

Aboriginal Housing Management Association

SUBMISSION ON THE HOMELESS OUTREACH PROGRAM AND HOMELESS PREVENTION PROGRAM

MAY 2023



ABOUT AHMA

Founded in 1996, the Aboriginal Housing Management Association (AHMA) is an umbrella organization of 55 Indigenous housing and service providers. AHMA's members oversee 95% of Indigenous housing units across the province for those not living on reserve. This includes over 5,500 units that provide homes to an estimated 10,000 Indigenous individuals and families living in urban, rural, and northern regions of BC with over 2,000 additional units currently under development.

In addition to providing Indigenous peoples, their families, and communities with affordable housing, AHMA's members offer many support services. These include homelessness prevention, parenting skills, mental health programs, substance use support, and more. AHMA members provide a culturally safe space for Indigenous peoples to make their home— wherever they settle, by facilitating connections to community and cultural resources. This includes housing and supports for those experiencing homelessness and wanting to transition to supportive housing.

In 2022, AHMA released BC's first Indigenous community-led Provincial Urban, Rural, and Northern Indigenous Housing Strategy¹. This report outlines a 10-Year strategy to address the housing needs of off-reserve Indigenous people in BC. The report reflects extensive engagement and input from existing Indigenous housing and service providers in BC, as well as tenants, stakeholders, government agencies, and Indigenous organizations. The strategy includes thirteen strategic actions and an implementation plan that identifies the funding, resources, and activities required to implement the strategic actions.

In addition, AHMA also participated in the development of the BC Indigenous Homelessness Strategy (IHS), which was released in 2022². The BC IHS was an Indigenous-led process that identifies, analyzes, and makes recommendations to address unique complexities, structures, challenges, and resiliencies associated with Indigenous experiences of homelessness.

To learn more about the work AHMA does, please go to <u>www.ahma-bc.org</u>.

CONTEXT

The BC Government (the Province) funds the Homeless Outreach Program (HOP)³, which provides outreach and support programs, such as rent supplements, for people experiencing, or at risk of, homelessness. It prioritizes individuals at transition points that put them at greater risk of homelessness.

 ¹ Aboriginal Housing Management Association. (2022). British Columbia Urban, Rural, and Northern Indigenous Housing Strategy. Accessed May 19, 2023, https://static1.squarespace.com/static/573e02ab62cd943531b23633/t/6201693e2bbce05d5cae4031/1644259653966/AHMA_BCURNIHousingStrategy_220124.pdf
 ² BC Indigenous Homelessness Strategy Steering Committee. (2022). BC Indigenous Homelessness Strategy. Accessed May 19, 2023,

https://statics.science.com/static/573e02ab62cd943531b23633/t/637bf48ff6d09d682dbf538d/1669067919818/2022-08+BC+Indigenous+Homelessness+Strategy++ +FINAL+V5+%28004%29.pdf

³ BC Housing. (2023). Homeless Outreach Program. Accessed May 19, 2023, https://www.bchousing.org/housing-assistance/homelessness-services/homeless-outreachprogram



HOP is enhanced by the existing Homeless Prevention Program (HPP), which delivers portable rent supplements and support services to individuals currently experiencing or at risk of experiencing homelessness to help clients access rental housing in the private housing market.

The Province is launching a project to analyze and review the current state of the HOP and HPP program by identifying program successes and shortcomings, best practices, and challenges and barriers towards service delivery. Findings from the project will be used to help inform adjustments that more effectively serve priority populations and ensure the program is optimized for those accessing it.

In April 2023, the Province approached AHMA to assist with this process, including reaching out to AHMA members who administer HOP and HPP to clients. While the Province has contracted Malatest to undertake the consultation, AHMA engaged with relevant members one on one throughout May 2023, using questions provided by the consultant.

AHMA heard back from the following members:

- Wachiay Friendship Centre
- Aboriginal Mothers Centre
- Victoria Native Friendship Centre
- Wilmas Transition Society
- Vancouver Aboriginal Transformative Justice Services Society
- Fraser Region Aboriginal Friendship Centre Association

This represents nearly 50% of all AHMA that deliver rent supplements.

The report has also been reviewed by the Vancouver Aboriginal Friendship Centre Society and Fort St. John. Friendship Society.

In addition, AHMA undertook an analysis of how the programs are utilized using data from the Homeless Individuals and Families Information System (HIFIS) for the period of May 2021 to March 2023 (excluding November 2021, which was not available at the time of reporting). This analysis showed that:

- 13 members utilizing rent supplement programs exist in five of AHMA's six geographic regions (excluding Cariboo Chilcotin Coast).
- Over the 23-month reporting period, 7,946 individual rent and non-rent supplements were provided \$3,275,110 dollars.
- A total of 1,916 unique clients were provided supplements during this period. 75% of all unique clients received *less* than five months of rent supplement subsidies, with one month (38%), two months (20%), three months (11%), and four months (7%) the most frequent usage.



- The vast majority of the supplements were used for rent supplements specifically (89%), which accounted for 93% of the total budget expense.
- The other 11% was used for costs such as food (37%), utilities (23%), security deposits (14%), moving/transportation (13%), and applications fees/cleaning supplies/furniture/start-up items/storage/toiletries (<5%).
- During the two-year period, HPP accounted for 54% of all supplements, Canada Housing Benefit BC (CHB-HPP) at 37%, Aboriginal Housing Outreach Program (AHOP) at 8%, and HOP at 1%.
- Vancouver Island has the greatest use of rent supplementing programming compared to other regions at 36%, followed by the Fraser Region (18%), Vancouver Coastal (17%), North (16%), and the Interior (13%).

FROM OUR MEMBERS

Overall understanding of the program

Please describe your knowledge regarding the HOP and/or HPP programs. How does your organization interact with the program?

Overall, members have a good understanding of both the HOP and the HPP programs. Often members refer to HOP as AHOP. While HOP and AHOP used to be different streams of funding, they were merged in 2018 as the HOP now includes a requirement for the provision of culturally supportive services.

Members are aware that different organizations choose to administer the programs in different ways, but that HOP is capped at \$300 per client and HPP at \$450 per client. Funding for these amounts is extremely limiting, which means that many clients have to be turned away.

Nonetheless, members consider the programs to be an important part of their organization's ability to provide a continuum of care and support for those transitioning from homelessness into housing by offering a subsidy and firsthand support. In particular, it enables organizations to recruit one or two staff to help provide services to vulnerable populations. Often, organizations will provide HOP and/or HPP and then connect clients to other services such as income assistance, health supports, and other benefits people are entitled to. This means that HOP and HPP serve as important entry points for clients to access a range of services.

In general, members try to offer HOP for up to four months, and HPP for up to a year. Generally, our members find that people need these supports for much longer due to bottlenecks in other programs such as the Rental Assistance Program (RAP) and Shelter Aid for Elderly Rents (SAFER) program, as well as overall increased costs associated with renting, which is making it more difficult to access funding for longer-term housing.



What populations or target groups does your organization serve?

All of our members focus on serving Indigenous clients. In particular, they also noted they serve:

- Families (priority)
- On and off-reserve Indigenous clients
- Indigenous women with children who are facing homelessness and/or domestic violence
- Clients struggling with mental health
- Clients who have interactions with the Ministry of Children and Family Development
- People intersecting with the justice system
- People released from hospitals
- Youth
- Seniors (one organization noted that 20% of those being referred to them for HOP and HPP are seniors)

Probe: What services do you provide to this/these group(s)?

Members provide a portfolio of services to these groups, including (but not limited to):

- Housing outreach programs: helping people find, achieve, and maintain permanent housing
- Aiding in finding immediate/emergency shelter
- Obtaining identification
- Transportation to housing-related appointments
- Referrals to other services
- Ready-to-heat meals and food hampers for those needing additional support
- Access to cultural supports
- Daycare programs and early childhood supports
- Legal Advocacy
- Income tax preparation
- Indigenous health and wellness services

Processes

How does your organization typically make first contact with a person in need of services?

Members noted that first contact with a person in need of services happens in many different ways. Including:

- Referrals from internal programs/other staff members, as clients often overlap with other programs
- Referrals from external organizations



- Individuals self-referring through the website, phone, or text messages members noted that often people know why they are calling and what they need
- Word of mouth from other clients

Some members receive many phone calls and messages over weekends and these are usually emergency situations for people and families. As HOP and HPP generally only fund one or two positions for an organization, this places a huge amount of pressure on that particular staff member and causes burnout.

Some members advised that they engage in locally-driven coordinated access processes, whereby organizations get together to discuss a client's needs and how resources can be shared to provide wraparound support for that individual.

Probes: How does your organization assess and stream individuals for...the services your organization offers? Referrals to HOP and/or HPP?

Members advised that clients are assessed via an intake meeting (in person or over the phone) to ensure they are eligible for services. Staff members also reviewed bank statements and use HIFIS to see what other services a client is accessing at other organizations. During these discussions and assessments, staff determine if the client is eligible for other services offered at their organization. Likewise, often clients reach out to the organization for other services and then are referred to HPP and/or HOP staff as part of this.

If a potential client comes to your organization after being referred by HOP and/or HPP, what is your organization's typical process for assessing and serving them? *Probes: Does your organization...reach out to a case worker or other support person at the referring organization? Prioritize the client for services? Alter assessment and/or streaming for services in any way? Other steps to better serve these individuals?*

After a referral is made, whether it be a self-referral or referral from another team or organization, the staff member responsible for HOP or HPP (e.g. a homelessness liaison) will meet with the client. This can be done over the phone or in person. Sometimes that staff member will send a list to the client ahead of the meeting to highlight what documents they need to bring, such as three months of bank statements. Intake meetings typically involve discussing the individual's financials and current situation in order to understand their eligibility for HOP and HPP as well as other programs.

Members also use HIFIS as part of this process to see if someone is already receiving support elsewhere. If a client is trying to double up, the member will contact the support worker from the other organization to try and coordinate capacity and budgets. Some members stressed the importance of **coming from a place of yes, instead of a place of no**, because it is hard for people to ask for help, and if they are trying to double up on services, it is likely because of the stressful situation they find themselves in. Members stressed that HIFIS should not be used to "filter people out of services", but instead approach it as a tool to effectively case



manage and understand the suite of services that someone is receiving and help them access anything they might be missing out on.

Some members noted that they like HIFIS, while others said they did not. Some noted that information is entered in different ways by different organizations and this can make it difficult to navigate and quickly access information about what services someone is receiving. For example, there are three different places that HOP/HPP can be entered into. Furthermore, some members found inputting information into HIFIS to be time-consuming as it takes up to ten minutes per client to complete. Given that the demand for HOP and HPP, as well as other programs is increasing, this adds extra administrative burden on to staff.

In general, members try to be flexible with eligibility because they recognize that everyone's need is different and it is important to treat situations on a case-by-case basis. For example, someone may have a higher income but they may also be supporting multiple children. In addition, members try to connect clients to other services that may help them. This is done in different ways, including:

- Connecting with local organizations to develop their own central hub for coordinated access and intake
- Ensuring clients are on the BC Housing Registry
- Helping clients complete housing application forms and community referral forms (some would even host "application days" with the broader public on a biweekly basis)
- Connecting clients to landlords
- Helping clients obtain identification

Program Effectiveness

Does the HOP/HPP program respond to the unique challenges and needs related to serving urban Indigenous unhoused people?

Some members said yes, while others said no. One member noted that HPP does not really serve unhoused populations because you needed to be housed to access the funding in the first place. Overall, there was agreement that there are more systemic challenges preventing the programs from truly being effective, such as a lack of housing supply which cannot be addressed by HOP and HPP alone. This leads to other consequences, such as people losing their children to the welfare system due to a lack of housing, or landlords finding ways to evict their tenants anyway because they can get higher rent from new tenants. When someone is evicted, there is a lack of supply means there is nowhere else for them to go.

Many members noted that HOP and HPP are not flexible enough to meet client's needs and that this is a problem because homelessness looks different for everyone and therefore it is hard to spend based on true need. For example, the funds are good for covering the costs of moving and storage lockers but are insufficient at fully covering important costs such as damage deposits and recognizing how expensive rent has become.



It also is not flexible enough to meet the needs of specific populations such as seniors, who would benefit from funding to cover costs such as internet and grocery deliveries due to mobility challenges. The lack of flexibility means that some organizations do not know how or when to use their funding in a way that is most effective and may sit on it until the end of the fiscal year. This means when looking at a snapshot of HOP and HPP utilization at certain times of the year, it may seem there is a surplus of rent supplements. However, this is not the case, it is simply that the program is not flexible enough to address actual needs.

Many organizations referred to Reaching Home as being a much more successful program in truly meeting the needs of those experiencing homelessness, as the funds can be used more flexibly and truly meet people where they are at. For example, the money could be spent on tents and sleeping bags, or on installing air conditioners for vulnerable seniors. Further information about Reaching Home versus HOP and HPP is provided later in this document.

Probe: Can you identify unique needs of Indigenous unhousedcommunities in urban centers? Probe: What additional steps could be taken to meet the needs of Indigenous unhoused populations?

In urban centres, particularly Metro Vancouver, rent is exceedingly high. Coupled with racism and stigma, these factors all make it difficult for organizations to support stability. Renovictions (when an eviction is carried out to renovate or repair a rental unit)⁴ are also a big problem in urban centres, which means tenants are often being evicted because landlords want to increase rent, but there is nowhere for those former tenants to go, due to a lack of housing supply.

In addition, current housing structures and the lack of supply make it extremely difficult to find housing with multiple bedrooms, with long waits for three-bedroom units and essentially no four or five-bedroom units. Not only does this make it difficult to house families, but it is contrary to Indigenous cultural approaches to hospitality and hosting family and friends. For example, subsidized housing has strict rules around who can stay in a house, which contravenes responsibilities to host family and friends, especially if people are staying from out of town for a funeral or due to displacements such as floods or wildfires. It also makes it almost impossible for families to live intergenerationally. The current housing context does not serve Indigenous family structures well as the rules make it difficult to comply and there is not enough space to comfortably host people.

Probe: What additional steps could be taken to meet the needs of Indigenous unhoused populations?

The government's intention to increase the housing supply must ensure that there are more units with more bedrooms. This will enable families to stay together, particularly if it is an intergenerational household.

⁴ BC Government. (2023). "Renovictions". Accessed May 30, 2023, https://www2.gov.bc.ca/gov/content/housing-tenancy/residential-tenancies/ending-a-tenancy/renovictions



Furthermore, **for Indigenous communities, there is a need for cultural-based supports. HPP and HOP do not provide funding for this**. Allowing more flexibility in how funding is spent would address this.

Do the services offered through the HOP and/or HPP programs (either directly or through referral), such as medical care and mental health services, effectively respond to the needs of the vulnerable populations targeted by the program (urban Indigenous peoples, women escaping domestic violence, former corrections inmates being released, people with disabilities)? Please explain. *Probes: What program elements, if any, are particularly effective at meeting the needs of one or more of these target groups? What program elements are not effectively meeting the needs of one or more of these target groups?*

Members noted huge challenges in connecting people to the right programs, particularly health-related ones. They noted that whom you know matters, and having connections in the right places is a huge advantage to actually getting clients access to services – with some members relying on direct phone numbers for workers in local offices and not bothering to use official 1-800 numbers.

The broader health and mental health system is extremely difficult to navigate, and it is hard to find the right services to refer people to. This means that members are spending a significant amount of time trying to help people, after already spending time trying to clarify their status with income assistance to make sure they are getting services they are eligible to.

The consequence of a complicated system is that people are falling through the cracks and showing up at members' doors desperate because they have exhausted all options. In particular, AHMA members advised that people with mental health issues essentially need an advocate because, without a mental health support worker, it is almost impossible for them to access the services they need to stabilize their health. Furthermore, AHMA staff often hear that non-clinical/allied supports such as peer-based and cultural supports are a gap for members. It is crucial that a broader definition of "mental health worker" is used to support decolonizing standards of how life domains/wellness are supported in service delivery. This means that not only should funding for health care workers be provided, but also funding for peer/cultural support workers.

In addition, members stressed the need for support of secondary services to support mental health issues. If done correctly, this would help address situations such as pests, hoarding, and supports for high-needs children. Currently, organizations lack the resources to address these. It was also noted that embedding support services in applications alongside rent applications would help this.

In terms of income assistance, members noted it can take a while to confirm someone's status and eligibility, but that there has been success in working with Community Integration



Specialists (CIS). CIS' are considered a valuable resource and for some members, and it has been a collaborative working process. Ideally, CIS' would be based out of Friendship Centres.

In general, members highlighted the need to look at the broader picture and think beyond housing – other supports are under-resourced, not just homelessness and housing supports. More needs to be done for poverty reduction, health programs, child care, and public schools in order to truly address needs.

Probe: Are there any target groups that are overlooked or not receiving sufficient services? If yes, please explain.

The following groups were noted by members as being overlooked or not receiving sufficient services:

- Couples that are homeless and want to stay together; the alternative is a tent and/or couch surfing.
- Single fathers with children, as they cannot access housing that is available to single women with children. The consequence is that they are separated from their children.
- Seniors with limited mobility and therefore need help cleaning their houses or accessing groceries. Furthermore, Old Age Security is not enough to support increased costs of living.
- People being discharged from hospitals.

What barriers can you identify for individuals accessing the program? *Probe: What* feedback have you received from program recipients about their personal barriers and what system-level barriers can you identify?

Members identified the following barriers to accessing the HOP and HPP:

- Some clients lack transportation to get to and from appointments to access services.
- Some clients are difficult to contact and/or do not have access to phones or minutes.
- Some organizations found it difficult to navigate the HOP and HPP program and how funding can be spent.
- The dollar amount per supplement is not sufficient in helping house people due to the increased cost of living and high rent prices.
- The number of rent supplements available does not match the need.
- Some clients lack references to enter the housing rental market.
- Some clients do not have a bank account.
- Some clients do not have a form of ID.
- Some clients do not have official tenancy agreements, especially if they are couch surfing, so they may not be eligible for assistance because it is harder to demonstrate their 'need'.
- Asking for help can cause some clients a lot of anxiety.



• Some clients build relationships and trust with individual staff members. If that staff member needs to take extended leave or resign due to burnout and/or vicarious trauma, this can result in a break or cut of service for clients who may not want to engage with anyone else.

More broadly, members identified the following issues for individuals accessing other supports:

- There is a need for organizations to have stronger relationships with motels/hotels in order to temporarily shelter people, as many motels/hotel require credit cards, which some clients do not possess. By having a strong relationship directly with the organization, there may be workarounds to address this.
- There is a lack of facilities for harm reduction which makes it difficult for people to find spaces to address substance use challenges.
- There are major barriers for trans-women wanting to access women-focused services. Trans-inclusive spaces are critical.

Among your clients, how effective has HOP and/or HPP been at providing housing stability? *Probe: If there are challenges or gaps, what are they?*

Some members felt that even if aspects of the program are effective at housing people, the need is now so high that it does not address wider systemic issues at hand, especially as housing prices continue to increase and racism. Other services and relationships are needed to achieve housing stability, particularly with landlords and organizations that can help clients fill out applications.

If housing is already acquired, then some members felt it can help clients to maintain their housing. But ultimately, the funding and subsidies going to clients are temporary in nature and do not provide a long-term solution. This means that processes are not finding out why people are in a situation of crisis, and thus the subsidy works against itself because it comes with ties, rather than actually addressing the systemic issue itself, and therefore it does not truly provide housing stability.

Members indicated that there would be more value if the programs would also fully cover the costs of factors such as damage deposits as it would then help those who are trying to enter new housing. Instead, organizations currently have to redirect resources from other funds, such as Reaching Home.

What needs are not met under the current program structure of HOP and HPP? *Probe:* What gaps in service delivery can you identify in the current program model? Probe: What target populations are most impacted by these gaps?

As our members serve Indigenous clients, **the fact that HOP and HPP do not fund cultural supports was considered a major gap**. Other gaps included:

• Funding for daycare and education - by incorporating daycare with education/community, Indigenous women and Indigenous children can move forward



- Sufficient funding for damage deposits so the programs cover new housing, not just maintain existing housing
- Food security many food banks are not accessible to people as they required lots of paperwork and a form of ID to demonstrate a need
- Funding for immediate needs such as tents and sleeping bags members often referred to the flexibility of Reaching Home and how it makes that program more successful than HPP and HOP. The lack of flexibility impacts a range of priority populations, including seniors who would benefit from different services such as grocery deliveries and internet
- Christmas and holiday supports for workers and clients noting that it can be an extremely challenging and traumatic time of year for people and extra supports can help with stability and wellness

Nevertheless, members noted that even if gaps in services for HOP and HPP were addressed, the Province must look at the broader picture – **other supports are also under-resourced**, **not just housing and homelessness**, particularly for poverty reduction, health, childcare, and public schools. Any policy solutions put forward by the Province must account for an all-of-government approach.

What is your organization's experience in working with or collaborating with service providers under the HOP and/or HPP programs?

All members noted the importance of collaborating with other organizations, and they do so in different ways. They often rely on a direct relationship with someone whom they can just pick up the phone and check in with, especially when they have seen on HIFIS that a client is accessing services elsewhere.

Members also work with other local organizations to help clients access other services, especially if they have run out of HOP and HPP funding themselves. If they are referring a client to them, they will telephone the organization to give them a heads-up. Members noted that the lack of formal coordinated access was a big challenge, and some regions are taking it upon themselves to develop localized versions in order to better assist clients.

Members also work with different government departments and staff, particularly **CIS' who** were noted as being valuable, especially when they are based in Friendship Centres. BC Rent Bank was also noted as another valuable service.

Some members specified that they have better experiences working with other Indigenous organizations and that they often share resources and support referrals. Non-Indigenous organizations were considered more difficult to engage with as they are overwhelmed and do not have the capacity or attention to dedicate themselves to the unique needs of Indigenous clients. In addition, Indigenous clients often trust Indigenous organizations more and their staff usually have a greater understanding of Indigenous needs.



Probe: Are there areas of strength or best practices in providing supports and services to clients across the two programs?

Having pre-established relationships with other organizations makes it easier to ensure that clients are accessing the services they need in a timely manner. In addition, having staff well-trained in using software such as HIFIS and understanding what services their organization can offer helps provide clients with a suite of services.

CIS positions are considered valuable contact for connecting people to services, especially if the CIS is based in a Friendship Centre.

Probe: Are there gaps or challenges? Please describe.

Some members noted a lack of formal coordinated access, and some communities have taken it upon themselves to develop localized versions to ensure that clients are accessing the services they are eligible for.

Human Resources

At your organization, what staff positions typically work with HOP and/or HPP recipients? What are the qualifications required for each of these roles? *Probes: Are these staff members required to have education/training in social work? Nursing or other health care? Other skills, training, or education?*

Most organizations recruited either one or two staff members for these programs and noted that these staff members were crucial parts of their wider teams. All members advised that there was a need for more staffing to implement these programs more effectively due to the surge in demand. The positions undertaking the work included Homeless Outreach Workers and Housing Support Workers. Ideal staff have backgrounds in crisis intervention, conflict de-escalation, mental health, social services, trauma-informed practices, cultural sensitivity, and a clear criminal record check.

Staff are generally expected to have a level of lived experience, whether through themselves or through a family member, so they have a stronger understanding of how to access services and navigate the system. Members highlighted that having lived experience equals knowing what it means to move forward, and helps them to connect with clients on a deeper level.

Usually, lived experience is preferred over academic experience, formal qualifications, or formal work experience. Still, it was noted that some potential candidates did not know this and were reluctant to apply for positions because they perceived their lack of formal work experience or education as being a barrier.

However, members noted that with lived experience comes the risk of vicarious trauma and burnout, and current programming does not take into consideration the cost and space required to ensure the wellness of staff working with highly vulnerable populations.



Furthermore, as our members work with Indigenous clients, it is crucial that staff have an understanding of Indigenous communities and the unique dynamic of all the cultures and nations that intersect in their areas.

Does your organization experience any challenges hiring for these positions, retaining these positions, or other human resources challenges that impact your organization's ability to provide services to HOP and/or HPP recipients?

All members stressed that the administration budget for HPP and HOP is limited and that recruitment and retention are challenging because they cannot compete with public or private budgets. They often have to redirect funding from other programs to top up wages, as competition can sometimes offer \$10 per hour more. In addition, members noted that their own staff are also struggling with the high costs of living.

Furthermore, vicarious trauma and burnout are present within the staff for these positions, as they are working with highly vulnerable and generally traumatized individuals. As lived experience is a valued component of someone's experience for the position, it makes it even more likely that staff will experience vicarious trauma. This may result in staff needing extended breaks or a need to take leave. As it stands, funding does not support staff with vicarious trauma.

If there is funding for more positions, then the pressure and stress can be shared across several staff members. This also helps clients as they can build relationships and trust with more than one staff member and therefore lowers the risk of a cut or break in services. Dedicating funding and time to the wellness of staff also helps to avoid compassion fatigue.

Are there any other staffing-related challenges or barriers that your organization experiences related to serving HOP and/or HPP recipients? If yes, please describe.

It was noted that some organizations receive many phone calls and messages over weekends and that these are usually emergency situations for people and families. However, as HOP and HPP generally only fund one or two positions for an organization, this places a huge amount of pressure on that particular staff member and causes burnout.

Probe: What are the impacts of these challenges on your organization's ability to serve clients?

Members noted that they struggle to do outreach because they are constantly dealing with emergencies. Furthermore, once the money is allocated, sometimes there is nothing else they can do aside from listening to clients.



There is also a risk that with limited funding for staffing positions, in conjunction with vicarious trauma, staff will experience burnout resulting in extended leave or resignations. This may result in a break or complete cut in services for clients who engaged with an organization due to the trust and relationship they built with a particular staff member. In other cases, there is a risk that staff will develop compassion fatigue, which may impact the care and compassion that a client may receive.

In your experience, how does the HOP and HPP program compare with similar initiatives such as the BC-Canada Housing benefit, RAP, SAFER, and the wide provincial and federal homelessness strategies? *Probe: In what areas in the program more effective than comparable programs? In what areas could HOP and HPP learn lessons from these programs?*

RAP and SAFER

RAP and SAFER are considered more intense in terms of both the information they require for an application and the ongoing information required to maintain it. Some clients are deterred from engaging in these programs because of this. Furthermore, **some clients receive less money through RAP and SAFER than they did with HPP and/or HOP, but this is not known until authorities have decided on the RAP or SAFER application**. Members advised that they work with clients to tidy up their applications so that clients can receive more funds through RAP and SAFER.

Furthermore, while RAP and SAFER are considered longer-term options for clients, these programs are also in high demand, and subsequently, the processing time for an application is getting longer. This means that members are keeping clients on HOP and HPP for longer periods than previously, especially because the dollar amount offered for RAP and SAFER are also not increasing with the cost of living. In some cases, a client may be on HPP for up to five years (rather than the previous goal of less than one year).

BC-CHB

Some members have not worked with BC-CHB or are still waiting to hear back about their applications. Some felt that BCCHB could be valuable as it is calculated based on region and a percentage of income to housing. However, they have not yet had a chance to test it.

Members noted that the main difference when transitioning legacy clients from CHB to BC-CHB is the different maximum monthly subsidies. The criteria for the program are different, so for some people, the subsidy is going up. However, **the programs still do not match the overall need of the community**. Once the transition for BC-CHB is complete, there may be some extra spots for people to access HPP.



Reaching Home

Reaching Home is a community-based program to prevent and reduce homelessness across Canada. It provides funding to urban, Indigenous, rural, and remote communities to help them address their local homelessness needs. It is a federally funded program, and many of our members said they interact with it. Reaching Home is considered advanced because it provides the most flexibility in terms of program funding and offers much higher rates for staff wages. Members advised that Reaching Home funding provides the same services as HPP and HOP, and a lot more.

If housing is already acquired, HPP helps participants to maintain housing, however, members advised that it does not fully cover damage deposits, which makes it difficult to get people into new housing or it forces organizations to dip into other funds.

In comparison, Reaching Home funding can supplement these types of costs and address other areas such as cultural supports, food security (noting a huge increase in demand recently), providing equipment such as tents and sleeping bags, air conditioners (for the elderly and those with health issues), gift cards, and meeting people where they are at.

Other

Members highlighted the need for support of secondary services when it comes to mental health issues. This includes addressing pests, hoarding, and supports for high-needs children.

What long-term outcomes do you associate with the program for individual recipients, based on those your organization has worked with? *Probe: Have you witnessed or heard from individuals who have engaged with the program and transitioned into long-term, stable housing? How often would you say this occurs?*

Members noted that it is hard (and getting harder) to transition people from HPP or HOP to more sustainable, longer-term funding and solutions. **Some of them have had clients on HPP for up to five years, especially with the bottlenecks seen with SAFER and RAP**. While members encourage people to get on to the BC Housing Registry, and some have been successful, overall the current market makes it very difficult for people to move on.

The best case scenario is that organizations do not hear from participants again because they have entered into private housing sustainably, and no longer have to worry about rent and/or needing to continuously increase their incomes.

Can you identify any other opportunities for HOP/HPP and your organization to collaborate or work together to better serve your clients? If yes, please describe.

Some members have already developed complementary services and programs to provide wraparound supports, or they have developed localized coordinated access processes. It was



agreed that organizations must be better coordinated and improve collaboration wherever possible to be efficient with limited resources.

However, it was noted that the Province needs to look at the broader picture beyond housing and homelessness and revisit other social services and health areas. It is widely understood that the private sector is not going to fund affordable housing, so the government must step in and meet the need by increasing supply, and in the midst of a housing crisis, it is unethical to continue increasing rents.

The federal government's desire to increase migration was noted as a concern because the housing crisis in BC demonstrates a lack of capacity to house more people.

ANALYSIS

- Overall, both HPP and HOP are important components for AHMA members to provide a continuum of care for Indigenous people, particularly vulnerable families.
- The two programs fund important positions for organizations. If this funding is removed or jeopardized, it would result in the loss of experienced, well-trained staff who have built relationships with their local communities. However, funding does not support appropriate wages for staff who have built relationships with clients and their local community, and who are also at risk of vicarious trauma.
- In addition, with the funding budget facilitating wages at around \$24 per hour, the wages are low relative to high costs of living in places such as Metro Vancouver and this puts staff at risk of poverty themselves while at the same time trying to help those experiencing homelessness.
- Increasing their wages would address this and align with recommendation 15 of the BC IHS, which calls for more support for Indigenous employment in the non-profit sector, and recommendation 19, which is about working with Indigenous organizations and supporting them to explore other ways to build their organizational capacity⁵.
- Furthermore, providing some budget/wage room for organizations to adjust what wage they can offer based on the applicant's skill set gives organizations more flexibility in how they pay their staff and negotiate contracts. Discussions with AHMA staff also indicate that there would be value in also providing specific guidelines, limits, and expectations for service provider staff, especially as limits can help staff to work and help clients within their job description, and thus reduce burnout. Burnout could also be reduced by developing mental/emotional support programs and training groups for social workers to connect and support each other.

⁵ BC Indigenous Homelessness Strategy Steering Committee. (2022). BC Indigenous Homelessness Strategy. Accessed May 19, 2023, https://static1.squarespace.com/static/573e02ab62cd943531b23633/t/637bf48ff6d09d682dbf538d/1669067919818/2022-08+BC+Indigenous+Homelessness+Strategy+ +FINAL+V5+%28004%29.pdf



- While there are ways in which HPP and HOP could be improved, at the very least they
 provide an entry point for vulnerable people to engage with the social service sector and
 subsequently be connected to other services such as income assistance, mental health
 supports, food banks, assistance obtaining identification cards, and access to cultural
 supports.
- The population interacting with HOP and HPP is diverse because the population experiencing homelessness is diverse. It includes women and children fleeing violence, people with addictions, people with mental health challenges, single fathers, seniors, people interacting with the justice system, people interacting with the child welfare system, and people being discharged from hospitals.
- Thus, it is crucial that organizations can spend money under HPP and HOP in a manner that is flexible so that the two programs can fund what is actually needed in the community – whether it be rent supplements, purchasing tents and sleeping bags, covering the cost of internet or grocery deliveries, storage for belongings, air conditioners to keep units habitable, or cultural supports for Indigenous people.
- As noted previously, the lack of flexibility sometimes results in organizations not knowing how or when to spend the funds, and they may sit on it until the end of the fiscal year. This means that if research is being undertaken into fund utilization, it may look as if there is a surplus. This is not the case, it is simply that the funding is not flexible enough for organizations to use it effectively.
- A huge barrier to HPP and HOP is that the dollar amount is not in line with the increased cost of living and high rents, and more individual supplements are required to truly address the need. In order for these kinds of programs to be effective, they must be indexed rather than set at fixed dollar amounts so that they increase in real-time with what is happening in communities whether that be changes to the housing market or changes to inflation more broadly. Affordability associated with the costs of groceries and petrol all impact someone's ability to pay rent.
- In addition, 40% of the population experiencing homelessness identify as Indigenous, and Indigenous clients generally trust Indigenous organizations more, thus there is value in earmarking 40% of the fund for Indigenous clients only and ensuring a large proportion of the funds are allocated to Indigenous-led organizations. This would align with recommendation 3 of the BC Indigenous Homelessness Strategy⁶ which calls for rent supplements to be set aside for Indigenous Peoples and administered in line with guidance from Indigenous organizations and communities.

⁶ Ibid, 2022



- How the system interacts with other services and positions largely relies on individual staff members building relationships with others, as there is a lack of effective coordinated access. CIS were largely considered a successful position for helping individuals access different services, but where these positions are housed is crucial in terms of its effectiveness. Having CIS' based in Friendship Centres will help bolster their ability to benefit Indigenous clients. Additionally, by increasing the administrative portion of the HOP and HPP budgets for organizations administering the programs, Indigenous providers will have more capacity to provide cultural supports. Ultimately, Indigenous organizations are best placed to serve Indigenous clients because they have a greater understanding of Indigenous needs and thus it is easier to build trust with clients.
- Out of AHMA's 55 members, just 13 deliver rent supplements, representing a budget of approximately \$1,000,000 a year. In the context of the housing crisis in BC and the average cost of housing in BC sitting at \$997,000 province-wide⁷ or \$1,123,000 in Vancouver⁸, this funding is minimal and additional funding, which can be spent flexibly, will help address community need.
- Lastly, it is crucial that government and service providers work with clients from a place of yes, not a place of no. It is hard for clients to ask for help, so current systems, tools, and attitudes should not focus on sifting clients out of their services, but instead welcome them in and ensure they are getting access to as many services as they are eligible for.

RECOMMENDATIONS

AHMA recommends that the Ministry of Housing consider the following:

- 1. Note the importance of these programs in terms of providing employment opportunities for organizations that work with those experiencing homelessness.
- 2. Increase wages for staff recruited through this program to ensure that staff are not forced to also live in poverty.
- 3. Increased administrative budgets for the program so that:
 - additional staff can be recruited to reduce burnout and consequences associated with vicarious trauma, and thus improve the care that clients receive.
 - b. Indigenous organizations have increased capacity to provide cultural supports.

⁷ Statista Research Department. (2023). Average house prices in British Columbia, Canada from 2018 to 2022, with a forecast until 2024. Accessed May 19, 2023, https://www.statista.com/statistics/604245/median-house-prices-britishcolumbia/#:~:text=The%20average%20house%20price%20in,dollars%20in%20the%20following%20year.

⁸ Canadian Real Estate Association. (2023). Real Estate Board of Vancouver. Accessed May 19, 2023, https://creastats.crea.ca/board/vanc



- 4. Increase the dollar amount of HPP and HOP per client so that it reflects the true cost of living. Ideally, the amount should be indexed rather than set at a fixed dollar amount so that it can be updated in real-time.
- 5. Increase the overall funding for rent supplements so that additional supplements can be provided to the community, and ensure that a number of these are earmarked for Indigenous people and are administered by Indigenous organizations to recognize that almost 40% of those experiencing homelessness identify as Indigenous.
- 6. Increase the administrative budget so that more staff can be recruited for these positions and therefore reduce burnout and compassion fatigue in the sector, as well as improve the care that clients receive.
- 7. Allow spending under HOP and HPP to be more flexible and more in line with the Reaching Home program so that it recognized that the population interacting with the two programs is diverse, and thus individual needs are diverse.
- 8. Ensure that a large number of CIS positions are based within Friendship Centres.
- 9. Address bottlenecks with RAP and SAFER applications so that people can move through a continuum of care and access more sustainable funding to address homelessness.

For any further questions, please reach out to Stephanie Lowe, Senior Policy Analyst, AHMA at <u>ahmapolicy@ahma-bc.org</u>.