Creating Community Solutions

An Action Plan to Prevent and End Homelessness in Ottawa-Carleton

Ottawa-Carleton

June 1999

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Preventing and Ending Homelessness in Ottawa-Carleton

Homelessness is not an issue with a common cause. Although Ottawa-Carleton has taken steps to deal with homelessness in the past, the problem persists. Results from the Environmental Scan released in April 1999, demonstrated that the problem is growing.

↑ *POVERTY*

- poverty has risen in the Region by 29% between 1990 and 1995
- social assistance recipients are poorer by 21.6% since 1995 reductions

↑ *EVICTIONS*

- 16% increase in formal evictions (1996-1998)
- 20% of families using the Region' s family shelters report eviction as the reason for need

↑ *RENTAL COSTS*

- steady increase in rental costs (1990-1998)
- a single person on social assistance has a $68 shortfall between shelter allowance and the average rent for a bachelor apartment.
- a family of four' s shelter allowance is $602 /month. The average 2-3 bedroom unit is $754-923/ month.

↓ *AVAILABILITY OF AFFORDABLE HOUSING*

- 15,000 applicant on social housing waiting list.
- In 1998 there were 5,500 applicants
- no new social housing in the Region since 1995
- Federal government withdrew funding for social housing construction in 1993

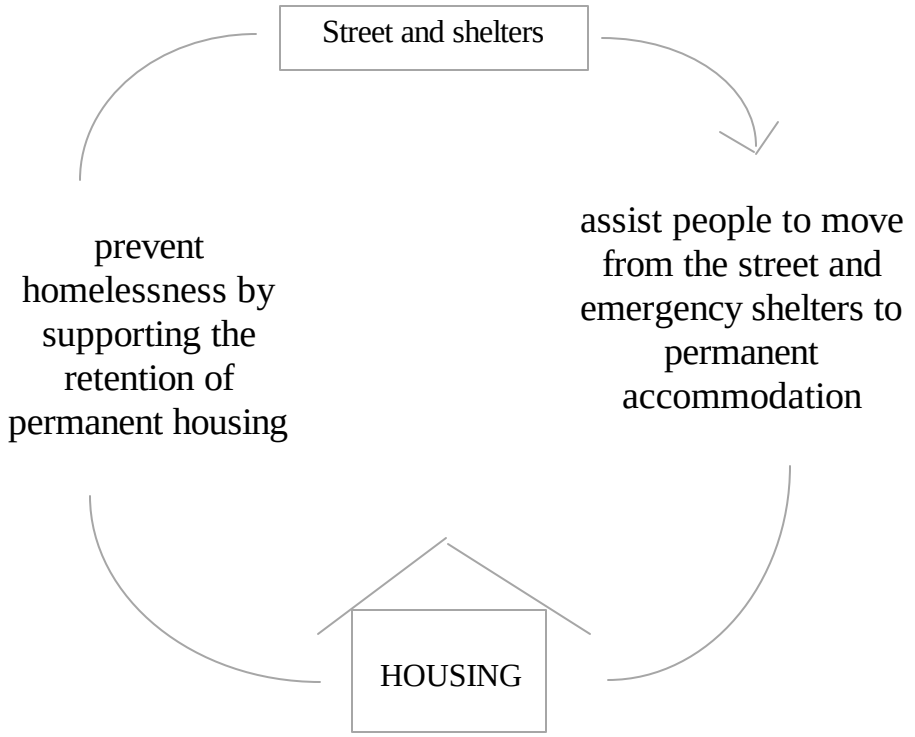
↓ *TENANT PROTECTION*

- The removal of rent control and changes in the Tenant Protection Act (June 1998) are expected to increase the number of evictions.

The factors that place individuals at risk of becoming homeless will not be removed simply by the passage of time. Prevention strategies are required immediately to stop the increase of the number of persons who are homeless.
Regional Council recognized the need for action when they approved a motion on November 14, 1998 requesting that the Federal Government declare homelessness a National Disaster.

Although there are both individual-level contributing factors to homelessness, (for example, mental illness and substance abuse) and systemic-level contributing factors (for example, poverty and lack of affordable housing), issues that affect single adults may vary from those affecting youths or families. Despite these differences, this initial community action plan will begin to respond to the needs of those who are homeless or at risk of being homeless. An issue as complex as homelessness cannot be prevented or ended with only one plan.

This Community Action Plan outlines recommendations and actions to achieve the goal of preventing and ending homelessness. This will be accomplished by focusing efforts on assisting people to move from the streets and shelters to permanent accommodation, and by providing support services that will help people remain housed.



The United Nations defines homelessness in two ways:

Relative Homelessness: a situation in which people' s homes do not meet the UN' s basic housing standards.

A dwelling must:

- have adequate protection from the elements
- provide access to safe water and sanitation
- provide secure tenure and personal safety
- lie within easy reach of employment, education, health care and
- not cost more than 50% of total income

Absolute Homelessness: a situation in which an individual or family has no housing at all, or is staying in a temporary form of shelter

Recent Actions

Actions that have led to the development of this initial community action plan are:

- On November 14, 1998, Regional Council approved a motion requesting that the Federal Government declare homelessness a National Disaster.

- The Provincial Task Force Report on Homelessness, released in October 1998, designated municipalities as the *local service system managers* for homelessness.

- In January 1999, The Mayor's Action Task Force Report for the City of Toronto released the report known as "The Golden Report". This report was used as a background for the development of Ottawa-Carleton's Community Action Plan. The report suggested that homelessness can be prevented and reduced by understanding both the public responsibility and the role for each level of government.

"Homelessness is fixable if we all work together."

Anne Golden speaking to the Ontario Municipal Social Services Association Forum on Homelessness, February 17, 1999.

- The Regional Community Services Committee directed Health and Social Services to develop a "made in Ottawa-Carleton" version of the Golden Report.

- On April 15, 1999, the Region's Community Services Committee received the Environmental Scan. On April 28, 1999 Regional Council approved the recommendation that the Region assume the role of a local service systems manager for homelessness. In the role of Service System Managers for homelessness, the Region is expected to draw together its services, including Social, Health and potentially Social Housing, in the management and coordination of services to persons who are homeless or at risk of becoming homeless.

In the role of local Service System Managers for homelessness, the Region is expected to work with the community, service providers, provincial ministries and funders to develop coordinated approaches to service delivery.

This report represents the beginning of a community action plan to end homelessness in Ottawa-Carleton. The plan was developed in two phases.

Community Consultation: "Bringing All the Players to the Table"

Phase One of the plan was an Environmental Scan which identified five main contributing factors to homelessness in Ottawa-Carleton. These factors are: poverty, lack of affordable housing, evictions, mental illness and addictions. It also provided a profile of persons who are homeless in the Region and the services available to them. The study formed the basis of the discussion, public consultation and planning required to produce solutions to homelessness.

What is required is a coordinated, integrated, community-wide approach to serving persons who are homeless or those at risk of becoming homeless with the exchange of information between agencies in order to support clients to move to stable housing and remain housed.
-Environmental Scan, Region of Ottawa-Carleton

Phase Two began with a Community Consultation process that
was fundamental in building the community plan presented in this report. The creation of an integrated community action plan was enhanced by the involvement of members of the Alliance to End Homelessness in all stages of the process. Consultation also involved other private and public stakeholders. The methodology included:

Stakeholder Groups Involved in the Community Consultation Process:

- front-line staff
- program managers
- community agency directors
- federal, provincial and municipal elected officials
- municipal representatives
- provincial representatives
- federal representatives
- private housing developers
- business sector representatives
- persons previously

⇒ Key Informant interviews conducted with 40 individuals (see Appendix B for a list of informants) who helped identify solutions and strategies to end homelessness in Ottawa-Carleton. Questions asked to Key Informants are shown in Appendix A.

⇒ A Community Forum held on April 8, 1999, attended by 100+ participants (see Appendix B for a list of participants) representing inter-faith ministries, municipal, provincial and federal government, the private sector, academic institutions and persons who have experienced homelessness. Participants identified strategies needed to be implemented to achieve these possible solutions.

"A really good cross -section of attendees"
-Linden Holmes, Ottawa-Carleton Housing

It's a great start - let's keep up the momentum!"
-Bill Teron, Teron International

Evaluations from the Community Forum

⇒ An inventory of services available to persons who are homeless in Ottawa-Carleton. From information provided by community agencies, the inventory was developed to gain an understanding of the community services available and allow for the future identification of gaps (see Appendix D).

Principles of an Integrated Community Action Plan

During the Community Consultation process, stakeholders identified the following key principles for the development and implementation of the plan:

Prevention-Focused

- To have the necessary balance between intervention and prevention services.
- To not focus exclusively on the provision of "crisis-based" emergency services.
- To develop initiatives that address the prevention of homelessness.

Collaboration and Communication

- To seek collaboration between the levels and areas of government (such as health, housing, community and social services, corrections and education), and between service providers, planners and persons who are currently/have had the experience of homelessness.

Focused on Long-Term Solutions

- To develop an integrated community plan to address long-term solutions to ending and preventing homelessness.

Community Involvement

- To involve a broad representation of public and private sector stakeholders and people who have experienced homelessness for the further development and implementation of community planning to end homelessness.

Research-Based

- To investigate and adopt strategies and/or initiatives where effectiveness has been examined empirically.
- To establish identifiable benchmarks and to provide on-going information collection and monitoring to ensure efficiency and accountability of all service provision.

"We need a municipal office dealing with homelessness that has a specific budget and governance to liaise with current services and provide an integrated use of the money"

-Jeff Turnbull, Faculty of Medicine.

"We need to make sense of multiple funders and mandates and to put all of our resources on the 'collective table' to find a way to bridge the gaps in the system"

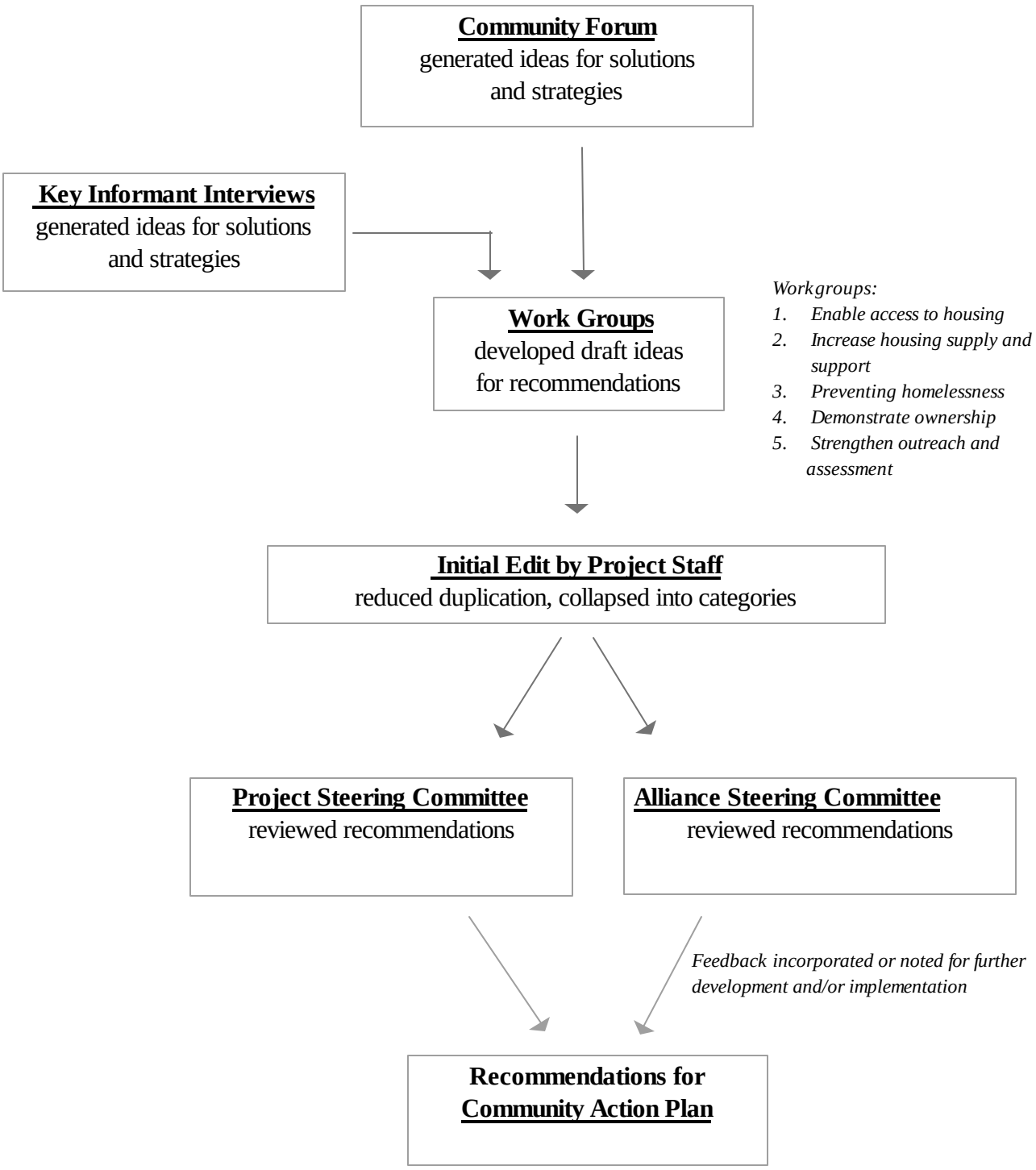
-Peter McKenna, Sandy Hill Community Health Centre

Creation of Community-Based Recommendations

The process of developing community-based recommendations is shown below.

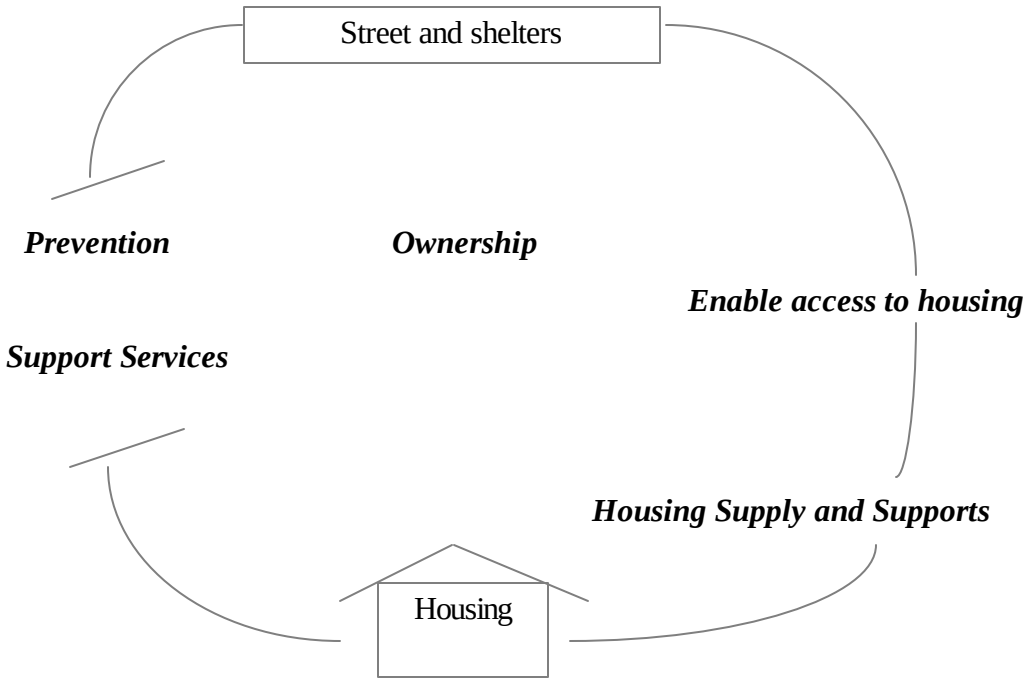
Figure 1

DIAGRAM OF PROCESS TO DEVELOP AND REVIEW RECOMMENDATIONS



The process began by using the solutions and strategies generated by the Community Forum and the Key Informant Interviews to develop five work groups. These groups were comprised of 65 different stakeholders from the community, representing public and private sectors (see Appendix B).

The solutions were grouped into five areas:



The task of the work groups was to formulate draft recommendations either from the ideas presented at the Community Forum or from the Key Informant Interviews, or to develop new ideas based on their areas of experience and expertise. The input from the five work groups, shown in Appendix C, is cross-referenced to the recommendations in this report.

Vision for the Implementation of the Community Action Plan

The success of the implementation of the Community Action Plan requires the efforts of all community members. Once the Community Action Plan is approved by the Community Services Committee, the implementation of recommendations will be conducted in collaboration with a broad range of stakeholders in the community. Close working relationships with both the public and private sector, of which the Alliance to End Homelessness plays an integral role, will be essential for the further development and implementation of the recommendations.

In addition, ongoing monitoring of contributing factors to homelessness (both individual and system-level factors) is essential to ensure that the implementation of recommendations responds to current and future needs of persons who are homeless or at risk of becoming homeless.

Presentation of the Recommendations

The recommendations section is grouped by categories similar to those used by the five work groups. Because many of the recommendations discuss the prevention of homelessness, prevention-based recommendations were included within the following categories:

- regional ownership;
- provincial and federal ownership;
- housing supply and support;
- enable access to housing; and
- provision of support services

Within each group, global recommendations (such as ones requiring advocacy to other levels of government) are presented first, followed by recommendations requiring local action.

OWNERSHIP — REGIONAL

Recommendation 1:

That the Region establish a responsibility centre to facilitate the coordination and integration of services related to homelessness in Ottawa-Carleton.

Rationale:

The Region has the responsibility to provide leadership and to coordinate the diverse community services and stakeholders to work toward preventing and ending homelessness.

Given the complex nature of homelessness, the approach to solutions can not neatly be attached to any one area within the existing departments of the Region. Housing, Health and Social Services have joined efforts to organize in order to effectively facilitate the coordination of services and programs.

As part of this organizational capacity, the Region will carry out the following functions to coordinate services:

- Consultation
- Policy Development
- Implementation
- Resource Determination
- Evaluation

Actions and Timeframes:

The Region, working in collaboration with partners and stakeholders, will begin to implement this community action plan (Summer 1999).

Throughout the development of this community action plan, a number of ideas for recommendations were generated that would need to be addressed as part of the Region' s organizational capacity (on-going).
These actions are:

- facilitate the coordination of services
- establish a system of accountability to ensure that recommendations are acted upon, with a monitoring and evaluation process that provides regular and public reports on progress and outcomes
- assess current and future needs for social and supportive housing
- coordinate efforts with stakeholders and partners to address the need for increased number and types of supportive services
- encourage research and demonstration projects that increase understanding of the factors that contribute to homelessness and informs responses to those factors
- enhance a working relationship with the Aboriginal community to ensure that policies and initiatives address their needs.
- support the development of a comprehensive information management system on homelessness with accessible and accurate information for the public and service providers alike, and ensure links with other information management systems
- support training and education initiatives for service providers who are working with homeless persons and those at risk of becoming homeless
- ensure links are established with other local initiatives and working groups, such as the Task Force on Poverty, the Task Force on Employment, the Addiction Restructuring Task Force, and workgroups of the Alliance to End Homelessness
- strengthen the relationships with the inter-faith community and Aboriginal Elders to increase opportunities for spiritual support
- facilitate a process for neighbourhoods and communities to develop strategies to reach out to people at risk of becoming homeless.

Outcome:

Comprehensive, integrated service delivery for persons who are homeless in Ottawa-Carleton.

OWNERSHIP — PROVINCIAL AND FEDERAL

Recommendation 2:

That the Region request the Federal and Provincial governments to retain overall accountability for homelessness and the development of affordable housing .

Rationale:

The Federal and Provincial levels of government have a greater capacity to deal with the systemic-level issues (e.g. housing, poverty) of homelessness. Therefore, it is these national and provincial perspectives that are necessary to implement the broader solutions stemming from systemic factors. Homelessness will soon be a concern for all Canadians. The problem stems from little or no new affordable housing being built compared to the expected steady growth of our country' s population.

Recent actions are promising. Continued responsibility and support from Federal and Provincial government is essential to enable our community to better respond to the need for affordable housing.

Actions and Timeframes:

The Region has joined other cities and municipalities from across the country in their collective efforts to support the development of a National Housing Policy Options Strategy. The Region will continue to play an active role in persuading Federal and Provincial governments to assume responsibility for developing affordable housing.

The Region will petition the Province of Ontario to review policies and practices across all ministries to address the needs of people who are homeless or at risk of being homeless. It will encourage linking of policies and practices across Ministries.

Outcome:

Renewed commitment by the Federal and Provincial governments to provide all citizens with the basic right to safe and affordable housing.

In March 1999, Claudette Bradshaw was appointed as the Federal Minister responsible for homelessness. Her role is to coordinate the Federal effort with the provinces and municipalities across Canada. The first announcements of a plan to introduce federal initiatives and resources is expected in Fall 1999.

There are many provincial ministries charged with the responsibility of addressing homelessness, including: Health, Community and Social Services, Municipal Affairs and Housing, the Solicitor General, and Correctional Services.

The Toronto Disaster Relief Committee has developed *The One Percent Solution: Towards a National Housing Strategy* which proposed that all levels of government spend 1% more of their existing total budgets on housing.

An increase of 1% would double the amount currently spent by federal and provincial governments towards housing (1% campaign developed by National Disaster Relief Committee in Toronto).

OWNERSHIP — PROVINCIAL AND FEDERAL

Recommendation 3:

That the Region request that the Federal and Provincial Governments increase support services and access to housing for newcomers to Canada including assistance to refugee claimants to access housing.

Rationale:

Newcomers to Canada face a period of resettlement. Some newcomers face additional challenges, such as: not speaking the language(s) of a country, poverty, social isolation, discrimination, unemployment and lack of housing. Many of the residents in the Region' s family shelters are immigrants or refugee claimants, with large families, competing for a shrinking stock of affordable housing in Ottawa-Carleton.

In addition, there is an inequity in government policy and practices with regard to status, and access to supports and supportive services. Government sponsorships allow some immigrants and refugees access to financial support, access to reception shelters, and settlement services. Conversely, refugee claimants have none of the same supports - no access to settlement services; no financial support, and limited health or medical care. Even if employable, refugee claimants are not permitted to work until they are issued a work permit. They must have a job lined up, however, before the permit is issued. Backlogs in processing refugee claims, and other immigration and settlement issues add to the state of limbo many refugees face upon arriving to Canada.

The Provincial Task Force on Homelessness recommended that *"the federal government should be responsible for income support for refugee claimants"*.

In addition, the Task Force recommended that *"the federal government should ensure immigrant and refugee settlement and integration programs be adequately funded"*.

Actions and Timeframe:

The Region forward this request to the Federal and Provincial Governments (Fall 1999).

The Region encourage the coordination of services for newcomers (including refugees) provided by Community Resource Centres and settlement programs and services (Fall 1999).

Outcome:

Decreased requirement for shelter services for newcomers to Canada.

HOUSING SUPPLY AND SUPPORT

Recommendation 4:

That the Region continue to advocate for renewed Federal and Provincial funding for additional social and supportive housing and for support services.

Rationale:

The Region is unable to address the problem of homelessness without funding support from the federal and provincial governments. This was also the conclusion of the Golden Report and is the basis for recommendations to the Federation of Canadian Municipalities Conference for a National Housing Policy.

Actions and Timeframe:

In addition to advocating generally that the senior levels of government provide funds for housing and homelessness, there are a number of specific proposals which should be put forward:

- Request other levels of government to contribute land or properties to meet the needs of the homeless.
- Encourage CMHC to continue recent new guidelines for RRAP funding for renovations to facilities housing people at risk of homelessness.
- Advocate for adequate reserve funds to safeguard existing social housing.
- Request that the Province reassume 100% of the cost of supportive housing, as well as capital costs, rent supplements and support services.
- Request that the Province assess the impact of the removal of rent controls on rent levels and economic evictions.
- Encourage the Province to re-introduce incentives to create more affordable housing, including programs like "Convert-to-Rent".

(All actions are on-going)

Outcome:

Increased federal and provincial government funding for social housing and support services.

On April 14, 1999, the Regional Council passed a motion that Council urge the Provincial and Federal Government to include within the framework of the new Federal/Provincial agreement currently being negotiated a mechanism or protocol that allows and encourages a Federal role in the funding of social housing programs in Ontario.

RRAP is the acronym for Residential Rehabilitation Assistance Program. This program is offered by Canada Mortgage and Housing Corporation (CMHC) to assist owners of rental and rooming house properties to bring their properties up to health and safety standards. It also assists with the adaptation of residential properties for clients with special physical needs.

A rent subsidy pilot project has been developed in Alberta between Boardwalk Equities and Alberta Municipal Affairs. The project provides 10 subsidized town homes to families at risk of homelessness. Families pay 30% of their income towards rent, and Alberta Municipal Affairs finances the remainder.

HOUSING SUPPLY AND SUPPORT

Recommendation 5:

That the Region assess the advantages of delivering housing programs directly and assisting local housing groups to access funds from provincial Ministries.

Rationale:

CMHC currently delivers its renovation program through the City of Ottawa. If the Region assumed this function, region-wide program delivery could be made available. There may also be an interest on the part of the Province, in advance of full devolution of the responsibility for social housing, to have the Region play a role in the delivery of rent supplements which were announced by the Provincial Minister as a homelessness initiative. Further, the Region may be able to assist local groups in accessing funds that will be made available from other Ministries, such as the Ministry of Health for supportive housing provided to those with mental illness.

In December 1998, the Federal Minister for Housing announced a special RRAP allocation to assist in meeting the needs of the homeless. In Ottawa-Carleton a total of $3.295 million was approved for renovations to apartment units and rooming houses and the creation of 89 units, primarily in the City of Ottawa. Major shelter providers as well as a number of support agencies and non-profit housing corporations took advantage of the funding.

Actions and Timeframe:

Analyze the viability of assuming Residential Rehabilitation Assistance Program delivery and prepare a report to Council (Summer 1999)

Track provincial actions to transfer rent supplement funding to regions. (on-going)

Track provincial announcements and policy developments on mental health reform and other supportive housing (on-going).

On March 23, 1999 the Ministry of Community and Social Services announced a $100 million dollar initiative to help the homeless in Ontario. This includes $45 million to develop, in the short and medium term, housing spaces and supports for people with mental illness, and reallocation of $2.5 million from expiring rent supplement contracts to help house 300-400 persons with special needs, and $50 million per year to be used in partnership with the municipalities for rent supplements.

Outcome:

Increased Provincial funding for local initiatives.

HOUSING SUPPLY AND SUPPORT

Recommendation 6:

That the Region create a Task Force on public/private partnerships to encourage the private sector to take a more active role in dealing with homelessness.

Rationale:

In other areas of the country and in the United States, the private sector has become active in developing and implementing solutions to homelessness. There may be opportunities to involve the private sector to a greater extent in Ottawa-Carleton. At the same time, it would be useful to identify barriers which have prevented the private sector from producing affordable housing.

In the USA, the Community Reinvestment Act has succeeded in channeling large volumes of private capital towards low-income housing. The Act rests on the premise that lending institutions have an obligation to reinvest in local communities where they make their money.

Actions and Timeframe:

Request that the Regional Chair co-sponsor with a private sector leader a task force to encourage greater private sector participation in building and financing affordable housing and meeting other needs of persons who are homeless. Private sector participants would include representatives from financial institutions, the service sector, the high tech business sector, the home builders and other business leaders (Fall 1999).

Seek input from Task Force participants on barriers or incentives for the creation of affordable housing, including the following:

- the need to streamline and provide assistance with development applications;
- the degree to which zoning bylaws provide opportunities for intensification in conformity with the Official Plan;
- the need for a comprehensive inventory of government land and properties for sale;
- the feasibility of a business foundation to finance affordable housing;
- the usefulness of a network of social housing developers; and
- an awards program for best practices to promote more innovative production of affordable housing.

Specific commitments are made by banks in connection with periodic regulatory reviews, and as a result, targeted pools of capital are available for affordable housing. Canadian banks (for example the Toronto Dominion Bank and the Bank of Montreal) operating in the U.S. participate in Community Reinvestment lending but no similar initiative exists in Canada.

Develop partnerships, including attracting the corporate sector to work with and fund community ventures (Fall 1999)

Foster active involvement of private and community foundations in the development of affordable and supportive housing and services (Fall 1999).

Outcome:

Increased private sector investment in development of affordable housing.

HOUSING SUPPLY AND SUPPORT

Recommendation 7:

That the Region encourage more use of social housing units for persons who are homeless.

Rationale:

There are over 25,000 units of social housing in the Region, which have assisted in meeting the needs of the homeless and could be used to do even more. The Region does not have direct control over these units, but may influence providers to ensure existing social housing is used optimally. As units become vacant, they could be made available to assist persons who are homeless, if sufficient support services are also provided. Other non-profit and co-op projects may have accumulated equity or excess land which could be used to produce more affordable housing. At the same time, the Region must take steps to ensure the on-going viability of existing social housing so that current residents are not at risk of homelessness.

Social housing represents just under nine percent of the total housing stock in the Region. The majority of the units (84%) are located in Ottawa. Nearly three quarters of the stock is under provincial administration. This includes: 8,600 units of public housing, managed by the Ottawa-Carleton Housing Authority; approximately 1500 rent supplement units held through agreement with private landlords; and 8,300 units managed by municipal and private non-profit and cooperative housing providers. The remaining quarter of the stock (nearly 7,000 units) is administered by the Federal government.

Actions and Timeframe:

Funding of demonstration projects to provide support services (for example, Ottawa-Carleton Housing's project to integrate low-income singles into seniors or age-mixed buildings when units become vacant).

In consultation with provider groups, study the degree to which equity or vacant land may be available in existing projects for intensification or additional housing (1999-2000)

Influence provincial standards on social housing and maintain them following the transfer of administration from the Province to the Region.

There are different models of support services currently available to residents of social housing. One model provides on-site support which is linked to the unit. Another model provides mobile, flexible support that follows the person and is not attached to a specific housing unit.

Outcome:

Increased social housing stock dedicated for persons who are homeless or at risk of being homeless.

HOUSING SUPPLY AND SUPPORT

Recommendation 8:

That the Region assess the use of publicly-owned land and regulatory measures as ways to promote the development of affordable housing.

Rationale:

The creation of more affordable housing is essential to preventing and reducing homelessness. Local governments could promote the development of more low-cost rental housing by reducing the capital costs of land and development charges and, in future, by reducing property taxes for rental housing properties. In addition, the Region may be able to assist with financing costs of the above- mentioned strategies.

Actions and Timeframe:

Approve an exemption from regional development charges (RDC) for non-profit housing (prior to August 1999)

Develop a policy to lease Region-owned land for a nominal cost to community housing groups serving those at risk of homelessness (September 1999).

Assess the option of equalizing property taxes for homeownership and rental properties (long-term).

Encourage local area municipalities to use land and regulatory measures to promote development of more affordable housing (long-term).

Consider the creation of a revolving fund to provide loans for interim financing and for the conversion of residential and non-residential properties to affordable housing (long-term).

Outcome:

Increased affordable housing.

The Toronto Mayor's Homelessness Action Task Force recommended the provision of municipal land for housing development. The Task Force proposed a "housing first" land policy for surplus and potentially surplus sites for the City to lease or sell its sites to community-based non-profit housing developers for less than market value.

The Task Force also proposed an allocation of one percent of its annual capital budget to a Homelessness Community Fund, part of which could be used to provide capital subsidies for the construction of low-rental housing.

HOUSING SUPPLY AND SUPPORT

Recommendation 9:

That the Region explore the feasibility of providing capital grants to facilitate construction of affordable housing through demonstration projects.

Rationale:

In the absence of federal and provincial programs for new development, it may be feasible to produce affordable housing through a combination of initiatives to reduce the capital costs of construction.

Actions and Timeframe:

Assess the Toronto experience (detailed in the side column) and consider a similar approach to demonstration projects (Fall 1999).

Do costing analysis and prepare policy options for consideration of Regional Council (Fall 1999).

Outcome:

If the feasibility study results are favourable, consider the development of a similar initiative.

In Toronto, a call for proposals was recently issued to non-profit developers to consider a project for single parent families who are in emergency shelters or at risk of becoming homeless. The City' s contribution to the project would be land at nominal cost on a long-term lease, a capital grant of $10,000 per unit and an interest-free second mortgage of $25,000 per unit. This contribution is less than the cost of keeping the same number of people in an emergency shelter for a year.

ENABLE ACCESS TO HOUSING

Recommendation 10:

That the Region request that the Province of Ontario to raise the amount of the shelter allowance under the Ontario Works Act to reflect actual housing costs.

Rationale:

While the shelter allowance portion of social assistance benefits has never reflected actual rental costs in Ottawa-Carleton, the 1995 cuts in the shelter allowance have severely restricted the ability of many people to rent in the private market.

Currently, the shelter allowance for an individual is $325/month. The Environmental Scan listed the average rent for a 1-bedroom apartment in 1997 to be $700/month. In addition, almost 50,000 renters in the Region pay more than 30% of their income on shelter. This problem is compounded for families. For example, a family of four receives $602/month shelter allowance, yet the average 2-3 bedroom unit is $754-923/month.

When the Provincial government cut social assistance benefits under the former *General Welfare Assistance Act* in October 1995 by 21.6%, the shelter allowance portion was also reduced. There was no corresponding reduction in rent for non-subsidized tenants in the private rental housing market.

Actions and Timeframe:

A meeting be requested with the Minister of Community and Social Services and the Minister of Finance to discuss the issue (Fall 1999).

A 1998 Consumer Preference Survey conducted by the Canadian Mental Health Association (Ottawa-Carleton Branch) found that the number one barrier preventing respondents from living in their ideal place was *not having enough money for housing.*

Outcome:

Increased shelter allowance.

The Toronto Mayor' s Action Task Force Report provides this recommendation: *The shelter component maximum for social assistance should equal 85 percent of the median market rent for each local housing market, based on annual surveys.*

ENABLE ACCESS TO HOUSING

Recommendation 11:

That the Region promote the wider use of Direct Payments and Trusteeship Agreements where there is an inability of Ontario Works (OW) and Ontario Disability Support Program (ODSP) participants to manage finances.

Recommendation 12:

That the Region request the Province of Ontario enhance the Ontario Disability Support Program automated system so that Direct Payments can be made for accommodation costs by early 2000.

Rationale:

Direct payment of rent to landlords is a strategy that is not necessary for everyone on social assistance. However, for some individuals (for example, with severe health or mental health issues), sending rental payments directly to landlords would increase their ability to secure and maintain housing when health or personal issues interfere with their ability to manage financial affairs.

Trusteeship Agreements provide a third party support to individuals with serious challenges in managing their own benefits, including securing and maintaining housing.

The Provincial Task Force Report on Homelessness listed trusteeship or rent paid direct to landlords in exchange for lower rent or a waive of first and last month' s rent as an example of a housing support initiative for the Province.

Actions and Timeframe:

- Social Services is currently reviewing the policy and procedures regarding direct payments (Ongoing).

- Social Services will provide staff with an information package on the use of direct payments and other pertinent policy and procedures, specifically relating to a person in need with a housing crisis (Fall 1999).

- Social Services, with interested community partners, will create and promote more effective ways to support people in managing their own affairs by providing small administration costs for voluntary trustees (Fall 1999).

ENABLE ACCESS TO HOUSING

Actions and Timeframe: (continued)

- Social Services will look for ways to streamline access to the Official Guardian for persons with persistent and severe conditions that preclude them managing their own affairs and who are not able to obtain access ODSP
  (Fall 1999)

- The Region will approach the Province to work collaboratively in developing a consistent approach to direct payment (August 1999).

Outcome:

Increased prevention of homelessness by reducing the number of evictions due to defaulting on rent, or rent arrears.

ENABLE ACCESS TO HOUSING

Recommendation 13:

That the Region streamline and broaden the use and acceptance of the Letter of Last Month's Rent Guarantee to enable homeless people to more readily secure accommodation on the private housing market.

Rationale:

Providing last month's rent at the beginning of a rental agreement is an expense that is virtually impossible for those on social assistance. To assist Ontario Works participants to secure housing, Social Services can provide a Last Month's Rent Letter, which guarantees rent payment. This guarantee is meant to help individuals and families secure the housing they need.

There are barriers to this assistance that need to be addressed to help people secure housing in the private market. Barriers shown in the right-hand column were identified through consultation.

Actions and Timeframe:

The Region will:

- streamline existing practices for issuance and redemption of the Last Month's Rent Letter;
- clarify information given to clients and landlords;
- provide training to Social Services staff; and
- develop and implement (with community partners) a strategy to increase acceptability of the Last Month's Rent Letter in securing housing (Fall 1999).

Outcome:

Increased ability to secure accommodations in the private housing market.

Until 1991, the *General Welfare Act* had provisions for covering first and last months' rent for recipients. Since these changes, the added cost of last month's rent is a barrier for those on assistance in securing accommodation in the private housing market.

Although last month's rent letters can be of assistance to individuals and families, there are barriers to this assistance that need to be addressed.

Barriers

- Many landlords in the Region will not accept the Letter of Guarantee, citing cumbersome redemption procedures.
- Individuals and landlords are often unclear as to the terms and conditions of the letter.
- Last Month's Rent Letter can not be issued for the actual amount of the rent, only up to the ceiling amount of a client's shelter allowance entitlement. Individuals would still need to find a means to pay the difference between the shelter allowance and the actual rent.

PROVISION OF SUPPORT SERVICES

Recommendation 14:
That the Region re-allocate up to 15% of emergency hostel funding for innovative approaches to service delivery.

Rationale:
To change direction from short term emergency hostel beds to more effective response to prevention and early identification, the Ministry of Community and Social Services has approved the redirection of up to 15% of emergency hostel funding to innovative prevention programs with the goal of reduced emergency hostel use.

The intent of the Ministry is to have fewer persons in emergency shelters and more persons in stable housing situations at no added cost.

The Region and other stakeholders, especially the members of the Alliance to End Homelessness, have expressed a willingness to work in this direction.

"Successful housing of homeless people depends on getting them connected and supported. So, when you give money, tie it so it has to be used to prevent homelessness, find homes and support people".
-Comment from Ottawa participant to the Provincial Task Force on Homelessness, March 25, 1998.

The Provincial Task Force on Homelessness recommended that *"the Province should provide flexibility that allows municipalities to direct a portion of emergency hostel dollars to strategies [that prevent homelessness]".*

Actions and Timeframe:

The Region, working with community agencies including emergency hostels, will develop a business plan that will include descriptions of initiatives, costs of the initiatives, the projected emergency hostel savings, and intended outcomes for specific target groups.

In redirecting emergency hostel funding to innovative prevention programs, the business case will analyze the impact of the reduction of funding available to emergency hostels. **Strategies will be developed to ensure that the community is able to maintain the necessary level of emergency hostel beds.**

The redirection of emergency hostel funding and the Homelessness Initiative Fund are complementary initiatives. The redirection initiative is specifically geared to moving persons from emergency shelters to permanent accommodation. The allocation of funding available from both initiatives could occur at the same time.

PROVISION OF SUPPORT SERVICES

Actions and Timeframe: (continued)

The Region will immediately initiate the development of the business case for the redirection of the emergency hostel funding in concert with community stakeholders for approval by the Ministry of Community and Social Services.

The amount available for redirection with provincial approval is approximately $1.2 M.

Outcome:

Decreased use of emergency hostel services and increase in the number of persons gaining access to housing and retaining it at no additional cost to the system.

PROVISION OF SUPPORT SERVICES

Recommendation 15:

That the Region fund a community agency to administer a Rent Bank to prevent individuals and families from becoming homeless.

Rationale:

Rent Banks are a prevention strategy to help individuals and families at risk of losing housing due to owing rent arrears by providing one-time financial assistance. Individuals and families living on a low fixed monthly budget cannot usually tolerate a sudden or unexpected financial expense. A Rent Bank could reduce financial stress and permit the individual or family to remain in their home.

The Connecticut Eviction Program first developed a Rent Bank program in 1989.

The Mayor' s Task Force for the City of Toronto recommended the creation of a city-wide Rent Bank to help individuals and families deal with short-term rent arrears. They recommended that access to the rent bank should be through designated multi-service agencies.

Actions and Timeframe:

The Region will review the results of a planned evaluation of the current Rent Bank pilot project in Ottawa-Carleton. The evaluation will assist in determining the amount of funding required, as well as, the most effective method of administering the funding to those in need (Fall 1999).

In Ottawa-Carleton, the Salvation Army has initiated a Rent Bank pilot project. The project is being evaluated by the Community Services Research Unit at the University of Ottawa. A report is due in Fall 1999.

Outcome:

Increased prevention of homelessness by averting eviction through the use of rent-bank funds.

PROVISION OF SUPPORT SERVICES

Recommendation 16:

That the Region petition the Province to restore cost-sharing for day programs to levels in existence prior to the removal of funding in 1995 .

Rationale:

Services provided through day programs are an integral part of the community strategy to support and maintain persons in permanent accommodation.

Day programs provide a range of services and supports needed by vulnerable and at-risk persons.

Day programs provide an opportunity for peer support beyond the service system network.

The Region has demonstrated the essential nature of day programs by not only maintaining funding for day programs at 100% Regional cost, but in fact increasing funding during the past 4 years. This recent pattern of regional funding does not absolve the Province from its responsibility to also fund day programs. If the Province restored its cost-sharing funding for day programs to 1995 levels, the Region could reallocate regional funding to other essential services and supports for persons who are homeless or at risk of becoming homeless.

Actions and Timeframe:

The Region to request that the Province restore cost sharing for day programs to no less than 1995 levels (Fall 1999).

Outcome:

Reduced risk of homelessness and increased support to persons who are currently homeless or at risk of becoming homeless.

The CMHC report entitled "Best Practices Addressing Homelessness" (March 1999) recognizes the contribution of day programs to the provision of services to persons who are homeless or at risk of being homeless.

Within the CMHC report, an Ottawa-Carleton day program, Centre 454 is reviewed, including its loss of budget post-1995 for clothing and bus tickets.

The Mayor' s Action Task Force Report for the City of Toronto stated that "*drop-ins need stable funding"* (p.45). Stable funding would allow for the provision of core services, including: food and hygiene, personal supports, crisis intervention, information and basic recreational programming.

The Provincial Task Force Report on Homelessness recommended that *"provincial program structures and funding mechanisms should be rationalized to support the planning and management role of municipalities"*. This is expected to include stable core funding for services at appropriate levels.

PROVISION OF SUPPORT SERVICES

Recommendation 17:

That the Region request that the Ministry of Health and other stakeholders provide funding to increase the community's capacity to provide convalescent, palliative and long-term care for people who are homeless or at risk of being homeless.

Recommendation 18:

That the Region request that the Ministry of Health and other stakeholders provide funding to increase the community's capacity to provide a full range of addiction services.

Rationale:

Being homeless compounds the effects of a debilitating health condition. Homeless persons who are ill or recovering from surgery often experience a longer or complicated convalescence. It may also mean that others are exposed to communicable diseases such as tuberculosis and influenza.

Individuals with severe addiction or substance abuse problems find themselves on the street, unable to access shelter services. Subsequently, they are unable to make use of addiction services while struggling with being homeless. For some individuals, this cycle leads to illness and death. The success of addiction services will be limited if the basic needs of an individual (e.g., food, shelter) are not met. Different models and approaches of addiction service delivery need to be considered to meet the needs of persons who are not safely or stably housed. The models need to contain a range of services from initial outreach to long-term support and be sensitive to individual need.

Actions and Timeframe:

The Region send a letter to the Ministry of Health outlining the need as reflected in the recommendation and rationale (Fall 1999).

Outcome:

Establishment of convalescent, palliative and long-term care for persons who are homeless.
Increased services to addicted homeless persons.

Over a three month period in 1998, Regional public health nurses found that 44% of persons served had a chronic health condition (including arthritis, diabetes, hepititis, cancer, HIV/AIDS, heart disease and a variety of other conditions).

Wright (1990) examined the health status of homeless adults in the USA and found that homeless persons suffered from physical disorders at elevated rates from housed citizens.

A study conducted by the School of Psychology at the University of Ottawa collected health status and substance use information on 230 persons who were homeless. The sample included 200 persons across all emergency shelters in Ottawa-Carleton and 30 persons who did not currently use shelters. Health status data will be used to inform the Health Status Report to be released by the Regional Health Department in Fall 1999.

PROVISION OF SUPPORT SERVICES

Recommendation 19:

That the Region facilitate the development of an interagency/hospital network for services to persons who are homeless or at risk of becoming homeless.

Rationale:

Hospitals, community health and public health agencies are serving many of the same clients who are homeless or at risk of being homeless, with limited service coordination. The organizations lack understanding of each other' s role in providing service. Most distressing to all involved is the lack of links between hospital and street services. One of the first functions of this network would be to share information in order to identify service needs, overlap, gaps and opportunities for development. The network would be responsible for monitoring changes to discharge practices and protocols and evaluate effectiveness of service coordination.

A 1998 Consumer Preference Survey conducted by Canadian Mental Health Association (Ottawa-Carleton Branch) found that 15% of respondents went to an emergency shelter or lived on the streets when discharged from hospital.

Although comparable information is not available for persons leaving correctional facilities, the Provincial Task Force on Homelessness notes that for persons who have completed their sentence, discharge planning is not a mandatory activity. They estimate that one-third of this population goes to emergency shelters upon release.

Actions and Timeframe:

The Region will set up a meeting with stakeholders from hospitals, community and public health agencies, including member organizations of the Alliance to End Homelessness and the Street Health Coalition. This network should build upon current efforts and initiatives of this kind (for example, Street Health Coalition). When coordinating discharge planning, representatives for correctional services will also be involved (Long-term Strategy).

Many agencies provide similar services to persons who are homeless. An important step in the coordination of service delivery is to connect these services to prevent gaps and overlap in service provision.

Outcome:

Improved coordination of services to homeless persons.

PROVISION OF SUPPORT SERVICES

Recommendation 20:

That the Region work with community stakeholders to review the requirements for a coordinated approach to providing community support services (including case management, outreach, and rapid response services).

Rationale:

The provision of community support services often varies according to client needs, location and time of contact. There is a recognized need to standardize the approach across Ottawa-Carleton's agencies and services. A needs assessment will identify the type and number of resources required, identify the components of a common assessment tool, standardized information requirements, and outcome measures across services.

A 1998 Consumer Preference Survey conducted by the Canadian Mental Health Association (Ottawa-Carleton Branch) found that:

- 75% of homeless persons surveyed indicated that they would use the services of an outreach worker; and
- 37% indicated that an outreach worker was a source of social support.

Actions and Timeframe:

The Region will immediately facilitate the development of a working group comprised of a broad range of community service providers and Regional representatives who provide support services. Efforts need to be made to draw in other service providers who provide outreach services and who may or may not currently be members of the Alliance To End Homelessness.

Currently Outreach Services in Ottawa-Carleton are being provided in the areas of mental health, physical health, addictions and housing for a range of different target groups.

The working group will ensure that: prevention strategies for all services and programs include rapid response capabilities for responding to crisis situations (e.g. risk of eviction, mental and/or physical health crisis), and that a protocol is developed, coordinated and communicated across services and programs (Fall 1999).

The working group will support efforts to promote health education and disease prevention for people who are homeless or at risk of becoming homeless (Fall 1999).

Outcome:

Improved client focused service delivery and coordination.

PROVISION OF SUPPORT SERVICES

Recommendation 21:

That the Region facilitate the development of a partnership between the Community Care Access Centre and community agencies in order to coordinate and improve service delivery to persons who are homeless or those at risk of becoming homeless.

Rationale:

People who are homeless often have medical needs that require home care services. These services are not readily available in emergency shelters. To date, a formal protocol has not been established between the Community Care Access Centre and Community Agencies to identify those persons in emergency shelters or drop-in centres requiring home care services. By building partnerships with community service providers serving homeless persons, the Community Care Access Centre can review services with a view to increasing access to services for residents of emergency shelters.

Actions and Timeframe:

The Region to organize a workgroup of community agencies, shelter providers and Community Care Access Centre (CCAC) representatives to develop a plan to improve home care services to homeless persons and those at risk of becoming homeless (Fall 1999).

Outcome:

Improved health care services provided to persons who are homeless and currently living in emergency shelters. Improved health status. Reduced demand on emergency shelter workers to provide services that are outside of their training.

As the Toronto Mayor's Task Force Report on Homelessness noted, "*people who do not have stable housing cannot generally receive home care*". However, they illustrate the flexibility that the Toronto CCAC has adopted in defining a person's "home" to allow services to be provided in emergency shelters and drop-in centres. They suggest that "*eliminating this service would be disastrous for people who are at risk of homelessness*".

In one of the work groups, the potential for a partnership of community agencies that provide services to persons who are homeless and the CCAC was identified. This partnership would provide training to CCAC staff to adopt other agencies' flexibility in their model of service delivery.

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(cited or consulted)

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Region of Ottawa-Carleton (April 1999). *Homelessness in Ottawa-Carleton*. Ottawa, ON: Region of Ottawa-Carleton.

Wright, J. D. (1990). Poor people, poor health: The health status of the homeless. *Journal of Social Issues, 46*, 49-64.

Background Research

Oosterman, Jo-Ann, Consultant, Inventory of Services.
Sorensen, Jean, Consultant, Research on Federal, Provincial and International Initiatives.

APPENDIX A

Key Informant Interview Questions

KEY INFORMANT INTERVIEWS

Questions

1. In the Environmental Scan that we have recently completed, we have found that homelessness is a complex problem rarely emanating from one identifiable cause but rather from a combination of factors attributable both to the individual and to society generally. Pressures in the housing and job markets, the social services and health care systems all contribute to the problem on a systemic level. Individual factors include alcohol and substance abuse, mental illness, developmental disabilities, age and the stability of family relationships. (taken from the Scan)

The causes of homelessness are reported to be:

- poverty
- lack of affordable housing
- involuntary loss of housing
- lack of community supports for people with mental illness
- lack of community supports for people with addictions
- breakdown of family and social networks (domestic violence, physical/sexual abuse, isolation and loss of support from family and friends, relocation/refugees).

Do you agree that these are the causes of homelessness or are there others you would add or some that you would remove, (why)?

2. *What are the **principles** that should guide the development of a client focused integrated community plan toward preventing and/or ending homelessness?*

3. *What are some innovative solutions that you have heard of, or can suggest to prevent and/or end homelessness in Ottawa-Carleton* ?

4. *What functions would have to be in place to develop and implement an integrated community plan?*

5. *How can the many partners, in government, community and private sector, work together to develop and implement an integrated community plan*?

6. Comments

APPENDIX B

Participants Involved in Consultation

COMMUNITY CONSULTATION

Thank you to the following people for their participation in the consultation activities.

		Consultation activities							
					Recommendation Workgroups				
Name	**Organization/Agency**	Alliance to End Homelessness Steering Committee	Community Forum	Key Informant Interviews	Enable Access to Housing	Housing Supply and Supports	Preventing Homelessness	Outreach and Assessment	Demonstrate Ownership
Michael Allen	United Way/ Centraide Ottawa-Carleton		◆						
Mike Anderson	Region of Ottawa-Carleton, Social Services, Hostel Workers Team			◆					
Caroline Andrews	University of Ottawa, Faculty of Social Sciences		◆						
Stella Andriopoulos	Centretown Community Health Centre		◆						
Elisabeth Arnold	City of Ottawa		◆						
Tim Aubry	University of Ottawa	◆	◆	◆					◆
Cathy Blauer	United Way/ Centraide Ottawa-Carleton		◆						
Norm Bourdeau	Toronto-Dominion Bank		◆						
Carol Bower	Options Bytown (Board)					◆			
Rob Boyd	YM-YWCA of Ottawa-Carleton Emergency Housing	◆	◆						◆
Susan Brandt	Ottawa Innercity Ministries		◆						◆
Garth Bulmer	Faith Partners		◆						
Sheila Burnett	Shepherds of Good Hope	◆	◆	◆					
Leighann Burns- Capagna	Harmony House			◆					
Jamey Burr	Canada Mortgage and Housing Corporation			◆		◆			◆
Donna Campbell	Royal Ottawa Hospital	◆		◆					
Marni Cappe	Region of Ottawa-Carleton, Planning & Development Approvals					◆			
Denis Carr	Centertown Citizens Corporation		◆			◆			
Lucy Carriere	Ottawa-Carleton Detention Centre						◆		
Diane Charbonneau	Human Resource Development Canada (HRDC)		◆						
Constable Jean Claude Charbonneau	Ottawa-Carleton Police Department			◆					

		Consultation activities							
					Recommendation Workgroups				
Name	**Organization/Agency**	Alliance to End Homelessness Steering Committee	Community Forum	Key Informant Interviews	Enable Access to Housing	Housing Supply and Supports	Preventing Homelessness	Outreach and Assessment	Demonstrate Ownership
Shawna Christensen	Ministry of Foreign Affairs		◆						
Anne Chornenky	Ottawa Salus Corporation		◆						
Catherine Coles	Alliance To End Homelessness		◆						
Rob Cook	HRDC		◆						
Sonja Cronkite	Psychiatric Survivors of Ottawa		◆						
Alex Cullen	M.P.P. - Ottawa West		◆						
Bev Cummings	CMHA		◆						
Rob Cushman	Region of Ottawa-Carleton, Health		◆						
Tara Deadman	United Way/ Centraide Ottawa-Carleton		◆						
Lyne Delorme	Community Care Access Centre							◆	
Roland de Montigny	Options Bytown		◆						◆
Marie-Josée Denis	Canada Mortgage and Housing Corporation		◆			◆			
George Devine	Devine and Associates		◆						
Akwiren:tha Diabo	Wabano Centre for Aboriginal Health			◆					
Marie France Dionne	Pinganodin Lodge			◆					
Bonnie Dinning	Region of Ottawa-Carleton, Health		◆				◆	◆	
Helen Durand Charron	Region of Ottawa-Carleton, Social Services		◆						
Glen Eby	Ministry of Community and Social Services (MCSS)		◆						
Laird Eddy	The Union Mission	◆		◆		◆			
Abebe Engdasaw	Region of Ottawa-Carleton, Health								◆
Kim Ennis	Region of Ottawa-Carleton, Social Services		◆				◆		
Dale Falkenhagen	Shelter Unlimited		◆						◆
Susan Farrell	University of Ottawa		◆					◆	
Darlene Fisher	CMHA		◆						
Oonaugh Fitzgerald	HRDC		◆						
Barb Flint	United Way/ Centraide Ottawa-Carleton		◆						
Carolyn Forbes	Sandy Hill Community Health Centre						◆		
Brian Ford	Ottawa-Carleton Regional Police		◆						
Sue Garvey	Cornerstone	◆	◆	◆		◆			◆
Janine Gates	Ministry of Health - Addictions			◆					

		Consultation activities							
					Recommendation Workgroups				
Name	**Organization/Agency**	Alliance to End Homelessness Steering Committee	Community Forum	Key Informant Interviews	Enable Access to Housing	Housing Supply and Supports	Preventing Homelessness	Outreach and Assessment	Demonstrate Ownership
David Gluzman	Ministry Of Community & Social Services	◆	◆						
Richard Goralczyk	Options Bytown resident, Cumberland								◆
Helen Gottfried	CMHA		◆						◆
Jean Goulet	Ottawa Roman Catholic Archdiocese		◆						
Shauna Graham	Region of Ottawa-Carleton, Health					◆			
Erik Gravelle	University of Ottawa Community Legal Clinic		◆	◆					◆
Elizabeth Greaves	Toronto Mayor's Homelessness Action Task Force		◆						
Roger Greenberg	Minto Developments Inc.		◆						
Joan Gullen	Gloucester Non-Profit Housing		◆						
Mary-Martha Hale	Centre 454	◆	◆						◆
Philip Hepworth	Shelter Unlimited		◆			◆			
Terry Hogan	Lifeline Centre for Addicted Survivors of Trauma		◆				◆		◆
Bertina Hogeterp	CMHA			◆					
Delma Holan	ROC, Social Services (Forward Family Shelter)				◆				
Linden Holmes	Ottawa-Carleton Housing		◆	◆		◆			
Diane Holmes	Region of Ottawa-Carleton Councillor			◆					
Rosine Kaley	Action Logement			◆					◆
Luc Ladouceur	Social Planning Council		◆						◆
Chris Laidler	Rooming House Landlords Association		◆						
Pierre Lalibere	Options Bytown resident, Cumberland								◆
Pierre Lalonde	MCSS		◆						
Chamroeun Lay	Catholic Immigration Centre		◆						
Marco Leboeuf	Action Logement		◆						
Michel Lefebvre	Options Bytown		◆			◆			
Luc Legault	Region of Ottawa-Carleton (ROC), Social Services	◆	◆	◆					
Constable Louise Logue	Ottawa-Carleton Police Department			◆					
Joanne Lowe	CMHA	◆	◆	◆		◆			

		Consultation activities							
					Recommendation Workgroups				
Name	**Organization/Agency**	Alliance to End Homelessness Steering Committee	Community Forum	Key Informant Interviews	Enable Access to Housing	Housing Supply and Supports	Preventing Homelessness	Outreach and Assessment	Demonstrate Ownership
Fernand Lozier	Health Canada		◆						
Sarah MacFadyen	CBC Radio		◆						
John Maracle	Pinganodin Lodge Inc								◆
Peter McKenna	Sandy Hill Community Health Centre			◆					
Colleen McKernan	United Way/ Centraide Ottawa-Carleton		◆						
Barbara McKinnon	Coalition of Community Health Centres			◆					
Mary McNamara	Region of Ottawa-Carleton, Health							◆	
Madeleine Meilleur	Region of Ottawa-Carleton Councillor			◆					
Carol Mierins	Ottawa Hospital - General						◆		
Nasim Moledina	Kanata Baptist		◆						
Terry Monger	Region of Ottawa-Carleton, Health							◆	
Lorena Morris	Caldwell Family Centre		◆						
Diane Morrison	The Union Mission	◆	◆				◆		
Wendy Muckle	Sandy Hill Community Health Centre	◆	◆	◆				◆	
Alex Munter	Regional Council - Kanata		◆	◆					
Maureen Murphy	Region of Ottawa-Carleton, Health		◆	◆					◆
Betty Neilin	Daybreak Non-Profit Shelter Corporation		◆						
Karina Parm	Options Bytown resident, Gilmour								◆
Richard Patten	M.P.P. - Ottawa Centre		◆						
Nicholas Patterson	Canadian Development Institute		◆						
Francoise Pelletier	Sophie's Hope		◆						
Delores Peltier	Guignol Non-Profit Housing		◆						◆
Donna Pettey	Canadian Mental Health Association (CMHA)	◆	◆	◆					
Joyce Potter	Region of Ottawa-Carleton, Housing					◆			
Doug Powell	Barrhaven United Church		◆						
Bill Prentice	Anglican Diocese of Ottawa		◆						
Brian Ricketts	CMHC								◆
Liz Roberts	Canadian Public Health Association						◆		
Rob Remus	John Howard Society						◆		
Bill Rooney	ROC, Initiatives to End Homelessness	◆	◆	◆	◆		◆		
Bruce Rooney	AIDS Housing Group		◆						
Charlie Saso	Canadian Paraplegic Association		◆						

		Consultation activities							
					Recommendation Workgroups				
Name	**Organization/Agency**	Alliance to End Homelessness Steering Committee	Community Forum	Key Informant Interviews	Enable Access to Housing	Housing Supply and Supports	Preventing Homelessness	Outreach and Assessment	Demonstrate Ownership
Cathy Savage	Salvation Army						◆		
Lynette Scobie	CMHA		◆	◆	◆				
Karen Sexsmith	City Living - City of Ottawa Non-Profit Housing Corporation		◆						
Steve Shapiro	Ministry of Municipal Affairs & Housing		◆						◆
Russell Sheridan	CMHA		◆						
Nick Sidor	Co-Op Housing		◆						
Lori Smith	Children's Aid Society		◆	◆					
Dave Smith	Business Sector Representative		◆						◆
Jean Sorensen	Consultant								◆
Jocelyne St. Jean	ROC, Social Services (Task Force on Poverty)		◆			◆			◆
June St Pierre	HRDC								◆
Dick Stewart	Region of Ottawa-Carleton, Social Services		◆	◆					
Trudy Sutton	Housing Help	◆	◆	◆			◆		
Olga Tasci	Co-op Housing Association Of Eastern Ontario		◆						
Judy Taylor	Region of Ottawa-Carleton, Health								◆
Bill Teron	Teron International Inc.		◆						
Robbin Tourangeau	Federation of Canadian Municipalities		◆						
Peter Trotscha	OCISO Non-Profit Housing		◆			◆			
Deborah Tunis	HRDC		◆						
Jeff Turnbull	University of Ottawa, Faculty of Medicine		◆	◆					
Dwane UnRuh	CMHA						◆		
Denise Vallely	Youth Services Bureau	◆		◆				◆	
Bert van den Berg	Ottawa-Carleton Friends of Schizophrenics		◆						
Ralph Vanderhook	Ottawa Hospital - Civic						◆		
Nityanand Varma	Ottawa-Carleton Immigration Services		◆						
Dan Viau	Options Bytown resident, Gilmour								◆
Howard Walker	Shelter Unlimited		◆						
Ken Watson	Lifeline Centre for Addicted Survivors of Trauma						◆		
Paul Weber	City of Ottawa Rooming House Response Team	◆		◆	◆		◆		
Wendy White	Ottawa Detox Centre			◆					
Janet Whillans	United Way/ Centraide Ottawa-Carleton	◆	◆						

		Consultation activities							
					Recommendation Workgroups				
Name	**Organization/Agency**	Alliance to End Homelessness Steering Committee	Community Forum	Key Informant Interviews	Enable Access to Housing	Housing Supply and Supports	Preventing Homelessness	Outreach and Assessment	Demonstrate Ownership
Colleeen Whiteduck	Aboriginal Women' s Support Centre			◆					
Stan Wilder	City of Ottawa					◆			◆
Libby Williams	Guignol Non-Profit Housing		◆						
Marsha Wilson	St Joe's Women's Centre		◆						
Connie Woloschuk	Salvation Army	◆	◆	◆			◆		
Beth Wood	Royal Ottawa Hospital, Outreach						◆	◆	
Leslie Worth	Ottawa-Carleton Regional District Health Council		◆						
Paddy York	CMHA		◆						
	ROC, Social Services, Hostel Team			◆					

APPENDIX C

Draft Ideas for Recommendations

Cross-referenced to number of final recommendation	Draft Ideas for Recommendations	Coordinate Services & System	Housing	Support Services	Prevention	Public Education/ Awareness	Advocacy
13	**The Region streamline the procedures and broaden the use and acceptance of the Letter of Last Month Rent Guarantee. (EA1)**			x			
11&12	**A) The Region promote the wider use of alternative forms of Direct Payments and Trusteeship Agreements where there is a history of inability to manage financial affairs or a severe health or mental health condition, as a support to securing and maintaining their housing. B) The Province of Ontario will enhance the ODSP automated system so that Direct Payments can be made for accommodation costs by early 2000. (EA2)**			x	x		
10	**The Region request that the Province raise the amount of the shelter allowance under the OW act to reflect actual housing costs. (EA3)**			x			
4	**The Region advocate to the Federal and Provincial governments to provide funding for additional rent supplements. (EA4)**			x			x
8	**The Region promote private market development of affordable housing for people who are homeless or at risk of becoming homeless by using a significant amount of its surplus properties as incentives to private or non-profit developers to build and/or operated affordable housing. (EA5)**		x				
17&18	**The Region will work with the Ministry of Health and other stakeholders to increase the number and type of supportive services for homeless individuals and those at risk of becoming homeless. A special effort should be made to increase the capacity of the community to provide convalescent, palliative and addiction withdrawal management & recovery services to those people who may become homeless or who are at a greater risk if these services are not available or are not accessible to them. (P1&10)**		x		x		
19	**Hospital discharge planners together with the Street Health Coalition, Shelter Providers and representatives from Correctional Services to develop and formalize a working protocol. (P2)**	x		x	x		
19	**The Region, in conjunction with the Alliance to End Homelessness and the Street Health Coalition, set up an inter-agency/hospital info network. (P3)**	x			x		
15	**The Region should fund and administer a city-wide rent bank with $400,000 annual budget to help individuals and families deal with short-term rent arrears. (P4)**	x		x	x		
1	**The Region will fund the development of a comprehensive information system and a rapid response capability addressing those in a housing crisis. (P5)**	x		x	x		

Cross-referenced to number of final recommendation	Draft Ideas for Recommendations	Coordinate Services & System	Housing	Support Services	Prevention	Public Education/ Awareness	Advocacy
20	**The Region and the Province should immediately fund a team of support workers to address the immediate crisis to avert evictions and provide housing support, to prevent homelessness. (P6)**	x		x	x		
20	**The Region should facilitate and fund the development of a coordinated group of housing help agencies, Community Health Centres, shelters, CMHA, the Region and other related agencies/organizations in order to prevent eviction and to provide housing supports. The group will share information, identify gaps and establish a culturally-sensitive intake function, and support or manage a team of support workers (see #5 above). (P7)**	x	x	x	x		
1	**Housing help programs need to be more systematic and coordinated, with improved accessibility to each other and the community. These programs should develop a centralized database and a coordinate information management system. Funding must be increased to accomplish this. (P8)**	x			x		
2	**The Province should facilitate across all departments development of and/or changes to policies and practices that will address the needs of people who are homeless or at risk of being homeless. (P9)**	x					x
6	**The Region investigate opportunities to develop the potential of at-risk young people by engaging them in activities at a designated centre, following the model of New York' s "The Door". (D20)**						
1	**The Region strengthen partnerships with inter-faith ministries (churches, synagogues, temples, mosques, and Aboriginal Elders) to increase opportunities for spiritual support for the homeless and at-risk for homelessness population. (D17)**	x				x	
1	**The Region establish a program to assist neighborhoods and communities (including churches, schools, business community, service clubs and community groups) to develop strategies to reach out to people at risk of homelessness. (D2)**						x
1	**The Region form one credible coordinating agency for homelessness that would coordinate and facilitate the implementation of a community plan, in collaboration with stakeholders, and would also facilitate development of partnerships, coordinate funding, manage information , and conduct research. (D3)**	x					
6	**The Region, with community partners, work to attract the corporate sector to work with (and fund) community ventures. (D4)**	x				x	x

Cross-referenced to number of final recommendation	Draft Ideas for Recommendations	Coordinate Services & System	Housing	Support Services	Prevention	Public Education/ Awareness	Advocacy
2	**The Region lobby for increased Federal and Provincial funding for affordable housing and more supportive housing. (D5)**		x				x
8	**The Region be proactive in identifying and developing surplus school and other public buildings that could be converted to affordable housing. (D6)**		x				
1	**Explore opportunities for youth-at-risk to use their talents, using the police youth centre as an example. (D7)**			x	x		
1	**The Region require that funded projects do ongoing evaluation, in order to keep learning what works best (to demonstrate effectiveness or the need for different methods). Measures of success should be broader indicators of social health, e.g., how long people stay housed. (D21)**	x					
1	**The Region establish a fund for research and demonstration projects on why people lose their housing and what can be done to prevent it. (D8)**	x			x		
1	**The Region commit to developing more diverse learning and employment opportunities leading to meaningful jobs. (D22)**	x					
4	**The Region re-instate successful programs like "Convert-to-Rent". (D9)**		x				
3	**The Region lobby Federal and Provincial government to increase support services to newcomers including assistance to refugee claimants to access housing. (D10)**			x			x
3	**The Region encourage the coordination of services for newcomers including refugees provided by Community Resource Centres and settlement agencies. (D11)**	x					
1	**The Region establish system of accountability to ensure that recommendations are acted upon and that regular public reports on progress are provided. Appointment of a facilitator is recommended. (D19**	x					
1	**The Region work with existing community groups (e.g. Alliance to End Homelessness, Street Health Coalition, University of Ottawa) to review, prioritize and implement the recommendations outlined in the report. (D18)**	x					
1	**The Region commit to dedicating more resources to preventing homelessness, e.g., job opportunities for young adults, and supports to families at risk of homelessness, e.g., rent banks. (D23)**	x			x		x
20	**The Region strengthen resources for health promotion and disease prevention amongst homeless and at-risk people including health education, and support to develop skills (e.g., young families, people on a medication regime). (D14)**	x		x	x	x	

Cross-referenced to number of final recommendation	Draft Ideas for Recommendations	Coordinate Services & System	Housing	Support Services	Prevention	Public Education/ Awareness	Advocacy
2	**The Region lobby Federal and Provincial governments to retain funding responsibility for social and supportive housing. (D15)**						x
6	**The Region foster more active involvement of private and community foundations in the development of affordable and supportive housing and services to homeless and at-risk people. (D24)**	x	x	x	x	x	x
2	**The Region lobby Federal and Provincial governments to retain overall accountability for the problem of homelessness. (D16)**	x					x
1	**The Region fund training and development programs for people within the service sector for the homeless (e.g. supportive housing staff, shelter staff, volunteers with various agencies). (D13)**	x				x	
1	**The Region ensure that policies and initiatives be put in place that address the needs of the Aboriginal community, examples of which include establishment and expansion of Aboriginal shelters, clinical detox centre, and establishing a liaison position between the Region and the Aboriginal community (this role would be met by a member of the Aboriginal community). (D12)**	x		x	x		
20	**The Region enhance the outreach services currently available in Ottawa-Carleton. (O1)**	x		x	x		
20	**The Alliance to End Homelessness form a working group (comprised of representatives from agencies that provide outreach services) to develop a standardized approach to outreach services used in Ottawa-Carleton. (O2)**	x		x	x		
20	**The Region broaden the escorted transportation service. (O3)**			x			
21	**Community Care Access Centres develop partnerships with community agencies in order to adopt a more flexible model of delivering services to persons who are currently homeless or at risk of being homeless. (O4)**	x		x	x		
21	**Community agencies that provide specialized services to persons who are currently or at risk of being homeless provide additional training to their service providers. (O5)**	x		x	x		
21	**Community Care Access Centres develop a team to provide outreach services for persons who are homeless or at risk of becoming homeless. These services would follow the standardized approach to services to be developed in Ottawa-Carleton. (O6)**	x		x	x		
1	**The Region support the education program (entitled "The Mythical Mental Health Act") delivered by the Ministry of Health as a training initiative to provide information about the appropriate application of the Mental Health Act. (O7)**	x			x		

Cross-referenced to number of final recommendation	Draft Ideas for Recommendations	Coordinate Services & System	Housing	Support Services	Prevention	Public Education/ Awareness	Advocacy
1	**The Region assess current and future needs for social housing. (H1)**		x				
7	**The Region fund a demonstration project to provide support services enabling low-income singles to integrate into seniors buildings and other existing stock (H2)**	x		x			
14	**The Region re-allocate 15% of emergency shelter funds to provide permanent housing solutions. (H3)**		x				
8	**The Region encourage existing non-profit and co-op groups to leverage their equity to produce more affordable housing. (H4)**	x	x				x
4	**The Region advocate for adequate reserve funds from the Province. (H5)**		x				x
8	**The Region provide exemption from development charges for non-profit housing. (H6)**		x				
8	**The Region sell or lease Region-owned land for $1 to community housing groups serving those at risk of homelessness. (H7)**		x				
8	**The Region encourage other municipalities , the federal and provincial governments (including the NCC) and other public institutions to also sell or lease land for $1 community housing groups serving those at risk of homelessness. (H8)**		x				x
5	**The Region access funds from other Ministries for additional housing (Health, MCSS). (H9)**		x				
5	**The Region create a Task Force on public/private partnerships in Housing to encourage the private sector to take a more active role in building and financing affordable housing. (H10)**	x	x			x	x
5	**The Region encourage lower-tier municipalities to appoint a facilitator to streamline and assist with development applications. (H11)**	x	x				x
7	**The Region explore the feasibility of providing capital grants to facilitate 200 units of affordable housing as demonstration projects in the year 2000. (H12)**		x				
6	**The Region continue to ensure that zoning bylaws provide opportunities for intensification in conformity with the Official Plan. (H13)**		x				
2	**The Region lobby the federal and provincial governments to re-introduce funding programs for development of new affordable and supportive housing projects. (H14)**		x				x
4&5	**Region explore the feasibility of delivering Rental RRAP within existing resources. (H15)**		x				
8	**The Region encourage municipalities to reduce demolition of affordable rental stock, similar to Regional policy regulating conversions. (H16)**		x				x
4	**The Region encourage CMHC to continue recent new guidelines for accessibility to RRAP funding for renovations to facilities to house people at risk of homelessness. (H17)**		x				x

Cross-referenced to number of final recommendation	Draft Ideas for Recommendations	Coordinate Services & System	Housing	Support Services	Prevention	Public Education/ Awareness	Advocacy
7	**The Region influence the nature of Provincial standards and maintain them following devolution. (H18)**		x				x
7	**The Region facilitate intensification of social housing properties. (H19)**		x				
7	**The Region promote adaptation and re-use of existing subsidized stock, particularly to address growing needs of low-income families. (H20)**	x	x				x
8	**The Region develop comprehensive inventory of land and properties for sale. (H21)**		x				
8	**The Region support adaptive re-use of non-residential buildings for housing. (H22)**		x				
6	**The Region support the creation of a business foundation to finance affordable housing for future use. (H23)**		x				
8	**The Region purchase land for affordable housing. (H24)**		x				
7	**The Region purchase affordable homes and rent to low-income households. (H25)**		x				
8	**The Region equalize property taxes for homeownership and rental properties. (H26)**		x				
5	**The Region establish a revolving fund to provide loans to convert residential and non-residential properties to affordable housing. (H27)**		x				
9	**The Region conduct a risk analysis to provide financial guarantees so community groups can purchase or construct affordable housing. (H28)**		x				
4	**The Region to encourage the Province to examine the impact of the removal of rent control and incentives to create more affordable housing. (H29)**		x				
20	**The Region provide range of supports (e.g. case management, outreach emergency supports, on-site supports, housing search and maintenance supports). (H30)**		x				
14	**The Region use per diem in alternate ways to provide more appropriate support. (H31)**		x				
5	**The Region ensure that Supports to Daily Living funding, if devolved to the Region, is maintained at the same amount and for the same purpose currently in place. (H32)**		x				
6	**The Region establish a network for social housing developers to assist others interested in development. (H33)**		x				
6	**The Region recognize achievements/best practices in the provision of affordable housing. (H34)**		x				
1	**The Region improve access to information to clients about affordable housing options. (H35)**		x				
1	**The Region implement an integrated service system manager function across the Health, Social Services, and Housing Departments.**	x					
1	**Sub-groups of the Alliance be used in providing leadership in the further development and implementation of the recommendations in the community action plan.**	x					

APPENDIX D

Inventory of Services

INVENTORY OF SERVICES — Services to people who are homeless or at risk of becoming homeless.

AGENCY NAME AND BRIEF DESCRIPTION	TYPE OF SERVICE PROVIDED/FOCUS	POPULATION SERVED	SPECIFIC OR UNIQUE SERVICE CHARACTERISTIC	SERVICE DATA			FUNDING SOURCE(S)	OTHER INFORMATION
				# OF PEOPLE SERVED IN 1998	# OF BEDS	# OF UNITS		
SHELTERS								
Shepherds of Good Hope- Hope Outreach Shelter for people who are at risk, and have been barred from other shelters Clients who are not ill enough to be in a hospital and not well enough to be on their own Many clients have mental illnesses	Provide support to move people to a more manageable mental state through medication management, meals, shelter, clothes, then support person to access hospital care, or other shelter or housing	**Men Women**	Offers shelter and support to those barred from all other shelters due to erratic, violent and/or unpredictable behaviour Can be long-term shelter for those who can not obtain the independence or support to find housing	6,263 people slept	20 (10 male 10 female)		Private donations Rents MOH	
Shepherds of Good Hope- Hope Recovery Shelter for those people barred from Detox and those people who are chronic alcoholics and/or substance abusers	Safe place to sleep it off Medical services Clothes Showers Laundry	**Men Women**		3,225 slept	10		Donations Per Diem	
The Union Mission Emergency shelter for homeless men	Food and Clothing for men and women Shelter for men only Life skills program Addiction counseling Boarding house for those in transition Health services	**Men Women Youth**	Addictions counseling Care for those who have mental illness Care for those with terminal illness who are homeless Transitional housing	34,805 overnight visits 142,000 meals served	110 (80 emergency 30 single occupancy rooms)		ROC United Way Community Donations	

Some services or programs could appear under several headings. However, for this inventory, agencies are placed under the heading reflecting the primary focus of the service. All program description and information is listed in the inventory exactly as it was provided directly by the organization.

AGENCY NAME AND BRIEF DESCRIPTION	TYPE OF SERVICE PROVIDED/FOCUS	POPULATION SERVED	SPECIFIC OR UNIQUE SERVICE CHARACTERISTIC	SERVICE DATA			FUNDING SOURCE(S)	OTHER INFORMATION
				# OF PEOPLE SERVED IN 1998	# OF BEDS	# OF UNITS		
SHELTERS								
YMCA-YWCA of/d' Ottawa-Carleton Emergency shelter overflow for: women, families, youth, men with mobility impairment/health concerns Long-term housing for single men and women Youth Housing	Emergency shelter for people living in poverty, with mental illness, with addictions, and/or new Canadians Long-term housing for people living in poverty, with mental illness, and or with addictions Independent living, life skills and case management for youth	**Men** **Women** **Youth** **Families**		Emergency shelter given to 519 people length of stay between 5-7 days	15 single 2 family		ROC Per Diem CAS CSC United Way Rental income	
Salvation Army Booth Centre Men' s Emergency Shelter Emergency shelter, food clothing to adult men who are homeless	Provides services to men with mental illnesses, addictions, living in poverty, discharged from institutions and men with complex mental/physical conditions	**Men**		2,539	97 plus 11 single occupancy beds		Salvation Army ROC Community donations	
Shepherds of Good Hope-Men' s Emergency Shelter Emergency Shelter providing a bed' meals, laundry and clothing	Outreach doctors, nurses, support workers and case managers are assessable through shelter as well as food and clothing	**Men**		22,708 people slept	74 plus over flow		Private donations ROC MOH	
Cornerstone Emergency Shelter for homeless single adult women	Services to women in crisis due to violence Counseling Supportive housing Services also provided to homeless women with addictions, complex mental/physical conditions, women discharged from institutions and women living in poverty	**Women**	Services provided to women in immediate crisis	395	43		ROC MCSS Community Donations	

				SERVICE DATA				
AGENCY NAME AND BRIEF DESCRIPTION	TYPE OF SERVICE PROVIDED/FOCUS	POPULATION SERVED	SPECIFIC OR UNIQUE SERVICE CHARACTERISTIC	# OF PEOPLE SERVED IN 1998	# OF BEDS	# OF UNITS	FUNDING SOURCE(S)	OTHER INFORMATION
SHELTERS								
Carling Family Shelter Social Services Temporary shelter for homeless families 14 rooms devoted to abused women and their children	Emergency shelter Emergency assistance Counseling Referrals Advocacy	**Families**	14 rooms devoted to abused women and their children	250 families (291 adults and 555 children) 41 other (adults and spouses)	208 max.	36-44	ROC Provincial Donations	
Forward Family Shelter Social Services Emergency Family Shelter	Secure temporary shelter in a supportive environment to homeless families Assistance in obtaining appropriate housing	**Families**		125 families (163 adults and 317 children)	as needed	21	ROC	
Salvation Army Booth Centre Young Men' s Shelter Emergency shelter, food, clothing and personal support for homeless male youth	Crisis Intervention Counselling Chaplancy Service planning/Case management Referral to community resources	**Male youth**	Youth are assigned to key workers for service planning/ case management Chaplancy	395	18		Salvation Army ROC Community donations	
Youth Services Bureau of Ottawa Carleton **Young Women' s Emergency Shelter** Provides food, shelter, and supportive counselling to young women 20 years and under The Shelter is open 365 days a year Admissions occur on a 24 hour basis and	Crisis intervention Assessment of needs Supportive counselling Group work Referrals	**Youth- young women age 12-20**		214	12	One 12 bed unit plus 2 for over-flow	ROC United Way MCSS	The Shelter works collaboratively with and depends upon it' s partnerships with a number of different community and agency services. Approximately 40% of young women accessing Shelter services are coping with mental health problems. The number of young women with serious mental health problems is increasing. Nearly all of these young women report having been in treatment facilities or group homes. Often their admission to the child welfare system was a consequence of the abuse they experienced in the familial home. Subsequently, many of the coping mechanisms they have learned threaten their personal health. For example, self-injury, drugs, alcohol, and abusive

length of stay is short term								relationships undermine their efforts to achieve healthy living and healthy relationships. These young women remain at the Shelter for longer periods and return a number of times because available community resources are insufficient to meet their safety needs, and do not offer the support they require to manage the tasks of daily life.
AGENCY NAME AND BRIEF DESCRIPTION	TYPE OF SERVICE PROVIDED/FOCUS	POPULATION SERVED	SPECIFIC OR UNIQUE SERVICE CHARACTERISTIC	# OF PEOPLE SERVED IN 1998	# OF BEDS	# OF UNITS	FUNDING SOURCE(S)	OTHER INFORMATION
TRANSITION HOMES FOR ABUSED WOMEN AND CHILDREN								
Harmony House Medium-term supportive housing for women and their children, who have survived violent relationships	Supportive housing	**Women and their Children**	Women must be referred by emergency shelter or other services for abused women	99 (44 Women, 55 Children)		16	100% Donations	
Interval House of Ottawa-Carleton Temporary shelter for women fleeing family violence and abuse, with or without children 24 Hour crisis line	Safe shelter, support in accessing services including Legal Aid and Housing, Counselling (formal and informal), Community referrals and Advocacy	**Women and their Children**	A 24 hour crisis line for abused women	281 (139 Women, 142 Children) 2236 crisis calls			MCSS	
La Présence **Temporary Emergency Shelter**for abused women and their children	Shelter Food Counselling Referrals Advocacy	**Women and their Children**	Parenting skills Educational and Spiritual counselling Smoke free environment	65	14		COMSOC Donations	
Maison d' amitié **Maison d' hébergement pour femmes violentées** Temporary shelter for abused women and their children	Emergency shelter 24 hour helpline Children' s program Follow-up services	**Women and their Children**	24 hour crisis line for abused women	153 Women and their Children Sheltered 1653 calls answered 667 from abused women			MCSS Fundraising	

Nelson House of Ottawa-Carleton Temporary shelter for abused women and their children 24-hour crisis line for women experiencing violence	Emergency shelter/Food Counselling Referrals Advocacy Information support and referrals through 24-hr crisis line	Women and their children		Sheltered 79 women and 67 children 1594 crisis calls answered	15		MCSS Donations Fundraising	

				SERVICE DATA				
AGENCY NAME AND BRIEF DESCRIPTION	TYPE OF SERVICE PROVIDED/FOCUS	POPULATION SERVED	SPECIFIC OR UNIQUE SERVICE CHARACTERISTIC	# OF PEOPLE SERVED IN 1998	# OF BEDS	# OF UNITS	FUNDING SOURCE(S)	OTHER INFORMATION
HOUSING								
Ottawa-Carleton Regional Housing Manages 10,000 rent geared-to-income housing units	Rent-geared-to-income housing for families, seniors and singles	**Men** **Women** **Youth** **Families**	Priority given to victims of violence, urgent cases, the homeless, youth age 16 & 17 and newcomers to Canada within the past 12 months	1,248 applicants housed		10,000	ROC Federal Gov.	Applications are made at the Social Housing Registry
Shepherds of Good Hope-Supportive Housing 24 Hour supportive housing program in two locations	Rooming house environment with support geared to individuals needs. Medication management, assistance with life-skills, in-house activities	**Men** **Women**	Provides long-term supportive housing. Tenants maintain and clean facilities			92 plus	ROC MOH Rents Private donations	
Centre 515 **Supportive Housing** For women at risk of homelessness, with chronic mental illness	On-site support and counselling Crisis intervention Meal plan provided Rent geared to income	**Women**	For women at risk of homelessness with chronic mental illness	27	20	20	MCSS	
Empathy House **Supportive Housing** Glencairn Supportive Residence & Grove Supportive Residence	Case management and Peer Groups at Glencairn Residence Emergency case management only at Grove Residence	**Women**		15	11		MOH (Glencairn0 Rents (Grove)	
City Living (City of Ottawa Non-Profit Housing Corp.) Affordable housing for all citizens with low and moderate incomes Rent geared to income housing is available for a majority of the units (permanent housing)	Rental units include: townhouses apartments (low rise and high rise) rooming houses various accessible units	**Men** **Women** **Youth** **Families**	City Living addresses all individuals' housing needs No support services exist within City Living	6000 total units approx.	201 beds-room- ing houses approx.	5799 units-every-thing else) approx.	Federal and/or Provincial funding Rents received from tenants	City works with support agencies such as Youville, CMHA, Ottawa Salus, etc using block leasing or unit by unit agency leases.
Daybreak Non-Profit Housing Supportive housing for single men and women with very limited income who are	Minimal support so that tenants can maintain independant and permanent housing	**Men** **Women**	3 homes- minimum supportive housing for men	45	35 (25 for men		CMHC MMAH/ ROC	

often living with mental illness, addictions and/or abuse issues			1 home- supportive housing for women		10 for women)		MCSS Community donations	

				SERVICE DATA				
AGENCY NAME AND BRIEF DESCRIPTION	TYPE OF SERVICE PROVIDED/FOCUS	POPULATION SERVED	SPECIFIC OR UNIQUE SERVICE CHARACTERISTIC	# OF PEOPLE SERVED IN 1998	# OF BEDS	# OF UNITS	FUNDING SOURCE(S)	OTHER INFORMATION
John Howard Society of Ottawa Kirkparick House Residence for men released from a correctional facility	Halfway house, day parole, shelter, meals, counselling and liaison with parole officer	**Men**	Provides effective, just and humane responses to crime and its causes	45	22		Correctional Services Canada	
Options Bytown Non-Profit Housing Corporation Permanent housing for men, women and couples who are "hard to house" Rent is geared to income Staff on duty during day to provide support services	Counselling, life skills, education for people living in poverty, with mental illnesses with addictions, and/or discharged from institutions	**Men** **Women**	Building designed to support independent living for people who are considered "hard to house" Provides space and support to the Bytown Art Group	172 approx.	122	101	MCSS MMAH Donations	
Ottawa Salus Corporation Provides Rehabilitation Services (housing and support services) for adults with a mental health problem	Case management Life skills teaching Recreology Supports to housing	**Men** **Women**	Provides services to people with mental health problems	158 plus support services for the 68 people in the units and to 90 other people who don' t live in Salus Housing		68	MOH CMHC Fundraising	
SUPPORTIVE SERVICES								
Aboriginal Women' s Support Centre Aboriginal counselling services, community referrals, Food bank, Elders Guidance, support groups Children' s programs	Aboriginal Specific Family Violence services that have a holistic model	**Women** **Youth Families**		3,876			MCSS OWD ROC Youth Initiatives Brighter Futures Program	AWSC is seeking capital funding for a 24 hour shelter AWSC works with Homeless people
Action-Logement/ Action Housing Assist absolute and relative homeless people to obtain and maintain safe affordable housing Prevention for families and individuals at risk of becoming homeless	Counseling Housing support Prevention and Advocacy for: people living in poverty, with mental illness and/or with addictions, victims of abuse, newcomers, youth (16-17 yrs), people living in	**Men** **Women** **Youth** **Families**	Satellite office of legal clinic Bilingual services (reception and all case workers)	1235 families (approx. 3087 individuals based on 2.1 members per family)			MMAH ROC City of Ottawa	

Maintain housing registry for affordable housing in the private market (listing available to shelters through network)	institutions, homeless people, people with physical disability, with chronic illness and/or terminal illness							

				SERVICE DATA				
AGENCY NAME AND BRIEF DESCRIPTION	TYPE OF SERVICE PROVIDED/FOCUS	POPULATION SERVED	SPECIFIC OR UNIQUE SERVICE CHARACTERISTIC	# OF PEOPLE SERVED IN 1998	# OF BEDS	# OF UNITS	FUNDING SOURCE(S)	OTHER INFORMATION
Housing Help Assistance obtaining and maintaining housing Assistance with housing emergencies, evictions, landlord/tenant problems	Casework/intervention for people living in poverty, facing barriers due to mental or physical illness, addictions, and abuse Updated listings of private market rental units	**Men** **Women** **Youth** **Families**		2,973 people Casework services 17,281 Information & assistance at front desk			MMAH ROC City of Ottawa	
Lowertown Resource Centre Community and social services to the residents of Lowertown mostly in low income families	Information and referral services Crisis intervention Counselling services for individuals and families Home support Collective kitchens Community development program	**Men** **Women** **Youth** **Families**	Provides services to victims of abuse, seniors, immigrant families and children	2,500			ROC City of Ottawa	
Operation Go Home Assist runaway youth in crisis, to return to their family or to connect with the appropriate agencies for assistance	Client advocacy Community outreach Prevention in schools Referral Counselling	**Youth**	Clients are youth who have runaway from home, and often have dysfunctional families Clients may also have addictions	3117			Privately funded	
Odawa Native Friendship Centre	Family Support Healing and Wellness Food Bank Counselling Pre-natal Support	**Men** **Women** **Youth Families**	Aboriginal Perspective	12			Fed, Prov ROC City of Ottawa Businesses	
Ottawa Innercity Ministries (OIM) Interdenominational Christian organization dedicated to meeting the emotional, physical, social and spiritual needs of the less fortunate in down town Ottawa	Street outreach, Evangelism, pastoral care, Life skills and in-service education, Counselling (addiction, anger management, trauma) Home, hospital, and prison visits Walk in clinics and drop in centres Prayer walks and prayer ministry Mentoring program, Urban intervention training	**Men** **Women** **Youth** **Families**	Emphasis is primarily on providing quality services versus volume of client served. Services are driven by attraction to meet the ever changing needs of our clients	5,000 approx. contacts			Churches Businesses Individuals Charitable foundations (OIM does not receive government funding)	We pray, wait, and walk as we serve. It is a privilege and honour to be able to serve the Lord among those who experience adversity in various facets of life. We are thankful that we have been called to do our part.

	for volunteers Crisis intervention							

				SERVICE DATA				
AGENCY NAME AND BRIEF DESCRIPTION	TYPE OF SERVICE PROVIDED/FOCUS	POPULATION SERVED	SPECIFIC OR UNIQUE SERVICE CHARACTERISTIC	# OF PEOPLE SERVED IN 1998	# OF BEDS	# OF UNITS	FUNDING SOURCE(S)	OTHER INFORMATION
Pinganodin Lodge Outreach Outreach program for homeless Aboriginal people	Spirituality Offering Pinganodin Lodge services	**Men** **Women** **Youth**	Outreach to Aboriginal people				Pinganodin Lodge	New program recently started
The Food Bank Solicits, collects, sorts, processes and distributes emergency food to over 70 food agencies in Ottawa-Carleton and Western Quebec	Provides food to soup kitchens, school breakfast programs, shelters, recovery homes, drop-in centres and grocery programs	**Men** **Women** **Youth** **Families**		27,000 to 30,000 **per month** on average			Community donations ROC	The Food Bank relies almost exclusively on community support. Less than 1% of the food and financial support comes from government services
The Hospitality Kitchen A supper program staffed by a devoted group of volunteers who provide a nutritional meal in a safe non-threatening environment to all who come to our door	Hot meal served daily to all who come to our door People have an opportunity to chat with volunteers and everyone is made to feel welcome	**Men** **Women** **Youth** **Families**	We serve all who come to our door.	20,923			Donations from Church parishioners Food Bank (No Funding)	
Canadian Red Cross	Vision Care- provides prescription glasses to people with inadequate financial resources First Aid for Youth- First Aid workshops for street youth to increase their skills and self-esteem Cold Weather Program- provides knitted mittens, hats, scarves, or socks to people who are homeless, street youth and or living in shelters Community Assistance Program- provides advocacy, referrals, crisis intervention, short term counselling Abuse Prevention Services- Educational programs aimed at breaking the cycle of abuse, neglect and interpersonal violence	**Men** **Women** **Youth** **Families**					Special events Donations Program revenue Bingo' s/ Nevada United Way	
Salvation Army Booth Centre Community & Family Services	Emergency assistance with food, clothing, furniture, rent, utilities.	**Men** **Women**		412 families 492 singles (emergency assistance) 143 families			Salvation Army	

Emergency assistance with food, clothing, furniture, rent, utilities. Collective Kitchens, Christmas toy centre and Christmas vouchers, Summer camps.	Collective Kitchens. Christmas Toy Centre and Christmas vouchers. Summer camps.	**Families** **Children**		(collective kitchens) 7,668 kids (Christmas toys) 97 kids (to summer camp for one week)				

AGENCY NAME AND BRIEF DESCRIPTION	TYPE OF SERVICE PROVIDED/FOCUS	POPULATION SERVED	SPECIFIC OR UNIQUE SERVICE CHARACTERISTIC	SERVICE DATA			FUNDING SOURCE(S)	OTHER INFORMATION
				# OF PEOPLE SERVED IN 1998	# OF BEDS	# OF UNITS		
SUPPORTIVE SERVICES								
John Howard Society of Ottawa Diversion Program and Intake/Outreach Program	Short term, skill-based intervention to individuals facing a minor criminal charge Crisis Intervention Counselling in areas of Anger/Stress management, Pro-social thinking, decision-making skills and problem solving Housing Social Services Appointments Financial Needs Retaining identification -Collateral Contact with Police	**Men** **Women** **Youth** **Families**	Eliminate barriers that ex-offenders face by travelling into the community and acting as a liaison between Community Service provider and ex-offender	690 (Intake/ Outreach program) 63 (Diversion program)			United Way	The John Howard Society has other programs such as **Positive Steps** (family violence), **Counterpoint** (anti-criminal thinking) **Hire Power** (Employment Assistant Services) whose number are not included in those provided
John Howard Society of Ottawa Literacy Program Providing free, confidential educational guidance, assessment and literary tutoring, one-on-one arrangement	Reading Writing Basic Math Basic computer skills Lifeskills Workshops	**Men** **Women** **Youth**	Services provided to inmates at OCDC as well	757 contacts			Ministry of Education and Training	
John Howard Society of Ottawa Youth Employment Resource Centre Employment counselling and preparation for youth	Resource room (staffed) Individual and group employment counselling Resume preparation Job listings Summer job programs Internet access	**Youth**	Services for unemployed, out of school youth aged 16-24	1,600			Ministry of Education and Training	
The Elizabeth Fry Society of Ottawa Services offered to women, including young women who are or who are at risk for coming into conflict with the law	Counselling Support Groups Advocacy, assistance, information and support during the court process Pretrial Diversion for first time offenders Counselling, telephone support, recreation and	**Women** **Youth (young women)** **Families**	Services are related to dynamics of root causes of crime	1,100 (does not include residence)			United Way ROC Sol-Gen.: Corrections Canada	Currently have a waiting list for support groups Also currently trying to program a house for use of women at risk. This house also has a waiting list

	discharge planning for provincially and federally incarcerated women							

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SUPPORTIVE SERVICES								
Social Services **Residential Care FacilitiesProgram** provides financial assistance and personal support to clients needing various types of housing depending upon their special needs and circumstances. Assistance is provided to eligible clients	Long stay in care and supervision Contract for care and supervision to group of eligible clients including: frail elderly, psychiatrically disabled, physically disabled	Men Women	Financial Assistance Assessment of needs re activities of daily living and ongoing case management Referrals and advocacy	765 daily averages (approx.)	815	24 residential care facilities	Emergency Hostel Funding Special Assistance-O.W.	
Social Services **Emergency Shelter Accommodations**	Shelter services	Men Women	Financial Assistance Assessment of needs Support with problem solving and securing and keeping permanent address Referral and Advocacy		349 in several shelters - Almost 100% occupancy on a yearly basis		Emergency Hostel Funding Special Assistance-O.W.	
Social Services **Transition Homes**	Financial assistance, support/problem solving, ongoing case management, referrals and advocacy, help to find permanent housing	Women Youth Families			64 in 4 locations	11 in 1 location	Block Funding OW/ODSP for personal needs and special assistance	
Social Services **Rooming Houses**	Financial assistance, ongoing case management re: maintaining rooming accommodations, referrals, advocacy, support	Men Women	These rooming homes have superintendents that support clients in these privately owned and operated accommodations				OW ODSP	Current estimate ： 250 rooming houses in the Region representing an estimated 2,500 individual rooms (Environmental Scan, April 1999).

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SUPPORTIVE SERVICES - MENTAL ILLNESS								
Assertive Community Treatment Team (ACTT) ACTT is a self-contained clinical team (including psychiatrist, social workers, nurses, recreologist, Occupational Therapy, and vocational rehabilitation), which provides services to clients with a severe and persistent mental illness **Community Rehabilition Program (CRP)**	ACCT is responsible for providing direct needed treatment, rehabilitation and support services for clients CRP provides intensive case management and long term rehabilitation services	**Men** **Women**	Services are for people with serious persistent mental illness Provides long term care Emphasis: outreach relationship building individualization of services	160 on average			MOH	Services are provided through Brockville Psychiatric Hospital
Canadian Mental Health Association Ottawa-Carleton Branch Provides support to individuals with a serious mental health problem who are homeless or at risk of becoming homeless	Provides direct services through outreach and long-term support programs to care for clients in a way that maintains their physical, social, cultural, and emotional well-being; assisting clients through the process of dealing with the mental health legal, medical and welfare systems Other services include social action, education and training as well as a volunteer community support program and a service brokerage project for people with a dual diagnosis (developmental disability and a mental health problem)	**Men** **Women** **Youth**		600 (180 long-term case man- agement 420 through outreach services)			MOH United Way ROC	
Causeway Provides a supportive community for adults with a mental illness. The program is work oriented with a social recreational component. The purpose of Clubhouse is to assist clients in rehabilitation. The process helps people lead more	Supported education Supportive employment Street outreach Member outreach Social, recreational, vocational and hands-on-training	**Men** **Women** **Youth**	Focus of rehabilitation program is work-related and is designed to help clients from a holistic perspective. The client chooses what he/she wishes to do in the	457			ROC MOH MCSS	

meaningful lives.			program					

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SUPPORTIVE SERVICES - MENTAL ILLNESS								
Psychiatric Survivors of Ottawa (PSO) A peer support organization directed and run by psychiatric consumers/survivors	Peer support groups Social activities Educational activities Advocacy	**Men** **Women**	Directed and run by psychiatric consumers/survivors	200			MOH	PSO' s goal is to have individuals who have experienced the mental health system, support fellow consumer/survivors. We support each other through peer support, peer advocacy, peer education and social activities
Royal Ottawa Hospital Emergency Crisis intervention in shelters, drop-in centres and boarding homes requesting intervention Case Management to severely mentally ill who are homeless or at risk of homelessness Partnership Specialized Nurse Practitioner, Psychiatrist and Sandy Hill Community Health Centre	Mobile Outreach team of health care Professionals provide crisis intervention, assessment, counselling, support and linkage to other services for chronically mentally ill. Addiction counsellor provides counselling and linkage to service. Case managers support clients to increase level of functioning in community and ability to use available services. Many services are indirect to agency- staff serving client e.g. shelters	**Men** **Women** **Limited involvement with youth** **Families are not a targeted population**	Provides services to people with severe mental illness		No dedicated beds for this populati on		MOH	The ROH provides psychiatric services much beyond those listed in this inventory. The ones mentioned are targeted to the relative and absolute homeless with severe mental illness. We continue to look for ways to improve the delivery of services to better meet needs of this population.
SUPPORTIVE SERVICES - ADDICTIONS								
Billy Buffet' s House of Welcome Recovery Home for men with drug and or alcohol problems	One on one counselling 24 hour supervision Mandatory AA or NA meetings Food Laundry Recreation	**Men**	A compassionate last resort for addicted men	76	12		Charity donations Bingo (Side Door Bingo Hall) MOH - Substance Abuse Bureau	
Empathy House: **Treatment Centre** Long term residential treatment for	Counselling Group therapy	**Women**	Service to women with concurrent disorders (eating disorders, mild	41	10		MOH United Way Fundraising	

women with addictions to drugs and alcohol			psychiatric problems)					

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SUPPORTIVE SERVICES - ADDICTIONS								
Harvest House/Sanctuary Long-term residential treatment program for men and women with addictions	Addiction counselling Supportive housing for people with addictions who are living in poverty, with mental illnesses, and or discharged from institutions	**Men** **Women** **Youth**	Spiritually oriented program. Offers education and employment	135	31 (24 male 7 female)		Fundraising MOH	
Newgate 180 (formerly Gateway House) Residential treatment service for employed men with substance abuse problems	Assessment Work-site intervention Training Group and individual counselling Follow up	**Men**	Client profile- men from the workplace	29	11		Fee for service MOH	No waiting list
Maison Fraternité - **Résidence des Femmes** Residential Recovery home for francophone women with addictions	Addiction counselling Crisis intervention Advocacy Referrals	**Women**	For francophone women	45 à l' interne (in-patient) 15 à l' externe (out-patient)	10	1	OHIP Services charges for those who receive salary insurance 15./day	
Salvation Army **Anchorage Program** Short term supportive housing program for men with addictions	Short term residency and Addictions counselling for men who are homeless or living in poverty	**Men**		163	24		Salvation Army Community donations MOH	
Sobriety House Now a 21 day residential treatment facility. Prior to Jan. 99, it was 35 days	Group work One on one counselling Live in education	**Men**	Men from 16 years old.	126	14		MOH Bingo Donations Fundraising	Must be 3 days clean
James Street **Recovery Program** Recovery home for women	Addictions counselling Crisis intervention Group dynamics	**Women**		105 residents (intake) Number of	14		MOH	Women requesting admission are required to complete an assessment and 3 day/72 hr detox.

with addictions	3 month residential stay, extensions as requested with aftercare for 1 year			assessments done not available				

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SUPPORTIVE SERVICES - ADDICTIONS								
Pinganodin Lodge Residential Treatment for Aboriginal Men recovering from drug and alcohol abuse	Integration of Aboriginal spirituality with contemporary clinical approaches	**Men** **Youth**	For Aboriginal Men	1,600 approx.	12		Archbishop Aboriginal Health and Wellness ROC Grey Nuns	
SUPPORTIVE SERVICES - HEALTH SERVICES								
Carlington Community and Health Services Integrated social and health services for people who are homeless and those at risk of becoming homeless Outreach ACT Team supporting people who are chronically mental ill	Crisis intervention Home support Information Referrals Health services Employment services	**Men** **Women** **Youth** **Families**		25,186 clients served			MOH MCSS ROH	
Centretown Community Health Centre Medical care including walk-in services, outreach to shelters and drop-ins, and social services support	Counselling Home support Health services Information and referrals	**Men** **Women** **Youth** **Families**	Services to people with complex physical/mental condition, people with addictions and newcomers to Canada	not available			MOH ROC MCSS	
Pinecrest Queensway Health and Community Services Medical and crisis intervention services to Family	Crisis intervention Home Support	**Men** **Women**	Primary care to: homeless people				ROC MOH	

Shelters; Outreach programs to people at risk of becoming homeless; Respite care Services to children and youth: Enrichment and respite drop ins for under 5 years; After 4 (new) Youth groups re: crisis management (new) Program Against Abuse: Individual counselling and groups; Somali Outreach	Information and referrals Health services Family support- home visiting following discharge Respite for children from shelters	**Youth** **Families**	people living in poverty people who are immigrants and refugees Services for children under five				MCSS Donations	

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SUPPORTIVE SERVICES - HEALTH SERVICES								
Region of Ottawa-Carleton Health Dental Clinics Three regional dental clinics provide services to social assistance recipients and low income children under the age of 14.	Basic dental service for children and emergency dental service for adults Dental services for social assistance recipients	**Men** **Women** **Youth Families**		25,000 approx.			Provincial ROC	
Region of Ottawa-Carleton Health Environmental-Health/ Communicable Disease Division	Inspection of food preparation and Storage facilities in shelters Food safety training for shelter food handlers Inspection of food bank Response to complaints/concerns regarding substandard housing issues and health hazards Inspection of rooming houses	**Men** **Women** **Youth Families**					ROC MOH	
Region of Ottawa-Carleton Health HIV Prevention Program **The SITE Needle Exchange Program** HIV Prevention program for individuals who are using injection drugs and other people at risk for HIV and bloodborne infections. Harm reduction approach to assist individuals to improve or maintain their health.	New needles/syringes in exchange for used ones Referrals to Detox, treatment or other supports Condom distribution Testing for HIV, hep B and C Vaccinations for hep B, Flu, Pneumococcal pneumonia Harm reduction Health Education Counselling	**Men** **Women** **Youth**	Services for people who inject drugs, are sex trade workers and/or are street-involved	FOR SITE PROGRAM ONLY 8,354 visits #of needles exchanged- 135,234			ROC MOH	Also provide training to other professionals: • needle exchange program • safe needle disposal • universal precautions
Region of Ottawa-Carleton Health Street Health Program Provides outreach services to clients who are homeless, unstably housed or using shelters and drop-ins, with the goal to: improve client' s access to health care, provide health education and advocate on	Individual and group health education sessions First Aid Communicable Disease control including: TB screening and follow up of active cases influenza and pneumococcal pneumonia immunization screening of STD' s	**Men** **Women** **Families** **Youth**	1217 people served				MOH ROC	work collaboratively with the ROC Healthy Sexuality Program and HIV Prevention Program providing services to inmates at the Regional Detention Centre

behalf of clients	hep B & C follow up of cases HIV - partner follow up							

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SUPPORTIVE SERVICES - HEALTH SERVICES								
Region of Ottawa-Carleton Health Healthy Sexuality Program Sexual Health Outreach	Extension of sexual health services from Sexual Health Centre on Clarence St. Provides physical street outreach to individuals (mostly youth) at risk of STDs/HIV and pregnancy Provides sexual health education, counselling, testing and treatment services in partnership with the Youth Services Bureau drop-in on Besserer St.	**Men** **Women** **Youth**						Jan - April 1999: Sexual Health Outreach team has 30 clients registered and has had 50 encounters recorded Average age is 17.6 years Population served includes sex trade workers, individuals in and out of detention centres
Sandy Hill Community Health Centre Health care and social service, addiction treatment service, walk-in clinic **OASIS**- Satellite clinic for people at risk for HIV infection or who have HIV/AIDS, providing health care, support groups, outreach, counseling, laundry, collective meal preparation and referrals	Crisis intervention Home support TB testing Services to Street youth	**Men** **Women** **Youth** **Families**	Satellite Clinic for people living in poverty, using injection drugs and or people living with or at risk for HIV/AIDS	12,000 approx.			MOH MCSS AIDS Bureau, Ontario Substance Abuse Bureau, ROC	Provides crisis services through social services and food programs Also provides some support to rooming house tenants in neighbourhood
Sandy Hill Community Health Centre- Outreach Out reach services to shelters and day programs to assist homeless clients in accessing health care	Street Outreach provides practical assistance to clients assisting them in accessing food, housing, health care, transportation Health card program to assist the homeless in obtaining and retaining health card Support groups Crisis services	**Men** **Women** **Youth** **Families**	Prenatal nutrition Program for pregnant street youth Parenting drop-in for youth Hand in Hand- Support Group Provide space and support to Bytown Art Group Good Day Workshop Men' s Sexual Abuse Survivors Group				MOH MCSS AIDS Bureau, Ontario Substance Abuse Bureau, ROC	

			Rideau Street Youth Enterprises Street Health Coalition Youth net					

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Somerset West Community Health Centre Integrated health and social services for homeless and people at risk of becoming homeless	Crisis intervention, Advocacy, Addictions Services, Case Management, Information and Referrals, Brief Counselling, Employment Services, Health Care, HIV Testing/ Counselling Outreach/Conflict Resolution to Rooming Houses, Practical Assistance (i.e.: Health Cards), Street Health Outreach to Injection Drug Users, Health Outreach to Forward Avenue Family Shelter, South East Asian Outreach Services, Community Development/Housing Employment Services Outreach	**Men** **Women** **Youth Families**	Services provided to Chinese, Vietnamese, Thai, Laotian, Cambodian, and Italian (as well as English and French)	45-60 people per day at risk of being homeless			MOH MCSS ROC City of Ottawa	
South-East Ottawa Centre for Healthy Community Health and social Services for residents of South-East Ottawa Community Target vulnerable populations	Primary Health care Health Promotion Crisis Intervention Counseling Home support Community Development Youth Programs Advocacy Information and referrals	**Men** **Women** **Youth Families**	Serve people from different cultural backgrounds and languages	3,000 approx.			MOH MCSS ROC City Of Ottawa Federal Grants	Having recently relocated to Bank and Riverside - near the transit station we may be more accessible to this population
University of Ottawa Health Services to relative and absolute homeless people in Ottawa-Carleton	Specialized for: People living with HIV/AIDS and People who use injection drugs	**Men** **Women** **Youth** **Families**		65,000 client visits			Auto-financed facility, Fee for service-OHIP	
DAY PROGRAMS/DROP IN CENTRES								
St. Luke' s Lunch Club and Drop-in Centre Day Program (drop-in) for men women and children. Meals provided 8 am - 12 noon	Daily - Light breakfast, noon meal, referrals, recreation, practical support, personal support, addictions counsellor, mailing address, phone/messages, free haircuts Weekly -	**Men** **Women** **Youth** **Families**	Clients volunteer daily to: set-up, take-down, cook, wash dishes and pots	40,000 visits approx. In 250 days			ROC/Day Program Donations Fundraising	Wheel chair accessible

	SITE Social Worker, Nurse Practitioner Opportunity to volunteer							
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Caldwell Family Centre **Day Drop-in Program**for adults providing emergency assistance to people living on low income Emergency food program	Practical support Personal support Referrals ESL program Sewing classes Computer training Recreation Emergency food	**Men** **Women** **Families-** **(**indirectly through food program)	Many of the people accessing the Drop-in are mentally challenged	30,150 approx. Through Emergency food program, Day Drop-in and ESL classes			ROC Immigration Canada Fundraising Donations	Services are provided at/through two housing units
Centre 507 Drop-in **McLeod-Stewarton United Church** Centre 507 is a drop-in centre that serves people who are disadvantaged both economically and socially. Homelessness, mental illness, addictions, health concerns, chronic unemployment, extreme poverty, and physical abuse are examples of issues faced by our participants Community Economic Development Project	Supportive listening Outreach Needle exchange Employment programs Education concerning health care housing and lifeskills Advocacy Referrals Problem solving Pastoral counseling Recreation and Special events Emergency telephone Clothing vouchers Coffee and snacks	**Men** **Women**	Community Economic Development project seeks to provide participants with long term employment opportunities. This is accomplished through: Individual and group job search workshops Temporary placements in local businesses Special community projects and micro-enterprise An odd job bank Additionally it is the goal of the project to give participants an opportunity to interact with the community in a positive way to reduce and eliminate societal barriers	19,472 visits			ROC United Church of Canada Centretown Churches Social Action Committee (CCSAC) The Community Foundation The Ontario Training and Adjustment Board(OTAB) Personal and Corporate donations	
Centre 454 **Anglican Social Services Centre** **Drop-in Centre** for men and women socially and economically disadvantaged, to facilitate their growth to function to the best of their ability in the community	Counseling Recreation Employment support Addiction program Education through Day and Health programs	**Men** **Women** **Youth Families**	Provides services to people who live in poverty, are homeless, have mental illnesses and/or have addiction problems	2,235			ROC Anglican Diocese of Ottawa Fundraising	

Shepherds of Good Hope- **Day Drop-in** Friendly place to watch TV, play cards, hang out	Visits from outreach workers, nurses and social workers Shower, clothes Medication management Phone, hair cuts	**Men** **Women**		35,367 visits			Private donations Rents MOH	

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DAY PROGRAMS/DROP IN CENTRES								
Shepherds of Good Hope-Sophie' s Hope Drop in for women who may live close to the streets	5 Day a week drop-in (evenings 4-12 pm) Provides a safe place for women to be and to access community resources Support Movies Phone	**Women**	Provides resources to women who may be at risk for HIV Women who are sex trade workers Women who use injection drugs	3366			Private donations	
St. Joe' s Women' s Centre Day Program for homeless and marginalized women in a safe, non-judgmental environment	Nutritional breakfast and Hot Lunch Personal and Practical Support HIV testing and counselling Advocacy Referrals Laundry facilities Shower and bathtub Telephone	**Women and their children**		10,000			ROC	Growing up Downtown- Parent/child Programming Clothing Program Emergency Food Hamper Program
Vanier Community Service Centre Community Resource/Drop-in for people living below the poverty line	Crisis Intervention, Home support Information and referrals Drop-ins Employment counselling Individual and couple counselling	**Men Women Youth Families**	Respite Child and parent services	8,000 (all agencies, programs groups)			HRDC MCSS ROC Fundraising	
The Well/La Source Day Drop-in program for women of all ages	Practical support Personal support Open Groups Recreation Laundry Referrals	**Women Children**		24,000 (number of visits)			ROC Human Resources Development Anglican Diocese of	

	Light Breakfasts Nutritious Lunches						Ottawa Donations	

				SERVICE DATA				
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DAY PROGRAMS/DROP IN CENTRES								
Youth Services Bureau of Ottawa Carleton **Downtown Services and Drop-in** Downtown services provide a safe place for youth 20 years of age and under. Downtown Services and Drop-in are open 365 days a year	Crisis Intervention Assessment of needs Supportive counselling and group work AIDS prevention education Health Services Job Board Literacy programs Computer Room Life skills workshop Wraparound Community Outreach teams Showers, Laundry Facilities, Telephones Lunch is served daily	**Youth (aged twelve to twenty)**		998			ROC MCSS MOH	Downtown Services and Drop-in works collaboratively with and depends upon it' s partnerships with a number of different community and agency services; Rideau Street Youth Enterprises, Frontier College, Beat the Street Ottawa, Healthy Sexuality Clinic, Sandy Hill Addiction Assessment Centre, Sandy Hill Nurse Practitioner, ROH Outreach, CMHA Housing Help, Centretown Health Centre, Rape Crisis Centre, Innercity Ministries