

**Prelude:**

“After Stephen Wesley moved from a tent in Topaz Park to his own studio apartment in - October, he cried for three days.

“I was just so happy when I got this place,” he said.

And then he fell sick for a few days. Wesley thinks his body was finally able to relax after living in the park for four months, leading to tears of relief and the flu.

“You have to be alert all the time,” Wesley said. “People coming up to your tent with flashlights high, looking to steal stuff. People asking for lighters in the middle of the night. The police coming and knocking on your tent looking for people that are wanted. It was constant.”

He dutifully packed up his tent each morning before 7 a.m., per Victoria bylaws, and carted his belongings around with him during the day. But moving indoors has given him a sense of peace, and now that he’s an “insider,” as his unhoused friends call him, he never wants to go back.

“Do I miss it? No.”



Elliott, R E, ‘Moving people out of parks for good takes a personalized approach’, [Times Colonist](#), December 26, 2023

# Developing a Homelessness Action Plan for Nanaimo: Finding a Way Home

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## Table of Contents

|  |    |
|--|----|
| 1. Background .....  | 4  |
| 2. Nanaimo’s History of Homelessness .....                         | 5  |
| 3. Issues Related to Homelessness .....                            | 14 |
| 4. Lessons from Elsewhere .....                                    | 20 |
| 5. Lessons from Canada .....                                       | 23 |
| 6. A Way Forward .....   | 28 |
| 7. Supporting and Funding a Homeless Action Plan for Nanaimo ..... | 36 |
| 8. Next Steps .....  | 41 |
| 9. Conclusion .....  | 55 |

Is excessive homelessness our new normal?

Or is it a temporary new reality in which “Canada is gripped by a surge in homelessness that has seen tens of thousands of people priced out of rental and real estate markets and left to live in the streets of the wealthy nation”.<sup>1</sup> It is clear:

Chronic homelessness is a complex, national issue in Canada with many social, economic, and environmental impacts. According to Statistics Canada, over 235,000 people experience homelessness in Canada every year (Strobel *et al.*, 2021)<sup>2</sup>.

Homelessness is classified as ‘chronic’ when an individual has spent over six months without permanent shelter or has recurrently experienced homelessness for a cumulative duration of at least 18 months over the past three years.”<sup>3</sup>

Homelessness has a number of complicating features that appear to have created a ‘perfect storm’ of a mix of people living on the street. Many are there because of our failure to care properly for those with mental health issues, those with brain injuries, those with substance abuse issues, youth who have been allowed to transition out of care without proper supports, release of those in custody who have no home or supports, seniors (especially women) who have lost income support and those who have simply been priced out of the housing market.

Systemic homelessness has become a challenging issue for many municipalities across Canada. Nanaimo is no exception. Some would call it a crisis. In August 2023 the Canadian Alliance to End Homelessness, Smart Prosperity Institute, and REALPAC (consisting of 130 of the largest commercial real estate companies in Canada [such as Bentall, BOSA, Brookfield, Cadillac Fairview, CHARTWELL, Colliers, CONCERT, Ivanhoe Cambridge, Manulife, Morguard, Oxford, PCL]) concluded that “Canada’s housing crisis is worsening dramatically. Millions of people – particularly those with the lowest incomes – are facing rapidly rising housing costs, driven significantly by an extreme lack of supply of the right types of rental housing. This is driving a wave of new homelessness, eating up increasing percentages of workers’ incomes and causing untold stress and suffering”.<sup>4</sup> Further, in July 2023, IPSOS Market Research stated that “more than half (52 per cent) of Canadians report that they are \$200 away or less from not being able to meet all of their financial obligations, including 35 per cent who say they already don’t make enough to cover their bills and debt payments, the highest recorded proportion to date.”<sup>5</sup>

What can be done to address this increasingly complex and challenging issue?

This paper explores homelessness and offers suggestions for addressing chronic homelessness in Nanaimo.

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<sup>1</sup> <https://www.japantimes.co.jp/news/2023/10/05/world/society/homelessness-canada-prices-soar/>

<sup>2</sup> “Researchers warn government data is vastly underestimating the number of homeless across the country, as the Government data estimates there are some 235,000 homeless people across the country, but that is only counting people who access shelters, said University of Western Ontario professor Cheryl Forchuk, who fears the true picture is far worse. ‘We are largely underestimating the number ... we could probably triple the current federal estimates.’”

<https://www.japantimes.co.jp/news/2023/10/05/world/society/homelessness-canada-prices-soar/> social ill spreads from major cities to small towns

<sup>3</sup> <https://www.sdgcities.ca/2023/04/04/the-cost-of-chronic-homelessness-and-solutions-for-the-city-of-london/>

<sup>4</sup> [The National Housing Accord: A Multi-Sector Approach to Ending Canada’s Rental Housing Crisis: August 2023](#) Canadian Alliance to End Homelessness, Smart Prosperity Institute, REALPAC

<sup>5</sup> G&M September 6 ‘23



Life on the street: On the left three people sleeping overnight under cover; on the right next morning when it's time to move on.

## 1. Background

I have the privilege of living in Nanaimo British Columbia on scenic Vancouver Island. Island living is a unique lifestyle. For many visitors there is a sense that the issues of the world are somehow less impactful, that islanders are fortunate to live a more idyllic daily life. But, the reality is very different<sup>6</sup>. While Vancouver Island and Nanaimo are special places, there is another side to Nanaimo that is both disturbing and problematic: our increasing homeless population. As of fall 2023, Nanaimo has as many as 600 to 800 homeless people<sup>7</sup>. Of that number, 33% are Indigenous<sup>8</sup>. But, there are few shelter beds, few resources to provide supports and few long term solutions. Life for Nanaimo's homeless is a day to day struggle to simply exist in the face of foul weather, inadequate services and supports.



Hunkering down out of the wind and rain

Living in Nanaimo's downtown I have seen the number of our homeless population grow dramatically in size with numbers of seniors and young people appearing to increase disproportionately. I have gone from recognising 'regular' homeless people to recognising none. I have gone from seeing a few homeless as I walk around downtown to seeing many homeless. In contrast, as I travel Switzerland, and

<sup>6</sup> See: Goldberg Kim, *Red Zone*, (Nanaimo: Pig Squash Press) 2009

<sup>7</sup> City of Nanaimo Housing Needs Report (2023) noted that "likely more than 600 people experiencing homelessness in Nanaimo every year" p.36 Applying a 30 percent increase (that increase is slightly less than actual homeless increases 2016-2020) to homeless numbers since 2020 (433) then the 2023 homeless number could be 800 homeless (or more!).

<sup>8</sup> Op.Cit.

Basel Switzerland in particular, I see no homeless. That contrast has only grown over the years and especially since 2020.

I was intrigued as to why Switzerland seemed to have no homeless. Were they hidden away? Were they forced to leave the country? I knew Switzerland had lots of foreign residents; it was obvious as one walked down Basel's streets<sup>9</sup>. But where were the homeless? I decided to find out and undertook a research project in the summer of 2023 to find the answer.

I met with members of the Urban Studies Program at University of Basel who put me in touch with a recent graduate student and Professor Jörg Dittman of University of Applied Sciences Northwestern. In addition I connected with the Canton of Basel whose staff provided me with information about Basel's role in addressing homelessness. Professor Dittman met with me and provided an overview of homelessness in Switzerland. He has been a key investigator in several homeless studies, including a national homeless survey in December 2020 that determined there were a total of 2,200 homeless people in Switzerland which had a population of 8.65 Million at the time. That number shocked me. I knew Nanaimo had a homeless population of approximately 500 to 600 in 2022 or 20 times higher than Switzerland. I was determined to find out why and how Switzerland and Basel managed homelessness.

This paper explores those findings and lessons that offer hope and way forward for Nanaimo.

## **2. Nanaimo's History with Homelessness**

Homelessness has been a part of Nanaimo's history for many years. But, unlike today when homelessness has become a systemic issue, those homeless were a small number of people; many of whom were transients and frequently people who suffered from mental and substance abuse issues. Since the early years of the 21<sup>st</sup> Century, the homeless population has become more diverse as seniors and youth are unable to find suitable employment or accommodation.

Too often, our common reaction has been one of: well they must want to live on the street or as noted in a letter to the editor in response to my op. ed. in the News Bulletin<sup>10</sup>, a resident of Nanaimo felt dealing with homelessness was simple: "you pick them up and put them in complex care" or "you place them in mandatory treatment"<sup>11</sup> (without their permission). Such action was deemed to be "simpler, easier and doable" as a way of "fixing the homeless and street disorder problems". (Ibid) Yet, we know through empirical evidence that for those living on the street getting off the street is their first priority.<sup>12</sup> It seems it is our nature to try and simplify complex problems like homelessness that are caused by multi-layered issues such as difficult social and/or home-life issues, mental health challenges, substance abuse and addiction, soaring accommodation costs, post-COVID fall out in the form of lost jobs and decreased income and simply the inability for seniors to afford rising costs on fixed income. In the latter case, a recent United Way Study determined that 1 in 5 seniors in BC is at risk of being homeless due to constrained fixed incomes<sup>13</sup>.

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<sup>9</sup> OECD numbers confirm nearly 25% of Swiss are foreign born.

<sup>10</sup> Witty D., 'Look to proven solutions to tackle homelessness' in Nanaimo News Bulletin, October 27, 2023

<sup>11</sup> Letter to Editor Nanaimo News Bulletin November 26, 2023.

<sup>12</sup> Chou E., Los Angeles Times, 'RAND Research finds the homeless avoid big shelters but want to get off the streets', May 4, 2022

<sup>13</sup> Barnes G., 'Almost 1 in 5 BC Seniors at Risk of homelessness: Report', Nanaimo News Bulletin, November 22, 2023

## 2.1 The City's attempts to address homelessness

There has been no shortage of studies in Nanaimo to explore topics related to homelessness. Several are listed below.

### 2.1.1 Nanaimo's Working Group on Homelessness: 2008

Although not a City Council initiative, the Nanaimo Working Group on Homelessness, a partnership strategy between service providers, local businesses and government agencies tried to address the increasing number of homeless by pointing the way for the City of Nanaimo to begin a comprehensive approach to address homelessness. The Working Group retained the reputable consulting firm CitySpaces to complete a review of best practice. In January 2008, the Working Group completed its report, *A Response to Homelessness in Nanaimo: A Housing First Approach*.<sup>14</sup> The following captures some of the key recommendations of that report including the important role that local government can and should provide as well as key considerations to ensure a successful outcome:

***Communities are best placed to devise effective strategies to both prevent and reduce homelessness locally. There are a number of key roles for municipalities to play in the implementation of housing first and harm reduction approach to service delivery*** (my emphasis). These are primarily in the areas of leadership, coordination, advocacy, problem-solving, streamlining regulation and monitoring.

***Community leadership is essential*** (my emphasis) to raise local awareness, foster cooperation among major stakeholders, research needs, support innovation and champion policies and programs that respond to the needs of the most vulnerable in our society.<sup>15</sup>

In particular, the report noted:

The Safer Nanaimo Committee and the Nanaimo Working Group on Homelessness have formally adopted the "Housing First" model of addressing homelessness and acknowledge that a "harm reduction" philosophy and related service model need to be incorporated into the overall housing and service delivery framework targeting the City's most vulnerable.

Across Canada and the US, there has been increasing support for housing first and harm reduction approaches to addressing the problem of homelessness. Housing first approaches support the idea that individuals are better able to pursue their personal goals towards employment, treatment, health and wellbeing when they are in stable housing. Harm reduction or "low demand" approaches combined with supportive housing have also been reported to be effective at addressing the needs of homeless people with substance use issues. (ibid p.1)

In 2008 Nanaimo chose not to adopt a Housing First approach to homelessness. Since 2007, when there were 173 homeless identified in Nanaimo, the homeless population has grown to 600-800+.

### 2.1.2 Nanaimo Affordable Housing Strategy: 2018

In 2018 City Council adopted the *Nanaimo Affordable Housing Strategy*. That Strategy "acknowledged (homelessness) to be a fundamental component of the City of Nanaimo's affordable housing strategy and policy response". Unfortunately the Strategy did not "specifically include the range of service

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<sup>14</sup> CitySpaces, *Response to Homelessness in Nanaimo: A Housing First Approach: Best Practices, January 2008*

<sup>15</sup> Op.Cit.

delivery and programming responses required to effectively respond to homelessness”<sup>16</sup> and it did not adopt the Housing First approach first recommended in 2008. That lack of commitment to a broad range of services and programmes and a Housing First policy (with attendant wraparound supports) may very well have been the critical factor in Nanaimo’s significant increase in homelessness.

### 2.1.3 Nanaimo’s Action Plan to End Homelessness: 2018

Nanaimo’s Action Plan to End Homelessness 2018-2023<sup>17</sup> provided some clear direction to address the emerging homeless challenges faced by Nanaimo. It noted:

**Put bluntly, Nanaimo faces pressures that threaten the integrity and sustainability of the current service system if not addressed.** This report has found that a gap has opened up between community expectations, the needs of the homeless, and the strategies used by agencies to respond to these two pressures. This gap is real, and must be addressed if the service system is to retain community support and maintain its capacity to serve its clients. Two issues in particular require attention.

**First, the service system in Nanaimo needs to account for the challenges posed by changes in the housing and labour markets;** in particular, sharp rises in housing costs, low vacancy rates, and precarious income. This change in the economic context is amplified by a social change; specifically, the need to recognize and respond to the increasing acuity and complexity of addictions and mental health issues in Nanaimo.

**Second, the current system of services needs to be modified to address gaps in services that were identified by service providers,** which range from lack of support to escape street involvement to the need for more graduations in supportive housing.

Notwithstanding the fact that this Action Plan identified key needs and issues, **the “Action Plan focuses on services for the homeless and those who are at risk of homelessness. It does not deal directly with the issue of affordable housing.”** (ibid)

Affordable housing is a key element in the homeless equation. It must be included in any long term homeless strategy. It is apparent that the preceding ‘factors’ still remain today to be addressed and solved.

### 2.1.4 Health and Housing Action Plan: 2020

In 2021, City Council adopted the Health and Housing Action Plan. After the launch of the 2018 Plan to End Homelessness:

Nanaimo City Council appointed a multi-sectoral Health and Housing Task Force (HHTF) to advance the priorities within the plan, through a collaborative approach. The HHTF — composed of key stakeholders at the municipal, regional, provincial and First Nations governments, and community level — embarked on a collective effort to create a Health and Housing Action Plan (HHAP) that takes into consideration the entire health and social sector in our community. The Action Plan sets a bold vision for creating a stronger, more coordinated system to respond to the needs of people facing the most vulnerable circumstances.<sup>18</sup>

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<sup>16</sup> Nanaimo Affordable Housing Strategy 2018 p. 10

<sup>17</sup> Nanaimo’s Action Plan to End Homelessness 2018-2023 United Way Central and Northern Vancouver Island and Nanaimo Homeless Coalition 2018 p.10

<sup>18</sup>City of Nanaimo, Health and Housing Action Plan December 2020, p.12

The Health and Housing Action Plan set out the following Vision and Principles:

Vision: All people in Nanaimo, regardless of their background, situation, or past experiences, are able to navigate & access a full spectrum of health and housing services.<sup>19</sup>

Principles: A set of principles has been developed to guide the development of the Plan. The desired outcome of this Plan, in addition to achieving the Vision as listed above, is a system that embodies the following principles:

TOGETHER, NOT AGAINST Our community as a whole is greater than the sum of its parts.

HOLISTIC, NOT SILOED We work together, as a community, taking into account the whole health and wellbeing of those who live here.

SYSTEMS CHANGE, NOT ONEOFFS We are committed to solutions now, while creating long-term change for the future.

ROOT CAUSES, NOT JUST SYMPTOMS We act early, on things that matter most.

COORDINATED, NOT STATUS QUO We will coordinate, unafraid to chart roads not yet travelled.

ACTION, NOT CONSULTATION We will take action on what we know, and what we hear.

SHARED ACCOUNTABILITY, NOT SOLE RESPONSIBILITY We acknowledge that no one is solely responsible for creating system change, but that we all have a part to play in our collective success.

LEADERSHIP, NOT MANAGEMENT We will create a clear direction and vision for health and housing in our community, for others to rally around and build on.<sup>20</sup>

Those are important principles which reflected the need to address the following problem facing Nanaimo:

We have significant gaps in our current capacity to support the housing, health, and social needs of these individuals and families. This has been exacerbated by the COVID-19 pandemic — which amplified the already widening income and housing affordability gaps — impacts of systemic racism, and health inequities. This is layered on top of a growing yet aging population, and the ongoing impacts of colonialism on Indigenous people. Beyond this, our current system of care is fragmented and lacks coordination, creating gaps and inefficiencies in our social safety net. The results impact all of us: early childhood trauma, social disorder, visible homelessness, social marginalization, etc. lower quality of life and entrench inequities further in our community.<sup>21</sup>

“The report notes that \$18.5 million is needed in 2021 to support 280 people experiencing chronic homelessness, and \$65.5 million over five years to support 635 new program and housing spaces for 4,300 people”.<sup>22</sup> A total of 6,000 new affordable housing units was identified to address housing “1,800 experienc(ing) homelessness at some time during a given year and another 4,200 are “on the edge.”<sup>23</sup>

This ambitious plan continues to be implemented but the pace of implementation creates challenges for all involved. One of its key recommendations, Systems Planning Organization, is discussed in Section 2.2 below. The Vision and Principles of the Health and Housing Action Plan continue to resonate today and should inform any future homeless actions.

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<sup>19</sup> Op.cit. p.4

<sup>20</sup> Op.cit. p.4

<sup>21</sup> Op.cit. p.7

<sup>22</sup> Sakaki G., Nanaimo News Bulletin, ‘Nanaimo’s health and housing task force presents action plan to address homelessness’, December 15, 2020

<sup>23</sup> Op.cit.



## 2.2 Nanaimo Systems Planning Organization: 2023

Clear empowered direction is required to address homelessness. Such is the case with the Nanaimo Systems Planning Organization Society formed by City Council in 2023:

The creation of the Nanaimo Systems Planning Organization (SPO) emerged from one of the key recommendations from the 2021 Health and Housing Action Plan (HHAP). The role of the SPO is to help optimize the current resources and maximize return on existing investment. The SPO will be responsible for several key areas of plan implementation, focusing especially on improved coordination and organization of existing health and housing resources.

The purpose of the SPO is to provide research, data, analysis, education and information related to the community's homelessness response and provide coordinated action and advocacy by Nanaimo's non-profit organizations, Snuneymuxw First Nation and other levels of government, the business sector and the broader community to address an end to homelessness in Nanaimo.<sup>24</sup>

"The SPO is an independent, non-aligned agency that jointly manages and makes decisions through an equitable structure".<sup>25</sup> The SPO Charter sets out its purpose, vision, and guiding principles. Its Vision states:

That all people, regardless of their background, situation, or past experiences, can access a full spectrum of health and housing services. This means that responses are coordinated and resources are aligned to ensure homelessness is prevented whenever possible; and if homelessness occurs, it is a rare, brief, and nonrecurring experience. (Ibid)

The SPO provides an important opportunity to buffer the 'politics of homelessness' from City Council and City Administration. It is a bold and important initiative that is similar to Medicine Hat's successful Medicine Hat Community Housing Society's Homeless and Housing Development Department (Section 5.1 below). The SPO provides a well defined action arm to identify and implement homeless solutions.

## 2.3 Nanaimo's Homeless

The following provides an overview of Nanaimo's homeless.

The 2020 Nanaimo Point-in-Time Homeless-Count (PiT) "found that most unsheltered people in Nanaimo are from the city, with 71.2 per cent reporting that they lived in the city for at least five years".<sup>26</sup> Fifty nine percent are chronically homeless. Ten percent are episodic homeless. Thirty three percent are Indigenous (c.f. 8% of Nanaimo's population).<sup>27</sup>

Reporting on the 2020 PiT Count, CTV noted<sup>28</sup>:

The vast majority of PiT Count respondents told organizers they became homeless due to housing affordability challenges, and not because of challenges due to mental health or substance abuse.

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<sup>24</sup> <https://www.nanaimo.ca/your-government/social-issues-and-community-safety/nanaimo-systems-planning-organization>

<sup>25</sup> CHARTER NANAIMO SYSTEMS PLANNING ORGANIZATION (SPO) SOCIETY May 2, 2022

<sup>26</sup> Chan A., CTV News, Homelessness on the rise in Nanaimo, according to latest count, October 13, 2020

<sup>27</sup> Homeless hub community profile: Nanaimo, 2020

<sup>28</sup> Chan A., CTV News, Homelessness on the rise in Nanaimo, according to latest count, October 13, 2020

Thirty-four per cent of respondents simply said that they could not afford rent, while 27.7 per cent said they had lost housing because of a conflict with a landlord or other tenant. A further 18.4 per cent of respondents said they became homeless after they had a conflict with a partner or spouse.

Further, “most respondents, at 91 per cent, said they want to access permanent housing but find it difficult, largely due to the cost of rent in the city”. (*ibid*)

#### 2.4 Factors leading to homelessness

There are a multitude of factors that lead to homelessness. Such factors include those who require care due to mental health and brain injury issues but are not getting that care, those who have substance abuse issues, those who have aged out of childcare with no housing options, those who have family issues, those who are released from custody with little supports, and those who have lost their employment or their retirement income and then their accommodation. As the 2020 Point-in-Time-Count noted, the majority of homeless are those who have been displaced from their accommodation as a result of a host of factors related to loss of accommodation.<sup>29</sup>

Of particular concern is the steep rise in housing costs and rental costs. In the case of the former, there is the issue of increased costs of entry housing and mortgages and for the latter the ability of landlords to force people out of affordable accommodation. For instance, the average cost of a single family home in Nanaimo in June 2023 was \$876,000 (a 69% increase in 5 years; c.f. \$519,000 in June 2018). Average rents have also increased significantly. For instance a two bedroom rental unit that cost \$975 in 2017 now costs \$1,990 or a 104% increase. CMHC identifies a healthy rental vacancy rate of 3 to 4 percent of all units; but as of July 2023 Nanaimo had a vacancy rate of 1.6 percent (c.f., Vancouver 1.2). To complicate matters, BC’s minimum wage is \$16.75/hour or \$34,840/year. But a maximum monthly housing cost should not exceed 30% of before tax income (CMHC). That suggests a maximum rental in Nanaimo should be \$10,452 for those working for minimal wages; but for a one bedroom rental the current cost is \$20,388 or 58 percent of income. As a result, many are required to share one bedroom units, couch surf, sleep in their vehicles or sleep on the streets.

As noted in a recent comprehensive Globe and Mail article on homelessness:

The biggest issue is housing for the working poor, says Ludvik Skalicky, Smoke Signals’ housing co-ordinator (Mr. Skalicky is a homeless person working to help other homeless in Vancouver). People who are working can’t get government funding because it’s all labelled ‘supportive’ for those incapable of working. So the working poor become homeless, which messes you right up, and the problem just grows. That’s what happened to me. It’s a Catch-22, a riddle, that’s what this is.<sup>30</sup>

Therefore, it is critical that every effort be put into addressing those at risk of losing their housing to ensure they do not end up homeless with all of its debilitating tendencies.

It is obvious that housing is unaffordable for many in Nanaimo and as a result a large number of Nanaimo’s homeless are un-housed because they cannot afford the high costs of housing. That is especially the case for those working in the service industry.

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<sup>29</sup> Op.cit.

<sup>30</sup> <sup>30</sup> Bishop-Stall, S., ‘From Vancouver to Toronto, tent city dwellers carry on despite the constant threat of being swept aside’, Globe and Mail, December 16, 2023

## 2.5 Provision of housing

A number of organisations in Nanaimo have worked tirelessly to provide shelter and affordable housing. Their efforts are commendable in the face of numerous challenges.

### 2.5.1 Emergency overnight shelters

There are a total of 113 beds in Nanaimo<sup>31</sup>:

- Unitarians 25 beds plus 2 for emergencies
- Samaritan Place - Women only 14 beds available for 30 day max stay 24
- Salvation Army - New Hope – 53 beds (24 emergency shelter, 10 transitional shelter beds, 19 CRF transitional)
- St Peters Winter Shelter - 25 beds
- Tillicum Lelum Youth Safe House Co-ed year round: 8 beds



Unitarian Shelter: a reality for too many

### 2.5.2 Supportive and Affordable Housing

The City of Nanaimo Housing Report (2023)<sup>32</sup> indicated that there are 663 transitional supportive housing units in Nanaimo (126 special needs, 510 seniors, 27 women and children fleeing violence units); and 854 non-market units (377 seniors and 477 low income family units). As well, 1,221 BC Housing rent supplements were issued.

A key affordable housing provider is Ballenas Housing Society (BAS). It operates approximately 900 affordable housing units. But there is a need for up to additional 1,800 units to accommodate needs.<sup>33</sup> Recently BAS “completed a 53-unit apartment building that includes a mix of one- and two-bedroom suites, with three accessible units. Half the units will be rented with a rent-geared-to-income arrangement, one-fifth of the units will be rented at deep subsidy as low as \$375-500 per month, and the balance will be rented out at below market rent. The project is a partnership between the housing society, the federal and provincial governments and the City of Nanaimo. The federal government provided \$13.5 million as well as a share of a \$6.25 million in joint federal-provincial funding through the

<sup>31</sup> Emails: Paul Manly November 23, 2023; and Bern Muller December 22, 2023

<sup>32</sup> City of Nanaimo [Housing Needs Report](#), CitySpaces 2023

<sup>33</sup> Interview A. Blakeman, August 21, 2023

national housing strategy. The province will also provide, through B.C. Housing, \$340,000 in annual operating funding. The housing society purchased the land and the city waived \$221,000 in development fees”.<sup>34</sup> That project illustrates the importance of collaboration in achieving housing success. It also illustrates the good work that Ballenas does and can play in addressing homelessness.

In addition, BC Housing supports other affordable housing initiatives such as the Residences at Brechin Hill which features a mix of studio, one-, two- and three-bedroom homes.

## 2.6 Housing Needs

The City of Nanaimo Housing Needs Report (2023)<sup>35</sup> provides a comprehensive analysis of housing in Nanaimo. It includes a detailed description of housing needs by type. It notes that “the City will need to facilitate the correct mix of unit types to address diverse needs, such as, affordability and suitability.”<sup>36</sup> In particular, the Report notes that “more emergency services and shelter spaces” are needed. It also confirmed that there were 762 households on BC Housing’s waitlist of which 343 were seniors, 182 were families, 143 had disabilities and 34 were single. Further the Report noted that 5,005 households are currently in core housing need of which 65% are renters. In addition, of the 11,600 new units that need to be constructed by 2031, fully 46% need to be geared to low income households or 525 new units per year. The Report identifies the need for 5,285 non-market units by 2031 (75% 1 person unit, 19% 2 person unit, 4% 3 person unit).



Types of housing

There are a variety of housing needs and types such as: emergency accommodation, temporary and year-round shelters and safe houses for women and children fleeing violence – all three require ongoing government support; transitional and supportive housing – require some specific directed on-going government support; non-market rental units provide rental options for individuals spending 30% or more of their income on average market rents - support services are not required – initial government

<sup>34</sup> Sakaki G., ‘Building with 50 affordable apartments opens in north Nanaimo.’ In [Nanaimo News Bulletin](#), December 1, 2023  
Federal, provincial and local governments partner with non-profit on Hammond Bay Road building  
Greg Sakaki about 19 hours ago about 19 hours ago

<sup>35</sup> City of Nanaimo [Housing Needs Report](#), CitySpaces 2023

<sup>36</sup> Op.Cit p. summary

funding or innovative funding mechanisms are required to build and construct these units; rent supplements form a bridge between non-market and market housing, with government assistance provided to individuals renting in the private market; and market rental and market ownership housing available through the private market without any public subsidy.

## 2.7 The Status Quo

The current number of homeless is increasing significantly. In 2016 there were 174 counted in the Nanaimo Point-in-Time Homeless-Count (PiT), 355 in 2018 and 433 in 2020. Current numbers suggest upwards of 800<sup>37</sup> are homeless (note: those who manage the PiT believe that the count does not capture all homeless). Those numbers suggest annual homeless numbers increase on average by up to 30 percent. Assuming a lower increase of 20 percent per year increase in homeless people by 2030, there could be upwards of 2,500 homeless in Nanaimo in 2030 unless significant action is taken to address homelessness.

It is evident that a 'do nothing' scenario is unacceptable.

## 2.8 Findings

There have been significant ideas and resources directed at trying to identify long-term solutions to the affordability housing crisis and associated homelessness that results from too expensive housing. While there are NGO's and others who are desperately trying to address homelessness, the number of homeless are overwhelming available supports. Simply, notwithstanding the good intentions of the *Nanaimo Affordable Housing Strategy*, *Nanaimo's Action Plan to End Homelessness 2018-2023*, and *2020 Health and Housing Action Plan* the system is failing to address both the housing affordability issue and the homeless need for housing and wraparound supports and services.

At a December 12<sup>th</sup>, 2020 Council meeting to review the *Health and Housing Action Plan*, City Councillor Sheryl Armstrong pointed to the on-going failure (and her frustration) to address the homeless issue. She said "everything in the action plan was previously attempted a decade ago with the Safer Nanaimo committee" and she hoped "this time there will be more specialized supports and more health and mental health resources". Further Councillor Armstrong noted that "There's nothing new in [this] report. Nothing." She continued: "And what happened [last time] is there was a lack of commitment from partners."<sup>38</sup> Her comments speak to the frustration that many have. That reality of an inability to coordinate across services, supports and sectors is an on-going challenge for most local governments attempting to deal with homelessness. Nanaimo is no exception.

## 2.9 Implications for action

1. It is my view that, in the absence of a comprehensive tested and successful approach, Nanaimo will continue to underachieve in addressing chronic homelessness and homeless numbers will grow significantly.
2. There needs to be a fulsome integrated approach to the delivery of housing and services.

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<sup>37</sup> Applying a 30 percent increase (that increase is slightly less than actual homeless increases 2016-2020) to homeless numbers since 2020 (433) then the 2023 homeless number is likely 800 homeless (or more!).

<sup>38</sup> Sakaki G., 'Nanaimo's health and housing task force presents action plan to address homelessness' in [Nanaimo News Bulletin](#), December 15, 2020

3. Nanaimo's Systems Planning Organization needs to be fully supported and encouraged to lead in the delivery of appropriate housing and services required to address Nanaimo's homeless crisis.

### 3. Issues related to homelessness

There are some European studies and local evidence that explore the costs of homelessness, including the direct costs of lives lost and the externalities of skyrocketing service/support costs. In addition, there is anecdotal local evidence to suggest that the current state of homelessness is extremely costly in terms of impact on those living daily homelessness and those trying to provide services and supports. A few examples are discussed below.

#### 3.1 Costs to those on the street

By simply walking Nanaimo's downtown, it is evident that the lives of those who live on the street are chaotic and challenging. Yet, studies on Skid Row in Los Angeles point to the reality that homeless people do not want to live on the street. One study found that 90% of homeless people when asked what they needed most responded that they wanted to get off the street and have shelter<sup>39</sup> (the other study found 92% wanted to get off the street). A 2020 PiT Count study in Nanaimo, also found 91 per cent wanted to get out of homeless living and have access to permanent housing<sup>40</sup>. With nowhere to go, it is not surprising that those who live on the street become victims: victims of crime, victims of hunger, victims of substance abuse, victims of violence and victims of premature death. For instance, "people between age 25 and 44 who are living unhoused in Nanaimo are dying from illicit drug overdoses two and a half times more often than elsewhere on the Island". Further this "grim statistic arose during discussion of drug toxicity data at a City of Nanaimo governance and priorities meeting Monday, Dec. 11. . . . According to Island Health, from Jan. 1 to Oct. 31, B.C. Emergency Health Services attended 964 illicit drug poisonings in Nanaimo, compared to 586 for all of 2022. Nanaimo's rate for drug overdoses now stands at just over 906 per 100,000 people, more than double Island Health's average of 428 per 100,000. Drug toxicity deaths in Nanaimo have been rising in recent years. In 2019, overdoses killed 28 people, and in 2022, overdoses claimed 85 lives. As of Oct. 31 this year, 99 people had died, representing a death rate more than double that of the rest of the Island Health region."<sup>41</sup> A 2011 study by Dr Bethan Thomas, from the University of Sheffield UK<sup>42</sup>, estimating the average age of death for the wider homeless, found that homeless people **die thirty years before the UK national average**<sup>43</sup>. (my emphasis)

As Dr. Roger Walmsley, Island Health addiction medicine physician noted at the December 11 Nanaimo Governance meeting, "one of the other things that I'm very aware of when I work on the street is the increased amount of homelessness and I don't think that we can ... dismiss the challenges that the housing crisis has put on our community". He continued: "I'm seeing more elderly people living in their cars. I'm seeing people who are not substance users who are faced with homelessness." "He said in those situations people sometimes turn to addictions as a 'way to survive.' Many of the people that I

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<sup>39</sup>A-Mark Foundation, 'What do People Experiencing Homelessness Really Want,' September 13, 2022

<sup>40</sup> Chan A., CTV News, Homelessness on the rise in Nanaimo, according to latest count, October 13, 2020

<sup>41</sup> Bush, C., 'Nanaimo's Death Poisoning Death Rate Double Vancouver Island's Average', in Nanaimo News Bulletin, December 15, 2023

<sup>42</sup> Thomas B., 'A Silent Killer: A research brief on mortality amongst homeless people, in Crisis, December 2011

<sup>43</sup> Other key findings from the research into the mortality of homeless people are: Drug and alcohol abuse account for just over a third of all deaths Homeless people are over nine times more likely to commit suicide than the general population Deaths as a result of traffic accidents are three times as likely, infections twice as likely.

deal with on the street, they use drugs to stay up at night because they don't have a warm place to go to. There's not enough shelters in the city to go to to house all the people that we have".<sup>44</sup>

Those thoughts were further corroborated by the following observation from a former Vancouver tent city occupant: "If there's one thing I know from my experience in Tent City, it's that while drugs and booze sometimes lead to homelessness, being homeless can make you turn to anything. In urban North America, the hardest aspect of vagrancy is not hunger, thirst or even exposure to the elements (though that can be a killer). The most torturous part is never being able to relax – not fully, in any kind of real comfort and safety. Eventually the psychic stress and exhaustion can break a person, so that a hit of something to become less fully aware is just a tiny bit of grace. But of course, out here, grace, too, spirals downward".<sup>45</sup>

As Jason Harrison<sup>46</sup> Nanaimo Homeless co-chair worker noted, "Despite investments in social and supportive housing over the last five years and increased funding for service providers, the homeless crisis is increasing in our city."<sup>47</sup> It is not surprising that many homeless see no hope.

### 3.2 Costs to service and support those on the street

There are a number of costs associated with the mental health and drug use issues of many who live on the street. A number of studies (including one here in Nanaimo) have put the annual costs to address those on the street with mental and drug use issues at \$53,000 per person per year. One study in Surrey BC tracked a particularly challenging street person and determined the full yearly cost to address that person's use of the system to be \$171,000 per year (2007). Medicine Hat in 2019 noted that some people living on the street cost 120K per year to resource. A Swiss study of the cost savings resulting from addressing heroin users concluded that "the expenditure is more than compensated by 'significant savings to society', including less spent on criminal procedures and imprisonment"<sup>48</sup>. In Canada "it was noted that it costs more to ignore our housing problem than it would to fix it. Consider the estimate that homelessness alone costs the Canadian economy over \$7 billion per year" (in 2014 dollars)<sup>49</sup>. Further, "in Canada, the annual costs to society for persons struggling with both homelessness and severe mental illness are high – about \$75,000 per year, compared to about \$51,000 for homeless people with moderate needs. These costs are often related to health services, emergency shelters, and policing"<sup>50</sup>. In comparison, it is estimated that it costs approximately \$37,000 to house one person in a shelter with attendant supports for one year (i.e. it is at least \$16,000 less per person to shelter someone than to leave them on the street). A 2009 CTV News report reported that the Surrey Business Association believed housing the homeless could reduce costs for each homeless person by 90%.<sup>51</sup>

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<sup>44</sup> Bush, C., 'Nanaimo's Death Poisoning Death Rate Double Vancouver Island's Average', in [Nanaimo News Bulletin](#), December 15, 2023.

<sup>45</sup> Bishop-Stall, S., 'From Vancouver to Toronto, tent city dwellers carry on despite the constant threat of being swept aside', [Globe and Mail](#), December 16, 2023

<sup>46</sup> Jason is currently Executive Director, Mid-Island CMHA

<sup>47</sup> Chan A., CTV News, [Homelessness on the rise in Nanaimo, according to latest count](#), October 13, 2020

<sup>48</sup> [HTTPS://TRANSFORMDRUGS.ORG/BLOG/HEROIN-ASSISTED-TREATMENT-IN-SWITZERLAND-SUCCESSFULLY-REGULATING-THE-SUPPLY-AND-USE-OF-A-HIGH-RISK-INJECTABLE-DRUG](https://transformdrugs.org/blog/heroin-assisted-treatment-in-switzerland-successfully-regulating-the-supply-and-use-of-a-high-risk-injectable-drug)

<sup>49</sup> Stephen Gaetz, Tanya Gulliver, & Tim Richter: (2014) [The State of Homelessness in Canada 2014](#). Toronto: The Canadian Observatory on Homelessness Press.

<sup>50</sup> McGill Newsroom [Housing-First strategy proves cost effective especially for the most-vulnerable homeless August 2020](#)

<sup>51</sup> CTV News/The Canadian Press, [Housing B.C. homeless would save \\$211M: report](#), March 22, 2008

A recent Nanaimo Fire Department Report<sup>52</sup> estimated that in 2023 the fire department will respond to approximately 8,200 medical aid calls costing an estimated \$592,000. As Nanaimo Fire Chief Doyle noted: “There has been a jump ... that can pretty squarely be attributed to the toxic drug crisis . . . We’re seeing a huge increase in illicit drug use calls [for] overdoses.” There are other costs as well including increased police responses to homeless issues, ambulance responses to overdose and mental health issues, and safety patrols provided by the city. Further there are unaccounted externalities for private businesses related to significantly increased costs for security of businesses such as foot patrols, security staff manning doors, security cameras, protective fencing and increased door/window protection costs. In addition, there is very likely a significant toll on the health and well being of those who are repeatedly responding to numerous stressful calls for homeless people who are in need of life saving intervention. To what degree does such work lead to early retirement or job termination due to that added stress?

Further evidence of the costs of homelessness was identified in the 2020 Nanaimo *Health and Housing Action Plan*: “the draft action plan to council, acknowledged the \$18.5 million and \$65.5 million estimates sound like a lot of money, but it would be primarily cost-shared. (The consultant) compared spending \$40 per person per day with the \$363 it costs for a day in the hospital or \$144 for a day in jail. The action plan notes that “the potential return on investment can be as high as \$30:\$1.”<sup>53</sup> Medicine Hat found - between 2009-2023 - that their housing first approach reduced days in hospital by 36%, days in jail by 68% and court appearances by 25%.<sup>54</sup>

While the actual costs of homelessness can vary widely depending on the status of the economy, housing costs, drug related issues, weather and available support, I believe that an order of magnitude of the direct economic costs to society of keeping people on the street is approaching \$21 million per year in Nanaimo (see Table 1). That does not include the issues related to costs of long term care needs for those who have experienced overdose and require long term special care<sup>55</sup>, those who have developed chronic illnesses from living outdoors without adequate care or personal health/hygiene, those who become dependent on substances and spiral down to addiction, and those who ultimately (and often inevitably) die on the streets or as a result of street life (as per Dr. Thomas cited previously).

The following table projects yearly service and support costs to simply keep people on the streets of Nanaimo. Cost per person is based on Section 3.2. It demonstrates that significant financial resources continue to be directed to supporting life on the street without a longer term transition to housing and associated supports. In effect, the current delivery of services to the homeless perpetuates the problem.

There needs to be a rethinking of financial resource expenditure so that funds spent on a never ending cycle of homeless supports for those living on the streets can be directed over the long term to appropriate housing and support services which in itself leads to less homelessness and associated issues.

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<sup>52</sup> ‘Fire Department challenged by soaring overdose calls’, Nanaimo News Bulletin, November 9, 2023

<sup>53</sup> Sakaki G., Nanaimo News Bulletin, ‘Nanaimo’s health and housing task force presents action plan to address homelessness’, December 15, 2020

<sup>54</sup> Rogers, J., ‘Homelessness, Mental Health and Substance Abuse: Promising Strategies in ending Homelessness’, Power Point, Winnipeg, December 7, 2023

<sup>55</sup> The increased health risks associated with opioid use has been well documented. See: Kotlinska-Lemieszek A., ‘Less Well-Known Consequences of the Long-Term Use of Opioid Analgesics: A Comprehensive Literature Review, in Drug Design, Development and Therapy, January 2022:16 p. 251-264



**Table 1: Estimated Yearly Cost of Homelessness for Services and Supports in Nanaimo**

| Number of homeless* | Category and percent                                     | Cost per person | Total cost          |
|---------------------|--|-----------------|---------------------|
| 7                   | 1%: severely Chronic                                     | \$120,000/year  | \$840,000           |
| 32                  | 5% severe mental illness                                 | \$75,000/year   | \$2,400,000         |
| 96                  | 15%: mental health issues                                | \$53,000/year   | \$5,088,000         |
| 128                 | 20%: substance abuse issues                              | \$53,000/year   | \$6,784,000         |
| 224                 | 35%: living on street with minor health and other issues | \$10,000/year   | \$2,240,000         |
| 108                 | 17% : living in shelters                                 | \$37,000/year   | \$3,996,000         |
| 45                  | 7%: living partially on street/couch surfing             | \$5,000/year    | \$225,000           |
| <b>TOTAL: 640*</b>  | <b>100%</b>  |                 | <b>\$21,573,000</b> |

\*Note: assumes 800 homeless of which 80% require supports/services

All of these costs are unacceptable. Most are unnecessary (assuming appropriate housing and necessary supports are in place).

### 3.3 Barriers to Integration of Homeless Services

There are a number of issues that have impeded the seamless delivery of homeless programmes and desired outcomes. For instance:

The lack of housing stock – particularly permanent supportive housing, affordable housing – makes it challenging for service providers to assist clients in exiting homelessness. Funding requirements may present challenges as funders have different expectations about how services will be provided, who the target population is. Ideological differences in the way services are provided need to be addressed. For example, abstinence-only shelters and harm reduction programs would need to work to find common ground and means of partnering. Most partnership/coordination/collaboration efforts are aimed within a sector (i.e. housing) and are not cross-sectoral (i.e. housing, education, child welfare, corrections). Governments may support the concept of service integration but do not invest in the mechanisms needed to create change within and between sectors. Agencies may fear the loss of funds, control, jobs, the loss of autonomy.<sup>56</sup>

As a result, it is essential that any homeless strategy be founded on programme and inter-sectoral integration, collaboration and coordination.

### 3.4 Is housing the homeless cost effective?

As noted above, while there are studies that point to the costs of people living on the streets, there are few studies that have quantified the comparable costs of housing those on the street versus leaving them on the street. Professor Dittman confirms that there are no such studies completed in Switzerland<sup>57</sup>. But, as he and others note, the Swiss believe, through anecdotal review of their experiences, that the costs of housing the homeless is, in a full cost accounting framework, a better investment (less stress on health, policing, justice services) and better quality of life for all (i.e.,

<sup>56</sup><https://www.homelesshub.ca/solutions/why-do/potential-barriers-and-challenges-integration-homelessness-services>

<sup>57</sup> Email, November 20, 2023 Professor Jörg Dittman of University of Applied Sciences Northwestern

emotional, health, social and economic supports for those who lived on the street and no encounters with street people for residents while utilizing urban centres). In Finland, there is clear evidence that it is less expensive to invest in housing for homeless people than leaving them to fend for themselves as homeless people. For instance:

Keeping people homeless, instead of providing homes for them, is always more expensive for the society. In Finland we have some scientific evaluations of the cost of this program. When a homeless person gets a permanent home, even with support, the cost savings for the society are at least 15,000 Euros per one person per one year. And the cost savings come from different use of different services.<sup>58</sup>

Medicine Hat believes that its Housing First policy is cost effective when compared to the costs of those living on the street.<sup>59</sup> “Year after year, **the data from Medicine Hat confirms that it is less costly to provide appropriate housing and support to a person experiencing homelessness than maintaining the status quo approach that relies on emergency and institutional responses**”. (Ibid) (my emphasis)

### 3.5 Importance of political leadership and will

For those cities and countries that have addressed homelessness, there is a common factor for success: political leadership and will to continue to invest in housing and wrap around supports. As a leader in Finland notes: “What has been crucial in Finland is that there has been a political understanding and political consensus: this is a national problem that we should solve together. Since 2008, we have had several governments with several different political coalitions. All these governments have decided to continue to work to end homelessness.”<sup>60</sup>

### 3.6 Importance of keeping people housed

While much attention is paid to the visible homeless, there is a need to minimise the number of people who lose their accommodation and end up on the street. For instance, Medicine Hat Alberta found early on in its homeless work “that ending homelessness was easier on the upstream side than on the downstream. In other words, **helping people keep their housing is both easier and less expensive than helping them afterward**. (my emphasis) Once a person is homeless, everything else becomes harder. Concerns of nutrition, hygiene, physical safety, dangerous weather events, crime, addiction, and joblessness all follow. This is why Housing First is a vital principle”.<sup>61</sup> Professor Dittman and Canton of Basel staff also confirmed that a focus on supporting those at risk of being homeless was a key priority activity to minimise homelessness.

### 3.7 Role of Community

Interviews in Basel, identified the important role that a cross-section of organisations and the broader community play in supporting homeless strategies and action plans undertaken across much of Basel. For instance, Professor Jörg Dittman noted that addressing homelessness in Basel was possible because of the “importance of the power of community” and the “importance of neighbourhoods” in accepting their role in accommodating homeless populations. Further he felt that addressing homelessness was

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<sup>58</sup> CBC *Sunday Magazine*, ‘Housing is a human right; How Finland is eradicating homelessness’, January 24, 2020

<sup>59</sup> 2023-24 Service Delivery Plan, Medicine Hat Community Housing Society p.18

<sup>60</sup> CBC *Sunday Magazine*, ‘Housing is a human right; How Finland is eradicating homelessness’, January 24, 2020

<sup>61</sup> <sup>61</sup> Edgar G., Moose Jaw Today, ‘Lessons from Medicine Hat’s first-in-Canada Functional Zero Homelessness Feb. 6, 2022

supported because it fostered “the possibility of community activating its interests.”<sup>62</sup> Regula Kürg with the Canton of Basel-Stadt described how a cross-section of organisations and private initiatives supported the ‘right to living space’. In particular, much of the Canton’s energy and that of supporting organisations is directed at keeping people housed (and off the street) by supporting those who are at risk of losing their rental accommodation.<sup>63</sup> As a result, Basel’s successful homelessness programmes is contingent on a broad cross-section of citizens, organisations, and non-profits and a willingness of neighbourhoods to accept homeless people in a variety of housing types and locations. For Basel, it appears that the community working together to address homelessness is a key tool to move the homeless agenda forward successfully.

Jaime Rogers of Medicine Hat also confirmed that much of the City’s success in addressing homelessness can be attributed to a committed community and variety of community-based supports.<sup>64</sup>

### 3.8 Findings

Addressing homelessness will require a concerted community effort with a long term commitment to continuing to provide the needed housing and services over many years to get homelessness to a manageable level, while recognising it will never disappear completely. Such an effort will need political courage and leadership. It will also require innovative solutions and tough decisions.

The costs of homelessness are extraordinary in the form of lives lost, family trauma, low quality of life for those on the streets, decreased community well-being as well as traditional financial costs. Those costs will not decrease unless there is a will to address homelessness in a coordinated, comprehensive, integrated and committed way. Initial financial requirements to move homeless numbers down to a more manageable level will be challenging but essential in order to spend less money on homeless street survival and more on long term solutions that move people off of the streets into housing with appropriate services. There is ample evidence to confirm that the expenditure in appropriate housing and associated wraparound services/supports can make a significant difference in the homeless population and ultimately and fundamentally to their quality of life and that of the entire community.

### 3.9 Implications for action

1. With the significant financial costs associated with servicing the homeless in Nanaimo (approximately \$21 million per year), there comes a crucial need to rethink and redirect such significant financial costs (which as well do not provide options to change behaviour or the level of the crisis).
2. There is evidence that solutions exist that can be replicated in Nanaimo.
3. When we talk of addressing homelessness we need to also talk about addressing at risk or vulnerable populations that could end up homeless due to factors that are controllable.
4. Any long term success will depend on the community of Nanaimo supporting and encouraging bold but necessary action. That suggests that the SPO must actively and continually build and nurture support.

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<sup>62</sup> <sup>62</sup> Interview June 2, 2023 Professor Jörg Dittman of University of Applied Sciences Northwestern

<sup>63</sup> Personal interview with Regula Kürg, lic.rer.pol., Department Head, Presidential Department of the Canton of Basel-Stadt, Cantonal and Urban Development, Housing and Development Department, June 15, 2023

<sup>64</sup> Interview with Jaime Rogers, Manager, Homeless and Housing Development Department, Medicine Hat Community Housing Society, December 18, 2023

## 4 Lessons from Elsewhere

Switzerland and Finland are examined to identify what other countries are doing to address homelessness.

### 4.1 Switzerland

The Swiss believe that providing housing through a Housing First program is not only a socially responsible response to homelessness but that it is also a very cost effective way of dealing with homeless populations. To that end, Switzerland (and Finland, Iceland, Japan, Portugal and Norway) have invested in Housing First and its associated wrap around supports (Note: Basel calls this approach Housing First Plus). In December 2020 Switzerland completed a country-wide homeless survey. It identified 2,200 homeless people across the nation which had a population of 8.65 million in 2020. That equated to a ratio of 0.25 homeless people per 1000 of the Swiss population (c.f., 7.7 homeless per 1000 residents in Nanaimo).<sup>65</sup>

In Basel Switzerland with a population of 174,000 there are 20-30 homeless people; the majority of whom are temporary illegal residents and not able to get government supports (the illegal immigrants tend to sleep in the nearby international airport located in Germany). The remainder (literally a handful in numbers) who are un-housed are Swiss citizens,<sup>66</sup> who prefer to sleep outside in wooded parks and ravines in the summer and under cover in the winter. Except for those few individuals, there are no long term homeless people in Basel. There are 50-60 'houseless' residents who daily all make use of overnight shelter spaces and associated supports, including food. As a result, they do not live on the street.

Basel has adopted a Housing First-Plus programme. In the Canton of Basel-Stadt, "the right to housing has been written into the cantonal constitution, and the canton has established a housing foundation, set up a fund to finance cooperative housing, expanded social welfare assistance, put a Housing First model into practice, decided on affordable new construction in new housing sites, and established a coordination office tasked with addressing precarious housing conditions"<sup>67</sup>. The Canton of Basel-Stadt determined that "housing is a basic human need: a secure housing situation is the basis for participation in social life and integration into society" and "as part of the overall social housing concept, Housing First should definitely be continued and expanded."<sup>68</sup> To that end Basel Stadt has undertaken a "comprehensive template" that embodies pursuing a number of pilot and long term housing related projects. As a result, "the government council wants to . . . pursue a long-term, uniform and coordinated strategy in the area . . . of social housing." (*ibid*)

In particular, "the Housing First project is intended to create a housing offer in which independent living in furnished one-room apartments or studios is possible. Apart from the simplest of rules such as a

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<sup>65</sup> Interview June 2, 2023 Professor Jörg Dittman of University of Applied Sciences Northwestern

<sup>66</sup> Note: Interview July 4 2023 with Basil Studer: MA thesis: "Us and our City: Politicising Public Space through Participatory Photography" confirmed he had to modify his thesis on homelessness because he could not find enough homeless people to interview in Basel. He worked with street organisations to identify homeless people but could only find 6 homeless in total.

<sup>67</sup> <https://www.europenowjournal.org/2023/07/06/homelessness-in-switzerland-from-a-blind-spot-to-new-approaches-in-research-and-practice/>

<sup>68</sup> Original in German: Der Regierungsrat stärkt das Soziale Wohnen in Basel-Stadt 26.06.2023 (10:00): Press Release Government Council Basel Stadt June 26, 2023

minimum of order, renunciation of drug dealing and violence, no requirements are made of the residents. The offer is supported by experts from around the clock. The aim of 'Housing First Plus' is to stabilize the personal situation of the residents".<sup>69</sup>



A modern new Basel affordable senior housing complex located adjacent to a residential district, main tram line, intercity train station and shopping district

It is my view that Basel's ability to declare that it has successfully tackled homelessness reflects several key initiatives and processes:

1. Basel has a Government Council that supports long term homeless intervention through an activist agenda, including adopting housing as a human right through the Housing First-Plus project;
2. Basel (and other Swiss Cantons) is less reliant on the Swiss federal government for funding local initiatives;
3. Basel has the financial means of independently funding a housing first policy<sup>70</sup>;
4. Basel has a city administration that actively addresses homeless issues through policy development and advocacy;
5. Basel addresses those at risk of losing their housing, youth housing and seniors housing as core Housing First activities;
6. Basel has taken a government leadership role in identifying homeless strategies and resource requirements, including fulsome wraparound supports;
7. Basel has developed integrated and coordinated responses to homeless needs;
8. Basel has purposefully and carefully dispersed affordable and supportive housing throughout the Canton so that there is no visible difference in the lifestyle and location of those on government assisted housing supports;
9. Basel has recognised that those with mental health and substance abuse issues are highly susceptible to being homeless unless active supports are in place to keep them safe and housed;
10. Basel has funded a variety of housing initiatives including leading some through ownership of 2,000 affordable housing units, facilitating third party construction of affordable housing units

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<sup>69</sup>Original in German: Der Regierungsrat stärkt das Soziale Wohnen in Basel-Stadt 26.06.2023 (10:00)

<sup>70</sup> Unlike Canada, Canton's have access to income and corporate taxes that are raised locally by each Canton for Canton purposes. Basel's income tax rate is 40.5% and its corporate tax rate is 13%. Nevertheless, OECD calculates an overall tax to GDP ratio of 33.2 for Canada and 28.0 for Switzerland.

and ensuring that those who may be faced with loss of housing are provided advice and support<sup>71</sup>.

As a result of those aforementioned steps, affordable housing is embedded in the daily life of the city. There are no affordable housing ghettos (like France). There are no visible people living on the streets, no tents, no shopping carts<sup>72</sup>, no ‘vagrants sleeping it off’ in parks and no public drug use. Quite literally walking in Basel in 2023 is like walking in Nanaimo in 2010: it is an enjoyable experience absent seeing homeless people in varied states of helplessness.

Basel points to the need to integrate homeless people throughout the Canton in a more community-based housing model where homeless people are not marginalised or segregated in ghettos.



Scattered among these flats are families whose rent is subsidized by the Canton of Basel-Stadt. But, their individual circumstances are only known to the supported families.

#### 4.2 Finland

In Finland (population 5.5 million), “the number of homeless people has fallen sharply. The reason: The country applies the ‘Housing First’ concept. Those affected by homelessness receive a small apartment and counselling – without any preconditions. 4 out of 5 people affected thus make their way back into a stable life. And: All this is cheaper than accepting homelessness”.<sup>73</sup>



One of the apartment complexes built as part of Finland's national homelessness strategy. (photo: Y-Foundation)

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<sup>71</sup> As Professor Dittman noted, it is key to keep people off the street where they can easily and quickly spiral into challenging lifestyles (c.f. Medicine Hat’s focus on keeping people in their homes).

<sup>72</sup> I have seen one shopping cart filled with ‘stuff’ in seven trips to Basel over 6 years.

<sup>73</sup> <https://scoop.me/housing-first-finland-homelessness/Nov-2020>

Since the 1980s, Finnish governments had been trying to reduce homelessness. Short-term shelters were built. However, long-term homeless people were still un-housed because there were too few emergency shelters and many affected people couldn't find jobs – without a housing address. And without any job, they couldn't find accommodation. Furthermore, they had problems applying for social benefits. “All in all, homeless people found themselves trapped. But in 2008 the Finnish government introduced a new policy for the homeless: It started implementing the ‘Housing First’ concept. Since then the number of people affected has fallen sharply”<sup>74</sup>

As a result, “in Finland, the utilisation of emergency and temporary accommodations, such as shelters, hostels, and temporary supported housing, has significantly declined. The number of homeless individuals residing in hostels or boarding houses decreased by 76% from 2008 to 2017. This reduction is attributed to the widespread adoption of prevention strategies, the replacement of outdated models of communal supported housing with Housing First and housing-led approaches, which largely replaced emergency shelters”.<sup>75</sup>

Finland offers another example of how Housing First can successfully address homelessness. It has invested in high quality housing and associated wraparound supports for the homeless. In addition, Finland recognises that investing in addressing homelessness is a long term continuous process.

#### 4.3 Findings

A long term coordinated, holistic, integrated and collaborative response to homelessness is essential to ensure a fulsome and robust response. Both Switzerland and Finland were in dire situations and were desperate for solutions before they realised they had no choice but to act.

#### 4.4 Implications for action

1. Housing First has proven successful in addressing homelessness (as a result it is examined in detail in 6.3.1 below).
2. Political and administrative leadership is an important common element that is required to foster long term success.
3. Identifying a lead agent/agency/structure in addressing homelessness is essential to ensure coordinated and accountable action.
4. Nanaimo must act because it now finds itself in a similar desperate situation with exceedingly high homeless numbers and associated acute health issues.

### **5. Lessons from Canada**

Unlike Switzerland and Finland where there are robust homeless programmes and policies, Canada has a patchwork of delivery models to try and address homelessness. Currently, Medicine Hat Alberta seems to be the most comprehensive Canadian approach (and as a result has the most successful homeless strategy).

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<sup>74</sup> Op.Cit.

<sup>75</sup> Europe Hub, Housing First n.d.

## 5.1 Medicine Hat, Alberta

Medicine Hat Alberta (population 63,000) decided to make Housing First a city priority and since then has brought more than 1,900 off the street (35% were children). Medicine Hat's 'Plan to End Homelessness' originated in 2009 with a housing first approach. In 2014, Medicine Hat developed a second homeless plan entitled *At Home in Medicine Hat: Our Plan to End Homelessness*. "The Plan is based on a 'housing first' philosophy and outlines an effective strategy to address homelessness in the community. A comprehensive and coordinated system of care has been built and continues to evolve, ensuring timely access to the right resources and supports to prevent and end homelessness in peoples' lives. The Homeless and Housing Development Department functions as the Community Based Organization and Community Entity, established for the purposes of system planner and administering funding targeted to initiatives aimed at ending homelessness"<sup>76</sup>. "Housing First provides housing with supports through intensive case management (ICM) for individuals and families who experience chronic and episodic homelessness and who present with higher acuity needs. The duration of the program is approximately 12 months"<sup>77</sup>.

In 1999 Medicine Hat City Council delegated the responsibility of implementing the homelessness initiative to the Medicine Hat Community Housing Society (MHCHS) with a mandate to provide access to affordable housing and supports. MHCHS is a non-profit community-based organisation with an 11 member Board of Directors. The Board is independent of City Council and does not receive municipal funding. The Homeless and Housing Development Department of the MHCHS is tasked with housing programs and homelessness initiatives.

Medicine Hat has addressed its homeless challenge by providing: permanent supportive housing, graduate rental assistance, community-based youth shelter, youth hub outreach services, cultural addictions worker, social supports ad employment, community capacity building and centralised support fund. In June of 2021 Medicine Hat announced that it had become the first city in the country to 'functionally end' chronic homelessness – meaning that there were no more than three individuals facing chronic homelessness in the city for three consecutive months. "While the numbers have gone up and down since, the city has maintained its role as a Canadian leader in the battle against homelessness"<sup>78</sup>.

Subsequently, "a point-in-time count, held every two years, took place the evening of Sept 26 (2022). The unofficial number before dozens of volunteers hit the streets to start the count was 17 'chronically, active homeless,' with another two dozen people considered in and out of homelessness. The survey found the number of chronically homeless people has climbed to 19, while the number of those in and out of homelessness soared to 50"<sup>79</sup>. Even so, with a 2022 homeless population of 69, Medicine Hat's ratio of homeless to its population was 1 homeless per 1000 compared to Nanaimo's at 7.7 homeless per 1000. In October 2023, the number of homeless in Medicine Hat had decreased to 12 making its homeless ratio 0.2/1000.<sup>80</sup>

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<sup>76</sup> <https://mhchs.ca/homelessness-initiatives/>

<sup>77</sup> Community Based Homeless Initiatives, Medicine Hat Community Housing Society

<sup>78</sup> Gregersen, L., "How A Small Canadian City Took On Chronic Homelessness" in *Next City*, Aug. 2022

<sup>79</sup> CBC News Calgary, ".Medicine Hat says it ended homelessness a year ago, but it didn't last long.", October 4, 2022 Note: while 69 seems like a large number, it pales in comparison to Nanaimo's 800+.

<sup>80</sup> Interview with Jaime Rogers, Manager, Homeless and Housing Development Department, Medicine Hat Community Housing Society, December 18, 2023



Medicine Hat Council declared it also ended chronic homelessness in 2015 “bringing accolades and attention from all over the world”<sup>81</sup>, including an article in the New York Times. “But Medicine Hat’s claim points to the fuzzy logic of the problem: The end of homelessness is a state, not a moment. There will always be people who become homeless, and there will always be people who prefer to remain homeless, even in Medicine Hat”.<sup>82</sup> That is the reality of homelessness. It will fluctuate over time.

Medicine Hat uses the Homeless Management Information Systems (HMIS) which are local information technology systems specifically designed for coordinated access in a community. They protect confidentiality, track program attendance, and allow providers to send those in need exactly where they need to go. Only the necessary information reaches each provider, ensuring the privacy of those in the system. “A growing number of Canadian communities are using such tools”.<sup>83</sup> The Homeless Individuals and Families Information System (HIFIS) is a federally-supported tool currently on its fourth iteration.<sup>84</sup> The HMIS that Medicine Hat uses, therefore, doesn’t just account for people who have become homeless – it also accounts for people who are at risk of homelessness



Medicine Hat’s Homeless Strategy

The Government of Alberta has provided a \$2.6Million yearly since 2009 and currently \$3.1 million to support the work of the Community Housing Society which is tasked with coordinating housing first work. The Federal Government (approximately \$1 million per year) has also committed funding in support of the work of the Society. As noted earlier, the City does not fund the Society.

Of particular note, “Year after year, the data from Medicine Hat confirms that it is less costly to provide appropriate housing and support to a person experiencing homelessness than maintaining the status quo approach that relies on emergency and institutional responses.”<sup>85</sup> For instance in 2022-23, for the 201 homeless adults serviced by the Community Housing Society, there was a 74% reduction in hospital days, 59% fewer days in jail and 76% decrease in the number of court appearances.

<sup>81</sup> Smith C.S., New York Times, ‘Homeless Find a Champion in Canada’s Medicine Hat’, Feb. 26, 2017

<sup>82</sup> Op.Cit.

<sup>83</sup> Edgar G., Moose Jaw Today, ‘Lessons from Medicine Hat’s first-in-Canada Functional Zero Homelessness Feb. 6, 2022

<sup>84</sup> Op.Cit.

<sup>85</sup>2023-24 Service Delivery Plan, Medicine Hat Community Housing Society p.18

Medicine Hat's homeless experience can inform Nanaimo. For instance, between 2009-23, of those who had been on the street 55% experienced mental health conditions, 41% experienced physical health issues, 33% experienced substance abuse issues, 29% had experienced family violence, 19% had been in foster care, and 4% suffered from FASD (note: some had more than one issue). Of those who went through Medicine Hat's homeless programme in 2009-23, 84% had a positive exit from the program wherein they ended up in housing: 20% in subsidized housing, 62% in market housing, 9% with family/friends and 9% in other forms of housing. In 2022-23, 94% had a positive exit from the program. While the 84% and 94% exit into housing points to a successful programme, Medicine Hat continues to provide supports for many who have been housed and those who returned to the street.

Medicine Hat provides some vital lessons for Nanaimo. A 'Teams' interview with Jaime Rogers, Manager Homeless and Housing Development Department pointed out several key lessons<sup>86</sup>:

- Cost avoidance is central to effectively managing scarce financial resources. "You can't do it all." Manager Roger's experience confirms that first year costs are high and that investment in re-training and staffing are high to ensure relevance. In addition, they have found that if they start something new then they need to stop something else. Their "focus is on programme effectiveness rather than program expansion"; making do with the same to accomplish more.
- The use of a Coordinated Access System (CAS) needs to identify who is served first and why (much like a hospital's emergency department). To do that, "there needs to be an organisation – a backbone organisation - that has complete oversight that ensures quality of delivery of service and supports". (ibid)
- A systems response is "instrumental to focus on the quality of the entire system". (ibid)
- Medicine Hat has determined that "their first priority is helping the dying". (ibid) In addition, being objective is important.
- "Prevention work is critical." As Jaime Rogers noted, "opioid addictions change everything." In addition, "Medicine Hat does lots of housing loss prevention." (ibid)

Of particular note, Medicine Hat has had a relatively successful outcome to its adoption of Housing First. The City has acknowledged that much of its success comes from its approach of combining the Housing First model with essential wraparound supports (i.e., it has used a model similar to Basel). Further, while it has twice declared that it has addressed chronic homelessness, it has also confirmed that its homeless population will fluctuate as economic and social needs change. Medicine Hat continues to be recognised as a leader in addressing homelessness.

## 5.2 London Ontario

London (population 420,000) has developed a unique response to its homeless population of 2,000. The city organised three Health and Homeless Summits that produced a report entitled: People Centred and Housing Centric Health and Homelessness in London Ontario: A Whole of Community System Response (February 2023). The report notes that "We believe that housing is healthcare and a fundamental human right".<sup>87</sup> The three summits involved 200 individuals representing 70 organisations and a pledge "to do things differently". (ibid) In addition, there was agreement that there were multiple entry points

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<sup>86</sup> Interview with Jaime Rogers, Manager, Homeless and Housing Development Department, Medicine Hat Community Housing Society, December 18, 2023

<sup>87</sup> City of London, People Centred and Housing Centric Health and Homelessness in London Ontario: A Whole of Community System Response (February 2023) p.5

or referral sources for assistance and support and that each and every ‘door’ used to ‘enter’ the homeless conversation was appropriate.

London has identified ‘hubs’ as a focal point for addressing homeless needs. There will be 12-15 hub locations across the community with 5 to start. It is projected that 25-30 people would be served per location. In addition, there will be 100 support housing units built immediately with a total of 600 over three years. Those hubs will be fully supportive and comprehensive providing: coordinated multi-agency intake, coordinated outreach & warm transfers, transportation, basic needs (food, shower, laundry, rest), quick access to acute & primary care, housing access support, income supports, integrated care planning, translation, intentional connections to health & wellness services (e.g. harm reduction via Carepoint mental health, treatment, stabilization, general medical), 24/7 safe spaces (population-specific, including private, semi-private, congregate, flexibility to come and go), transitional, medical respite and crisis stabilization beds, justice system services, and one number to call for referral. (*ibid*) As well, “there is a continued focus on prevention and advocacy to address the systemic issues that cause community members to experience health and homelessness issues”.<sup>88</sup>

At the same time London has 300 people living in tents. To address tent homeless, London has gone farther than most. “Instead of clearing tent dwellers out, the city has built portable toilets and washing stations, and given people resources to keep their shelters clean and safe.”<sup>89</sup> In July it set up four “depots,” open for 90 minutes a day, close to encampment sites. “There, staff started handing out snacks, socks, soap and a host of other everyday items. They also directed visitors to help finding housing or getting addiction treatment. To prevent sprawling tent cities from springing up, the city tries to keep encampments to six tents or less. It asks campers to keep their shelters as inconspicuous as possible, set back from bike paths or playgrounds”. (*ibid*)

London’s approach is focused on making life for street people less stressful, healthier and more acceptable. But, its ‘housing’ targets seem to be less than needed and its acceptance of tent living troubling.

### 5.3 Findings

The review of selected other communities points to workable solutions to address homelessness. While learning from others helps point the way, the differences of culture, politics and resources must also be considered. Nevertheless, in the case of the aforementioned example communities, there are some common elements of success that can be applied to Nanaimo. For instance, the 2007/8 work of Nanaimo’s Working Group on Homelessness is vindicated by the overwhelming success of the Housing First approach to homelessness that is demonstrated in Basel, Finland and Medicine Hat. It is worth exploring in detail.

Operationalizing homeless intervention structures and processes seems to vary from internal local government controlled interventions (Basel), to state controlled processes (Finland) to third party empowered organisations (Medicine Hat).

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<sup>88</sup> Op.cit. p.10

<sup>89</sup> Marcus, Gee ‘Faced with growing homeless encampments London Ontario tries hospitality instead of hostility’, [Globe and Mail](#), November 20, 2023

## 5.4 Implications for action

1. Housing First has proven successful and is explored in detail (see 6.3.1 below).
2. Political and administrative leadership is an important common element that is required to foster long term success.
3. Identifying a lead agent/agency/structure in addressing homelessness is essential to ensure coordinated and accountable action.

## 6. A Way Forward

There are a number of lessons noted in the preceding section that point to ways where Nanaimo could reduce the number of homeless people over the near and long term. Several are explored below.

Fundamentally, however, as noted by London Ontario, “bolstering affordable and quality housing options, as well as ensuring that citizens at risk of losing their homes are kept housed will be critical long-term preventative measures”.<sup>90</sup> Professor Dittman of Basel confirmed this when he said, “it is a mistake to respond to homelessness as an emergency” (as we often do in Nanaimo) rather “it is better to address it in a preventive proactive way”<sup>91</sup>.

Based upon a review of the literature, observation and interviews, it is my view that Housing First has proven to be an effective tool at addressing homeless needs.

### 6.1 Canadian attitudes about homelessness

A 2020 Nanos poll “confirms a strong majority of Canadians—across the country and across the political spectrum—support urgent action on homelessness and investments in affordable housing as part of the pandemic recovery.” Further, the poll noted the following:

- Canadians rate the urgency of ending homelessness a 7.5 out of 10.
- Over 8 in 10 Canadians say they support or somewhat support investing in building new affordable housing

This broad support for addressing homelessness provides a foundation upon which to build an achievable homelessness implementation strategy.

### 6.2 Nanaimo’s Official Community Plan: City Plan 2022

Nanaimo’s Official Community Plan provides solid support for addressing housing affordability.

Nanaimo's City Plan provides the direction for future land use policy and practice in the city. It contains 30 affordable housing policies and actions to address the city’s housing supply gaps and needs (C3.2). The desired outcomes of these tools and policies include: • More affordable housing options; • Ongoing leadership; • Equitably distributed affordable housing options; • Low- to moderate-income households continuing to succeed; • Affordable housing innovations; • Strong community support and trust; and • Leveraging of external resource opportunities.<sup>92</sup>

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<sup>90</sup> <https://www.sdgcities.ca/2023/04/04/the-cost-of-chronic-homelessness-and-solutions-for-the-city-of-london/>

<sup>91</sup> Interview June 2, 2023 Professor Jörg Dittman of University of Applied Sciences Northwestern

<sup>92</sup> City of Nanaimo Housing Needs Report, CitySpaces 2023

As a result the community has provided direction to address affordability and through that some aspects related to homelessness.

### 6.3 Housing First: An Idea that has found its time

In the 1980s, a Canadian psychologist working in New York had an idea: maybe the best way to solve the problem of homelessness was to give people homes. Sam Tsemberis was one of the earliest proponents of a model known as Housing First. The idea was viewed as outlandish and unworkable.

Skeptics argued that complex issues like addiction and mental health had to be addressed first before someone was a suitable candidate for long-term housing. How would the cost be justified to hardworking taxpayers?

But the idea has caught on.

Housing First projects have appeared in municipalities across Asia, Europe and North America, including Medicine Hat, Alta.<sup>93</sup>

#### 6.3.1 Housing First

As noted above, Housing First has become a very successful approach to addressing chronic homelessness. But, what does it mean for Canada and Nanaimo, and what are its essential elements?

York University's Canadian Observatory on Homelessness and the homeless hub identify a number of Core Housing First Principles:

**1. Immediate access to permanent housing with no housing readiness requirements.** Housing First involves providing clients with assistance in finding and obtaining safe, secure and permanent housing as quickly as possible. Key to the Housing First philosophy is that individuals and families are not required to first demonstrate that they are 'ready' for housing. Housing is not conditional on sobriety or abstinence. Program participation is also voluntary. This approach runs in contrast to what has been the orthodoxy of 'treatment first' approaches whereby people experiencing homeless are placed in emergency services and must address certain personal issues (addictions, mental health) prior to being deemed 'ready' for housing.

**2. Consumer choice and self-determination.** Housing First is a rights-based, client-centred approach that emphasizes client choice in terms of housing and supports.

Housing - Clients are able to exercise some choice regarding the location and type of housing they receive (e.g. neighbourhood, congregate setting, scattered site, etc.).

Choice may be constrained by local availability and affordability.

Supports – Clients have choices in terms of what services they receive, and when to start using services.

**3. Recovery orientation.** Housing First practice is not simply focused on meeting basic client needs, but on supporting recovery. A recovery orientation focuses on individual well-being, and ensures that clients have access to a range of supports that enable them to nurture and maintain social, recreational, educational, occupational and vocational activities.

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<sup>93</sup> <sup>93</sup> CBC *Sunday Magazine*, 'Housing is a human right; How Finland is eradicating homelessness', January 24, 2020

For those with addictions challenges, a recovery orientation also means access to a harm reduction environment. Harm reduction aims to reduce the risks and harmful effects associated with substance use and addictive behaviours for the individual, the community and society as a whole, without requiring abstinence. However, as part of the spectrum of choices that underlies both Housing First and harm reduction, people may desire and choose ‘abstinence only’ housing.

**4. Individualized and client-driven supports.** A client-driven approach recognizes that individuals are unique, and so are their needs. Once housed, some people will need minimum supports while other people will need supports for the rest of their lives (this could range from case management to assertive community treatment). Individuals should be provided with “a range of treatment and support services that are voluntary, individualized, culturally-appropriate, and portable (e.g. in mental health, substance use, physical health, employment, education)” (Goering et al., 2012:12). Supports may address housing stability, health and mental health needs, and life skills.

Income supports and rent supplements are often an important part of providing client-driven supports. If clients do not have the necessary income to support their housing, their tenancy, health and well-being may be at risk. Rent supplements should ensure that individuals do not pay more than 30% of their income on rent.

It is important to remember that a central philosophy of Housing First is that people have access to the supports they need, if they choose. Access to housing is not conditional upon accepting a particular kind of service.

**5. Social and community integration.** Part of the Housing First strategy is to help people integrate into their community and this requires socially supportive engagement and the opportunity to participate in meaningful activities. If people are housed and become or remain socially isolated, the stability of their housing may be compromised. Key features of social and community integration include:

Separation of housing and supports (except in the case of supportive housing)

Housing models that do not stigmatize or isolate clients. This is one reason why scattered site approaches are preferred.

Opportunities for social and cultural engagement are supported through employment, vocational and recreational activities.

While all Housing First programs ideally share these critical elements, there is considerable variation in how the model is applied, based on population served, resource availability, and other factors related to the local context. There is no ‘one size fits all’ approach to Housing First.<sup>94</sup>

In addition a 2014 study<sup>95</sup> entitled, National At Home/Chez Soi Final Report, identified Housing First as an important tool to help address homelessness. It provided seven key findings:

1. Housing First can be effectively implemented in Canadian cities of different size and different ethnoracial and cultural composition.
2. Housing First rapidly ends homelessness.
3. Housing First is a sound investment.
4. It is Housing First, it is not housing only.

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<sup>94</sup> <https://www.homelesshub.ca/solutions/housing-accommodation-and-supports/housing-first>

<sup>95</sup> Paula Goering, Scott Veldhuizen, Aimee Watson, Carol Adair, Brianna Kopp, Eric Latimer, Geoff Nelson, Eric MacNaughton, David Streiner & Tim Aubry (2014). National At Home/Chez Soi Final Report. Calgary, AB: Mental Health Commission of Canada.

5. Having a place to live with supports can lead to other positive outcomes above and beyond those provided by existing services.
6. There are many ways in which Housing First can change lives.
7. Getting Housing First right is essential to optimizing outcomes.

Further, the Government of Canada is supportive of housing first and states:

Housing First involves moving people experiencing homelessness —particularly people experiencing chronic homelessness—rapidly from the street or emergency shelters into stable and long-term housing, with supports. Stable housing provides a platform to deliver services to address issues frequently faced among the chronically and episodically homeless. The goal is to encourage housing stability and improved quality of life for persons served by Housing First and, to the extent possible, foster self-sufficiency.<sup>96</sup>

The Government of Canada went on to note that **“the Housing First approach is supported as a proven approach to tackling homelessness, including chronic homelessness, which remains an important priority.”** (*ibid*) (my emphasis)

In Nanaimo, Island Crisis Care Society has adopted Housing First. It notes that “Housing First provides housing and support without requiring sobriety. Those unfamiliar with the science behind this model sometimes question the wisdom of ‘giving addicts housing.’ The concern is that the pressure to work hard will be removed and people will become a drain on society. We take the concern seriously, and choose a neighbourly response. First a good neighbour cares for people with no strings attached . . . Then a good neighbour encourages independence and interdependence with the wider community.”<sup>97</sup> Further, “when people have a safe place to live, the threat of homelessness recedes. The results can be powerful . . . An important part of Housing First is offering medical and psychological supports once the brain calms down. In our programs, when that happens, clients turn again and again, to the work of developing themselves”. (*ibid*)

As noted in the Nanaimo’s Working Group on Homelessness Report after implementing Housing First with associated supports: “there is a perceived decrease in use of expensive publicly funded services such as ambulances, emergency room visits, doctor’s appointments and calls to police”. Further, “communities that have adopted a supported housing first approach have seen significant decreases in their homeless population”.<sup>98</sup>

### 6.3.2 Housing First and Harm Reduction

Nanaimo’s Working Group (2008) on Homelessness identified a path forward in *A Response to Homelessness in Nanaimo: A Housing First Approach*. Much of the content of that report applies today. The following provides a detailed overview of how housing first and harm reduction go hand in hand:

Traditionally, there was a view that homeless individuals needed to become “housing ready” before being placed in permanent housing. This would involve a period of transitional housing and access to treatment and other programs. In contrast, “Housing First” approaches are based on the idea that stable housing enables individuals to better address their barriers to

<sup>96</sup> (<https://www.infrastructure.gc.ca/homelessness-sans-abri/resources-ressources/housing-first-logement-abord-eng.html>)

<sup>97</sup> <https://www.islandcrisiscaresociety.ca/programs/orca-place/>

<sup>98</sup> <sup>98</sup> CitySpaces, *Response to Homelessness in Nanaimo: A Housing First Approach: Best Practices, January 2008* p.4

employment, addictions and poor health. Research has shown that formerly homeless individuals, even those with multiple barriers, can successfully maintain their housing when they have supports in place appropriate to their needs.

A harm reduction or “low demand” approach combined with supportive housing has been widely reported to be an effective way to address the needs of homeless people with substance use issues. Proponents of housing first and harm reduction approaches purport that most people who are homeless can be successfully housed if they are given the right supports when they want them. These approaches are therefore viewed as a means to help end homelessness.

- **Use of a continuum approach to address homelessness.** Typically, a range of housing options and services are needed to address homelessness. This includes alcohol and drug-free environments to accommodate individuals who are in treatment or recovery. It also includes policies and programs that use a housing first approach so that people who are homeless can have direct access to permanent housing, with support as needed.
- **Adoption of Housing First.** Safe and secure housing is identified as a key factor that makes it possible for residents/program participants to address their substance use issues and to become abstinent, reduce their substance use or reduce the negative impacts of their use.
- **Implementation of a continuum of care.** A continuum of care model ensures a full range of services is provided by community agencies to move homeless persons from the street or shelter to a stable and secure life and to prevent the cycle of homelessness from repeating itself.
- **Types of services.** Harm reduction programs and services include street outreach, drop-in centres, information groups that allow people who are actively using drugs to take part in treatment activities, “wet” shelters or housing that does not require abstinence.<sup>99</sup>

Further, “it is generally acknowledged that clients participating in harm reduction programs undergo positive changes related to housing stabilization, substance use, physical and mental health and income. Some clients participate in employment training, return to school, are able to develop social networks or re-establish contact with their families”. (*ibid*)

In the preceding report, Nanaimo explored and identified housing first as a workable and acknowledged way of addressing homelessness. It is time to recognise that important work was prescient and should be the foundational element of a homelessness strategy in Nanaimo.

### 6.3.3 Housing First is Cost Effective

Housing-First strategy proves cost effective especially for the most-vulnerable homeless . . . investing in Housing First for people struggling with homelessness and severe mental illness is the most cost-effective way of spending limited public dollars to help these individuals regain and keep permanent housing.

Most of the costs of Housing First for people struggling with severe mental illness are offset by savings in other areas like emergency shelters, reducing the price of the intervention from about \$20,000 to \$6,300 (69%) per person per year. For people with moderate needs, the intervention is less expensive, about \$14,500, and the savings are smaller (46%), so the net cost is \$7,900. The cost for one more day of stable housing is about \$42, compared to \$56 for people with moderate needs. In either case, Housing First costs about the same as many other housing

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<sup>99</sup> A Response to Homelessness in Nanaimo: A Housing First Approach: Relevant Best Practices, City Spaces Ltd. January 2008



interventions that provincial governments already pay for, while providing permanent instead of temporary housing.<sup>100</sup>

As Eric Latimer, a Professor in the Department of Psychiatry at McGill University and Research Scientist at the Douglas Research Centre notes “We know that Housing First is a cost-effective solution for people with moderate needs; this new research demonstrates that for people with the most needs, the savings are even more dramatic. You get more bang for your buck by serving this group, in terms of reducing costs of shelters, health visits, and incarcerations”.<sup>101</sup>

“Housing First has also been shown to be more cost-effective than traditional rapid rehousing efforts. According to research from NAEH (National Alliance to End Homelessness), the average cost savings of a Housing First program can range from \$23,000 to more than \$31,000 per program participant”<sup>102</sup>. “In addition, housing for people with mental illness should be framed from a moral-ethical perspective rather than an economic perspective. We concur that housing should be viewed as a human right”<sup>103</sup>. A study from Finland notes: “(Funding a) Housing First” programme . . . is far less than the cost of homelessness itself. Because when people are in emergency situations, emergencies are more frequent: Assaults, injuries, breakdowns. The police, health care and justice systems are more often called upon to step in – and this also costs money. In comparison, “Housing First” is cheaper than accepting homelessness: Now, the state spends 15,000 euros less per year per homeless person than before”<sup>104</sup>. Medicine Hat has also confirmed that Housing First is cost effective when compared to leaving people un-housed<sup>105</sup>.

#### 6.4 The Four Pillar Approach

To be successful, Housing First needs to be aligned with a successful drug programme, such as Switzerland’s four pillar approach. Switzerland developed the highly regarded four pillar approach to substance abuse in the ‘90’s. It is a model that continues to be used in Switzerland and replicated in many other countries. It is based on the following:

- *Harm reduction* helps to reduce the negative consequences of drug use on the consumer and indirectly on society as well, by providing individually tailored and socially less problematic ways of consuming drugs.
- *Therapy or treatment* helps to reduce drug consumption by enabling users to break free of their dependency and to stay free of it, or at least by keeping this option open to them. In addition it promotes the social integration of those under treatment and helps to improve their health.
- *Prevention* helps to reduce drug consumption by making it harder to start using drugs and by preventing the development of addiction.
- *Law enforcement* uses appropriate regulatory measures to implement the prohibition of illegal drugs, thus helping to reduce the negative consequences of drug taking for society as a whole<sup>106</sup>

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<sup>100</sup>McGill Newsroom [Housing-First strategy proves cost effective especially for the most-vulnerable homeless](#) August 2020

<sup>101</sup> Op.cit.

<sup>102</sup> <https://kmb.camh.ca/eenet/resources/evidence-glance-housing-first-and-costs>

<sup>103</sup> Davis R., ‘How to Fix Housing First’, [In Housing First](#), July 2022

<sup>104</sup> <https://scoop.me/housing-first-finland-homelessness/>

<sup>105</sup> *2023-24 Service Delivery Plan*, Medicine Hat Community Housing Society

<sup>106</sup> <https://www.drugpolicyfacts.org/node/1681>

The City of Vancouver has adopted the four pillar approach. The City of Vancouver confirms the following:

Successfully used in such cities as Geneva, Zurich, Frankfurt, and Sydney, this four pillars approach has resulted in a:

- Dramatic reduction in the number of drug users consuming drugs on the street
- Significant drop in overdose deaths
- Reduction in the infection rates for HIV and hepatitis.

The prevention pillar includes strategies and interventions that help prevent harmful use of alcohol, tobacco, and both illegal and prescription drugs. In November 2005, Council unanimously endorsed the drug policy prevention plan, Preventing Harm from Psychoactive Substance Use. The plan is the result of extensive research and diverse community consultations.

The plan is also the first of its kind at the municipal level in Canada. It is comprehensive, integrated, and based on the best evidence and research available. It aims to expand awareness, understanding and discourse around prevention.

The treatment pillar includes a range of interventions and support programs that encourage people with addiction problems to make healthier decisions about their lives. Treatment improves health by decreasing preventable deaths, illnesses and injuries, while improving social integration<sup>107</sup>.

The four pillar programme has proven to be an effective and critical tool to address substance abuse-related homelessness. It is needs to be adopted as part of a Housing First program in Nanaimo. And, fundamentally it must be delivered in a collaborative and coordinated approach. The former BC Coroner spoke to that essential need when she said: "I want to be hopeful that we can turn this crisis around and I think it takes courage, and I'm ever hopeful our political leaders whether elected or not will at some point recognize [it]," she said. "It sounds naive, but we need to collaborate if we truly want to reduce the suffering that we're seeing and the deaths we are experiencing."<sup>108</sup>

#### 6.4.1 Addressing drug use

Starting in 1991, Switzerland began a major paradigm shift based on the concept of harm reduction: it decriminalized drug consumption, and to stop overdose deaths and the spread of HIV/AIDS, it opened clean, supervised consumption rooms where users can inject themselves with substances they bring in and exchange used needles for clean ones. "The offers of help no longer reached just the drug users who wanted to quit, but also those who were still unwilling or not capable of doing it."<sup>109</sup>

"The cost savings for its opioid abuse treatment programs have been great: the six-month cost to the Swiss government for treating a person in its outpatient methadone treatment was \$1,750, compared to \$20,000 for six months of incarceration, or \$21,500 for not providing any treatment . . . The prevalence of opioid dependence has remained fairly constant, however those who get addicted, stay addicted. But new cases of opioid use have fallen to almost zero."<sup>110</sup>

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<sup>107</sup> City of Vancouver <https://vancouver.ca/people-programs/four-pillars-drug-strategy.aspx>

<sup>108</sup> Meissner, D., 'B.C.'s chief coroner exits, frustrated and disappointed with government's OD response' in *The Vancouver Sun*, December 13, 2023

<sup>109</sup> <https://psychnews.psychiatryonline.org/doi/full/10.1176/appi.pn.2018.6b15>

<sup>110</sup> Op cit

Other positive results include “a huge drop in overdose deaths, crime, and the spread of HIV and hepatitis”<sup>111</sup>. In addition, participants have “improved social functioning and employment.”<sup>112</sup> Further, “Czechia, the Netherlands, Portugal and Switzerland are among a handful of countries that have decriminalized drug use and possession for personal use and that have also invested in harm reduction programmes. Consequently, diagnoses among people who inject drugs in those countries are low”.<sup>113</sup>

## 6.5 Findings

Housing First has been an important and proven approach across many jurisdictions. It has been studied and documented by many researchers as a proven tool. Likewise the use of harm reduction, prevention, treatment and law enforcement have been essential ‘backstops’ for the successful application of Housing First. Simply, Housing First requires appropriate wraparound supports in order for it to be successful. The two go hand-in-hand.

## 6.6 Implications for action

There are number of key takeaways from the preceding analysis:

1. Continued supportive leadership at the municipal and provincial level is key to a sustained, informed and committed intervention to address homelessness.
2. Homelessness and housing affordability should not be decoupled, both are mutually related.
3. Actions need to be coordinated across all delivery organisations, sectors and government agencies to ensure that programme interventions are holistic, integrated, sustained, transparent, focused and accountable and that results address the disparate needs of the homeless.
4. Long term investment of financial and programme resources is essential with associated monitoring of results, needs and potential re-focus as homeless needs change over time.
5. Housing First with associated wraparound services and supports is a proven successful model and should be adopted for Nanaimo so that homeless people are housed first without conditions but with required services and supports to ensure their safety and well-being from self harm and from others.
6. As part of Housing First the four pillar substance abuse programme of harm reduction, treatment, prevention and enforcement proven to be successful across many countries and cultures should be adopted in Nanaimo.
7. There needs to be a continuum of care and intervention from ensuring that currently housed people remain housed and those living on the streets with chronic exacerbated substance abuse, brain injury and/or mental health issues receive immediate and specialised care, support, services and housing.
8. A commitment is required that identifies unique Nanaimo-based needs and requirements by establishing and implementing a Nanaimo-centric homeless strategy that builds on the lessons from elsewhere, including Housing First with wraparound services and supports as well as the four pillar substance abuse programme.

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<sup>111</sup> Op.cit

<sup>112</sup> Op. cit

<sup>113</sup> UNAIDS, ‘Decriminalization works, but too few countries are taking the bold step’, March 2020

9. Recognise that Medicine Hat’s successful Community Housing Society and its Homeless and Housing Development Department that functions as the Community Based Organization and Community Entity addressing homeless is similar to Nanaimo’s Systems Planning Organization which bodes well for potential success in Nanaimo.
10. Consider using ‘Homeless Management Information Systems’ (also used by Canada’s ‘About Reaching Home’ initiative) to manage homeless numbers, needs, services, supports, housing allocation and outcomes.
11. Monitor and share homeless intervention outcomes on a yearly basis including successes, issues, challenges and benefit/cost findings.
12. Recognise that, once homeless numbers decrease, there needs to be a continued long term commitment to invest in managing all aspects that contribute to homelessness so that its numbers are not allowed to balloon again.

## **7. Supporting and Funding a Homeless Action Plan for Nanaimo**

As the number of homeless across Canada continues to grow, senior levels of government are beginning to take notice and commit increased resources to address this systemic issue. The following section examines British Columbia and Government of Canada potential supports to address homelessness in Nanaimo.

### 7.1 City of Nanaimo

Unlike many European countries where homelessness is addressed through unique tax systems<sup>114</sup>, Nanaimo is limited in terms of its ability to fund homeless initiatives. Property taxes are the largest tax pool for most Canadian local governments but their ability to fund major projects such as homelessness is limited. Therefore, the City of Nanaimo can coordinate homeless initiatives but it cannot fully fund them. Other senior levels of government must and should step forward to partner with Nanaimo to address homelessness.

Nevertheless, local governments need to be much more proactive in addressing homelessness if they are to reduce the detrimental impacts of homelessness on the lives of those directly affected and the population at large. Nanaimo could develop and initiate a robust senior government homelessness ask by approaching senior governments in concert with SPO and key member organisations.

### 7.2 Provincial Government role

British Columbia has a major jurisdictional and financial role to play in addressing homelessness. There are a number of programmes that service a cross-section of homeless or at risk of homeless needs. They include:

- **Homes for People:** designed to speed up delivery of new homes and increase the supply of middle-income small-scale, multi-unit housing that people can afford, including town homes, duplexes and triplexes through zoning changes and proactive partnerships. It will focus on the provision of rental units. The programme includes \$4 billion budget over three years and a commitment to invest \$12 billion over the next 10 years.
- **Belonging in B.C.** is the Province’s collaborative plan to prevent and reduce homelessness. The plan includes immediate actions backed by \$633 million in Budget 2022 (over three years) and

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<sup>114</sup> Basel Switzerland and other Swiss Cantons are able to raise funds through income and corporate taxes. Finland funds homeless programmes at the federal level.

\$1.5 billion in Budget 2023 to help thousands of people maintain and access housing and supports.<sup>115</sup>

- Outreach services aim to meet people where they are, whether that's on the street, in a shelter or in a temporary place.
  - o The Homeless Outreach Program helps people find an outreach worker and access immediate supports in their community.
  - o The Homeless Prevention Program supports individuals at transition points who are at greater risk of homelessness (for example, youth transitioning out of foster care). The program provides rent supplements and services to help individuals access the private rental housing market.
  - o Community Integration Specialists connect people experiencing homelessness with local agencies and organizations offering supports.<sup>116</sup>
- Homeless Community Action Grants Program: Since 2019 SPARC BC received \$12 Million of which two Nanaimo organisations received a total of \$70,000 to explore homeless issues.
- Shelters and Supportive Housing: emergency shelters, modular housing<sup>117</sup>, supportive housing (helps people experiencing or at risk of homelessness find and maintain stable housing), women in transition housing (help women who are at risk of or who have experienced violence. Women and children are provided a temporary place to stay) and complex care housing (provides long-term care and support to people who may be experiencing: mental health challenges, substance use challenges, developmental disability and brain injury).
- Homeless encampments: help people in encampments to: stay safe and healthy find stable housing and access support services.

Through the preceding programmes, the BC Government has committed to addressing the various layers that contribute to and affect homeless people. Further the BC Government admits more needs to be done. For instance, more recently, “the British Columbia government says results from the latest surveys of people living on the streets show current support levels aren’t enough and more services are needed to address rising homelessness”.<sup>118</sup>

The foregoing suggest that the time is right for Nanaimo to work with SPO to initiate a collaborative framework with the provincial government and lobby forcefully for funding from the preceding areas to address Nanaimo’s significant homeless needs. The Homeless Community Action Grants Program offers a source for further defining needs, solutions and operational plans.

It is my contention that, in response to the recent government statements about the need to act on homelessness, there is a significant opportunity for Nanaimo to take action, set clear Housing First goals and become a leader in British Columbia in addressing those at risk of losing their home (and ending up on the street) and homelessness in a holistic progressive way.

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<sup>115</sup> <https://www2.gov.bc.ca/gov/content/housing-tenancy/affordable-and-social-housing/homelessness>

<sup>116</sup> Op.cit.

<sup>117</sup> Modular housing offers an extraordinary means of addressing the cost of housing. See: <https://www.cbc.ca/listen/live-radio/1-63/clip/16026200>

<sup>118</sup> Globe and Mail, ‘More supports needed to address homelessness, B.C. government says after survey’ October 6, 2023

### 7.3 Federal Government role

Until the mid '80's the federal government was a major player in the provision of affordable housing across the country. Since then its role has diminished significantly in the delivery of affordable housing. More recently, realising that housing affordability has created a serious social and economic impact on the marginalised, the federal government has committed significant financial resources to try and increase affordable housing stock. Canada Mortgage and Housing Corporation (CMHC) and Infrastructure Canada have been tasked with implementing the federal government's new programmes.

The following explores two of those major initiatives.

#### 7.3.1 Reaching Home:

Canada's Homelessness Strategy is a community-based program aimed at preventing and reducing homelessness across Canada. This program provides funding to urban, Indigenous, rural and remote communities to help them address their local homelessness needs.

Reaching Home supports the goals of the [National Housing Strategy](#), in particular, to support the most vulnerable Canadians in maintaining safe, stable and affordable housing and to reduce chronic homelessness nationally by 50% by fiscal year 2027 to 2028.

In 2019, the federal government committed \$2.2 billion to tackle homelessness. Since the commitment has increased to nearly \$4 billion over 9 years.

Reaching Home is a community-based program delivered by a local Community Entity . . . In each community, a Community Advisory Board or a Regional Advisory Board supports the Community Entity by coordinating partnerships with homelessness stakeholders and establishing priorities to prevent and reduce homelessness in the community or region.

A Community Entity is normally an incorporated organization, such as a municipal government or an established not-for-profit organization that enters into a funding agreement with Employment and Social Development Canada. The Community Entity brings together community stakeholders to form a Community Advisory Board to help develop a community plan. The Community Entity also has the responsibility to implement the community plan, solicit project proposals, approve projects, contracts, monitor all agreements with third-party service providers, and prepare contribution agreements, report on its activities and disbursements, collect and share data and information and report on the community results<sup>119</sup>.

'Reaching Home' offers significant financial resources to support: housing services (transitional housing, permanent supportive housing, long term housing), housing placement, emergency housing funding, prevention and shelter diversion (at risk of losing housing), basic needs services, clinical and treatment services, economic integration services and capital investments. It appears SPO fits the Community Entity requirement.

#### 7.3.2 National Housing Strategy

The federal government has earmarked \$82 Billion for the National Housing Strategy.

The federal government is re-engaging in affordable housing through the National Housing Strategy. It provides a platform for the public, private and non-profit sectors to come together. Their collaborative efforts will provide more Canadians with a place to call home.

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<sup>119</sup> <https://www.infrastructure.gc.ca/homelessness-sans-abri/index-eng.html>

The goal of this historic strategy is to make sure Canadians across the country can access housing that meets their needs and that they can afford. Over the next 10 years, the Strategy will:

- cut chronic homelessness in half
- remove 530,000 families from housing need
- invest in the construction of up to 160,000 new homes

To achieve the goal, the strategy will first focus on the most vulnerable Canadians first.<sup>120</sup>

Further, “expanded and reformed federal homelessness programming, a new Canada Housing Benefit, and a rights-based approach to housing will ensure that the National Housing Strategy prioritizes the most vulnerable Canadians including women and children fleeing family violence, Indigenous peoples, seniors, people with disabilities, those dealing with mental health and addiction issues, veterans and young adults”.<sup>121</sup>

Specific elements include:

National Housing Co-Investment Fund: The National Housing Co-Investment Fund is expected to create up to 60,000 new units of housing and repair up to 240,000 units of existing affordable and community housing. The Fund will consist of nearly \$4.7 billion in financial contributions and \$11.2 billion in low interest loans. The Government’s recently announced Rental Construction Financing Initiative will be integrated into the National Housing Co-Investment Fund, as will the Government’s recently created Affordable Rental Innovation Fund. The National Housing Co-Investment Fund will attract partnerships with and investments from the provinces and territories, municipalities, non-profits and co-operatives, and the private sector, to focus on new construction and the preservation and renewal of the existing affordable housing supply. The Fund will support more shelter spaces for survivors of family violence, transitional and supportive housing, new and renewed affordable and community housing, and ways of making homeownership more affordable.<sup>122</sup>

Canada Community Housing Initiative: (\$4.3 billion fund) the federal government will support the provinces and territories as they protect and build a sustainable community-based housing sector. In order to participate in the program, provinces and territories will be required to cost-match this funding. This level of funding will enable provinces and territories to protect affordability for the total number of households currently living in community housing administered by provinces and territories and supported by former federal programs. It will also support repair and renewal of the existing supply, and expansion of the supply of community-based housing.<sup>123</sup>

Canada Housing Benefit (\$ 4 billion benefit). Designed to meet local needs and delivered by provinces and territories, the Canada Housing Benefit will be a new tool to fight the challenge of housing affordability. Launching in 2020, the Canada Housing Benefit will provide affordability support directly to families and individuals in housing need, including potentially those living in social housing, those on a social housing wait-list, or those housed in the private market but struggling to make ends meet. The Government estimates that the Canada Housing Benefit will deliver an average of \$2,500 per year to each recipient household. Over time, the Canada Housing Benefit will grow to support at least 300,000 households across the country.<sup>124</sup>

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<sup>120</sup> <https://www.placetocallhome.ca/what-is-the-strategy>

<sup>121</sup> Government of Canada, Canada’s National Housing Strategy, A Place to Call Home, n.d. p. 3

<sup>122</sup> Op.cit p.10

<sup>123</sup> Op.cit. p.12

<sup>124</sup> Op.cit. p.15

### 7.3.3 Implementation issues

As noted in the [Globe and Mail](#):

The federal departments tasked with curbing chronic homelessness in Canada don't know if the billions of dollars in public money they've spent have helped to get people into homes, Canada's auditor general reported.

Auditor General Karen Hogan found that the Canada Mortgage and Housing Corporation (CMHC) and Infrastructure Canada have failed to collect sufficient data about their programs, which are designed to connect the most vulnerable people with homes.

These two agencies are largely responsible for delivering the federal government's National Housing Strategy, which has a target of reducing chronic homelessness by 50 per cent by the 2027-28 fiscal year. But without data, there's no way to know if the government is getting good value for its money or if the 50 per cent target will ever be achieved, the AG said.<sup>125</sup>

It is my view that the recent issues around accountability offer an opportunity for Nanaimo to develop and manage a resilient and transparent homelessness and housing affordability plan that helps the federal government point to the benefits of its ambitious Homelessness Strategy and National Housing Strategy.

### 7.4 Private Sector, Society and NGO Involvement

While of much of the focus of funding for non-market housing and housing first initiatives will rely on government support, there will be significant opportunities for private sector, housing society and NGO housing construction for niche housing that uses unique financing methods such as Foundations and fundraising. As well, private financing for market housing that is affordable (rental and owned) will be essential.

### 7.5 Findings

The two senior levels of government have committed significant funds to address affordability and through that homeless housing. But, there seems to be a disconnect between funding allocation and demonstrated need. Therefore, access to those funds will require considerable collaborative and coordinated efforts on the part of the SPO and the City.

Given that Nanaimo shares a higher proportion of both overall homeless people and drug use, it is incumbent on senior levels of government to facilitate addressing Nanaimo's plight.

### 7.6 Implications for action

1. A concerted carefully crafted ask will be needed to secure Nanaimo's share of senior government housing dollars.
2. SPO will need to play a lead supporting role in organising senior government asks.
3. Partnerships with private sector financing, NGO's and Societies will be a critical part of any successful housing initiative.

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<sup>125</sup> Tasker J., [Globe and Mail](#), 'After spending billions, federal government doesn't know if it's reducing chronic homelessness: AG' November 15, 2022



## 8. Next Steps

Nanaimo has studied affordability and homelessness multiple times (See Section 2.1). Each time there has been a set of recommendations put forward that explored a range of actions. But, there has not been a concerted effort to address what many believe to be the most prudent, successful and cost effective approach to addressing homelessness: Housing First. Yet, it is interesting to recall that the first homeless study completed in Nanaimo was undertaken by a Nanaimo Working Group on Homelessness, a partnership strategy between service providers, local businesses and government agencies. That group in 2008 recommended a well documented Housing First strategy for Nanaimo. That recommendation was one year earlier than Medicine Hat's adoption of Housing First as their tool to address homelessness. As noted elsewhere, Medicine Hat has been able to document over 1,900 homeless people successfully taken off the street with 84% re-engaged back into society. And, while it is true that Medicine Hat continues to experience sporadic increases in homelessness, Medicine Hat's number of homeless for a population of 63,000 remains remarkably much lower than Nanaimo's homeless numbers (see: Section 5.1).

The previous Nanaimo studies documented in Section 2.1 were all well intended. They were all built on working collaboratively with service providers and government agencies. Many intended to address affordability and homelessness. But, at the end of 2023 the results are in. Nanaimo faces an increasing affordability and homeless crisis. Nanaimo's homeless population has increased dramatically with numbers likely approaching 800. Nanaimo is not able to provide enough shelter beds to get people off the streets during cold winter nights. In addition, unlike Medicine Hat which has detailed real homeless counts, Nanaimo continues to only estimate homeless numbers because so many are on the streets resulting in the system being overwhelmed.

This paper is a plea. It is a plea for the City of Nanaimo to recognise that past meaningful efforts have failed. They have failed badly leaving more and more people on the streets with associated opioid and use of other substances increasing significantly. This paper is a plea to recognise that Nanaimo's once thriving downtown will not return to its pre-pandemic energy until and unless the City addresses affordability and homelessness in a more fulsome way with the City of Nanaimo **leading** discussions with senior levels of government and setting out to become a leader in British Columbia in addressing affordability and homelessness.

To that end, **the City of Nanaimo should formally agree to explore Housing First as the means of working with others, including NGO's and senior governments, to become a model for all of British Columbia.** The time is right. The Provincial and Federal Governments are eager to participate in proven strategies and provide real time lessons for other local governments so that the affordability and homeless crisis is addressed and managed for all.

### 8.1 What will it take?

There are significant monies being spent to just keep homeless people homeless (my estimate \$21million per year). It is time to invest in long term housing and supports to take people off our streets and to prevent more entering the streets due to increasing costs of housing. Others have shown that taking people off the streets is a cost effective way to deal with homelessness. As documented elsewhere in this paper, not only does it save lives, it also reduces the costs on the health care system, policing and emergency services, on the private sector, on the toll on families and lives lost and on the fabric of everyday living.

### 8.1.1 Potential Housing Development Plan

To be successful a Housing First Plan will require municipal government leadership and coordination of financial and service and support resources from a diverse mix of interests and sources, including Government of Canada, Province of British Columbia, City of Nanaimo, the SPO, many NGO's, private sector lenders and design and construction industry. Together in partnership those sources can and should come together to address homelessness in Nanaimo.

### 8.1.2 Identifying the Numbers of Units and Types of Housing

Building on Table 1, Table 2 identifies the number and types of housing units needed over the next few years (2025-28 inclusive<sup>126</sup>).

**Table 2: Potential Type of Housing Response to Homeless Need (c.f. Table 1)**

| Number of homeless | Type of Homelessness   | Type of Housing Provided   | Percent Addressed |
|--------------------|--|--|-------------------|
| 7                  | severely chronic   | 3.Special Needs Housing  | 100%              |
| 32                 | severe mental illness  | 3. Special Needs Housing   | 100%              |
| 96                 | mental health issues   | 2.New interim (up to 6 months) Shelter Housing<br>5.New supportive transition housing                                | 100%              |
| 128                | substance abuse issues   | 1.New emergency Shelter space  | 78%*              |
| 224                | living on the street with minor issues   | 5.New supportive transition housing<br>6.Seniors affordable rental housing<br>7.New affordable rental family housing | 100%              |
| 108                | living in shelters   | 4.New youth in transition housing<br>6.Seniors affordable rental housing<br>7.New affordable rental family housing   | 100%              |
| 45                 | living partially on street and part-time couch surfing/living in vehicles/family/friends | 4.New youth in transition housing<br>6.Seniors affordable rental housing<br>7.New affordable rental family housing   | 100%              |
| 160                | remainder of homeless  | 4.New youth in transition housing<br>6.Seniors affordable rental housing<br>7.New affordable rental family housing   | 100%              |

\*The remaining 22% will be accommodated in the following years as those initially taken in 'graduate' out to permanent rental units.

Table 3 links Table 1 and 2 by identifying the number and costs of building the required number of units to address Nanaimo's 2023 homeless population. Potential sources of funding are also identified.

<sup>126</sup> 2025-28 was chosen to give one year to develop and organise an implementation plan.

**Table 3: Potential Housing Response to Homeless Need (c.f. Table 2)**

| Type of housing                                    | Design type   | Total Number of units by 2032 | Total Units 2025 -30 | Class 'C' Cost (does not include land cost) 2025-2030   | Annual Support costs                | Potential Source of funds  |
|--|---|-------------------------------|----------------------|---|-------------------------------------|--|
| 1. Emergency Shelter spaces                        | 4 bldgsx25 beds with full supports  | 100 units                     | 100                  | \$1,150,000/ 25 bed structure: <b>\$4,600,000</b>   | \$37,000/ person <b>\$3,700,000</b> | -BC: Belonging in BC<br>-NGO's   |
| 2 Low barrier shelter housing (up to 6 months)     | 5 buildings of 20 single rooms with common areas                                | 100 units                     | 60                   | \$1,650,000/5,000 sqft bldg<br>3bldgsx20 rooms: <b>\$4,950,000</b>  | \$20,000/ Person <b>\$1,000,000</b> | -BC: Belonging in BC<br>-Canada: Reaching Home<br>-NGO's   |
| 3. Special needs housing for chronic health issues | 10 buildings with 5 special needs individuals per building                      | 50 units                      | 40                   | \$1,350,000/ 5 resident/ homex8 homes@ 3,000sqft: <b>\$10,800,000</b>   | \$40,000/ Person <b>\$1,600,000</b> | -BC: Belonging in BC<br>-Children & Family Development<br>-Indigenous Relations & Reconciliation;<br>-Mental Health & Addictions |
| 4. Youth in transition housing                     | 4x6.000sqft buildings with 10 250sqft rooms plus common areas, dining, supports | 40 units                      | 20                   | \$2,400,000/10 youth in residence: 2 buildings: <b>\$4,800,000</b>  | \$30,000/ Person <b>\$600,000</b>   | -BC: Belonging in BC<br>-Children & Family Development<br>-Indigenous Relations & Reconciliation                                 |
| 5. New supportive transition housing               | 2x15,000sqft bldgs - 40 250sqft rooms plus common areas, dining, supports       | 80 units                      | 80 units             | 2 bldgs \$6,000,000 each <b>\$12,000,000</b>  | \$15,000/ Person <b>\$1,200,000</b> | -BC: Homes for People<br>-Social Development & Poverty Reduction<br>-Canada: Reaching Home                                       |
| 6. Seniors affordable rental housing               | Ten buildings with 50 one bedroom apartments                                    | 500 units                     | 200 units            | \$200,000/unit (450 sq.ft.): 30,000 sq.ft. bldg <b>\$13,500,000 or \$4,050,000</b> (assume 70% is financed through market; 30% is subsidized) | -                                   | -Canada: Reaching Home<br>-NGO's sponsor one building<br>-City of Nanaimo builds one building + Ability to pay occupant rent     |

|   |   |  |      |  |             |   |
|---|---|--|------|--|-------------|---|
| 7.New* affordable rental family housing | Mix of townhouse, three/four stories blended in with market housing | 341/year to meet City of Nanaimo Housing needs report: 2,728 units | 400  | 300 x 1 bedroom @ 450sqftx\$400: \$54,000,000<br>100x2 bedroom @ 550sqft@\$400: \$24,750,000<br>\$78,750,000 or <b>\$23,625,000</b><br><i>(assume 70% is financed through market; 30% is subsidized)</i> | -           | -BC: Homes for People<br>-Canada: National Housing Co-investment Fund<br>-Canada Community Housing Initiative<br>- Private investment<br>+ Ability to pay occupant rent |
| <b>New Units</b>                        |   | 3,648  | 900* | <b>\$64,825,000</b>  | \$8,100,000 |   |

\*Note: While there are 900 units, the projected accommodated population includes seniors one bedroom with the potential to have two seniors per residence and 100 two bedroom rentals. The latter would address at risk young families.

Table 3 provides Class 'C' cost estimates and a short term and long term housing plan that can address current homeless numbers, reduce those at risk of losing their accommodation and provide affordable rental housing for those who are entering the housing market on low income.

#### 8.1.3 Reallocating Resources to a Housing First Approach

As noted in Table 1, the City of Nanaimo, Province of British Columbia and a number of NGO's together spend in the order of \$21million annually (and growing as homeless numbers increase) to support those unable to afford or unable to live in accommodation. By adopting and implementing a Housing First approach, the current cost of 'managing' homeless people can be significantly reduced over time as housing options are provided. Clearly, in the absence of a robust housing programme, the numbers of homeless will only increase further taxing existing resources and increasing the costs well beyond the 2023 \$21 million estimate.

Table 4 provides an overview of the transformation of spending from street supports and services to a Housing First model where people are housed and supports provided.

**Table 4: Reinvestment of Current Homeless Costs**

| Year    | Costs of services/supports | Investments in Housing                         | Number of units | Cost Savings | Accumulative savings for reinvestment in housing |
|---------|----------------------------|--|-----------------|--------------|--|
| 2023-24 | \$21,573,000               | Design stage                                   | -               | -            | -  |
| 2024-25 | \$22,000,000               | 1.New emergency Shelter space                  | 50              | -            | -  |
|         |                            | 2.New interim (up to 6 months) Shelter Housing | 20              |              |  |
| 2025-27 | \$20,400,00                | 1.New emergency Shelter space                  | 50              | \$1,600,000  | -  |
|         |                            | 2.New interim (up to 6 months) Shelter Housing | 40              |              |  |
|         |                            | 3.New Special needs housing                    | 40              |              |  |
|         |                            | 4.New youth in transition housing              | 20              |              |  |

|          |              |  |                  |             |              |
|----------|--------------|--|------------------|-------------|--------------|
| 2027-28  | \$13,460,000 | 5.New supportive transition housing<br>6.Seniors affordable rental housing<br>7.New affordable rental family housing | 80<br>100<br>150 | \$6,940,000 | \$8,540,000  |
| 2028-29  | \$7,000,000  | 6.Seniors affordable rental housing<br>7.New affordable rental family housing  | 100<br>300       | \$6,460,000 | \$15,000,000 |
| 2029-30* | \$2,650,000  |  | 900              | \$4,350,000 | \$19,350,000 |

\*Assumes 50 homeless remain on street at annual cost of \$53,000 per person.

As noted there is the potential for savings in the order of \$19 million per year. Over the period of five years those savings could total \$90 million. As a result, building housing to relocate people from a homeless state to being housed is affordable. Studies in Finland confirm that the costs savings are significant.

Further, over the long term the annual support costs identified in Table 3 (\$8,100,000) could be more reasonably covered through the aforementioned cost savings and when combined with the \$2,650,000 identified in Table 4, a total of \$10,750,00 would be available for provision of services and supports as needed.

#### 8.1.4 On-going support services

As noted in Table 3 \$8,100,000 in annual support costs will be required to provide services and support to those in shelters, special needs housing, youth housing and supportive transitional housing. Further, there will be a continued long term need for supportive organisations such as Island Crisis Care Society and the Mid-island Canadian Mental Health Association to provide counselling, support, services and advice to those who have transitioned into affordable rental housing. Assuming Nanaimo will have a successful programme exit rate of 84% (Medicine Hat's rate) then the current system and associated financing should be able to manage those who require further on-going support.

#### 8.1.5 Paying for it all

The preceding numbers are nothing less than intimidating especially for a municipality of 104,000 residents and 2022 Revenues of \$226,162,613. Yet, a continued growth in Nanaimo's homeless population will seriously further tax the financial, service and human resources of the city. Without intervention, the costs to service and support the homeless population could reach upwards of \$25,000,000 by 2028. As noted in Table 4, investments in housing will lead to a significant decrease in public dollars spent on servicing and supporting those who are homeless. Over seven years of strategic investment in non-market housing, there exists a potential to recoup \$19 million. After 2029/30, the savings could be upwards of \$19,000,000 per year or a total of \$171,000,000 by 2032. This suggests that the investment of \$65,000,000 in 900 housing units required by 2029/30 could be fully recovered (including land costs). Further, as the homeless population is housed and those at risk of being homeless decreases because of the implementation of a robust and fulsome Housing First programme, the demand for housing units that do not generate a rental income (i.e., shelters, emergency shelters and supportive transition housing) will drop significantly because the overall homeless population and those in need will also drop significantly. As other cities that have implemented Housing First have shown,

there is a high rate of return to society for those formerly homeless. For instance, Medicine Hat has experienced a return of 84% to being productive members of society. Assuming that of that 84%, who are no longer homeless (800 x's 84% or 672), a number will be contributing directly or indirectly taxes back into the city revenue stream, then there would be a net gain in tax revenue in the city. In addition, there would be an increase in available service industry and other workers in an economy where there exists a shortage of those workers.

In addition, there are a number of externalities or costs that will be saved but are difficult to quantify, such as a reduction in the loss of life due to overdoses, the reduction of brain injury from overdoses and the reduction in fractured families (and associated social supports). Further, there will be a reduction in private sector costs as homelessness becomes a manageable and less disruptive element on our city. Such outcomes have been experienced in Medicine Hat. In Basel and Finland life on the streets is 'normal' with no need for increased security. As well, quality of life for all increases as residents return to a vibrant and safe downtown (real and perceived) and homeless residents now live in a safe, housed and healthier lifestyle. While all benefits are not quantifiable, they are immeasurably important for all.

## 8.2 Recommendations

Section 2.1.1 provided a summary of Nanaimo's Working Group on Homelessness's Report *A Response to Homelessness in Nanaimo: A Housing First Approach* (2008). While this report is now 15 years old, it still provides a clear and well articulated outline of what needs to be done to implement a Housing First agenda across all of Nanaimo. As noted by the Nanaimo's Working Group on Homelessness "proponents of housing first and harm reduction approaches purport that most people who are homeless can be successfully housed if they are given the right supports when they want them. These approaches are therefore viewed as a means to help end homelessness".

The following key recommendations identified are based on the preceding research findings and upon the Nanaimo report, *A Response to Homelessness in Nanaimo*. Recommendations consist of eight Strategic Recommendations and eleven Operational Recommendations.

### 8.2.1 Defining Principles to Address Homelessness in Nanaimo

1. Recognise that the majority of homeless people are homeless not by choice but by circumstance
2. Acknowledge that the majority of homeless people desire to be housed
3. Recognise that the majority of homeless people in Nanaimo are Nanaimo residents
4. Provide a range of unconditional housing for homeless people
5. Provide a range of supports that address the diversity of homeless needs
6. Commit to minimising people at risk of being homeless
7. Acknowledge that homelessness is a long term challenge that requires long term solutions
8. Use the Systems Planning Organization as the key delivery tool to address homelessness

### 8.2.2 Strategic Recommendations

The following eight strategic recommendations identify critical decisions and action that is foundational to the advancement of a successful homeless action plan.

#### **Recommendation 1: Recognise that homelessness in Nanaimo is an existential crisis that must be addressed with a fulsome response**

The evidence is clear. The facts are indisputable. Homelessness in Nanaimo is severe and acute. Nanaimo's homeless numbers and severity of associated issues are egregious. Nanaimo has one of British Columbia's most severe homeless challenges in terms of both numbers and types of homelessness needs.

### The why and how:

- As a result of a number of interconnected factors, including significant housing affordability issues, Nanaimo has at least 800 homelessness people or 8 homeless for every 1000 residents.
- Unless there is a systematic, coordinated and collaborative response to address this homeless crisis, the number of homeless could easily exceed 2,500 by 2030.
- Nanaimo has established the System Planning Organisation which is empowered to address the homeless crisis. It needs to be encouraged to do its work and coordinate appropriate actions to begin the long process of assisting the homeless population by advocating for and coordinating delivery of appropriate housing, and ensuring that appropriate services and supports are provided to those in need.
- Reconfirm Systems Planning Organization’s mandate and publicly support its role in implementing the recommendations embedded in this report.

### **Recommendation 2: Formally endorse the concept that homelessness violates the principle of human dignity**

The United Nations has identified in the Universal Declaration of Human Rights that homelessness is a violation of human dignity enshrined in Articles 1 (Free and equal. All human beings are born free and equal and should be treated the same way) and Article 22 (Right to social security. Society should help individuals to freely develop and make the most of all advantages offered in their country). Further the Special Rapporteur on the right to adequate housing stated: "Homelessness is a profound assault on dignity, social inclusion and the right to life. It is a prima facie violation of the right to housing and violates a number of other human rights in addition to the right to life, including non-discrimination, health, water and sanitation, security of the person and freedom from cruel, degrading and inhuman treatment."<sup>127</sup>

### The why and how:

- “Homelessness has emerged as a global human rights violation even in States that have adequate resources to address it. It has, however, been largely insulated from human rights accountability, and rarely been addressed as a human rights violation requiring positive measures by States to prevent and eliminate it”.
- “Homelessness not only indicates a State failure to guarantee access to safe, affordable and adequate housing for all, it violates as well a number of other human rights:  
For example, being exposed to homelessness impairs strongly the health of those affected undermining their right to the highest attainable standard of health”.
- “Homelessness causes, every year several thousand premature and preventable deaths, indicating as well a failure of States to protect the right to life adequately. In addition, it must be noted the right to life entails in itself more than mere survival, as it encompasses the core notion that everyone has the right to enjoy her or his life in dignity”.
- “Homelessness is stigmatized and often addressed with criminalization, violence, and aggressive policies that violate, rather than safeguard, the rights of the persons involved”.
- “Persons experiencing homelessness are also often discriminated on the basis of their housing status or due to their lack of official address, affecting their political, economic and social rights, such as their right to participation in elections, their right to work, or their right to access certain social benefits”.<sup>128</sup>

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<sup>127</sup> United Nations Human Rights Office of the High Commissioner, Special Rapporteur on the right to adequate housing. Homelessness and Human Rights, 2023

<sup>128</sup> United Nations Human Rights Office of the High Commissioner, Special Rapporteur on the right to adequate housing. Homelessness and Human Rights, 2023

- Adopt a supporting Council resolution that confirms Nanaimo recognises and reaffirms Articles 1 and 22 of the Universal Declaration of Human Rights and that it is committed to addressing homelessness through the lens of equity and dignity for all its citizens.

### **Recommendation 3: Adopt Housing First as the foundational element of a homeless strategy**

Getting off the streets is the desired wish for most homeless people. Appropriate, safe and secure housing is essential to begin to address homelessness. Evidence suggests that intervention absent a secure housing option will fail. Housing First has proven to be an effective way of addressing homelessness in cities where it has been adopted and applied in concert with full wraparound services and supports.

#### The why and how:

- “Safe and secure housing is identified as a key factor that makes it possible for residents/program participants to address their substance use issues and to become abstinent, reduce their substance use or reduce the negative impacts of their use”.<sup>129</sup>
- “Housing First (HF) is an evidence-based approach to ending chronic homelessness among people with mental illness and helping them address their complex needs (e.g., chronic health problems, addictions). HF combines rent supplements with support, typically in the form of Assertive Community Treatment (ACT) or Intensive Case Management (ICM). Rather than providing ‘treatment first’ before providing housing, the focus of HF is to provide people with housing immediately”.<sup>130</sup>
- Adopt a supporting Council resolution that confirms the City will use Housing First as its principle approach to addressing homelessness.
- Council request the System Planning Office to explore the implementation details and requirements to actualize a Housing First model in Nanaimo.
- Adopt the Principles embedded in The Health and Housing Action Plan
- Use the Nanaimo’s Working Group on Homelessness *A Response to Homelessness in Nanaimo: A Housing First Approach* to help guide implementation of Housing First

### **Recommendation 4: Create a purpose driven Housing First position**

Evidence shows that words are not enough to secure long term solutions that address the systemic nature of homelessness. There must be a fulsome commitment to a Housing First Action Plan with attendant structure, supports and action to ensure that homelessness is addressed in a multi-layered, coordinated, collaborative and integrated fashion.

#### The why and how:

- While there are a variety of excellent supports and services scattered across the community, many are uncoordinated and working independently.
- The evidence from successful housing first programmes identifies coordination and collaboration as central tenets to long term successful delivery of a homeless strategy.
- Create a five year term housing first position within the System Planning Office to coordinate and lead a housing first action plan with clear measureable goals and outcomes.

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<sup>129</sup> CitySpaces, *Response to Homelessness in Nanaimo: A Housing First Approach: Best Practices, January 2008* p.4

<sup>130</sup> <https://kmb.camh.ca/eenet/resources/evidence-glance-housing-first-and-choice>



### **Recommendation 5: Develop a robust plan to minimise at risk of homeless people**

It is clear that homelessness will only be reduced when fewer people lose their accommodation. Preventing homelessness is as important as reducing homelessness.

#### The why and how:

- Those cities that have successfully addressed homelessness have developed robust mechanisms to keep people housed before they enter street life.
- There will be a need to create a central housing support office (the SPO?) to provide guidance and supports to ensure people are not forced out on the streets.
- In addition, see Recommendation 10.

### **Recommendation 6: Prioritize addressing the 20 percent of homeless who suffer from acute health issues**

Those homeless who are suffering from chronic issues are those who need the most supports and services and overload the system. Their impact on hospital use, ambulance use, fire department use, police use, and court use is substantial. Such use has a significant financial burden and staff burnout burden on the overall systems.

#### The why and how:

- While these individuals are the hardest to serve and house and many are likely to return to the streets, they are the most disruptive to other homeless individuals and to the daily life of citizens (see Prelude).
- Special accommodation is needed in the form of safe secure housing with 24/7 supports and services to try and stabilize that population so that their disruptive impact is reduced.
- An immediate push to address that homeless population is critical to the success of the overall programme. While it may seem counter-productive to focus on those who are less likely to remain in housing, the reality is that their disruptive behaviour is problematic to all.

### **Recommendation 7: Implement a continuum of housing and wraparound supports**

Unconditional housing with wraparound supports is essential to addressing homeless needs. Time and again such an approach has proven to be effective, cost effective and compassionate. Lessons from successful housing first programmes can and should inform Nanaimo's approach and action.

#### The why and how:

- "The combination of housing and support is what is different from other housing. Support services for the homeless must be connected with housing for either to work effectively".
- "The availability of a range of housing options is necessary to meet the needs of a diverse target group. Some individuals prefer scattered sites in an anonymous landlord-tenant relationship and others prefer the camaraderie and group activities and sense of community available in dedicated buildings".
- "Provide social activities for participants/residents, e.g., communal meals and activities that builds sense of community".
- "Locate affordable housing in neighbourhoods away from drug dealing but accessible to public transportation, amenities and services".
- "Access to stable housing is central to attaining treatment goals. In addition, appropriate housing plays a critical role in stabilization, quality of life, and

initiation of treatment for homeless dually-diagnosed individuals”.<sup>131</sup>

### **Recommendation 8: Provide comprehensive, coordinated, intensive and integrated services and supports**

In addition to the formal government responses to homelessness, there have been a number of well developed and purpose driven community-based NGO’s that have provided supports and services to homeless people facing a variety of daily needs. There is clear evidence from those communities that have successfully addressed homelessness that all of these government and NGO interventions needs to be comprehensive, collaborative and coordinated.

#### The why and how:

- “Effective treatment for homeless people with substance use issues requires comprehensive, highly integrated and client-centred services as well as stable housing”.
- “Disorders cannot be treated apart from the concerns of the whole person. Services must address the range of people’s needs including food, shelter and support. This includes outreach, drop-in services, substance use treatment, health care, skills training, nutrition education, budgeting skills, housekeeping, hygiene, vocational education, family support, socialization, adequate income, employment services and housing”.
- “Providing integrated services for people with co-occurring substance use and mental health problems holds more promise than offering services in sequence or parallel. Close liaison and coordination to enhance referral and case management need to occur among the respective specialized services and informal street level agencies in a community. Excluding people with mental health problems from addictions treatment and excluding those with alcohol or drug problems from mental health treatment is discouraged”.
- “The same clinicians or team of clinicians work in one setting providing appropriate mental health and substance use intervention in a coordinated fashion”.
- “Integrated, client-centred support services for the homeless, addicted and mentally ill population not only work better, they cost less than an uncoordinated and fragmented service delivery system”.
- “High levels of support, including availability in the evenings and weekends. Typically, a range of housing options and services are needed to address homelessness. This includes alcohol and drug-free environments to accommodate individuals who are in treatment or recovery. It also includes policies and programs that use a housing first approach so that people who are homeless can have direct access to permanent housing, with support as needed”.<sup>132</sup>

#### 8.2.3 Operational Recommendations

Eleven Operational recommendations focus on the need to provide foundational delivery of services and supports that actualize effective abatement of homelessness issues that contribute to homelessness.

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<sup>131</sup> CitySpaces, *Response to Homelessness in Nanaimo: A Housing First Approach: Best Practices, January 2008* p.4

<sup>132</sup> CitySpaces, *Response to Homelessness in Nanaimo: A Housing First Approach: Best Practices, January 2008* p.4/5

### **Recommendation 9: Continue to support the work and independence of the System Planning Organization (SPO)**

There is ample evidence to recognise that an independent agency removed from City of Nanaimo oversight is an important means to address the complicated issues surrounding homelessness. Certainly, Medicine Hat confirms how important such independence is to actualize the ambitions of addressing homelessness.

#### The why and how

- The SPO Charter clearly sets out the authority, vision, guiding principles and operational mandate to address homelessness.
- The SPO brings together those who have a role in addressing homelessness and ensures that the essential elements of collaboration, integration and coordination are front and centre in all decision-making.
- The SPO should include those with the specialized expertise in addressing the complicated and nuanced issues surrounding homelessness.
- City Council should reaffirm its confidence in the SPO as the key tool for addressing homelessness in Nanaimo.

### **Recommendation 10: Put in place supports to significantly reduce at risk households from becoming homeless**

As noted by Basel, London and Medicine Hat, it is critical that those who face homelessness are kept housed. Once they enter the world of the homeless, they become susceptible to all of the issues of homelessness including entering a world of substance abuse.

#### The why and how:

- If homelessness is to be significantly reduced one of its main 'feeders' the risk of being homeless must be addressed.
- Efforts should be directed toward ensuring that there are adequate supplemental rent supports in place.
- Establish a coordination office (within SPO?) tasked with addressing precarious housing conditions.

### **Recommendation 11: Address substance abuse through a client-centred model using the four pillar methodology**

The four pillar substance abuse approach has proven to be a successful model that is applied across the globe. It involves integrated application of four steps of harm reduction, treatment, prevention and enforcement. Each step is applied as required depending upon circumstance and need.

#### The why and how:

- "A harm reduction approach in itself provides flexibility and focuses on the individual needs of each client".
- "Policies and programs are based on the principle of putting the client at the centre, that is, providing people who are homeless with choices about their housing".
- "Provides a client-centred approach to working with people 'where they are' rather than 'where they should be' as determined by treatment providers".
- "Flexible and intensive case management is based on a trusting and

respectful relationship”.

- “Success depends on ability to respond to different needs and provide individualized services adapted to the daily reality of clients”.
- “Individual treatment based on client’s needs, wishes, capacities, and timeframe rather than on a program’s predetermined benchmark for client outcomes”.
- “Case management has varied forms and can include client identification and outreach, assessment, planning to develop a service plan, linkage to services, treatment and support systems, monitoring and client advocacy to help clients to access services”.
- “Embodies the concept of low-threshold, which means removing traditional barriers to treatment that insist on a commitment to abstinence as a requirement of admission and as the only acceptable goal”.
- “Facilitates access to services even when people continue to use drugs and are unwilling to enter traditional substance abuse treatment programs that require abstinence.
- “Enables access to services such as safe housing, health care, psychological help, and safer means of drug use”.
- “Low barrier housing with supports is the key to addressing the public disorder resulting from homelessness, mental illness and addiction”.<sup>133</sup>

#### **Recommendation 12: Develop a Decolonization and Indigenization of the system of care**

Recognising that there exists a significant disproportion of Indigenous People in the homeless population, there needs to be a concerted effort to developing a decolonization and Indigenous practices approach to homelessness decision-making.

##### The why and how:

- Outreach and housing solutions should build on Indigenous knowledge and make use of Indigenous approaches to human interaction.
- Snuneymuxw First Nation should be asked to participate in developing protocols that enhance relationships with homeless Indigenous People.

#### **Recommendation 13: Develop a robust government agenda that ensures a coordinated approach with needs, land and approvals in alignment**

##### The why and how

- It is well documented that Nanaimo has a higher proportion of homeless numbers, substance abuse deaths and unsheltered homeless than most other cities in BC and Vancouver Island. Nanaimo should and can argue for a rightful portion of housing and services and supports to address its excessive homeless population.
- Nanaimo is in competition for scarce senior government dollars to finance homelessness initiatives. In the past many financial commitments, especially from BC Housing, have gone to other local governments in BC, such a Campbell River, Kamloops, Port Alberni and Victoria. Nanaimo needs to work closely with the SPO to ensure that housing needs are addressed by working together to access BC Housing funds.

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<sup>133</sup> CitySpaces, *Response to Homelessness in Nanaimo: A Housing First Approach: Best Practices, January 2008* p.4/5

- Such advocacy should be a coordinated between all affected parties and with significant city staff support ‘to make things happen’ and make sure Nanaimo was ‘at the front of the line’ for homeless needs.
- There needs to be clarity of task to show programme integration and collaboration.

**Recommendation 14: Clearly define the role of staff in creating a trust environment**

Evidence confirms that homeless people feel marginalized and ostracized and therefore are sceptical of services and supports. Many homeless resist services and avoid what appear to be institutionally delivered supports.

The why and how:

- “The relationship between staff and client is critical to treatment success. Staff are uniquely qualified – they have a helpful approach, a respectful way of treating participants and are knowledgeable of client issues”.
- “Staff are well trained. On-site and visiting staff share a client-centred, flexible approach to support and work cooperatively as a team”. (Ibid)

**Recommendation 15: Require and foster a collaborative approach**

Evidence points to the essential need for all who are involved in homeless issues to work collaboratively to foster success and address the primary issue of moving people into housing and required supports and services. Fragmented service delivery will continue to lead to failure.

The why and how:

- “Among agencies – particularly between housing and service providers”.
- Connections with community services – to help participants get involved in community activities and be able to contribute to community.
- “Municipality, region, and province work jointly with non-profit agencies to shift from the existing continuum of housing services to a model that supports “housing first” for all homeless people”.
- “Horizontal (between agencies) and vertical integration (within agencies) needs to occur at the policy, funding and governance levels, as well as in service delivery”.(Ibid)

**Recommendation 16: Provide a range of services that address the breadth of need**

The diversity of homeless people and their varied cultural and demographic mix confirms that the type, level, focus and management of services needs to be diverse and client specific.

The why and how:

- “Harm reduction programs and services include street outreach, drop-in centres, information groups that allow people who are actively using drugs to take part in treatment activities, “wet” shelters or housing that does not require abstinence. Examples include: Needle exchange programs, Methadone maintenance, Education and outreach programs that tell users how to reduce risks associated with using drugs, Law enforcement policies that place priority on enforcement of laws against drug trafficking while using a cautioning policy toward drug use, Tolerance areas, e.g. injection rooms, health rooms, centres where drug users can obtain clean injection equipment, condoms, advice and/or medical attention.<sup>134</sup>

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<sup>134</sup> CitySpaces, *Response to Homelessness in Nanaimo: A Housing First Approach: Best Practices, January 2008* p.3

**Recommendation 17: Ensure there is stable funding and monitor delivery**

Long term funding commitments are needed to not only build appropriate housing but also to provide long term services and supports that ensure homeless people are able to stay housed. Concomitant with appropriate funding commitments is the need to monitor the effectiveness and delivery outcomes of such investments. The two should go hand in hand.

The why and how:

- “A commitment to continued funding and supply of housing that meets the needs of individuals along the entire housing continuum”.
- “Affordable housing and prevention focused initiatives help support social sustainability in Communities”.
- “Ongoing review of key indicators and assessment of program effectiveness and outcomes”.<sup>135</sup>

**Recommendation 18: Adopt and implement the Homeless Management Information Systems**

Homeless Management Information Systems (HMIS) are local information technology systems specifically designed for coordinated access in a community.

The why and how:

- HMIS protect confidentiality, track program attendance, and allow providers to send those in need exactly where they need to go.
  - They are local information technology systems specifically designed for coordinated access in a community. They protect confidentiality, track program attendance, and allow providers to send those in need exactly where they need to go.
- SPO should adopt HMIS.

**Recommendation 19: Explore the potential to establish a modular housing initiative to serve Vancouver Island**

Part of achieving a rapid and affordable housing response will involve the exploration of new rapid cost effective tools and strategies<sup>136</sup>. “With the current housing crisis in Canada, modular construction can be part of the solution”.<sup>137</sup> Modular housing offers some significant opportunities to build affordable and easily constructed housing. “Prefabricated modular construction can be completed in less time than conventional on-site construction, while also offering high quality assurance and predictability”.<sup>138</sup> Further, “modular construction is poised as one of Canada’s premier answers to ever-growing issues in producing economic and environmentally smart buildings”.<sup>139</sup>

Others have adopted a modular housing approach such as:

In 2019, Ontario’s Durham Region committed to creating one thousand new affordable dwellings by 2024. Part of this initiative, Durham Modular Supportive Housing, will provide 47 transitional housing units for unhoused individuals, as well as on-site access to counsellors, nurses, and personal support workers, and facilitated access to a wider range of off-site services and training opportunities.

Reflecting the pressing need for this type of accommodation, the team used modular construction to accelerate project delivery. (ibid)

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<sup>135</sup> ibid p.5

<sup>136</sup> CBC, “The Current”. ‘Tackling the housing crisis with prefabricated modular homes’, November 28, 2023

<sup>137</sup> CSA Group, ‘Standards to Seize the Modular Construction Opportunity’, “Canadian Architect”, November, 2023

<sup>138</sup> “Canadian Architect”, ‘Durham Modular Supportive Housing’, ‘Winner 2021 Canadian Architect Award of Excellence, November, 2021.

<sup>139</sup> CSA Group, Op.Cit.

### The why and how:

- Modular building is being used around the world. It is now more common in Canada. With the abundance of wood construction in British Columbia, there is opportunity to establish a modular prefabrication facility in Nanaimo to serve Nanaimo and the rest of Vancouver Island. As noted above, modular housing can be more cost effective and provide high quality housing in a faster delivery model.
- Work with the Prosperity Corporation to explore the opportunity to establish a modular housing programme in Nanaimo.

The preceding recommendations provide a roadmap for addressing homelessness and its associated challenges.

## **9. Conclusion**

Homelessness in Nanaimo and across Canada is an existential crisis that deserves an equivalent response to ensure that the current crisis does not continue to detrimentally affect the well-being of those who are homeless and those affected by homelessness.

There are known solutions and methods to address most aspects of homelessness such as Housing First and associated wraparound supports and services. Those solutions are costly. They take time. They also require considerable political and community will. While the task is formidable and costly, the 'return on investment' has proven to be significant.

The alternative is unacceptable. Action is necessary; compassionate, focused action; action that may require tough decisions. Mechanisms exist. Nanaimo's System Planning Organization was recently constituted to address homelessness. It is time for it to be asked to implement a fulsome Housing First agenda with wraparound supports. Time is of the essence. Federal and provincial governments must be approached in the near term for their support to implement a robust action plan to address Nanaimo's homeless crisis.

Much needs to be done. Much is at stake. Without concerted action, the homeless crisis will only get worse.

No decision is a decision.