impact of the crisis in the City of London; and increased communication, collaboration and cooperation amongst all stakeholders.

Currently the LHC membership includes representatives from more than 30 different community agencies serving the homeless, those at risk of homelessness, and the poor. There are also representatives from the health and mental health sectors, youth, addictions, corrections, agencies serving immigrants and refugees, faith groups, business associations, non profit housing providers, volunteer agencies, the City of London's Housing and Community Services departments, Human Resources Development Canada, Canada Mortgage and Housing Corporation, post-secondary students and faculty, members of the general public, and homeless

people. As the work of the coalition becomes more widely known, membership continues to grow.

On the other hand, there is much work to do. Agencies are struggling to keep up with demand. Until the expansion at Mission Services and the Salvation Army are complete, London is still in need of a family shelter. The Unity Project is operating at full capacity. Other shelters, serving men, women, and youth, are over capacity.

Solutions involve far more than providing emergency and support services for those who are living in the street. Helping people find and keep housing and ensuring there is enough affordable housing available to all—these are key to a lasting solution. In the long term, London must take pro-active measures to prevent homelessness by addressing the needs of the specific groups that are more likely to experience it.

Eliminating homelessness will require that all sectors of the community and all levels of government work together to support and implement a comprehensive strategy that addresses the social, economic, and systemic contributors to homelessness. Homelessness prevention must become a long-term priority for all.

Homelessness Plan 2003 Revision

Overview

Progress has been made on many of the priorities identified in the 2001 Community Plan for Homelessness in London. Funding provided by the Government of Canada's National Homelessness Initiatives Supporting Communities Partnerships Initiatives (SCPI) enabled much of this progress.

Funds utilized under SCPI and the Urban Aboriginal Homelessness Strategy supported the community's urgent needs: emergency shelter spaces, transitional beds to serve Aboriginal women, a youth shelter, and street-level outreach programs. Other programs (including housing outreach, youth support and housing outreach, mental health housing outreach, and street-level health and mental health programs) were either initiated or enhanced. These initiatives helped homeless and at-risk people:

- access medical treatment
- obtain social insurance numbers
- apply for housing
- complete social assistance applications
- access the food bank
- access prescription and over-the-counter drugs
- receive medical and dental treatment.

Since 2001, several shelter diversion and homelessness prevention initiatives were initiated or enhanced. These included the Rent Bank, the London Housing Registry, and The Heat and Warmth (THAW) Fund, as well as ancillary supports such as meal programs. Provincial Homelessness Initiatives funding, Ontario Works Enhancement funding, municipal funds, and generous donations from the community were key to the progress in this area.

In the area of affordable and transitional housing needs, recent infusions of dollars from the Federal Bi-lateral Housing Framework Agreement, the City of London's Housing Reserve Fund, and community donations, have resulted in plans to create at least 100 new units of affordable and transitional housing, with construction on the first project scheduled to start by the end of this fiscal year. At least one non-profit housing provider is considering a partnership with a service provider that will create a number of new supported housing units.

More importantly, however, communication, cooperation and collaboration have grown in the community since the formation of the LHC. Although service providers have always worked together on specific common issues, there was little sharing of information and communication across the sectors. Coalition meetings have helped to break down these silos by providing opportunities for service providers to share information and by encouraging the development of collaborative strategies. By working together in this way, the LHC has been able to foster and encourage a climate where the issues of homelessness are dealt with in a more holistic way, resulting in more effective use and allocation of resources. Improved communication means, in broad terms, more comprehensive solutions, fewer gaps, and a stronger continuum of supports for homeless people.

The improved climate of communication, understandably, has affected how others in the community work with the LHC. City staff actively participate and collaborate with LHC members, informing London City Council of community issues and priorities, encouraging collaboration between LHC members and the City of London, and working to improve communication. City staff have sought input from coalition members and staff, provided the LHC with valuable information and research, and extended the spirit of collaboration to others in the community.

Through greater awareness and understanding of homelessness as a far-reaching social issue, the community increased its support for LHC initiatives. Agencies report that both financial and in-kind donations have increased, including volunteer labour. In all, the community has responded to the challenge of homelessness with contributions of more than \$3 million across the board. During the City's pre-budget consultation (in November 2002) and the public consultations (in January 2003) several very diverse groups expressed support for affordable housing and increased spending on solutions to homelessness. Rural farm owners, for example, asked for tax breaks but also supported increased funding for affordable housing. The Urban League and several members of City Council also voiced support.

Much work and many challenges lay ahead. London's activities to fulfill the goals set out in the 2001 Community Plan on Homelessness in London indicate that the community, the Coalition, and this City are poised to create very significant change.

Available Shelter Beds 2001 – 2003

The 2001 Community Plan for Homelessness in London recommended an immediate increase of 190 emergency beds. Plans are currently underway to increase the number of emergency shelter, transitional and “crash” beds available in the city. In 2002, both Mission Services of London and the Salvation Army initiated major campaigns to increase their shelter bed capacities, including crash beds for persons with mental health issues and spaces for families with children. Women’s Community House and At^lohsa have either increased the number of available beds, or are planning to do so. As well, the Unity Project began to provide emergency shelter services, and it expects to deliver transitional housing options in 2004.

Women’s Community House expects to open a new 25 bed shelter for abused women and their children in late fall 2004. The expansion at Mission Services is scheduled to be complete by the spring of 2004. Salvation Army expects construction to be complete by 2004.

In response to reports of unsafe conditions, especially in for people sleeping in abandoned buildings, three groups (Mission Services, the Salvation Army, and the City of London) together established a temporary emergency shelter. It created 36 new beds for men, 12 new emergency beds for women, and 9 new crash beds for women. This arrangement was to have lasted until May of 2003; however, funding has been extended so that 12 crash beds for women are available at the St. Peter’s site until the expansion at Mission Services’ men’s facility is complete. In addition, the crash bed site added three additional spaces to accommodate some of the “overflow” from Rotholme Women’s & Family Shelter.

Total increases, either in place or anticipated, in the number of shelter beds in London (not including the temporary spaces described above) are listed in Table 1.

Table 1: Increases in Numbers of Shelter Beds, 2001-2003

	Type	Total Increase
Men	Emergency	59 (Men’s Mission: 57 Salvation Army: 2)
	Transitional* *Mission Services – plans to create 10 additional private transitional units	46 (Men’s Mission: 10 Salvation Army: 36)
Women	Emergency: Abused Women	25
	Emergency: Single women, non-abused	18
	Emergency: Single Aboriginal women, non –abused	6
	Transitional: Single women, non-abused	27
	Transitional: Single Aboriginal Women, non abused	5
Youth	Emergency – male	25*
	Emergency – female	25*
	Transitional – male	4
	Transitional – female	4
Crash Beds	Emergency: male	5
	Emergency: female	5
Family	Emergency	2 units (total of 8 beds)
Other	Unity Project**	25 emergency 6 transitional

* These beds will replace the 26 beds at Cross-Zone; Net increase of youth beds will be 24.

** Alternative shelter project, provides collective and co-ed emergency and transition units. It is anticipated that the Unity Project will receive City approval by the fall of 2003

Increases in Street Level Supports

Street level supports include outreach and support to those living in shelters and “in the rough”. The following programs were either initiated or enhanced with funding from SCPI, the Provincial Homeless Initiatives Fund, or other sources:

Organization	Received Funding for:
Women’s Community House	outreach and transitional support workers
Canadian Mental Health Association	housing outreach and support workers
Cross-Zone	counselling staff
Western Area Youth Services	youth housing advocates
Youth Opportunities Unlimited	outreach and counselling
At^lohsa	transition support
Mission Services	staff increases (raising the afternoon shift from one to three)
Community Mental Health Program	increases to the case management complement

However, agencies have found it difficult to maintain this level of support. Unless additional operating dollars are found, almost all of the above-mentioned initiatives will cease—many already have. Funding from these initiatives helped to enhance the identification replacement program so that homeless and at-risk people could access medical treatment, obtain social insurance numbers, apply for housing, complete social assistance applications, and access the food bank. These funds also enhanced programs that provided people with medical and dental treatment and helped them access prescription and over-the-counter drugs.

The John Howard Society created a community outreach program to provide support for youth leaving the shelter system. These workers help youth to find permanent housing, and they offer programs in life skills and self esteem to help youth maintain their housing.

The Middlesex–London Health Unit initiated the Extreme Weather Alert Program. During periods of extreme heat or cold, the Health Unit notifies agencies and the media, who advise people to take precautions. The Health Unit was also behind the idea to stock police cars with blankets so officers can provide them to people living on the streets during inclement weather.

Through collaboration between the City of London’s Community Services Department and the LHC, StreetScape began a ten-week pilot project to extend its drop-in hours on weekends. Client use will be monitored to determine if this project is effective in meeting community needs.

Other supports for people with mental health issues have taken shape. The Mental Health Alliance currently is putting together a third Assertive Community Treatment Team (ACTT). The team will be housed on-site with the Community Mental Health Program staff of Mission Services, and it will help seriously mentally ill people in shelters. The team will also help to ensure that these people have access to support once they gain housing. The community (including LHC members, mental health facilities, community mental health service providers, and various levels of government) is currently exploring ways to provide support to homeless and at-risk individuals with mental health issues. The connection between homelessness and mental health has been the subject of several research projects conducted by the Community University Research Alliance.

Increased Shelter Diversion and Prevention Initiatives

The City of London's Housing Access Centre has put its coordinated waiting list (for rent-geared-to-income housing) online. It has developed a system to ensure that certain groups—abused women, families with children living in shelters, and disabled people—receive priority. Housing Access staff are now visiting shelters to take applications for subsidized housing. The London Housing Registry has received funds and is now seeing clients. In addition, the Housing Registry has hired a youth housing worker who is housed on-site at the Youth Action Centre.

The LHC's Prevention and Housing Working Group has submitted a proposal to create a Housing Resource Centre. Outreach workers and advocates from a variety of agencies would be available to help people obtain and maintain housing. The center would provide landlord/neighbour mediation to prevent evictions, and it would look at developing and operating a fund to help people pay rent and utility deposits.

Large financial contributions from the City of London and London Hydro, along with generous support from the community, have allowed The Heat and Warmth (THAW) program to help more families pay their utility bills in 2002-03. THAW has streamlined its application process and has created an operating manual for the satellites.

Rent banks have been proven to be successful eviction-prevention initiatives. After having received municipal funding, the London Rent Bank expects to begin accepting loan applications in late 2003. The community, in a strong show of support, has raised more than \$6,000 in donations for this initiative.

Homelessness prevention initiatives such as THAW (The Heat and Warmth program) report that 2002 applications for assistance totalled \$283,526.

Over the five years of THAW program's operation, approximately one million dollars has been raised and paid to the utility companies on behalf of low income Londoners

Agencies serving people with mental health issues have met to develop recommendations for the Ministry of Health and Long Term Care and the regional psychiatric facilities. These agencies have recommended that psychiatric facilities not release clients until adequate supports, including housing, are in place.

The Community and Protective Services Committee authorized funding of \$500,000 over two years for the Rent Bank. This amount includes funding for both operating and rent bank loans.

The community has taken advantage of new opportunities for affordable housing creation. Recent infusions of funds (from the Federal Bi-lateral Housing Framework Agreement, the City of London's Housing Reserve Fund, and the community) have resulted in plans to create at least 100 new units of affordable and transitional housing, with the first project scheduled to begin construction by the end of this fiscal year. At least one non-profit housing provider has discussed a partnership arrangement to build more supported housing. Faith groups formed the London Affordable Housing Foundation (LAHF) and raised more than \$100,000 for the construction of family units. As well, the City of London committed an additional \$2 million dollars in matching funds to encourage more affordable housing creation. It also hosted "London Day", a forum for private developers, city officials, community groups, and funders to initiate an affordable housing strategy for the City of London.

LHC Project staff organized and provided clerical support for six community forums and more than 60 community meetings. These gave rise to:

- a partnership with London Police Services to produce an educational/informational video for people who come into contact with homeless people as part of their jobs;
- the Rent Bank
- extended hours for "Gathering Place", StreetScape's drop-in centre
- Council Council's increased understanding of—and attention to—mental health and homelessness issues
- City Council's commitment to the development of an affordable housing strategy, as well the allocation of an additional \$2 million for affordable housing creation in its 2003-2004 budget

LHC project staff were also active as organizers of two very successful awareness events. "InVisible", held in October of 2002, attracted 340 people and included a community forum and a screening of "Shelter from the Storm". "Eyes on Homelessness", held in July 2003 at Museum London, showcased art created by people who had experienced homelessness. The event drew more than 200 people on opening night.

“Surviving Homelessness On Empty: A Councillor’s Challenge” (SHOE) was a highly successful campaign to engage City Council and the community, via the media, in a discussion. Almost all Council members participated in “back alley” tours and scheduled visits to organizations that provide services for people who are homeless or at-risk of homelessness. SHOE painted a broad and compelling picture of people who live in dire poverty, and those who work for change.

Another successful community awareness event was the soup-and-sandwich lunch series at Market Lane. These created awareness of homelessness issues and offered information on the range of services available. London City Council members, local businesses, and labour groups were invited to the November 22, 2002 soup-and-sandwich gathering; several became involved with the work of the LHC.

Partnerships

Since the formation of the coalition, more than 40 community agencies, faith groups, city staff, and members of the community have been involved in an on-going collaborative process to identify issues, gather and share information, and develop strategies to address homelessness issues. This kind of interaction has helped to break down barriers to communication and has fostered a new level of collaboration. LHC partnerships (and potential partnerships) are listed in Appendix 1.

It is estimated that these partnerships have provided the community with increased resources that have been valued at more than \$1 million

The Local Context

Shelters and Supports

The province pays 80% of the per diem cost for shelter beds in the city. The City of London pays 20%. In 2002, the City of London spent approximately \$845,000 on shelter. Currently there are about 160 people with developmental disorders waiting for spaces in supported housing units per diems

In 2002, the Provincial and Municipal governments spent a total of approximately \$4 million to keep Londoners in temporary shelters.

Despite all of the community's progress in addressing the priorities identified in the community plan, the sad reality is that agencies are struggling to keep up with demand. London is still in need of a family shelter, and until the expansions at Mission Services and Salvation Army are complete, shelters serving men, women, and youth continue to operate at over capacity. For the past three years, shelters in London have been operating at levels of up to 140% over capacity. In all, over 4,000 people, including 625 children, were accommodated in the city's shelters in 2002, straining the community's resources to the limit. This figure does not include those homeless individuals or families who, for a variety of reasons, did not seek beds in the city's shelters. The lack of affordable, transitional and supported housing and other supports has meant that people are staying longer in shelters—far beyond the funded 42-day maximum.

While shelters are straining to meet the emergency needs, many other needs go unanswered. London requires a gender-specific youth shelter remains unanswered as well as gender-specific drop-ins for homeless and at-risk people. People trying to access housing and housing maintenance supports, including help with “life skills” and landlord/tenant/ neighbour mediation, are faced with frustration and delays. Waiting lists for subsidized housing number in the thousands. Homeless aboriginal people continue to suffer from a lack of access to culturally specific supports, including emergency shelter beds. New and recent immigrants struggle to find suitable and affordable housing. Operating at record volumes, London's food banks and meal providers report seeing more and more children.

Compounding the problem is the growing number of homeless people with mental illnesses. Emergency shelter systems cannot safely and effectively support these people. There are not nearly enough resources in the community to provide the mentally ill with enough assistance to keep them stable and housed. Not surprisingly, service providers are struggling to keep up with demand. Recent statistics from Mission Services and Rotholme Women's and Family Shelter show that, on a typical night, more than 45% of their clients have recognizable mental illnesses. Incarceration rates for the mentally ill are on the rise, and

Currently there are about 160 people with developmental disorders waiting for spaces in supported housing units

uniformed police officers spend twice as much time dealing with persons with suspected mental illness¹.

Cutbacks

The lack of adequate and sustained funding has meant that many homelessness projects have either been scaled back or ended. London has lost housing outreach workers for women, youth, and persons with mental health issues. A lack of human resources forced the Canadian Mental Health Association to suspend new intakes for a period of time, and lack of funding forced HarvestField Dinners to temporarily shut down operations.

Funding cutbacks and restrictions have meant that community development agencies, including community resource centers and friendship centers for Aboriginal people, find it extremely difficult to provide services and programs that build individual and community capacities for sustainability.

In 1995, the Ontario Government cancelled the construction of 17,000 social housing units

By relying exclusively on “market forces” and failing to create a National Housing Program, the federal and provincial governments have impaired the ability of non-profit and social housing providers to meet demand for low cost, affordable housing.

Poverty

Despite economic growth, the number of low-income Ontario residents grew by 17% in the five-year period between 1995 and 2000. In London, approximately 54,000 citizens (more than 18% of London’s population) live at or below the poverty level. In 7 of the city’s 23 planning districts, household annual income is equal to or less than \$19,000. Three of these districts are well below the Low Income Cut Off Rate (LICO), with annual incomes ranging from a low of \$12,000 to a high of \$16,000.

¹ Police perspectives arising from trends in the London Police Service contact with persons with serious mental illness; Lisa Heslop, Kathleen Hartford, Ted Schrecker, Larry Stitt, and Jeff Hoch, for the Consortium for Applied Research and Evaluation in Mental Health, London Police Service, The University of Western Ontario, Lawson Health Research Institute

Table 2: 1997 Low Income Cut-Off Rates (Urban Populations)

<i># Of persons Per family</i>	<i>Low Income Cut Off</i>
1	\$18,841
2	\$23,551
3	\$29,290
4	\$35,455
5	\$39,633

The average income declined by 8% for low-income couples and by 11% for single-parent families. Child poverty has more than doubled in the last decade. Almost one in five children in Ontario lives in poverty; London’s rate of child poverty is higher, with almost one in four children living in poverty. For those receiving social assistance, the problem is even more acute. Across the province, data shows that more than half of the monthly Ontario Works allowance is used to pay for shelter, meaning that families increasingly are being forced to choose between paying the rent or buying groceries.

Table 3: Ontario Works Allowances

	Basic Allowance	Maximum Shelter Allowance	Total Allowance	Percentage of Total Allowance allocated for Shelter
Single Adult	\$195	\$325	\$520	63%
1 Adult/1 Child <13	\$446	\$511	\$957	54%
1 Adult / 1 Child >13	\$486	\$511	\$997	52%
2 Adults/ 1 Child <13	\$476	\$554	\$1030	54%
2 Adults/ 1 Child >13	\$512	\$554	\$1066	52%

London’s food banks and hot meal providers report dramatic increases in the number of people using their services. The London Food Bank reports that it provides assistance to approximately 31,200 families a year. In 2003, children (17 years or less) accounted for 43% of the total use of the London Food Bank’s services. HarvestField Dinners, in the Hamilton Road area, serves meals to more than 300 seniors a week, and has begun a breakfast

program for children. The Hunger Relief Advisory Committee reports that in January of 2002 London's 14 meal program providers served 7,875 meals.

THAW (The Heat and Warmth program) reports that demand for assistance is so high that funds are always exhausted soon after the official start of the project each year on January 2nd. During the 2002 winter season, the program ran for 11 weeks and assisted 1,375 individuals across 405 households with \$200,255 in payments towards utility charges. Because of the provincially mandated moratorium on hydro disconnections, the 2003 the program lasted 22 weeks. It paid \$387,683 to utility companies on behalf of 2,396 individuals in 748 households comprising, among others, seniors, the working poor, and families receiving social assistance.

Many people affected by poverty are members of London's most disadvantaged communities: recent immigrants, refugees, people of colour, Aboriginal people, women, gay/lesbian/bisexual/transgendered people, and the mentally or physically disabled. Most of these groups experience higher-than-average poverty rates and have less opportunity to access services and housing because of racism and other forms of discrimination. The incidence of poverty among urban Aboriginal people is considerably higher than among non-Aboriginal people. In London, the poverty amongst Aboriginal people was three times that of non-Aboriginals.

Housing costs, including heat and utilities are, for most people, the largest monthly expense. According to Statistics Canada, 47% of renters in London pay more than 30% of their monthly income on rent and one-quarter of these pay 50% or more. With heat and hydro costs increasing at unprecedented rates, costs for shelter have risen by more than 18%, while incomes for London's low-income families have dropped by 26%.

An individual earning minimum wage for a 40-hour week receives a gross weekly (before taxes and deductions) pay of \$274.00. Accommodations therefore should cost no more than \$365.33 per month. The average bachelor apartment rents at \$435 per month and one bedrooms start, on average, at \$495.00.

People surviving on Social Assistance are worse off. A single adult receiving Ontario Works receives a total of \$520 per month. Of this amount, \$325.00 is the maximum allowed for shelter (rent, heat and utilities). A family of three receives \$1030: \$554 per month for shelter and \$476 for food, clothing, and transportation. The shelter components of Ontario Works allowances ignore the

The Royal Commission on Aboriginal peoples concluded that the high poverty rate among Aboriginal people is due to a number of factors, including significant barriers that many Aboriginal people face in getting and keeping good jobs in urban centres.

Studies show that there is a direct correlation between health and housing. People living in sub-standard or inadequate housing are more susceptible to respiratory disease and stress-related illnesses, have a higher incidence of social and behavioural problems, and have more difficulties in school

realities of market rents and inflation rates. When a household's shelter costs consume more than 50% of its income for a prolonged period, the risk of economic homelessness increases considerably.

Rent

Twenty percent of London residents live in housing that is substandard or unaffordable— at rates 25% higher than in the rest of Canada. In its 1999 report London's Affordable Housing Task Force estimated that 700 units of affordable housing are needed every year for the next 10 years in order to meet existing needs. In 2003, 4000 names are on waiting lists for subsidized housing, representing an increase of 1,000 since 2001. Those who do not have priority status usually wait more than three years. Ten percent of London's rental housing has been lost to condo conversions and demolition. As vacancy rates decline, rents rise.

Changes to the Tenant Protection Act, introduced in 1998, gave landlords the right to raise rents with each new tenant who moves in. The new act, intended to stimulate growth in rental apartment construction, instead has served to drive up rents and make it easier for landlords to evict tenants.

Although hard data is still forthcoming, London's Rent Tribunal indicates that the number of evictions is on the rise, and that landlords are growing less willing to negotiate with tenants in arrears. People have been evicted in London for owing less than \$100. Rotholme Women's and Family Shelter reports that, during its 2002/03 fiscal year, 563 of their clients had come to the shelter after being evict

Jobs

Labour market trends have seen full-time jobs replaced by part-time and contract positions. In the 1980s, full-time, mid-waged jobs accounted for 58% of new job creation; in the 90s only 18% of new jobs were full time. Statistics indicate that, in London, the majority of new jobs created were low paying service sector or sales jobs. Ontario's minimum wage stands at \$6.85/hour, unchanged in ten years.

Restructuring of the E.I. program has made it harder, especially for those who are the least prepared to withstand layoffs and shutdowns, to qualify for benefits. Part-time and seasonal workers struggle to obtain the required number of hours. These range between 420 and 700, depending on the area's unemployment rate. In regions where unemployment rates are low, part-time workers

and short-term contract or seasonal workers find themselves ineligible for benefits, despite paying into the plan.

Health Care

London's shortage of physicians, loss of identification, and new regulations regarding health cards present barriers to homeless people accessing health care. This, and factors related to inadequate diets and unsafe and inadequate living conditions, put people at greater risk for infectious disease, premature death, malnutrition, and chronic health problems than for the general population. Studies indicate that on average, when homeless people become ill, their conditions are more severe and require more intensive treatments, including longer hospital stays - all of which have negative impacts on the health care system.

"It is not sufficient to ask what it is about the homeless poor that accounts for dispossession. One must also ask what it is about "the rest of us" that has learned to ignore, then managed to tolerate, and now seeks to banish from sight the evidence of a present gone badly awry"

Kim Hopper (1991).

Objectives

Strategic Objectives

- Reduce poverty
- Preserve and increase London’s supply of supported, transitional, and affordable housing stocks.
- Shift the focus from reactive, emergency responses to proactive, long-term homelessness reduction and prevention strategies.
- Foster and encourage cooperative and collaborative processes to support a continuum of supports approach to homelessness initiatives and service provision. This includes recognizing the relationship between health and poverty, ensuring that adequate supports are in place, and ensuring that the homeless can access all relevant services.
- Collaborate with all levels of government and ensure they participate in the development and implementation of London’s long-term homelessness elimination strategy.

Priority Objectives

Urgent Needs—Shelters.

Develop initiatives to meet the urgent and immediate needs of people living in shelters.

Urgent Needs—Street- Level Supports.

Develop initiatives to meet the urgent and immediate needs of people living on the streets and those without a stable place to live.

Shelter Diversion and Homeless Prevention.

Under the overall strategy of “find, get, keep”, develop initiatives that will help people find and maintain housing, including advocacy with landlords and other housing providers.

Transition and Support.

Develop initiatives to help people move from homelessness to stability, ending the “revolving shelter door” syndrome.

Affordable Housing (including supported and transitional housing).

Provide support to encourage the development of a range of permanent, affordable housing, supported housing, and transitional housing.

Coordination.

Enhance coordination and communication. Foster collaborative and partnered responses to homelessness.

Community Awareness and Understanding.

Implement initiatives to increase the community's awareness and understanding of homelessness and related issues in order to support the development and implementation of an effective long term, community wide homelessness alleviation and prevention strategy.

Specific Objectives

Sustainability

Examine the LHC's organizational capacity. Establish processes to ensure that the work of the coalition is supported and sustainable. Persuade funders to provide sufficient resources for a "continuum of supports" approach, and to re-examine the practice of providing only short-term direct service project funding.

Research

Develop cross-sectoral collaborative research and information/data gathering/sharing vehicles, including the development of a standardized statistical gathering method, and research into the costs of alternative homelessness strategies (such as "housing first") and the use of HIFIS as a tool for statistics gathering and strategic planning. Develop methods to monitor and evaluate programs.

Sectoral Participation

Increase the participation and representation by members of the Aboriginal community (and the agencies that serve them), as well as the private sector.

Leadership and Recognition

Strengthen the Coalition's relationship with the municipality to ensure that the London Homeless Coalition informs relevant municipal budget decisions. Integrate the Community Plan for Homelessness in London into the City of London's business plan.

Operations

a) Steering Committee. Based on LHC recommendations, develop the mandate and terms of reference for a steering committee.

b) Annual Plan. With guidance from the Steering Committee, develop an Annual Strategic Plan that sets specific, measurable, time-oriented goals and objectives for the activities of the LHC.

c) Working Groups. Based on existing LHC recommendations, establish working groups to deal with specific objectives identified in the plan.

Communication

Overcome the barriers that prevent meaningful communication and the development of shared, collaborative processes. Identify and develop opportunities for meaningful communication and collaboration with action-oriented outcomes.

Supports to Sustainability

As noted throughout this community plan, the lack of adequate and sustainable funding for community initiatives continues to present barriers for agencies trying to meet demand for service.

Insufficient funding has also proved to present barriers to the work of implementing long term effective homelessness amelioration and prevention strategies both at the agency level and with the work of community capacity building.

In order to provide the programs and services necessary to create a continuum of supports, individual member agencies of the LHC have each developed their own funding development strategies to ensure sustainability of core programs and projects. The staff and steering committee of the LHC project are also seeking sustainable sources of funding in order to continue providing administrative and coordination support to the LHC.

Partnerships

The LHC has been part of many valuable partnerships since 2001 and has helped form partnerships among its members. These are described fully in Appendix 1.

Enhancing Existing Partnerships

Looking to the future, the LHC will focus on enhancing partnerships with the following organizations:

City of London	Media organizations
Aboriginal Homelessness	Labour organizations
Coalition (AHC)	Addictions agencies
Old East Village Business	Agencies that serve offenders
Improvement Area (OEVBIA)	London Police Services
National Homelessness	Mental Health Alliance
Initiative (NHI)	Provincial and national partners
Private sector organizations	Foundations and other funding
United Way of London	agencies
Middlesex	

Equally important is the need to enhance intra-coalition partnerships and collaborations. It will encourage agencies to break out of “service silos”, reduce barriers to communication, and

build trust amongst and between community agencies and other stakeholders.

"... collectively and individually, organizations have few or no resources to spare from direct service. Voluntary organizations have suffered cutbacks by government at all levels in front line services and will be challenged to participate full without additional resources somewhere in the system"

VOICE in Health Policy Final
Report – Ontario

As well, the LHC will work to increase understanding of homelessness issues among Aboriginal peoples, (both within the LHC and the community in general) and to increase efforts to bring the Aboriginal community and their agencies into the community planning process. Aboriginal agencies (specifically At^lohsa Native Family Healing Centre and N'Amerind) have been represented on the LHC and their staff attend its meetings. Nevertheless, the relationship between the LHC and London's Aboriginal community must be strengthened, especially in terms of Aboriginal representation in planning, decision-making, and implementation processes. It has been recommended that that the LHC specifically invite the Aboriginal community to appoint members to sit on the LHC steering committee and that the Aboriginal community be specifically invited to participate as a formal working group of the coalition.

And finally, the LHC will support and build on existing intra-LHC partnerships and initiatives such as the Rent Bank, the after-hours drop-in for homeless individuals, the three party partnership to provide "crash beds" for women with mental health issues, and other projects, especially those in the area of mental health.

Forming New Partnerships

The LHC will work to form partnerships with the following organizations.

Federal Government

- Health Canada
- Revenue Canada
- Corrections Canada
- Indian Affairs
- Chiefs of Ontario
- Urban Native Initiative
- Attorney General
- HRDC – employment training-Immigration
- Local members of parliament

- Board of Control
- Community and Protective Services Committee

Private Sector

- Banks and other financial institutions
- Local manufacturers and businesses

Municipal Government

- Research and statistical departments
- Finance Department

Service Clubs

Optimist, Kinsmen, for fundraising

Homeless Individuals/families

Offenders/Ex-offenders

- Discharge planners
- Attorney General
- Services for Young Offenders to inform community development process, increase partnerships

Persons with Disabilities

People in the Sex Trade

Youth at Risk

- Youth Action Centre
- Cross-Zone
- Unity Project

Provincial Government

- Ministry of Community and Social Services
- Ministry of Health
- Ministry of Municipal Affairs and Housing
- Ministry of Education and Training
- Ontario Works
- Local members of provincial parliament

Non-Profit/Non-governmental organizations

- March of Dimes
- Association for Community Living – to provide input into community planning strategy, partnerships to increase number of units available
- Habitat for Humanity
- London Hunger Relief Committee
- Advocacy groups for the disabled
- Advocacy groups for seniors
- London Labour Market Planning Council
- London Economic Development Council (LEDC)
- Community Economic Development Technical Assistance Program (CEDTAP)
- London Small Business Centre
- Wheable Adult Education
- London District Labour Council
- St. Willibrord Credit Union
- Middlesex-London Health Unit
- Mental Health Alliance

Universities/ Colleges

- UWO – Media, Information Technology, Faculty of Law, Faculty of Education, also help with statistical analysis, research
- Kings College – social work
- Fanshawe College – apprenticeship programs, construction trades training

Faith Groups

- All major churches in the area – access to resources
- Interfaith Social Assistance Reform Coalition (ISARC)
- Central Mennonite Committee – community development programs

Unions

C.A.W. and OPSEU for support of community development initiatives, and fund raising

Groups that serve Aboriginal people

More partnering between “mainstream” community, including funders to implement Aboriginal Homeless Coalition community plan

People with Addictions

Increased communication and partnering on initiatives to support continuum of supports approach

People with FAS/FAE

People with Mental Health Problems

Recent Refugees/ Immigrants

Visible Minorities

Community Capacity Building

Along with partnership development, community capacity building is an essential element in the sustainability of London’s work to end homelessness.

The following areas of community capacity are identified as priorities:

- Support agencies to continue to develop the necessary skills and tools to develop and manage projects
- Support agencies to partner with other community groups to achieve common goals and provide better service to clients
- Assist agencies to develop networks to undertake joint activities and coordinate their services
- Help agencies and networks to actively participate in the community planning and implementation processes
- Support agency networks to work with other sectors to achieve common goals and provide better service to clients
- In the community response to homelessness, develop a process that is more broadly focused than just SCPI and homelessness services
- Actively expand the range of funders and potential contributors at community planning and implementation tables

- Further develop federal/provincial/municipal collaboration
- Seek out innovative funding partnerships
- Link agencies and networks with potential partners for funding and other resources
- Promote best practices in project development, management and sustainability (e.g. seminar on leveraging funding)
- Further develop community awareness of homelessness
- Further develop a common vision and community ownership of homelessness issues and solutions
- Further develop leadership of community processes to maintain momentum
- Link with other community involvement tables (e.g. Success by Six, Vibrant Communities, Safe Communities, etc.) to complement efforts
- Implement and/or maintain HIFIS
- Undertake research projects
- Improve data management with in community

Of the above priorities, three areas have been targeted for initial action. These, and the corresponding activities, are listed below.

1. Support agencies so they may continue to develop the necessary **skills and tools to develop and manage projects**.

Corresponding activities are consistent with the LHC's priority objectives: build shelters and improve street-level supports. As well, the LHC will undertake activities that foster community ownership of these goals/ objectives, and promote a common vision of how to meet them.

2. Promote best practices in project development, management and sustainability.

Corresponding activities are those consistent with "Sustainability" in the Specific Objectives section:

Examine the LHC's organizational capacity.

Establish processes to ensure that the work of the coalition is supported and sustainable.

The LHC will work to persuade funders to provide sufficient resources for a "continuum of supports" approach, and to re-examine the practice of providing only short-term direct service project funding.

3. Improve data management in the community

Corresponding activities are those consistent with "Research" in the Specific Objectives section:

Develop cross-sectoral collaborative research and information/data gathering/sharing vehicles, including the development of a standardized statistical gathering method

Research into the costs of alternative homelessness strategies (such as “housing first”)

Investigate HIFIS as a tool for statistics gathering and strategic planning. Develop methods to monitor and evaluate programs.

Develop partnerships with UWO and the City of London to access resources for data and statistic collection

In addition, the LHC will work to develop an exhaustive inventory of agencies, services and service providers working to alleviate homelessness and related issues.

Project Funding Issues and Criteria

The community has agreed to adopt a *community-vetting model* for decisions on project funding requests. With the help of the United Way of London and Middlesex, the LHC will develop a process that will reflect its commitment to transparency and trust.

The LHC realizes that projects will have funding needs that extend past the end of the SCPI initiative. In light of this reality, the coalition expects that member agencies will assume responsibility for developing and implementing programs that address community priorities as identified in this community plan.

The highest priorities for LHC are services that meet the needs of people who are experiencing homelessness or are at-risk of homelessness. Agency core activities and positions will not be eligible for SCPI funding. The Review Committee will assess proposals to ensure SCPI funding is meeting the communities’ priorities as identified in the LHC Community Plan. The LHC will use current research on service demands, trends in service utilization, and community concerns to guide its funding decisions for maximum impact in areas of concern.

Evidence of sustainability will be identified through the ability to leverage dollars and utilize partnerships, as was done with the Rent Bank. The Rent Bank was established after the LHC held stakeholder meetings and conducted community awareness campaigns. The City of London provided \$500,000 over three years for the initiative, and the general public contributed more than \$6,000. Partnerships were developed to ensure the sustainability of the Rent Bank project.

The LHC Review Committee will use the Terms of Reference (see Appendix 3) in its evaluation of all projects. The section dealing with funding criteria is reproduced here:

Is there a clearly defined need?

Is the project consistent with the LHC Community Plan, current local research, and discussion papers in areas identified?

Is attention paid to neighbourhood capacity-building, diversity and inclusive issues?

Does the service duplicate existing services?

Is it consistent with the changing funding and service delivery environment?

Are Service Outcomes clearly stated?

Are there clear objectives, service plans, monitoring systems and plans to develop outcome measures?

Is there evidence of partnerships and linkages?

Is the proposal innovative, collaborative, and creatively responsive to social, demographic, and economic change?

Is it cost effective?

Are resources used in the most effective manner relative to the outcomes to be achieved?

Does the project include clear financial reporting/planning activities?

Can it Leverage Dollars?

Is there evidence of creativity in seeking/obtaining additional funding from all possible sources?

How Does it Use Funds?

Does the proposal:

1. Demonstrate creative/innovative approaches to community issues?
2. Utilize partnerships in service delivery, funding, fundraising?
3. Incorporate goals that can be measured, in order to determine the project's impact and success in meeting critical needs?
4. Serve and reflect the diversity within the community?
5. Engage, support, and celebrate volunteers in all aspects of their work?

Members and staff of the LHC will continue to identify projects that have been effective in addressing community needs and priorities. They will advise funders of the need for continuity for projects. Agencies have been actively engaged in developing and implementing campaigns to raise project funds from the community and private sector. The LHC Steering Committee knows it must find ways to increase donations from the private

sector, faith groups, and labour groups. As it works to develop these funding possibilities, it will advocate for renewed funding for projects that have proven effective.

Plan Implementation & Evaluation

Through an ongoing and participatory process, the LHC will continue to monitor the community's progress in implementing the recommendations of the community plan. This process will include gathering information through its regular and special meetings, community forums, and through surveys and interviews with relevant stakeholders.

Members of the LHC, civic administration and others in the community will be invited to provide input and help identify gaps and needs in the community on a regular basis. This strategy has been useful in monitoring the community's progress and identifying emerging trends, as well as helping to identify areas where the LHC project has been successful in helping the coalition achieve its goals. As well, the LHC will investigate the feasibility of implementing the Homeless Individuals and Families Information System (HIFIS) as a potential information, research, and planning tool.

By the end of the 2004-05 fiscal year, the community's identified needs regarding shelter beds will be addressed. Approximately 100 new units of affordable housing will have been created. Drop-in spaces will be available after hours and on weekends. Development plans to create a housing resource centre will be completed and funding applications begun. Strategic planning for the LHC will have been completed, and actions related to the plan will have commenced. Relationships with the aboriginal community will have been strengthened and demonstrated through increased participation by the aboriginal community. There will be an increase in private sector participation in all aspects of the community planning process.

The LHC Review Committee will report to the London Homeless Coalition the outcomes achieved through SCPI funding.

As it did during the first phase of SCPI, the LHC plans to hold at least two community forums each year of the initiative to identify community progress. In addition, a survey will be distributed to determine whether or not the process is meeting community's needs. The results of these will be used to compile a Community Progress Report and will also be used to revise the Community Plan.

Communications Strategy

The following three goals of the LHC's communications strategy are discussed more fully in the subsequent paragraphs.

1. Increase and improve communication amongst and between LHC members, all levels of government, and the general public
2. Increase and improve communication among the LHC, its stakeholders, and the general public
3. Increase the community's understanding and awareness of the issues surrounding homelessness. Seek feedback and input from the community at large.

1. LHC – Government – Public

Target audience: LHC members, government agency, and general public

Activities:

- E-mail postings of LHC business, agency activities and information updates
- Hold regular and special meetings of the LHC - promote widely, invite broad participation
- Facilitate at least two community forums per year; promote widely
- Release semi-annual community progress reports; ensure wide distribution
- Revise and release community plan annually; ensure wide distribution. Continue to facilitate information-sharing (i.e. Soup'n Sandwich events, speaking engagements at UWO, Fanshawe College, meetings of faith groups, community groups, high schools, public schools)
- Strengthen the steering committee's capacity to work collaboratively and make decisions, in order to better facilitate the development of a comprehensive communications strategy that includes development of a web site, and regular media releases.

2. LHC – stakeholders - general public

Target Audience: funders, private sector organizations, non-governmental organizations (i.e. LEDC, Chamber of Commerce, etc.), agencies, government (all relevant jurisdictions)

Activities:

- Facilitate an annual funders' forum

- Coordinate workshop on public/private partnerships
- Meet with elected officials from all levels of government to provide information, advise on policy decisions, seek support for the work of the coalition and its members
- Coordinate and facilitate working groups of the LHC, ensure information flows to other stakeholders
- Develop "fact sheets" and other documents to illustrate extent of the impact of homelessness in the community, explore solutions, and inform the community
- Plan and develop a web site

3. LHC - Public (Awareness, Understanding, and Feedback

Target Audience: Citizens of London

Activities:

- Coordinate two community forums per year for the purpose of gathering and distributing information
- Coordinate at least four community awareness events per year to: highlight the community's progress in addressing homelessness; create better understanding and awareness; and engage the community in the planning and implementation of homelessness strategies.

Overall communication activities will include regular communications regarding the work of the LHC and its members, a semi-annual progress report, community forums for the purpose of gathering and distributing information and to create greater awareness and understanding of the issues of homelessness in the community, and special meetings, including specific workshops (i.e. funders forums, public/private partnerships, etc.)

Assets and Gaps

Emergency Shelter

Since 2000, all of the City's shelters have consistently operated at levels averaging at around 125% over capacity. The overcrowding is consistent, but the demographic is changing. Shelter providers and community agencies that provide services to the homeless report that they see more families, both one and two parent, as well as older women and youth. Particularly worrisome is the increasing number of young, pregnant homeless women. A doctor at one pre-natal clinic estimated that 50% of the women accessing the clinic were homeless.

The growing numbers of male-led families (either lone male parent or two parent) seeking shelter has highlighted the need for family shelters that can accommodate men. The current practice is to separate the family, with the mother and children going to Rotholme Women's & Family Shelter and the father going to one of the men's shelters. This solution is neither desirable, nor practical, particularly if the family happens to be headed by a lone male parent. Couples often choose to sleep outside rather than be separated. Families have different needs than single people, and children's safety can be compromised if exposed to some of the behaviours, choices, and crises that single shelter clients are dealing with. In addition to the need for separate family shelters, London needs shelter beds for the growing number of older single women and women with mental health issues.

Adequate shelter and transitional supports for youth between the ages of 15 and 18 has been identified as an area of need in the city. Since 1999, the Ministry for Community and Social Services has closed approximately 24 group homes in London; the Ministry has clearly expressed that it will not create more. Youth within this age group are not usually eligible for social assistance and are reluctant to seek out help from agencies such as the Children's Aid Society. They are unable to apply for social assistance without permission from their parents or guardians—which they are unlikely to obtain, particularly if they are fleeing from abusive family situations. Many youth who are unable or unwelcome to live at home due to abuse or chronic family conflict end up on the streets, where the risk of exploitation, violence, and illness is increased. These youth are in dire need of supportive living and life-skills programming to successfully live independently.

The LHC has identified the need to create shelter spaces for persons that cannot be accommodated within the current shelter

system: elderly and disabled people. Differing needs mean that these spaces must be separate from a family shelter, youth shelter or a men's shelter. Because staffing resources and clinical expertise are limited, city shelters have difficulty dealing with people actively using drugs and alcohol, as well as those exhibiting signs of psychotic behaviour or who have a history of violent, drunken, or disruptive behaviour at the shelter. Incarcerating or hospitalizing these people does not address the community's concerns in a meaningful way. "Crashbeds", provided by Mission Services of London's Community Mental Health Program, do address this need, but the capacity is limited.

The issue of mental health and homelessness has reached the crisis point in London. Shelter staff report that large percentages of the people they serve are those with mental illnesses. Between Rotholme Women's & Family Shelter and Men's Mission, 47% have diagnosed mental health illness; 43% of the 47% also have substance/alcohol abuse issues. This pattern is consistent with information received from agencies serving homeless women and youth. The lack of available alternatives for youth who are experiencing mental health issues has been noted by the LHC as an emerging issue.

Shelters are currently funded for each person up to a maximum of 42 days. However, shortages of transitional housing, affordable housing, and other community supports have meant that people are staying longer. This has resulted in a severe strain on shelter resources, both financial and human. The 42-day maximum does not allow people enough time to gather the personal resources they need to move on, particularly those who have additional life issues to contend with, such as low-level social functioning, addictions, and mental illness.

Community consultations have also highlighted the need for emergency shelter and street-level services for London's multi-cultural community. Currently, very little information or services are available in languages other than English and, perhaps, French.

Although the 2001 Community Plan for Homelessness in London identified the need to increase the number of beds for abused Aboriginal women by 25, there has been little progress. In addition to that recommendation, the Aboriginal Homeless Coalition in 2003 identified the need to research, more fully, initiatives that will address needs in London's Aboriginal community and provide long-term positive impacts.

Table 4: Summary of Assets and Gaps in Emergency Shelter Beds

	Assets	Inventory	Additional Need (Gap)
Men's Shelter (16+)	Men's Mission	54	
	Salvation Army	76	
Women and Family	Rotholme Women's & Family Shelter (non abuse related)	20	36 (for a total of 56)
	Rotholme Women's & Family Shelter	21	Create separate family shelter, totalling 60 beds for single parent (men/women) and two-parent families.
	Women's Community House (abused women)	42	20 (interim)
	Aboriginal Women & Children (Zhaawanong)	16 (20?)	30 female / 30 male
Aboriginal People	Zhaawanong Aboriginal Women & Children (16 (20?)	30 female / 30 male
	Aboriginal Youth	0	15 female / 15 male
Youth	Salvation Army Cross-Zone (not including 6 overflow)	20	Need for separate male/female facilities
	Unity Project	5	
	GLBTQ Youth	0	Not specified
	Aboriginal Youth		15 female / 15 male
Refugee / immigrant	Global House	25	50

Mentally III Addictions	Crash Beds (female)	3	20
	Crash Beds (male)	5	20

In the area of non-Aboriginal emergency shelter beds, London has met the most of the recommended increases. The overall number of available non-Aboriginal beds has increased (or will by May 2004 when the expansion at Mission Services is complete) by 110 emergency beds and 85 transitional beds.

A total of 69 new emergency beds are needed for the Aboriginal community.

See Appendix 4 for a list of LHC recommendations in the area of Emergency Shelter.

Street-Level Supports

Street-level supports are a top priority for the community. London’s service providers indicate that the majority of homeless people in London do not access shelters. These “hidden homeless”, while they do not often use the city’s shelters, do access homelessness services and programs such as meal programs, drop-ins and the services provided by the London InterCommunity Health Centre and the Health Access Group. The Health Access Group provides vouchers for over-the-counter medications, personal hygiene items, and other basic needs such as diapers.

Service providers agree that drop-ins and the services they provide often serve as the catalyst for people to seek assistance and move towards stability. It has long been known that, for many homeless individuals, there is an issue of trust that must be overcome before they will seek out help. This trust can only be developed through repeated exposure over a period of time. The lack of such spaces may prevent people from accessing services.

Community consultations have indicated that the lack of woman-only spaces may be preventing homeless women from accessing necessary services such as street-level medical care and referrals to other supports. The lack of community supports for homeless and

The World Health Organization states that "health is not merely the absence of disease. It is a state of well-being which encompasses the psychological, social, physical, emotional and spiritual elements".

at-risk people has increased their risk of becoming “easy prey” for those who would exploit or harass them. There are indications that organized crime has moved into the area and is recruiting the homeless, particularly substance abusers and the young, into the sex trade, increasing the risk of the spread of sexually transmitted disease, criminal activity, and violence. The lack of appropriate day time spaces has also prompted calls for the provision of street-level supports such as mobile food distribution and first aid and, during extreme weather situations, mobile units to pick people up and bring them to shelters to receive food and relief. A more coordinated service-delivery system is required to provide individuals with a “continuum” of supports”. The continuum, using a multi-agency case management service delivery model, includes shelter providers, community mental health providers, and housing advocates who share information to develop plans to assist individuals to regain stability. Implementation of this type of model would provide individuals with a coordinated strategy for moving off the streets into permanent or transitional housing.

When homeless and at-risk people need health care services, they typically access those provided by community health centres. In London, the London InterCommunity Health provides health programs both on-site at shelters and at its location on Dundas Street East. The centre provides access to pre-natal clinics, social workers, and prescription drugs, and it has instituted such programs as the oral care program and the Identification Replacement program. The InterCommunity Health Centre and other providers of “continuum of supports” for homeless people must be adequately funded.

Transportation is a serious problem for many homeless people, especially those with mobility problems or those who, out of necessity, have their children with them. It is not unusual for them to walk several miles a day between agencies when trying to access services. For those not staying within the core area, the lack of bus fare prevents many from being able to access services provided by InterCommunity Health, the food bank, and other supports. It has been suggested that a “homeless hot-line” be implemented, so homeless and at-risk people would be able to call and obtain information regarding available services and supports, hours of operation, etc. This would potentially help to ease the transportation barriers as well.

The issue of mental health and homelessness has reached a critical point in the community. The lack of sufficient community mental health supports, coupled with the lack of supported housing options, puts additional strain on services not equipped to deal with mental health issues and has caused some difficulties with business

owners and others in the community. In fact, the issue reached large enough proportions that Police Services commissioned a study on the matter. The members of the Old East Village BIA have asked LHC project staff for help with a proposal to hire additional outreach workers for that area.

In April of 2003, the community identified the lack of access to supports such as showers, washers and dryers, and safe storage of belongings as a need within the community. These facilities, considered essential to the process of moving people from life on the streets to stability, are available at shelters and the London InterCommunity Health Centre, Street Connection, and StreetScape. The demand far exceeds the supply.

Food is another important issue. Food providers, as well as the people they serve, want more coordination to ensure that meals are available every day of the week and that people outside the downtown area have access. The recognition that homeless and at-risk people are located throughout the city has prompted the Hunger Relief community to recommend that the London Food Bank implement satellite sites in areas of need throughout the city. The InterCommunity Health Centre will look at delivering some of its programs, including homelessness services, at neighbourhood sites.

In addition to supports such as those described above, there is a need to increase and maintain housing outreach and support workers in the community.

See Appendix 5 for a list of the LHC recommendations in the area of street-level supports.

Table 5: Summary of Gaps and Assets in Street-Level Supports

	Assets	Inventory	Additional Need (Gap)
All Groups			Increase health support programs, including access to dental care for homeless and at-risk individuals. Provide funding for increased health outreach programs.

	Assets	Inventory	Additional Need (Gap)
All Groups			Enhance the extreme weather alert, emergency response strategy to ensure sufficient supplies of water, blankets, etc. are available and distributed during extreme weather alerts. Create mobile food and medical aid distribution units during extreme weather alerts.
All Groups			Additional 14 outreach workers city-wide
All Groups	Food Banks/ Meal Programs	8 food banks 6 community kitchens 4 meal programs	Create 4 new food banks Work with the Hunger Relief and Food Security Programs to fill gaps in availability of food/meal programs.
All Groups			Develop a coordinated strategy amongst service providers to provide individuals with a “continuum of supports” by developing multi-agency case management service delivery model to assist individuals in developing personal plans to regain stability - off the streets and into permanent or transitional housing.
All Groups			Create a transportation fund that agencies can access to provide bus fare to clients being referred to other locations for assistance.
All Groups			Ensure city-wide street level outreach and support. Implement street level outreach programs in areas other than the downtown core and Dundas East corridor.

	Assets	Inventory	Additional Need (Gap)
All Groups			Facilitate dialogue between businesses, property owners and service providers in the downtown core and along the Dundas East corridor to develop and implement solutions to address neighbourhood concerns.
All Groups			Extend hours of existing drop-ins to cover evenings and week-ends, and provide funding to hire additional staff.
Men (16+)			See above.
Women and Family	Not available	N/A	Create and sustainably fund a safe “woman only” day-space for homeless and at-risk women; provide funding for life-skills training, supports such as washing machines, showers and recreation.
Aboriginal Community Aboriginal Community	Nokeekwe & N’Amerin d drop-in centres	2	4 needed
	Meal program	2 monthly 200 people = 2,400 meals/year	50 per day 19,200 meals/year
	Outreach services	1 (youth)	4 community outreach workers 2 youth outreach workers (total 2,700 clients/year)

	Assets	Inventory	Additional Need (Gap)
	Health Services	1 urban access centre	1 mobile health team for each of 3 sites (At^lohsa, N^Amerind, Nokeekwe) for a total of 4 teams
	Clothing/ furniture banks	0	2,700 clients per year
Youth			Increase and enhance youth outreach and drop-in services. Provide after hours and weekend drop-in spaces.
Refugee / immigrant			Increase availability of multi-cultural homelessness services
Mentally III / Addictions	Outreach workers Mental Health Crisis line		Hire a team of outreach workers who will respond quickly and appropriately to homeless people in crisis Enhance the ability of the crisis line to respond quickly to situations. Increase outreach and other supports for homeless people and, in particular, those with mental health issues.

Shelter Diversion & Homelessness Prevention

Under the overall strategy of “find, get, keep”, the LHC will develop initiatives to help people find and maintain housing, including advocacy with landlords and other housing providers.

Participants at the April 23, 2003 community forum identified as a gap the lack of a coordinated access system for housing and homelessness supports. They recommended that the LHC look at

developing a multi-partnered initiative to create a Housing Resource Centre.

On June 2, 2003 the Homelessness Prevention and Housing Working Group began working to develop this proposal. It is recommended that work be done to create a “one-stop” centralized access point where clients would have access to a variety of housing and other outreach workers from a number of different agencies, including intake workers for subsidized housing, the Housing Registry, The Heat and Warmth Program, and the rent bank. It was felt that a centralized access point would promote a client-centred system of service delivery. This working group also identified the need to put additional supports in place to help people already housed stay that way.

In addition to the transition supports identified above, there is a need to restore funding for housing advocates and housing outreach workers. Forum participants identified the need for increased access to advocates to help clients navigate the complex system of Ontario Works and O.D.S.P. They recommended that the LHC seek to develop a coordinated system with Ontario Works and ODSP to ensure that delayed cheques do not contribute to evictions and loss of housing.

More promotion of existing services (the Neighbourhood Legal Services’ housing mediation service and the Tenant Duty Council program) is needed. Also needed is increased information on tenant rights, the eviction process, and how to access free legal help.

Figures from the Rent Tribunal indicate that the number of evictions in London is on the rise. Housing costs (including heat and utilities) are, for most people, the largest monthly expense. Heat and hydro costs are increasing at unprecedented rates, costs for shelter have risen by more than 18%, but incomes for London’s low-income families have dropped by 26%. The need for homelessness prevention initiatives such as The Heat and Warmth program and the rent bank is overwhelming. In 2002, The Heat and Warmth program applications totalled \$283,526. Amongst those applying for help were seniors, the working poor, and families in receipt of social assistance. It is recommended that support for The Heat and Warmth program be increased to allow for year-round operation.

Rent banks are a proven means to prevent homelessness. It is recommended that the Housing Registry and the Housing Division work closely to ensure that the Rent Bank is operational by the fall of 2003.

Dr. Valerie Tarasuk, a nutritional scientist in the Faculty of Medicine at the University of Toronto, reported in the January/February 2000 issue of the Canadian Journal of Public Health that low welfare rates, combined with rising rents, leads to “serious problems of hunger and food insecurity.”

On average, 55.6% of Aboriginal people living in cities were living in poverty, compared to 24% of non-Aboriginal people.

Programs providing assistance with eyeglasses, prescription drugs, prosthetics, dental care, and burial assistance for low-income people, including seniors, have been cut. While the province's social budget is reduced, the quality of life for all Ontarians is ultimately compromised. As community agencies are forced to depend on fundraising to cover core operation budgets, they must cut back or eliminate programs and replace paid staff with volunteers. This results in job loss and fewer services available in the community.

Without affordable childcare, low-income wage earners cannot access employment and skills upgrading, which prevents them from moving up into higher waged jobs.

Many low-income wage earners do not have access to health plan benefits. As a result, preventative medicine and oral care is often neglected. People go without prescription drugs or will try to make them last longer by only taking half of the recommended dosages.

Appropriate housing is difficult to find and many landlords will not hold units without deposits, which are almost impossible to obtain for people relying on social assistance. Social assistance recipients report that they find themselves in a "catch 22" situation; landlords won't hold the units without a deposit or first and last months' rent, and Ontario Works won't issue cheques until the recipient has a place. Community "start up" is available, but once again, recipients cannot access this fund until they have already secured housing.

See Appendix 7 for a list of LHC recommendations in the area of homelessness prevention.

Table 6: Summary of Gaps and Assets in Homelessness Prevention

	Assets	Inventory	Additional Need (Gap)
All groups	Employment Supports		Improve access to skills upgrading and job re-training by creating flexible training programs Provide subsidized transportation for low income wage earners
	Health Supports		Increase access to preventative and emergency oral care for the “working poor” Improve food security
	THAW (The Heat & Warmth project)		Increase support and operate year round
	Housing Access Fund	0	Create
All groups	Rent bank		Operationalize
	Housing Registry and the Housing Access Centre		Improve access
	Eviction intervention		Free legal advice and information on how to access it
All groups	Housing resource centre	0	Create a housing resource centre to improve coordinated access to programs and services

All groups	Housing acquisition		<p>Community agencies and the City of London develop a plan to release, on a “same day” basis, Community Start-Up cheques for first and last months’ rent.</p> <p>Increase funding for housing outreach and support workers.</p> <p>Provide multi-year funding to ensure programs exist long enough to affect positive change.</p>
Men (16+)	See above		
Women and Family	Subsidized child care spaces		Increase number of spaces
	Supports for families with children over the age of 6.		Increase
Aboriginal People	Aboriginal employment service	1 centre	2 new centres, each serving 3,000 people/year
	Eviction and Legal services	0	1 centre to serve 540 clients/year
Youth	See above		
Refugee / immigrant	See above		

Mentally III Addictions	See above		
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Transition & Support

Transition and support initiatives help people move from homelessness to stability, ending the “revolving shelter door” syndrome.

It has been long recognized that the answer to most of London’s homelessness is to increase the supply of affordable housing. However, for some, obtaining housing is just the beginning. Many people need support in maintaining housing once they have obtained it. Research done by Mission Services and the Salvation Army indicates that a great many of the people who do not have mental illnesses and are chronic users of the city’s shelter system are those with low-level social functioning. Outreach workers at the Youth Action Centre and other agencies in the city have found this to be true of their “hard to house” clients as well. They also report that many of the people accessing support services are those who do not possess skills in the area of money handling and household management, including cooking and parenting. To prevent eviction, there is a need for early intervention when difficulties arise between landlords and tenants. These types of programs should also be created to respond to the needs of youth, the “hard to house” and newcomers to Canada. The lack of practical skills and poor social interaction amongst this sector of the homeless population often leads to difficulties that ultimately end in homelessness, again and again. The same is true for those experiencing mental illnesses.

Transitional and supported housing for youth between the ages of 15 and 18 has been identified as an area of need in the city. It has been noted that options for youth on their own within this age group are severely lacking. Youth within this age group are not usually eligible for social assistance and are reluctant to seek out help from agencies such as the Children’s Aid Society. They are unable to apply for social assistance without permission from their parents or guardians - which they are unlikely to obtain, particularly if these youth are fleeing from abusive family situations.

It was recently reported that there are over 150 developmentally challenged people waiting for supported housing.

It has been estimated that the number of homeless people with mental illness in London is proportionally higher than in other centres in the province. This is due, in part, to the fact that there are two large regional psychiatric facilities within 30 miles of each other: one located within London, the other in St. Thomas. London is also the largest metropolitan area in southwest Ontario and many people in need of services tend to migrate here from smaller communities. Within London, the demand for community mental health services, including mental health caseworkers and crisis outreach far exceeds availability. There is an immediate need to increase community mental health supports, including supported housing options.

Access to counselling and other supports are needed to help individuals and families while in shelter. For many, the circumstances that led them to become homeless and staying in shelter created life altering trauma and timely intervention is necessary to prevent further issues, including a decline in mental health, from developing. Counselling and support are not only required while people are in shelters, but after they have been housed as well. For many of the people most deeply affected by poverty and homelessness, the process of rebuilding their lives and moving toward stability requires a multi-faceted approach. A common factor to almost all people who are homeless is a lack of family support due to violence, sexual abuse and chronic poverty. To be poor and homeless is to be denied access to mainstream society. Funders must recognize this and work with the community to ensure that funding is sufficient to ensure that programs exist long enough to affect positive long-term change in people’s lives.

Table 7: Summary of Assets and Gaps in Transition and Support

	Assets	Inventory	Additional Need (Gap)
All Groups	Life-skills programs (banking, cooking, etc.) for independent successful living	?	Increase
	Parenting groups & recreation programs for children living in shelters	?	Increase

	Inexpensive bus passes to low-income individuals and families to increase access to services and employment.	0	Provide
	Publicity and advertising for support programs		Increase
	Support services for persons exiting the sex trade.	?	Provide
Women and Family	Support for pregnant homeless and at-risk women, including access to nutritious food		Increase
	Parenting groups & recreation programs for children living in shelters	?	Increase
Aboriginal People	Detox Centre		1 native detox centre
	Life-Skills Programs	4	6 native programs required
Youth	Outreach and life-skills support for youth.	?	
Refugee / immigrant	See above		
Mentally Ill / Addictions	See above		

Affordable Housing

Table 7: Summary of Assets and Gaps in Affordable Housing

	Assets	Inventory	Additional Need (Gap)
Men (16+)	Men’s Mission	25	Increase transitional beds by 29
	Salvation Army Hostel	15	
	St. Francis Residence (men)	4	
Women and Family	At^lohsa (women)	12	Increase funding to ensure sustainability of 12 beds.
	St. Claire Residence (women)	3	Increase transitional beds by 50. Create transitional units within “woman only” space.
	Second Stage Housing (apartment units for women & children)	15	
Aboriginal People	At^lohsa (women)	12	Increase funding to ensure sustainability of 12 beds.
	After-care	0	20 beds
	Supportive Housing	0	10 female / 10 male
Youth	Unity Project (male & female)	20	
	Western Area Youth Services (male)	8	
	Western Area Youth Services (female)	4	

Refugee / immigrant			Increase by 50
Mentally Ill / Addictions	Sisters of St. Joseph Residence	6	
	WOTCH (men & women)	23	

London’s supply of non-Aboriginal transition and support assets has increased by 18 emergency beds and 25 transitional beds. The community needs 20 additional non abuse-related interim beds for women until expansions are completed.

Coordination

Homelessness research from across the county has consistently supported the assertion that effectively addressing homelessness requires a two pronged approach: building and strengthening the community’s capacity to respond to community needs with a “continuum of supports” approach; and the development and implementation of a multi-faceted, long-term strategy which includes ensuring adequate supplies of affordable, transitional and supported housing options are available.

Good communication and collaboration across the sectors is essential to fully develop an effective continuum of supports. The lack of meaningful communication across the sectors and the factors that present barriers to collaboration, including the lack of adequate funding for sufficient human resources, have been identified as obstacles that must be overcome to ensure the development of an effective and efficient continuum of supports strategy. To help strengthen the community’s capacity in this area, there must be a commitment on the part of key decision makers, including the municipality, to share in the development and support of cross-sector collaborative research and information sharing vehicles, including the development of a standardized statistical gathering method. Furthermore, there must be a commitment by the various agencies and committees to gather and provide relevant homelessness data to support the development of “made in London” homelessness research tools.

"the LHC is comprised of organizations that demonstrate dedication, compassion and conviction with respect to making a positive difference for London's homeless. This membership, combined with the LHC's efforts to heighten community awareness works to ensure that the needs and voices of the homeless are heard"

Respondent's statement in LHC
Project Survey

Research reports should be centralized, catalogued and cross-referenced. A database should be designed and maintained. Funders, service providers and researchers should be able to easily and reliably access information from a centralized provision; they need to know what research has been done and how to access it.

To strengthen the community's capacity in the development of a long-term homelessness elimination and amelioration strategy, here is a need to create standard definitions, including measurement methods for homelessness and the various subcategories. These definitions can then be utilized by funders and agencies to collect data to support analysis and identification of issues.

To support the community's movement away from reactive, emergency responses to homelessness toward more preventive and long-term solutions, there must be sufficient funding to provide staff and resources to support the work of the LHC, including resources to help strengthen the capacity of the Steering Committee to provide direction on the community's efforts in implementing the community plan and in guiding the process of developing long-term, systemic strategies.

There has been virtually no work done to understand the comparative costs of various homelessness reduction and prevention strategies, and the overall cost of homelessness to the community. Funding is required to support research to gain an understanding of the costs of alternative homelessness strategies, such as "housing first".

Funding is required to ensure that agencies have the additional resources necessary to facilitate the development of system wide strategies, the gathering of statistics, data analysis and evaluation. In a recent survey conducted by the LHC Project staff, most of the agencies that responded indicated that although they felt that it was important that this work be done and that they felt their agencies needed to be involved in the process, their resources were already stretched to the limit just trying to keep up with demand and this presented barriers to sharing of information and the development of system wide, long-term strategies. Current short-term funding formulas also presented barriers for long-term planning of homeless reduction and prevention initiatives within agencies.

In October 2002 and again at the April 23, 2003 forum, the community identified the need for centralized leadership to develop a long-term homelessness strategy. The communications

and coordination provided by the LHC project staff was considered as essential to the implementation of the community plan and provided a focal point for continued progress in the development, implementation and evaluation of long-term systemic strategies to eliminate homelessness in London. The activities of the LHC staff to increase community awareness and education activities were also identified as being valuable to the development of homelessness strategies, increasing community support for homelessness reduction initiatives, as well as being beneficial to each of the agencies.

There continues to be a lack of a comprehensive understanding of the paths into, through, and out of homelessness, even though many individual elements are understood. There is an urgent need to understand and quantify how and why people enter and escape homelessness in order to develop measurably effective homelessness alleviation and prevention initiatives. The community's capacity to design, implement, and evaluate homelessness prevention and amelioration strategies will be strengthened through better understanding of the issues.

Community Awareness

As a result of the activities developed by the London Homeless Coalition Project, awareness of the issues of homelessness and the extent of the crisis in London has increased within the community. This has resulted in increased attention from City Council for homelessness initiatives, including housing. Community understanding of the issues of homelessness has increased, as has support for the work of the members of the LHC and others working in the community to alleviate the effects of homelessness.

In a recent survey conducted by the LHC Project, over half of the respondents agreed that awareness has increased within the community and with city council and city staff, and would like to see these activities continue.

To move the community away from reactive, emergency responses to homelessness, it is important that community awareness and education continue. It will be increasingly important to ensure that homelessness does not fall "off the radar" as other issues become more topical (elections, etc.) Within Ontario, the next eighteen months will be a critical time period to ensure that community awareness of the systemic factors that lead to homelessness and poverty is increased and deepened. The LHC is in a position to inform the public of the obstacles that homeless people must overcome on their way toward stability, and invite the community to put forward solutions. The next eighteen months also be an important time for the LHC to dialogue with the community and key decision makers in order to affect positive change in policy.

Within the next few months, the LHC must take advantage of the opportunities that present themselves. To do this, it is critical that the LHC develop and issue policy statements, backgrounders and other information related to homelessness and poverty and its causes, and provide increased opportunities for community dialogue by coordinating community forums and other awareness venues.

See Appendix 9 for the LHC recommendations in the area of Community Awareness.

Priorities

Because needs always exceed resources, the LHC has set priorities according to the plan objectives and the community's assets and gaps. These priorities are also listed in the draft Terms of Reference in Appendix 2.

Within each priority area, 25% of funds is to be directed to Aboriginal services and 15% for youth. These allocations are based on a local labour market survey, statistics Canada 2001 census, and the Ontario Federation of Indian Friendship Centres' Child Poverty Report. The community is committed to using an inclusive, integrated-services approach so that individuals will have a choice and will not be limited to aboriginal- or youth-focused services. It is expected that this approach will result in enhanced sensitivity and reporting on the population of aboriginal and youth who are service users.

Table 8: Summary of Priority Areas and Funding Allocations

Community Priority Areas	2003-2006 Recommended percentage of funding allocations
1. Transition and Supports, including transitional and supported housing	50%
2. a) Shelter Diversion and Homeless Prevention 2. b) Street-Level Supports	25%
3. Emergency Shelter	15%
4. Coordination	7%
5. Community Awareness and Understanding	3%
Total	100%

Conclusion

Homelessness is not inevitable. It can be eliminated through the collective efforts and expertise of all stakeholders and with bold action and strong leadership at all levels of government. Above all, governments must start re-investing in key areas, notably in affordable housing and income supports. Policy decisions and legislation that lead to social and economic inequity and exclusion must be reversed. Governments must commit to partnering with communities in real ways to support and re-build the social safety net and provide adequate supports to ensure that all those living in Canada have access to safe, adequate housing, income supports, education, health care and a reasonable quality of life.

In a country as prosperous as Canada there should be no room for poverty and homelessness. As concerned citizens, we must demand more input into policy decisions and annual budget making processes at the municipal, provincial and federal levels of government to ensure that those social programs that were once considered sacred are brought back and protected.

Appendices

Appendix 1: LHC Partnerships and Collaborations 2001-2003

LHC Partnerships

- Members representing youth, emergency shelters, mental health, corrections, municipal social services, housing advocates, and the Aboriginal community came together to develop a **submission for Council** regarding homelessness and mental health (coordinated and facilitated by LHC project staff)
- Members representing mental health, homelessness outreach, corrections, United Way, emergency shelter providers and LHC project staff met with City of London Social Services to develop and implement a project to **provide day-spaces for homeless people**. The outcome of this meeting was to create a pilot project to provide “drop-in” space on weekends for homeless people, identify an agency that was capable of providing this service for a period of approximately ten weeks and work with the City to fund the pilot.
- LHC project staff coordinated at least three meetings where members representing housing, emergency shelters, abused women, mental health, United Way, corrections, private sector landlords, the Aboriginal Homeless Coalition, and the City of London to develop a model for a **rent bank**, to identify an agency that has the capacity to operate a rent bank, and to work with the City of London to fund it.
- One hundred people participated at the April 23, 2003 **community forum** to gather input for the community plan revision, represented individuals from across the spectrum, including community agencies, private sector landlords, funders and the municipality.
- Fifteen people and two facilitators participated in the LHC project’s **strategic planning session**. Participants included representatives from: the United Way, the Community Services Coordination Network, Ontario Healthy Communities Coalition, the C.A.W., Community Mental Health, the University of Western Ontario, the federal government, St. Joseph’s Health Care London, and Legal Aid participated.
- Members collaborated with London Police Services to develop an **informational video** for front-line officers and other civic workers who come into contact with homeless people as part of their jobs.
- In response to a need identified by the LHC, several members of the coalition collaborated with Community Services staff to create a ten-week pilot project to provide **drop-in services** over weekends.
- Members worked with the Middlesex-London Health Unit to implement an **extreme weather project**. Members also collaborated with the Health Unit, Police Services and Bell Canada to equip patrol cars with **blankets** to be distributed to homeless people.

- Mission Services, the City of London, and the Roman Catholic Diocese partnered to create a temporary **shelter for homeless single women** including women experiencing mental health issues.
- The Old East Village Business Improvement Area, LHC project staff, and the City of London collaborated to organize **London Day**, to initiate an affordable housing strategy for London.
- Honey and Associates, a local graphic design firm, partnered with LHC project staff to create an **LHC logo** and promotional poster. Honey and Associates also arranged to have the poster graphic regularly placed in the London Free Press, and it arranged to have the posters featured in bus shelter ads.

Inter-Agency Partnerships

There have been a number of partnerships between agencies to enhance the effective delivery of programs. In addition, many agencies have entered into partnerships with unions, the private sector and faith groups. The following describes some of these community partnerships.

- In a partnership with the Youth Action Centre, the London InterCommunity Health Centre received multi-year funding from the City of London to deliver **oral care** to homeless and at-risk youth. In consultation with the London Coffee House, the Bethany Centre and neighbourhood representatives, the InterCommunity Health Centre is seeking to expand delivery of this service.
- The Mental Health Alliance's Assertive Community Treatment Team is partnering with Mission Services, Community Mental Health Programs to deliver **mental health services** on-site. These services will be available to homeless people at other shelters as well.
- Organized labour (through the C.A.W. and the London and District Labour Council) has actively supported the **growth of the Unity Project**. Along with financial support, these organizations have provided the services of their building-trade members to help with renovations. C.A.W. members sit on the Unity Project's Board of Directors. Funding from the City of London has enabled the Unity Project to purchase its facility from the London Cross Cultural Learner Centre. The Centre now rents a portion of the facility from its former tenant. This arrangement has enabled both organizations to meet the needs of their respective clients with minimal disruption.
- The London Housing Registry has a partnership with the Youth Action Centre to provide an on-site **youth housing advocate**.
- The Middlesex-London Health Unit and the Children's Aid Society of London are providing on-site **social work support** for parents through organizations that run shelters for women and children.
- Local shelters are working with the City of London Housing Access Centre and the Ontario Works office provide **on-site access to application and intake workers**.

- Community members and various faith groups have come together to create the **London Affordable Housing Foundation**. The group is planning an affordable housing project.
- London East Community Mental Health Services, the London Abused Women’s Centre, Seen and Heard—Queer Youth Project, Western Ontario Therapeutic Community Housing, and the Sisters of St. Joseph have collaborated to create a **safe day-space** for homeless and at-risk women
- Public **awareness events** such as “InVisible”, “Eyes on Homelessness” and Soup ‘n’ Sandwich events have resulted from partnerships between LHC project staff and Museum London, the London Public Library, the City of London, the Professional Public Speakers Association, the C.A.W., the London and St. Thomas Real Estate Board, community members, and homeless people.

Potential Partnerships

London Homeless Coalition project staff are currently working to bring about the following potential partnerships.

- The Old East Village Business Improvement Area has suggested that the LHC facilitate a meeting with service providers, landlords, and businesses in the Old East Village area. The group would look at making a joint proposal to increase the number of **street outreach workers** in the area. London Police Services and the Mental Health Alliance would be included in these discussions.
- At the request of the Women’s Mental Health and Addictions Research Coalition, LHC project staff are facilitating meetings with LHC members and others (including the City of London and private sector interests) to support the development of a **safe day-space** for homeless and at-risk women. Partnerships with other agencies are being sought to provide women with on-site access to services.
- LHC project staff are currently working with members of the Housing and Homeless Prevention work group of the London Homeless Coalition to develop a joint proposal to create a **Housing Resource Partnerships** with agencies are being sought to provide the community with “one stop” access to housing and housing related outreach workers, Ontario Works intake workers, etc. London’s ability to identify and respond to community needs and further develop the “continuum of supports” for the homeless and those at risk of homelessness has been strengthened by the work of the London Homeless Coalition and by the partnerships that have been created over the last twenty four months.

Appendix 2: Enhancing Existing Partnerships

LHC Existing Partnership with:	Activities that will enhance the partnership
City of London	<ul style="list-style-type: none"> • Increase opportunities to meet with civic administration to encourage increased cooperation and communication and build a more cooperative environment • Engage city council in the development of long-term community strategies to eliminate homelessness • Work with the municipality to jointly advocate for increased support from other levels of government on issues of homelessness and housing
Aboriginal Homelessness Coalition (AHC)	<ul style="list-style-type: none"> • Create more opportunities for partnered initiatives, • Create venues to inform mainstream population (including service providers) of Aboriginal issues in order to increase awareness and understanding, and to enhance the delivery of services • Develop strategies to encourage non-Aboriginal agencies to measure and assess Aboriginal peoples' use of all agencies • Improve the communication and collaboration between the AHC and LHC to develop strategies • Involve more members of the Aboriginal community (outside of agency representation)
Old East Village Business Improvement Area (OEV BIA)	<ul style="list-style-type: none"> • Follow up on potential partnered initiatives and increased community engagement • Initiate meetings with the residents of Old East neighbourhood, the OEV BIA and service providers along the Dundas East corridor
National Homelessness Initiative (NHI)	Work to develop (outside of SCPI process) a closer relationship with the NHI to ensure that the LHC is afforded more opportunities to provide input into policy decisions and to increase the NHI's awareness of London's needs
Private sector organizations	<ul style="list-style-type: none"> • Increase the dialogue with the private sector in order to engage it in developing and implementing homelessness strategies • Learn from each other
United Way of London Middlesex	Strengthen the LHC's relationship with the United Way of London and Middlesex in order to best utilize available resources, develop long-term homelessness strategies, develop sustainability strategies, increase the LHC's research capabilities, and strengthen its organizational capacities.
Media organizations	<ul style="list-style-type: none"> • Encourage more "in-depth" coverage of issues related to housing and homelessness • Establish closer relationships with all media sources to help increase the community's awareness and understanding of homelessness issues, and to inform the community of the community's progress in addressing homelessness
Labour organizations	<ul style="list-style-type: none"> • Develop more partnered initiatives and engage labour in development and implementation of projects • Undertake outreach activities with this sector
Addictions agencies	Build on these relationships in order to help identify issues and develop strategy Encourage participation beyond providing input and information
Offenders	As above
London Police Services	Increase participation with activities of the LHC and in strategy development and implementation

Mental Health Alliance	Increase communication and participation with activities of the LHC in strategy development and implementation in order to enhance service delivery
Provincial and national partners	Develop better relationships with these groups in order to maximize resources for use by LHC and community and increase ability of LHC to advocate for positive change at all levels of government and provision of service
Foundations and other funding agencies	LHC needs to engage these bodies in the development of long term strategies to ensure sustainability and continuity of effective programs
Steering Committee	<ul style="list-style-type: none"> • Build the committee's capacity for working together cooperatively and collaboratively. • Build the committee's capacity for decision making in order to benefit the work of the LHC • Build the committee's capacity to foster a cooperative and nurturing environment for staff (if any) of the LHC project • Build the committee's understanding of its role

Appendix 3: Terms of Reference (DRAFT)

LONDON HOMELESS COALITION
SCPI Funding Review Process
DRAFT of Review Committee Terms of Reference

Mission

The London Homeless Coalition (LHC) exists to advise, shape and co-ordinate community responses to homelessness and related needs for the London area.

Review Committee Mandate

- To review and assess proposals and make recommendations for funding to HRDC;
- To invest the \$1.5M London area allotment of SCPI funds for the period 2003–2006 in accordance with the stated goals and objectives of the LHC Community Plan and the community priorities outlined in the LHC Community Plan/SCPI Template
- To report back to LHC identifying how the Committee has fulfilled its mandate; and
- To report to LHC outcomes achieved through the SCPI investments.

Responsibilities

- To attend orientation seminar on poverty and homelessness in London
- To receive, review and assess funding proposals submitted for SCPI funding
- To recommend funding in accordance with the identified needs and priorities of the LHC Community Plan/SCPI Template and the established funding criteria
- To demonstrate to LHC and HRDC that the funding recommendations are in accordance with LHC parameters and SCPI guidelines
- To describe the intended results/impact of the funding
- To report to LHC and HRDC the outcomes achieved through the SCPI funding
- To recommend improvements to the allocations process as needed

Membership

- Five to seven community volunteers who are concerned about, and have knowledge of or may have experienced, homelessness in the London community.
- The membership will include individuals who have knowledge in the following key areas: Aboriginal issues, immigrant and refugee issues, youth concerns, mental health, addictions, family violence, as well as funding and financial expertise.
- HRDC will participate as an ex officio member.
- The term of service will conclude at the end of the 2003–2006 SCPI program.

Values and Principles

- The London Homeless Coalition (LHC) is committed to implementing a long-term strategy with the goal of elimination homelessness in our community.

- The LHC is accountable to its members, the London community and HRDC to address priorities of SCPI and make effective use of the available funding.
- The Review Committee (R.C.) will conduct its business according to LHC values of integrity, inclusivity, civility, transparency and mutual accountability.
- Recommendations are based on LHC goals, objectives and community priorities identified through Community Plan/SCPI Template.
- Review Committee Volunteers will agree to abide by the confidentiality guidelines.
- Review Committee Volunteers will adhere to conflict of interest guidelines.
- Review committee members will elicit information from, and communicate with, community, agency or organization representatives in a supportive, respectful manner to facilitate the application process.
- The review process may include face-to-face meetings with those requesting funding.
- Agencies or groups receiving SCPI funding are responsible for managing their own activities.

Funding Criteria

The highest priorities for LHC continues to be services that meet the needs of people who are experiencing homelessness or are at-risk of homelessness. The Review Committee will assess proposals to ensure SCPI funding is meeting the communities' priorities as identified in the LHC Community Plan and SCPI Template. Current research and analysis of service demands, trends in service utilization, community concerns with a need to focus funding for maximum impact in areas of concern.

Clearly Defined Need—there is consistency with the LHC Community Plan, current local research and discussion papers in areas identified; attention is paid to neighbourhood capacity building, diversity and inclusive issues; service should avoid duplication and be consistent with the changing funding and service delivery environment.

Service Outcomes—there should be clear objectives, service plans, monitoring systems and plans to develop outcome measures; there should be evidence of partnerships and linkages: there should be innovative, collaborative, and creative responses to social, demographic, and economic change.

Cost Effectiveness—resources should be used in the most effective manner relative to the outcomes to be achieved; there should be clear financial reporting/planning.

Ability to Leverage Dollars—there should be evidence of creativity in seeking/obtaining additional funding from all possible sources.

Use of funds—in addition to established HRDC criteria particular attention to services that:

- Demonstrate creative/innovative approaches to community issues
- Utilize partnerships in service delivery, funding, fundraising
- Can be measured to determine their impact in meeting critical needs
- Serve and reflect the diversity within the community

- Engage, support and celebrate volunteers in all aspects of their work.

LHC Steering Committee

LHC Steering Committee, whose members represent the citizens of London, has established that funding will focus on providing services that meet the needs of people who are experiencing homelessness or are at-risk of homelessness. LHC continually assesses community issues to ensure SCPI funding is meeting the communities' needs, as identified in the Community Plan / SCPI template.

To reflect changes in community needs, recommended funding percentages have been adjusted from those of previous template.

Community Priority Areas	2003-2006 Recommended percentage of funding allocations
1. Transition and Supports, including transitional and supported housing	50%
2. a) Shelter Diversion and Homeless Prevention 2. b) Street Level Supports	25%
3. Emergency Shelter	15%
4. Coordination	7%
5. Community Awareness and Understanding	3%
Total	100%

The LHC and the Review Committee insures that the allocation of dollars meets this objective. The Committees work in co-operation with all segments of the community to identify needs and direct resources in accordance with established priorities, principles, and policies.

To be added: Confidentiality guidelines and Conflict of Interest guidelines.

Appendix 4: Recommendations for Emergency Shelters

1. Increase the amount of affordable and transitional housing available in the city of London and ensure the units are affordable for Ontario Works/O.D.S.P. recipients. Implement the recommendations of the London Affordable Housing Task Force.
2. London's lack of transitional and affordable housing, and the lack of adequate community supports for persons with issues that present barriers to stability must be recognized; the maximum 42 day per-diem must be increased to provide shelters with the resources needed to adequately address individual and community needs.
3. All shelters report that they are operating at beyond capacity, stretching their resources to the limit. Increase funding to allow for more shelter staff to be hired, decreasing the potential for violence, public health issues, and other problems inherent in these types of living conditions.
4. For specific segments of the homeless population, an increase in longer-term transitional units is needed.
5. Solutions are needed to provide shelter for people who cannot access current shelter system because of active substance use and/or behavioural issues that have resulted in them being "suspended".
6. Continue to work cooperatively with regional psychiatric facilities, hospital discharge planners and discharge planners from correctional facilities to address the issue of releasing people into the community without adequate supports or housing.
7. Work with the multi-cultural community to identify resources and solutions to ensure the needs of the homeless within this community are addressed.

Appendix 5: Recommendations for Street-Level Supports

1. Develop a coordinated strategy amongst service providers to provide individuals with a “continuum of supports” by developing a multi- agency case management service delivery model to assist individuals in developing personal plans to regain stability and move off the streets and into permanent or transitional housing.
2. Facilitate dialogue between businesses, property owners and service providers in the downtown core and the Dundas East corridor to develop and implement solutions to address neighbourhood concerns. It has been suggested by the OEV BIA that a “group ask” be developed to provide funding for street-level outreach workers in the area.
3. In recognition that there are people who are homeless and at risk of homelessness throughout the city, street level outreach and support programs must be implemented in areas other than the downtown core and Dundas East corridor.
4. Create a homelessness hot line that people can call for help and referrals.
5. Increase outreach support for queer youth facing issues related to housing and homelessness.
6. Increase outreach and other supports for homeless people and, in particular, those with mental health issues.
7. Enhance the extreme weather alert, emergency response strategy to ensure sufficient supplies of water, blankets, etc. are available and distributed during extreme weather alerts.
8. Create mobile food and medical aid distribution units during extreme weather alerts.
9. Extend hours of existing drop-ins to cover evenings and week-ends and provide funding to hire additional staff.
10. Increase health support programs, including access to dental care for homeless and at-risk individuals.
11. Increase availability and access to supports such as showers and clothes washers and dryers for homeless people.
12. Provide cooking facilities (i.e. access to stoves, pots, etc.) to allow homeless people to prepare own food.
13. Increase number of locations where people can make free telephone calls to set up appointments, etc.
14. Providers have identified that an increasing number of people accessing shelters and homelessness services are recently arrived immigrants or refugees or people for whom English is not their first language, and who have difficulty communicating their basic needs. To ensure accessibility, services must be available in languages other than English.
15. Work with the Hunger Relief and Food Security Programs to fill gaps in availability of food/meal programs.
16. Create a transportation fund that agencies can access to provide bus fare to clients being referred to other locations for assistance.
17. Youth: Increase and enhance youth outreach and drop-in services. Provide after hours and weekend drop-in spaces.
18. Women: Create safe “woman only” day-space for homeless and at-risk women - provide funding for life-skills training, supports such as washing machines, showers and recreation.
19. Mental Health: Enhance the ability of the Mental Health Crisis line to respond quickly to situations.
20. Support the development of a team of outreach workers who will respond quickly and appropriately to homeless people in crisis (i.e. homeless people exhibiting psychotic behaviours) to avoid unnecessary apprehension by police services and to provide the community with assistance in dealing with these episodes.

Appendix 6: Recommendations for Transition and Support

1. Governments and funders must commit to ensuring that communities have adequate resources with which to design, implement and sustain effective programming. There must be recognition that the factors that cause homelessness cannot be addressed with “band-aid” solutions and short term project funding.
2. All levels of government must work collaboratively and in partnership with communities to develop long-term programs that will help to eliminate the root causes of homelessness - poverty and socio-economic marginalization.
3. Funding for community support programs must be sustainable and increased.
4. Sustainable funding is required to support the development and implementation of coordinated community strategies, facilitation of partnerships, and collaborative efforts.

Appendix 7: Recommendations for Homelessness Prevention

1. Increase the supply of affordable housing.
2. Local, neighbourhood-level solutions to poverty, food security and other issues should be explored and implemented.
3. Increase minimum wages and raise social assistance rates to reflect “real” costs.
4. Restore and increase funding to social programs that help to increase the quality of life for low-income people.
5. Opportunities for skills upgrading and job re-training must be available and accessible to low-income people. In the absence of sufficient subsidized child care spaces, retraining and upgrading programs must be designed to be flexible enough to accommodate the needs of families with children and those who may be experiencing personal crisis’s (i.e. living in shelter while trying to upgrade).
6. Dedicate 50% of slot machine revenues to affordable housing and homelessness initiatives.

Appendix 8: Recommendations for Coordination

1. Adequate resources must be made available to facilitate data collection, information sharing and distribution, and research.
2. The community should lobby and then work with all levels of government to develop long-term municipal, provincial and national strategies to deal with poverty and the lack of affordable housing.
3. To develop and implement a “continuum of supports” approach, funding to support administration, coordination and communication and the process of coalition building is absolutely critical.
4. Agencies and committees must commit to overcoming the barriers that prevent meaningful communication and the development of shared, collaborative processes, and commit to the development and implementation of an overall systemic homelessness prevention and amelioration strategy.
5. Development of specific policies is necessary to provide infrastructure for an overall homelessness strategy. To ensure that the management of homelessness strategies are reflective of community needs, primary funders and decision makers, including the City of London’s Housing Division and Community Services Department, must work through information gathering and strategic planning vehicles facilitated by the LHC.
6. The community should lobby the federal government to provide on-going funding for programs and services developed under the SCPI program.
7. Ensure the Community Plan for Homelessness in London is integrated into the City of London’s business plan.
8. To help strengthen the community’s capacity in this area, there must be a commitment on the part of key decision makers, including the municipality, to share in the development and support of cross-sectoral collaborative research and information sharing vehicles, including the development of a standardized statistical gathering method.
9. Funders must support the work of community capacity building by ensuring that sufficient funding is made available to ensure the development and implementation of an effective and efficient continuum of supports strategy. This includes re-examining the practice of only providing short term direct service project funding.
10. Funding is required to support research to gain an understanding of the costs of alternative homelessness strategies, such as “housing first”.
11. Better communication between the various agencies, groups and committees is necessary to support the development of a “continuum of supports” approach to homelessness amelioration and prevention. More work is required to ensure that opportunities for meaningful communication and collaboration, with action-oriented outcomes, are developed.

Appendix 9: Recommendations for Community Awareness

1. The London Homeless Coalition must develop policy statements and position papers in order to deepen the community's understanding of the issues. Increased research capacities are needed in order to develop comprehensive information and data.
2. In addition to regular public distribution of research findings and position statements, the LHC should continue to encourage dialogue through community forums and other awareness events.
3. The LHC should increase its efforts to dialogue with elected officials around the issues of homelessness. Meetings inviting all three levels of government to work with the LHC to find solutions should be resumed.