

Minutes of the Abbotsford Homelessness Task Force meeting held Wednesday, May 6, 2014, at 3:09 p.m. in the Room 530 of Abbotsford City Hall

Task Force Members Present: Councillor Ross – Co-Chair, Councillor Smith – Co-Chair, V. Eden, S. Kuperis, L. Loh, K. Macdonald, J. McElhoes, K. Matty, R. Van Wyk and M. Welte

Council Present: Councillor Braun, Councillor Loewen and Councillor MacGregor (part)

Staff Present: G. Murray – City Manager, J. Rudolph – Deputy Manager, B. Rich – Chief Abbotsford Police, B. Flitton - Director, Legislative Services/City Clerk, M. Laljee (part), Manager, Bylaw Enforcement and L. Ganske – Recording Secretary

Facilitator: C. Enns – Social Planning Consultant

Public Present: 25+-

1. CALL TO ORDER

Co-Chair Councillor Smith, called the meeting to order at 3:09 p.m.

2. ADOPTION OF MINUTES

Moved by Councillor Ross, seconded by K. Matty, that the minutes of the April 2, 2014, Homelessness Task Force meeting be adopted as amended.

HTF05-2014

CARRIED.

3. BUSINESS OUT OF MINUTES

.1 2014 Homeless Count - verbal report R. van Wyk and D. Murray

Deferred.

.2 Workplan – C. Enns

C. Enns circulated copies of the survey for members who hadn't completed them and a copy of the draft sub-committee work plan for discussion. It was suggested that combining some headings would make the sub-committees more manageable, and Ms. Enns advised her students could assist with research for outstanding items. Members were asked to hand in their suggestions for her to collate for the next meeting. Councillor Smith advised that the sub-committees would include service providers who could offer their ideas and support. It was suggested that mental health be maintained as a core thought in consideration on all of the sub-committees.

Chief Rich noted that we can't address the problem until we properly measure how big the problem is and what the significant components of the problem of homelessness are in Abbotsford. M. Welte agreed this will provide focus and measure whether objectives are met. R. van Wyk advised that the 2014 Homeless Count will inform these items. In response to a

question, C. Enns advised that responses along the housing continuum are needed. For example, a 24 hour drop-in could service those who won't participate with any other of the proposed solutions. Councillor Ross felt that "Homelessness Advocate" is the appropriate title for a homelessness outreach worker, and the most important thing that the task force can implement as it was an often repeated request of the homeless themselves. K. Matty strongly recommended a website that coordinates all of the services be provided on the City's website. C. Enns advised her students could assist MCC and FVRD on their update.

Deputy City Manager, Jake Rudolph, reiterated the suggestion that the sub-committees be collapsed into a shorter list and that we find a way to utilize the service providers in these sub-groups. Also, that we take an action approach and have ideas fleshed out by June when the task force will provide an interim report to Council: listing short, medium and long term goals. Councillor Smith summarized that staff and C. Enns will reduce the work plan to fewer subcommittees which will be presented at the next meeting of the task force. These sub-committees will be chaired by members of the task force who will be tasked with obtaining sub-committee members and report back to the task force at each meeting. D. Lowell reminded participants to remember to maintain the dignity and confidentiality of the homeless, especially in all written minutes and attachments as they can be circulated far and wide after they are distributed.

Cherie asked that task force members read through and come prepared to discuss the proposed timelines at the next meeting.

Moved by Councillor Ross, seconded by M. Welte, that the
Workplan presented by C. Enns be received.
HTF06-2014

CARRIED.

4. DELEGATION

- .1 Dorothy Henneveld, Executive Director of the Women's' Resource Society of the Fraser Valley (WRSFV), regarding the work surrounding housing, shelter, violence against women and community capacity building across sectors

D. Henneveld, Executive Director of the Women's' Resource Society of the Fraser Valley (WRSFV), spoke to a Power Point presentation and noted the invisibility of many homeless women and youth, because they are more likely to couch surf. She noted that Homelessness costs the Canadian economy \$7 billion per year (Canadian Alliance to End Homelessness 2013); and relayed several successful models in Abbotsford and elsewhere.

Ms. Henneveld questioned the Abbotsford Social Development Advisory Committee (ASDAC) suspension of meetings and the commitment of Council to address homelessness. She suggested that tax exemptions be offered to non-profits which meet acceptable criteria and that the City hire a homeless advocate.

.2 Paul McKee, Director Set Free Ministries, regarding Housing First

P. McKee spoke regarding his own experience as an addict for twenty-five years. He believes that most of the homeless are addicts, and that the housing first model does not work without oversight. Success will require the collaboration of the greater community showing the homeless a way out, and a way to live in a safe, continuum of care. He quoted Mother Teresa, who said, "Poverty is not a lack of possessions, but a lack of love." He encouraged the service providers to work together to create a culture that moves the homeless forward, to the point where they can eventually help others.

.3 Deb Lowell, Public Relations Director of the Salvation Army Community Ministries Abbotsford Mission, regarding their Outreach Team visits to Homeless Camps in Abbotsford, often multiple times daily, and their Psychiatric Nurse who often partners with the Fraser Health Mental Health representative in terms of client care. Additionally, changes to their shelter to accommodate the very complex needs of the people who need their services

D. Lowell introduced two new Salvation Army staff members: Captain Mark Dunston, Chief Executive Officer/Pastor and Nate McCreedy, Community Ministries Director. She invited attendees to visit The Centre of Hope, on Thursday May 8, 201 at 1:30 p.m. and Tuesday, May 13, 2014 at 5:00 p.m. to familiarize themselves with all of their services.

Ms. Lowell observed that society pays, whether they care about the most vulnerable or not, in terms of impacts on families and the community at large. She cited the changing dynamics of those who are homeless: seniors are finding themselves amongst the homeless, and increasingly, a mental health component is making it difficult to house those with more challenging issues.

Ms. Lowell suggested that social service providers submit a synopsis of their services to the task force so that a reference guide can be circulated and gaps can be identified.

.4 Kindra Breau, Community Engagement & Harm Reduction Coordinator, and Danny Braaten, Positive Living Fraser Valley, regarding health, Human Immunodeficiency Virus (HIV) and Hepatitis C (Hep C); and "dignity village" type of "housing"

K. Breau, relayed that the homeless, or people that are unstably housed, are sixteen percent more likely to have HIV than the general population. Fifty percent of people with HIV or Hep C experience homelessness in their lifetime and housing is the number one concern of people with HIV. Their health and mental health issues are exacerbated by this and the discrimination they endure. Positive Living Fraser Valley supports these individuals. It is almost impossible to ensure proper health care, consequently they end up in hospital for weeks or months at a time, with preventable illnesses, costing taxpayers amounts that would have been able to provide housing for these individuals for up to five years.

Ms. Breau advised that Positive Living Fraser Valley believes in, and will support or partner with any housing first initiative or dignity village styled model.

.5 Karen Young, Lookout Society, Vancouver, regarding homelessness

K. Young, advised that the Lookout Society of Vancouver has been in operation for forty-three years, and cares for ten thousand homeless people a year. They ascribe to the housing first model as part of a continuum of service. Ms. Young noted the homeless represent all sectors of society, and the reasons people find themselves homeless are many. The Lookout Society has a huge success rate, offering a variety of housing options designed to meet individual needs. Clients are appropriately supported and kept healthy through the process of dealing with the issues in their lives, until they can live independently or permanently if they cannot.

In response to questions, Ms. Young advised that the Lookout Society houses up to 750 people any given night, in a variety of housing throughout the greater Vancouver area. They also have a safe, daily drop-in centre that runs programs for the mentally ill, with 2,500 members, servicing 120-250 daily.

.6 Richard Korkowski, Joshua House, regarding outreach and assessment on placement and length of stay

R. Korkowski, operator of Joshua House recovery program, explained that he had participated in the process the City took to license recovery houses, because there were so many poorly run boarding houses at that time. He warned against this option being considered for housing addicted individuals. He advised that he relapsed three years ago and experienced the "housing first" option on Vancouver's downtown eastside. He visited several service providers during that time, and noted that proper assessments were never conducted prior to his being housed. He emphasized the crucial role that proper assessment by a qualified professional plays in caring for the drug addicted homeless.

Mr. Korkowski also stated that a period of detox should occur before an assessment is done, as it is difficult to tell whether mental illness is affecting an individual's addiction or perhaps visa-versa. He said that we must house the drug addicted homeless properly and effectively and not just give them a place to stay. He believes a shorter, easier process with the City should be in place for recovery house operators who have functioned well, when they are taking over other existing recovery houses. Most recovery home operators struggle financially, as funding streams do not align with needs of recovery home residents. If someone arrives after the first of the month, it can take several weeks before Social Services cheques commence for their housing. The operators simply absorb this shortfall or turn the individuals out onto the street.

.7 Jeanette Dillabough, and Sharon Forbes representing Raven's Moon Resource Society, regarding what they have been doing to address homelessness with housing, support and assistance in working toward adequate income

J. Dillabough and S. Forbes explained that they began the Raven's Moon organization as a pilot project five years ago, because women were coming to them and asking them to help them find a place to live. They knew that it would be impossible, so they rented a house themselves and took five women off the street. Since then, they have opened ten supportive homes that are sobriety oriented, but practice harm reduction - in that they will not turn away residents who abuse drugs.

Some of their clients come out of hospital or prison, with no place to live. Of the fifty residents they house, eighteen are now working, some have come off social assistance and are doing well. They walk along-side people, helping them, taking them to appointments, or whatever is important to them in order to be successful. They teach people to budget money and feed themselves. They have no time limits on lengths of stay. They have one client who has moved into her own basement suite and attends the Alano Club every day. She is no longer abusing drugs or alcohol, as her own choice. Raven's Moon works from an empowerment perspective. They don't do things for people, but support them as they learn to do them for themselves.

.8 Nadine Power of Abbotsford Community Services, regarding Supportive Housing

N. Power from Abbotsford Community Services (ACS) reported that they have been providing services to Abbotsford residents for forty-five years. Their mission is to promote community wellbeing and social justice through positive action and leadership. They collaborate with other partners in our city, to provide seamless services to people of all ages in poverty, in crisis, and in feeling included.

Ms. Powers referenced the "hidden homeless", and many more who are struggling with poverty in our community. Reducing these numbers will require shifting our focus from crisis management to permanent solutions. This will require commitment from our Provincial and local governments; collaboration amongst service providers; and, compassion from our entire community. She emphasized that a continuum of service is needed for the homeless who have been shuffled from one place to another.

Ms. Powers advised that ACS will continue to advocate for low barrier housing, as there is a critical need, and that a lot of community support was received for the facility, albeit not for the downtown location. She referenced an October 2013 Chamber of Commerce resolution calling on the government to maintain a "Housing First" model as part of a national strategy. She also cited the success of Nanaimo's Housing First Harm Reduction Action Plan.

.9 Patricia Postill Mentally Ill Homeless Outreach Nurse, Mission Community Health Centre

P. Postill distributed two Fraser Health Authority pamphlets on the Abbotsford Mental Health Centre and the Adult Community Support Services (ACSS) and explained that she is part of the ACSS team, made up of nurses, social workers and psychiatrists. She only has one client who is a homeless person, and advised that she cannot assist these people if she doesn't know about them. The ACSS Team has inclusion/exclusion criteria for who they work with: "...difficult to engage and chronically at risk of homelessness...often the most vulnerable individuals living in the community, who have both mental illness and problematic substance abuse... using a strength based model using motivational interviewing techniques, the nurse works collaboratively with clients and professionals to implement individualized care plans..."

In response to a question, Ms. Postill advised that referrals come from general practitioners, community members, family members and hospitals.

.10 John Davidson, Assistant Director for VisionQuest Recovery Society

J. Davidson advised that VisionQuest has one ten-bed recovery house in Abbotsford and four

elsewhere, as well as a sixty bed facility in Chilliwack. Many of their residents are prolific offenders. The success of these facilities is measureable, he stated.

Mr. Davidson is very disappointed that ASDAC has collapsed. He expressed dismay at the red tape in setting up recovery homes; especially by reputable operators taking over existing successful facilities, which have to begin at point zero, the same as first time operators. This time consuming process resulted in their inability to take over one recovery house in Abbotsford.

.11 Irene Jackson, Executive Director of Life Recovery

I. Jackson announced that Life Recovery is an eighteen bed, residential facility for women in addiction. They operate a safe, supportive, structured environment. Services are designed to encourage the development of coping mechanisms, support networks, healthy lifestyles and independence, in an alcohol and drug-free environment. This is an abstinence-based program, understanding that harm reduction is a one end of that continuum.

Ms. Jackson stated that we must not talk about homelessness and addiction separately, but together. We should not be silo-ing homelessness, addiction and mental health. Dealing with these simultaneously is more cost effective and successful. Addiction treatment must be combined with supportive housing. Supportive housing must help people reintegrate into society. She reported that recovery houses cannot accept addicts until they have been clean for seventy two hours. This is extremely difficult without a detox facility to stabilize them. Detox is a gap in our system here in Abbotsford and has been identified as a best practice in the minutes of our last meeting.

.12 Chad Monnan, Addict

C. Monnan explained that he is thirty-six years old, has lived in Abbotsford for thirty years and has been an addict for twenty years. He is grateful for recovery houses and shelters in Abbotsford, but would love to have a supportive house to live in. He also believes we need a detox centre.

.13 Barb Dickson – Barb's 2nd and 3rd Stage Transitional Housing in Abbotsford and Mission

B. Dickson felt that Mission did an amazing job of completing a homeless count, but that Abbotsford did not. While a lot of effort is being put forth to establish housing to assist the homeless, she agrees that there is a lot of red tape impeding the process, especially for those who already have a successful model. It takes months too long.

Ms. Dickson believes it is unfair that Provincial funding does not extend to houses such as hers. She was very disappointed that ASDAC has died, because many people in the community were invested in its work. She believes best practices should be borrowed from other communities world-wide. She referenced the phenomenal costs of dealing with adults in the system, and believes it is much cheaper to help children before they get to this point.

.14 Milt Walker, Executive Director of Kinghaven/George Schmidt Centre

M. Walker agreed that an incredible amount of red tape is a challenge in Abbotsford. George

Schmidt Centre took five years to complete. Eighty-four percent of their current residents polled believe they would be homeless if they weren't in their facilities (including Peardonville House).

Mr. Walker advised that there are three detox beds, two at Kinghaven and one at Peardonville House. These are run by the Riverstone Fraser Health Authority program. Sadly, they are empty fifty percent of the time. Chilliwack had a detox centre that went to an out-patient/at home kind of program, because it was a costly program to run at fifty percent occupancy. He attributes this low number to the addicts not wanting to lose access to drugs and because of the rules they must follow.

.15 Discussion Regarding Delegations

Members asked questions of the delegations and discussion ensued. In response to a suggestion that Abbotsford research and implement concurrent disorders best practices, Morten Bisgaard, Manager Field Services-Integration for the Ministry of Social Development and Social Innovation (Fraser Region) advised that there are two ACSS teams: one in New Westminster and one in Surrey, and advised that Abbotsford should approach the Fraser Health Authority for one. He also asked what suggestions the task force might have for him. Suggestions made were: to provide ongoing assessment in order to determine after a period of time if a client has mental illness or only had drug-induced psychosis (to avoid misdiagnosis); and, to consider changing the name of Mental Health, because clients are turned off by the name, because of the stigma attached.

Councillor Smith opined that streamlining recovery house processes for successful operators, and improving inter-communication for service providers are two obvious needs that we have. He suggested letting the sub-committees tackle the other issues raised in the meeting. Delegates advised that ACSS teams need somewhere to send people; and that follow-up beyond providing housing is crucial. C. Enns asked Jeannette how someone would go about sponsoring a basement suite.

Moved by R. van Wyk, seconded by M. Welte, that the
delegations be received.

HTF07-2014

CARRIED.

5. REPORTS

None.

6. CORRESPONDENCE

.1 Email Invitation from Salvation Army Regarding a Mid-May Site Visit

Two dates for Salvation Army Centre of Hope site visits were extended to the task force: Thursday, May 8, 2014 at 1:30 p.m. and Tuesday May 13, 2014 at 5:00 p.m.

7. MEDIA

- .1 Abbotsford news article by Alex Butler posted Mar 26, 2014 at 9:00am <http://www.abbynews.com/staff_profiles/187531031.html>. A new society aimed at helping the homeless has been launched in Abbotsford, with plans for a project that would see a transitional housing campground
- .2 Designing a Community-wide Strategy for Ending Homelessness: links to community wide homelessness strategies

Moved by Councillor Ross seconded by K. Matty that the media distributed, be received.

HTF08-2014

CARRIED.

8. NEW BUSINESS

- .1 Community Partnership Initiatives Program Brief

Deferred.

9. ADJOURNMENT

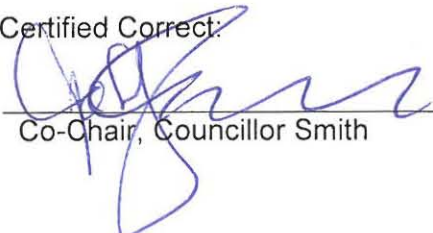
Moved by S. Kupries that the May 6, 2014, Homelessness Task Force meeting be adjourned (6:00 p.m.)

HTF09-2014

CARRIED.

The next meeting of the Homelessness Task Force is scheduled for Thursday, May 15, 2014, at 11:30 a.m. in Room 530.

Certified Correct:


Co-Chair, Councillor Smith


Recording Secretary, L. Ganske