

Executive Summary

This report will provide an update on the Housing First Program. The Program is delivered by the City's Social Services Division through the Homelessness Network. Funding is provided by all levels of government to support programming to reduce or prevent homelessness in Greater Sudbury.

Background

The City of Greater Sudbury (City) collaborates with community service providers to operate programs and services that support people who are homeless or at risk of homelessness. These programs include homelessness prevention, emergency shelter, and housing support.

Local plans and strategies are developed with community consultation to identify priorities for our community. The City has a Ten Year Housing and Homelessness Plan that was updated in 2018. The plan includes priorities such as the need to support individuals with multiple barriers in obtaining and maintaining their housing, and a need to improve co-ordination, collaboration, and partnerships among a broad range of stakeholders.

Since 2006, the City has provided financial support for homelessness initiatives under the Housing First approach through a collaborative model with community partners.

Housing First

'**Housing First**' is a recovery-oriented approach to ending homelessness that centers on quickly moving people experiencing homelessness into independent and permanent housing and then providing additional supports and services as needed.¹ The demonstrated success of the Housing First principle was documented through a federally funded project entitled "At Home Chez Soi" by the Mental Health Commission of Canada in 2014.

The guiding principles of the Housing First Program are:

- Immediate access to permanent housing with no housing readiness requirements
- Consumer choice and self-determination
- Recovery orientation
- Individualized and client-driven supports
- Social and community integration

A Housing First Program is intended to meet the needs of people who have experienced chronic homelessness, which is defined nationally as having over six months of homelessness in the past year or having recurrent episodes of homelessness over the past three years with a cumulative duration of at least 18 months.² Typically,

people who experience chronic homelessness also struggle with a disabling condition such as a serious mental illness, substance use disorder, trauma, or physical disability. Chronic homelessness, in addition to being extremely debilitating to those who experience it, can be very expensive to homeless systems and public systems, including health care and criminal justice.

Canada's National Housing Strategy has a goal to reduce chronic homelessness by 50% by 2027-2028. Reducing chronic homelessness in Greater Sudbury is a mandatory outcome under the Reaching Home Funding Program, which the City is a recipient of. As well, Provincial priority areas for addressing homelessness include chronic homelessness, youth, indigenous, and those transitioning from Provincial institutions such as hospitals, correction facilities, or child welfare system.

Homelessness Network

The Homelessness Network is a partnership of six community agencies. It is led by Centre de Santé Communautaire du Grand Sudbury and includes L'association des jeunes de la rue, Elizabeth Fry Society, John Howard Society, N'Swakomok Native Friendship Centre and Sudbury Action Centre for Youth.

Since 2007, the Homelessness Network has been providing housing assistance in the community under funding agreements with the City. The Network uses the Housing First philosophy including a centralized administration of outreach support and homelessness prevention services. In 2016, The Homelessness Network changed their model to fully conform to the Housing First Model.

In order to connect with and support those experiencing chronic homelessness in the community, the agencies within the Homelessness Network have developed collaborative partnerships with other sectors and supports to contribute to the success of the program. These include:

- intake and assessments completed by the Community Outreach team and on site assessments at the emergency shelter programs;
- streamlined communication with City of Greater Sudbury Ontario Works Program, Housing Services and Greater Sudbury Housing;
- connection to Health Sciences North, Sudbury Nurse Practitioner Clinic, and other mental health and health care providers ;
- John Howard Society and Elizabeth Fry Society partnership with discharge planners from Sudbury Jail and other correctional facilities;
- N'Swakomok Native Friendship Centre's collaborative partnership between the Housing First Program, their own Housing Support Program, and the Ontario Aboriginal Housing Program;
- Sudbury Action Centre for Youth's support for youth within connection to Compass, Child welfare agencies and other youth serving agencies; and
- Landlord engagement and mediation to support program participants

Local Results

Since January 2016 there have been 307 persons/families housed by the Homelessness Network, and supported in maintaining their tenancies over the long term in Greater Sudbury.

In 2019, 117 people completed a new intake including the Service Prioritization Decision Assistance Tool (SPDAT). This tool asks questions about a person's history of homelessness, and other health and social indicators to help inform decisions about who should be prioritized for support. From these intakes, 79 persons were assessed as priority and assigned to Housing First case management, while the remaining 38 were provided less intensive supports through community partners. About 90% of referrals come from the two emergency shelters, the Off the Street Shelter operated by the Canadian Mental Health Association Sudbury/Manitoulin (CMHA) and Cedar Place Women and Families Shelter operated by the Salvation Army. The remaining 10% of referrals came from Health Sciences North, Sudbury Jail, local treatment centers, other social and community-based service agencies, as well as self-referrals.

Supporting a person to maintain their housing is a key mandate for the Housing First Program. If someone loses their housing, the Housing First case manager quickly works with them to find another permanent housing option. In 2019, 10.4% of participants needed to be rehoused at some point, and 6.6% lost their housing and returned to homelessness, typically because they chose to withdraw from the Housing First Program.

In 2019, it took an average of 47.5 days to find housing for individuals in the program, an improvement over 56.8 days in 2018. For a person who has experienced chronic homelessness there may have been multiple barriers to obtaining housing that must be addressed. These barriers include accessing identification, applying for income, filing an income tax return, and completing the social housing application. Of those housed in 2019 through the Housing First Program, 70% were housed through City of Greater Sudbury social housing options and had applied for urgent status special priority for those who are homeless. As well, 28% were housed in private market rent with the assistance of a housing allowance tied to the program to ensure affordability.

Once housed, participants are supported to increase social and community integration. In 2019, 62 persons in the Program had increased their income (typically moving from Ontario Works to Ontario Disability Support Program), a 51% increase over 2018. Another 12 had increased their employment stability (started part-time or full-time jobs), 12 had started part-time or full-time education, and 10 started a job-training program, which are similar results to 2018.

Success Stories

Example Number One

Monarch Recovery Services first referred a 63 year old female to the Homelessness Network in June 2018. She was assessed as high acuity and had been homeless on and

off and struggling with addictions through most of her adult life. More recently, she had been chronically homeless for the past four years and struggling more intensely with mental health and addictions.

She was assigned to a Housing Based Case Manager, working out of a Homelessness Network partner agency the Elizabeth Fry Society. The participant had been working actively on her recovery with supports from Monarch and Narcotics Anonymous. Her goals were focused on finding sustainable and affordable housing, budgeting, and building meaningful daily activities, while learning to cope. Once she was in recovery from drug use, physical health issues, anxiety, and depression were her biggest challenges.

With support from the Housing First case manager, she was able to be housed within 3 weeks of initial contact and has stayed housed since. She continues to meet weekly with her case manager to continue to work on her goals and update them as her needs changed. The worker was able to connect her with community supports. During her tenancy, she moved into a bigger unit with the same landlord as they were able to collaborate with CMHA to secure a rent supplement for her.

While there have been hurdles and challenges due to the participant's mental illness, she has stayed sober and has been successful in accomplishing most of her goals, including managing finances, getting a puppy, and finding meaningful activities to do during the week. Since securing long-term housing, she has increased her social integration by joining a local support group, and has secured a part time job. She has now moved into a secure seniors' residence and successfully exited from the Housing First Program.

This example illustrates the success a Housing First Program can have for an individual on public services (i.e. hospital, emergency medical, treatment centres, detention centers, etc.).

Example Number Two

A male in his 50's was first referred in April 2016 through Health Sciences North psychiatric services. He remains housed, despite a few re-housing efforts, and continues to utilize his Homelessness Network Housing Case Manager's support to this day.

This person presented with lifelong mental illness concerns and intense alcoholism, along with a history of run-ins with the law and continuous interventions by local police to respond to public complaints about his behavior. He was also vulnerable to violence and suffered many physical attacks due to his less than social approach to resolving interpersonal issues of daily living.

Mostly unable to hold onto housing independently throughout his adult life, this participant had been homeless for several years when he was referred to the Homelessness Network. Several attempts were made to have him properly assessed for

the “right level of housing”, such as permanent supportive housing or specialized care, without success.

Coming out of hospital after life threatening psychotic episodes and continuing to drink at a level to put his life in danger, he was assigned to one of the Housing First Case Managers at a partner agency, Sudbury Action Center for Youth (SACY). Her work with him has consisted of daily or twice-daily check-ins for weeks at a time, to ensure his health and well-being. The worker “supervised” this person with the highest intensity to ensure his survival. The participant also needs strong supports to assist with activities of daily living and maintaining his housing.

Several referrals were made to local mental health and psychiatric supports to try to ensure his mental illness would not result in his death. Alcohol medical management has assisted in reducing his alcohol intake. Although this participant continues to struggle, today he is in stable housing and meets each day with a much lower risk to his health and safety.

This example illustrates the high level of need and ongoing support required by some participants, as well as increased need for specialized housing with supports options.

Next Steps

The City is working with the Homelessness Network and other homelessness serving agencies to create a Coordinated Access System. This system will expand the assessment and priority process currently used by the Homelessness Network across the homelessness-serving sector allowing people to be placed into the right level of housing with supports. It will also allow for the collection of community-wide data and identify key outcomes such as the number of people experiencing chronic homelessness; the number of people new to homelessness; and the number of people exiting to housing in our community. This will inform the allocation of future resources within the homelessness and housing sector with an end goal of reducing chronic homelessness and overall homelessness within the community.

A report will be brought back to the Community Services Committee in early 2021 to provide an update on the progress of the Coordinated Access System in the community.

References:

¹ <https://www.homelesshub.ca/solutions/housing-accommodation-and-supports/housing-first>

² <https://www.canada.ca/en/employment-social-development/programs/homelessness/directives.html>

City of Greater Sudbury Ten Year Housing and Homelessness Plan update (2019-2023)
<https://agendasonline.greatersudbury.ca/index.cfm?pg=feed&action=file&attachmen t=27902.pdf>

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https://www.greatersudbury.ca/content/div_councilagendas/documents/cc_min_1213 .pdf

National At Home/Chez Soi Final Report
<https://www.mentalhealthcommission.ca/English/document/24376/national-homechez-soi-final-report>

Canada's National Housing Strategy
<https://www.placetocallhome.ca/what-is-the-strategy>

Housing First – Government of Canada
<https://www.canada.ca/en/employment-social-development/programs/homelessness/resources/housing-first.html>

Homelessness Network
<https://homelessnessnetwork.ca/>