Housing Solutions for Complex Clients in Small Cities and Rural Areas

Includes:

Final Report

By: Johanne St. Louis

Completed for: City of Kawartha Lakes

Supervising Professor: Dr. Lisa Boucher

Trent Community Research Centre Project Coordinator: Brittany Finigan

Course Code: GESO 4820Y

Course Name: Community Research Placement

Completion Date: 4/1/2024

Project ID: 6041

Table of Contents

Housing Solutions for Complex Clients in Small Cities and Rural Areas

Introduction

In Canada, homelessness is defined as a situation whereby "an individual, family, or community is without stable, safe, permanent, appropriate housing, or the immediate prospect, means and ability of acquiring it" (Oudshoorn, 2021). Homelessness can result from a number of systemic and societal barriers which include a lack of affordable housing, poverty, mental illness, cognitive or behavioural issues, violence, and discrimination. The definition of homelessness has been broadened to include those who are at risk of homelessness, provisionally sheltered, emergency sheltered, as well as unsheltered (Oudshoorn, 2021). Government cutbacks to social housing, that began in the 70s, as well as other policy decisions such as the elimination of Canada's Federal Affordable Housing Program, which resulted from the rise of neoliberalism becoming the guiding political philosophy in Canada, are reflected in the current state of Canada's homelessness crisis. Developing more affordable housing options is necessary to counter the growing number of individuals and families experiencing homelessness (Donnan, 2014). An estimated 235,000 Canadians experience homelessness each year (Strobel et al, 2021). Ultimately, providing permanent housing solutions is far more cost effective than allowing people to remain homeless (City of Regina, 2019).

Homelessness prevention requires a coordinated effort on the part of all levels of government, public services, and the private sector to adequately address the issue of homelessness and to ensure that if it cannot be prevented, that it is uncommon, short term and unrepeated (Clode et al, 2023). This research project addresses the need for innovative solutions for individuals with complex needs, who have been evicted from social housing within the City of Kawartha Lakes and Haliburton County. In order to understand the challenges faced by social housing providers, it is necessary to identify environmental conditions and challenges providers

must navigate to compassionately address the needs of complex clients who may struggle with mental illness, substance use, or engage in anti-social behaviour, such as vandalism, excessive noise at unreasonable hours, and harassment, including verbal and physical abuse and threats (Clode et al, 2023). This report focuses on three key areas of research: eviction prevention, Housing First programs, and innovative housing models which include supportive housing, transitional housing, and micro-homes communities.

Purpose of the Research

When homelessness becomes chronic and prolonged, it can be detrimental to a person's wellbeing, as it coincides with extreme poverty, poor mental health, substance abuse, and chronic illness. Chronic homelessness also results in weaker ties to community and social supports, increasing the risk of harm and even death (Cummings et al, 2022). Reducing the number of people who are chronically homeless requires a coordinated effort built across human service systems and providers. City of Kawartha Lakes and Haliburton County share a vision that "Everyone has a safe, secure and affordable home" (City of Kawartha Lakes and County of Haliburton, 2020). For this vision to be realized, a solution must be found to house those individuals who are chronically homeless and have been evicted from social housing. The intent of this research is to investigate the reasons why individuals are typically evicted from social housing and address the barriers they face in accessing housing following an eviction. While preventing evictions is ideal, there are individuals who may be incapable or unwilling to comply with the requirements for remaining housed, and the level of support they require is not available within social housing facilities. In instances where pervasive anti-social behaviour (ASB) of individuals causes harm to other residents and staff, social housing providers have no choice but

to evict them into homelessness (Clode et al, 2023). Innovative housing models such as supportive housing facilities with intensive supports, transitional housing programs, and micro-homes communities, may provide alternative solutions. This research aims to explore possible solutions for those who have few remaining options outside of absolute homelessness. The right to shelter is a human right, and having a safe place to live is essential to personal dignity and wellbeing (Ontario Human Rights Commission, 2008).

Situating the Research

City of Kawartha Lakes (CKL) has a population of approximately 75,420 residents and covers an area of 3,067 square kilometres. It is located west of Peterborough and north of Durham Region. Haliburton County is located to the northeast of the City of Kawartha Lakes and has a much smaller population of approximately 18,065 residents. The greatest need for social housing in City of Kawartha Lakes is in Lindsay, followed by Fenelon Falls. For Haliburton County, the greatest need for social housing is in the Village of Haliburton, followed by Minden (City of Kawartha Lakes and County of Haliburton, 2019). Through the implementation of the Coordinated Entry System, City of Kawartha Lakes and County of Haliburton have been committed to identifying all those experiencing homelessness within the community. The By-Name List has identified 64 households that are homeless and of those, 53% are single adults between the ages of 25-59 years old (City of Kawartha Lakes and County of Haliburton, 2019). More than half of the individuals on the By-Name List are considered to be chronically homeless, meaning they have been without housing for more than 6 months, and there has been a significant increase in the level of acuity of these individuals since 2016 (City of Kawartha Lakes and County of Haliburton, 2019).

Methods

This research study included a literature review of academic and grey literature pertaining to the three key areas of research: eviction prevention, Housing First programs, and innovative housing models which include supportive housing, transitional housing, and micro-homes communities. The research is grounded in data retrieved from peer-reviewed articles, government reports, organization websites, best-practice guidelines, as well as policies and procedures currently in use by supportive and transitional housing models that are experiencing positive results in reducing evictions and maintaining stable housing for individuals with histories of chronic homelessness. Three case studies are included in the report and provide specific examples of housing models and programs that have been successful in providing transitional and permanent housing to individuals with high acuity and a history of chronic homelessness. These case studies include Indwell's Woodfield Gate supportive housing apartments (London Region); Inn From the Cold's Stability Now, Getting Ahead, and Please Come Inn programs (York Region); and Oshawa Micro-Housing Pilot Project (Durham Region). Information was primarily gathered from online sources including reports, websites, news stories, and informational interviews were conducted with project managers to fill knowledge gaps and provide rich data on program operations and outcomes. All recordings were deleted after the transcription and note-taking stages. From this research, a written report, research poster, and slide presentation have been produced to disseminate findings to a variety of stakeholders in accessible formats.

Literature Review

Key Issues for Those Most at Risk of Homelessness

Many towns and cities in Canada are facing a homelessness crisis that has been compounding for many years. The criminal justice system, health care system and shelter system are full of people who have fallen through the cracks, often as a result of comorbidities such as mental illness, substance use issues, brain injuries and other impairing disorders, for which there are not enough social supports in place to ensure they can maintain a good quality of life and remain housed (Whalen, 2021). Some of the key issues facing vulnerable populations are a lack of affordable and supportive housing in general, long waitlists to access affordable housing, and a lack of affordable options if they are evicted from social housing (Brown et al, 2019). An individual who has been chronically homeless for a considerable period of time, who may also have substance use issues and mental health issues, will have less chance at being successful in social housing, and may be better suited to another type of housing (Dickenson, 2023). Allowing the individual to access temporary transitional housing while they wait for the appropriate type of housing to become available, can set them up for greater success and stability. An individual lacking the skills necessary to live independently, may benefit from a transitional housing program that requires them to participate in programming and develop the required skillset to maintain permanent housing. Private transitional housing programs have seen a reduced rate of recidivism for individuals with comorbidities (Whalen, 2021). There is heterogeneity among the chronically homeless population in terms of the barriers they face, and the types and levels of support they require to maintain housing. Therefore, a multifaceted response is necessary as there is no "one size fits all" approach to ending homelessness (Brown et al, 2019).

Social Housing

Social housing is broadly defined as any type of housing that provides below market rent for individuals with low to moderate income and includes rent geared to income (RGI) housing. RGI housing aims to provide tenants with rent costs that do not exceed 30% of the tenant's income (Collins et al, 2021). Canada's social housing sector was initially designed to provide housing for individuals and families who were able to live independently, with low to moderate income. Social housing providers have come to recognize that much of the population living in social housing have complex needs that are not being met by the level of support available by social housing providers. Many of these individuals require intensive supports and would be better suited to supportive housing programs (Collins et al, 2021).

Preventing Evictions

Vulnerable tenants, who may be living with a disability, dealing with a mental illness, or using substances, are at greater risk for eviction. Tenants who are evicted have few options outside of homeless shelters and the private market. Finding housing in today's competitive housing market requires substantial income, financial security, a good credit rating, and references, which eliminates many people who are chronically homeless (Trglavcnik, 2010). Most tenants who are already part of the social housing system are eligible for Ontario Works (OW) or Ontario Disability Support Program (ODSP), both of which are intended to provide for basic needs and shelter. These programs determine the amount of monthly funds based on household size, income, assets, and housing costs. For a single person on OW, the maximum shelter allowance is $390. This amount is insufficient to rent a room in the private market at a cost that is upwards of $700, making it extremely difficult for those who have been evicted to

secure housing (Trglavcnik, 2010). Landlords and administrators of social housing, evict tenants for a number of reasons, including failure to pay rent, violence, criminal activity, damage to the unit, and drug use. Most administrators of social housing care about their tenants and evictions are considered a last resort. The consequences are often far greater for this vulnerable subset of the population (Collins et al, 2021). In the past two decades, considerable efforts have been made by community organizations and municipal governments to provide social programs that integrate tenants into the greater community. Improving communication, service, and social supports is integral to avoiding evictions and putting tenants at risk of absolute homelessness (Trglavcnik, 2010).

Housing First

Housing First was conceptualized in 1992 by Sam Tsemberis, who developed the Pathways to Housing model that began operating in New York City with great success. This radical new program model was founded on housing as a basic human right, rather than something that must be earned and has become widely adopted as a response to chronic homelessness across many countries in the last two decades (Collins & Stout, 2021). Housing First refers to the immediate placement of individuals in permanent housing with available supportive services but without any requirement that tenants utilize those services as a condition of remaining housed. Housing First recognizes housing as a human right and emphasizes respect for homeless individuals' self-determination and autonomy (Holmes et al, 2017). Housing First has proven to be a much more efficient and effective response to reducing homelessness than emergency shelters, hospitals, and jails, that provide the costliest emergency services (City of Regina, 2019). The five principals of Housing First include: rapid housing with social supports,

choice-based housing options, community integration, promoting self-sufficiency, and promoting tenant rights and responsibilities (Oudshoorn, 2021). While Housing First has proven to be successful in reducing chronic homelessness, it is often reliant on limited resources and staff who are stretched beyond their ability to provide individualized supports for clients with complex needs (Oudshoorn, 2021). Housing First models have typically been developed from research focused on chronically homeless single males, largely ignoring the complexities that families and single parents (mainly women) present. These models do not always address the efficacy of Housing First approaches for other vulnerable groups (Mosher, 2013).

One of the most effective studies that provides evidence for the cost effectiveness of Housing First programs as compared to emergency shelters, hospitals, and the criminal justice system, is the Mental Health Commission of Canada's At Home/Chez Soi (AHCS) study, conducted in 2008. Results of the study estimated the annual cost of emergency services at $23,849 per person for one year, while Housing First costs $14,599 per person per year. Additionally, the study confirmed that for every dollar spent on Housing First programs, $0.54 was recuperated from emergency service costs (City of Regina, 2019). While there are many proven benefits to a Housing First approach, there are limitations to the scope of support administrators are able to provide, and a portion of tenants with high acuity, who may also have personality disorders or anti-social behaviour, end up being evicted despite in-reach advocacy and stage warnings (Holmes et al, 2017).

Supportive Housing

Supportive housing is defined by the Canadian Mortgage and Housing Corporation (CMHC) as a physical environment that is specifically designed to be safe, secure, and home-

like, with in-house supports including meal provision, social supports, housekeeping, and recreational activities. The aim of supportive housing is to maximize independence, privacy, and dignity for residents, and it is a highly effective strategy that combines affordability with intensive coordinated services (Oudshoorn, 2021; Dohler et al, 2016). Permanent supportive housing (PHS) has been linked with reductions in emergency shelter use, hospitalization, and incarceration for individuals with histories of chronic homelessness (Kresky-Wolff et al, 2010; Dohler et al, 2016).

Supportive housing programs differ in many ways including the types of housing, programs offered, and the level of support provided by administrators. Types of supportive housing include scattered sites, group-homes, and congregate sites. Scattered sites, where individuals reside in private market rentals, are often subsidized by programs such as Canada-Ontario Housing Benefit (COHB), and residents are supported by in-reach programs. Group-homes provide both onsite and in-reach support services and small numbers of individuals cohabitate with both private and shared spaces. Congregate sites are larger buildings with individual apartments and on-site and in-reach support services. This type of housing may be better suited to individuals who can live independently and require fewer intensive supports. Congregate sites, embedded in supportive housing, allow for dedicated space for individuals with complex care requirements, to live within a supportive housing facility without negatively impacting other residents. This type of housing allows for two tiers of service and staffing (Province of British Columbia & MMHA, 2022).

A study conducted by the U.S. Department of Housing and Urban Development, through the U.S. Interagency Council on Homelessness, entitled The Collaborative Initiative to Help End Chronic Homelessness, found that while scattered sites were perceived as being higher quality

units and offered residents increased choice of unit location and a less stigmatized form of housing, disadvantages such as client isolation and reduced staff involvement were problematic (Kresky-Wolff et al, 2010). Giving individuals the choice of scattered living units or congregate living programs, allows for those who are better suited to independent living and those who are not suited to living independently, to have a greater chance of remaining permanently housed. Findings from the study suggest that local communities can develop supportive housing programs based on the sites that are suitable and available within the community. There is no "one size fits all" solution for ending chronic homelessness and communities require solutions that are specific to the housing needs of each community (Kresky-Wolff et al, 2010).

Transitional Housing

Transitional housing provides temporary housing, social supports, treatment, and employment opportunities for successful integration into society. Most transitional housing facilities provide support to help individuals get back on their feet, which is necessary for those with comorbidities to secure and maintain permanent housing (Whalen, 2021). Overall, privately funded transitional housing facilities and federally funded residential facilities have proven successful in transitioning individuals to permanent housing and ensuring they have the skills and knowledge to maintain their housing. There is no provincial body that provides oversight or funding for transitional housing facilities, even though the importance of these facilities is widely acknowledged, as is the need for more of this type of housing (Whalen, 2021).

There are many types of transitional housing that provide specialized supports for individuals transitioning to permanent housing, for example, those being discharged from acute care, or other health or addictions centres, as well as those leaving correctional facilities.

Reintegration into communities can be extremely challenging for individuals who have been unemployed for long periods of time, and who lack financial resources, credit, and references which are required by landlords to secure private market rentals.

Settings for transitional housing programs include scattered units, group-home or shared housing, and space in larger supportive housing congregate sites. Transitional housing programs that support individuals with comorbidities recognize the importance of providing a home-like setting, with lower resident-to-staff ratios, small numbers of residents in one setting, and access to specialized services. Wrap around supports can be tailored to the needs of participants within the program and delivered through partnerships that will help with successful transition into a better quality of life (Province of British Columbia & MMHA, 2022). One of the greatest challenges to the success of transitional housing programs is the lack of permanent affordable housing for participants to move into, once the program is completed or the maximum time allowance has been exhausted (Polcin, 2016). Funding for the establishment of a governing body for transitional housing is needed, as are more transitional housing programs (Whalen, 2021). The answer to finding solutions for individuals who are chronically homeless may involve a stepped approach to housing readiness. Combining transitional housing programs, with permanent supportive housing or other types of affordable housing may help to provide the right type of supports, life-skills, and housing, to increase the likelihood that an individual will remain housed (Whalen, 2021).

Micro-Homes Communities

The "tiny homes for the homeless" movement began as a response to the 2008 housing crisis in the U.S. and some of these villages were once tent encampments of homeless

individuals and activists, who were protesting the lack of affordable housing options (Alexander, 2017). There are now many micro-homes communities across the U.S., and a growing number in Canada that are well-supported and well-organized. With the help of non-profits, architects, and planners, these micro-homes communities are making an effort to restore dignity, connection, and purpose to formerly homeless individuals (Alexander, 2017). Micro-homes are small, self-contained units, that are designed for year-round use. They include a kitchen, bathroom, and sleeping area and are limited to a maximum size of 37 metres squared, as determined by the Ontario Building Code. Micro-homes are becoming a popular alternative to other types of housing as they are cheaper to build and maintain (York Region, 2021). The "tiny homes for the homeless" movement must be included in a larger continuum of currently available housing options and become part of the larger solution to ending homelessness (Alexander, 2017). There are a growing number of tiny homes communities that were developed to provide housing to those at risk of homelessness in Ontario. Kitchener's A Better Tent City (ABTC), which has 42 cabins, opened in April of 2020. Although there was some negativity from local residents in the beginning, most people recognize the need and are supportive (Mitchell, 2023). In 2021, the community was forced to relocate a short distance away due to the sale of the original property; however, it is now situated on land owned by the city, who have pledged support through to 2025 for the project in its current location. Erbs Road Shelter in Waterloo, a micro-homes community with 50 units, was developed as a result of the success of ABTC. The site is located about 10 kilometers from Kitchener's city centre, which does pose a challenge to some residents with mobility issues, who find the 12-minute walk to the nearest bus stop a barrier to accessing amenities (Mitchell, 2023). Peterborough's Modular Bridge Housing that opened in November 2023 with 50 modular units, is expected to operate for the next two years (Mitchell, 2023).

Kingston recently decided to end its Sleeping Cabin Pilot Program in November 2023, after less than 2 years of operation. The tiny cabins were being moved every six months between two locations, the harbour in the winter and Centre 70 Arena in the spring, which was challenging for residents and costly for the city. The Hamilton Alliance for Tiny Shelters (HATS) is currently looking for land to place 25 tiny homes, but so far have been met with pushback from residents who do not want to see a micro-homes community near their properties (Mitchell, 2023).

One of the greatest challenges that micro-homes communities face, is opposition from local residents who do not want these types of housing developments in their communities. However, those who reside within the micro-homes communities, require access to supports and do not have the means to travel long distances. Additionally, local residents fail to recognize the need for this type of housing to prevent homelessness for individuals already living in their communities (Mitchell, 2023).

Summary

Systemic and societal barriers including a lack of affordable housing, poverty, mental illness, cognitive or behavioural issues, and discrimination, contribute to the increased number of individuals experiencing homelessness. There are few options for affordable housing remaining for those who have been evicted from social housing (Brown et al, 2019). Co-concurrent conditions such as substance use issues and mental health issues, reduce the likelihood of a person successfully maintaining social housing, while other types of housing may be more suitable to accommodate their level of need (Dickenson, 2023). The chronically homeless population is heterogeneous in the barriers they face and the types of housing they require, and there is no "one size fits all" approach to ending homelessness (Brown et al, 2019).

Canada's social housing sector is intended to provide housing for individuals and families that are independent, with low to moderate acuity. However, much of the population living in social housing have complex needs that social housing providers are not equipped to support. Social housing providers generally care about their tenants and seek to prevent evictions wherever possible, as the consequences can been severe for vulnerable populations (Collins et al, 2021). Although Housing First models have proven successful in reducing chronic homelessness, they rely heavily on staff who lack the time and resources to provide the level of support required for clients with complex needs to maintain their housing (Oudshoorn, 2021).

Permanent supportive housing (PSH), transitional housing, and tiny homes communities, have been successful in reducing the need for emergency services for individuals with histories of chronic homelessness (Kresky-Wolff et al, 2010, Dohler et al, 2016). Overall, privately funded transitional housing facilities and federally funded residential facilities have proven successful in transitioning individuals to permanent housing and ensuring they have the skills and knowledge to maintain their housing. Alternative housing models must be integrated in the larger continuum of social housing and become part of the solution to ending homelessness (Alexander, 2017).

Case Studies

Supportive Housing Case Study - Indwell's Woodfield Gate

Indwell is an Ontario based, not-for-profit, charitable organization, whose mission is to create affordable, supporting housing communities that promote wellness and foster a sense of belonging for vulnerable people. Established in 1974, Indwell has been recognized for providing housing that supports individuals with disabilities, including mental health and addictions, to

become housing secure and live a more stable and independent life. In 2000, the organization grew exponentially, from housing 7 individuals to its current capacity of providing housing to more than 700 individuals in 3 municipalities. What sets Indwell apart from other supportive housing services is a commitment to its model of enhanced support housing, which was implemented in 2016 (Indwell, 2024). This model provides a unique opportunity for individuals with the highest acuity to experience independent housing as they emerge from incarceration, institutions, and absolute homelessness. Tenants are immediately supported with preventative health and housing services to avoid crisis and produce healthier outcomes. Indwell's practice is centred on ensuring the dignity of Canada's most vulnerable citizens who are deserving of high-quality housing and supports (Oudshoorn et al, 2021).

Woodfield Gate is Indwell's first permanent supportive housing building, and is located at 356 Dundas Street, in downtown London, Ontario. Established in 2019, Woodfield Gate supports more than 67 tenants in one-bedroom apartments, many of whom were considered high acuity, and came to Woodfield Gate from shelters, hospitals, the justice system, or other precarious living situations. Woodfield Gate offers its tenants an onsite, interdisciplinary team of dedicated staff that provide wraparound supports including housing support, mental health and addiction services, nursing, and food security. The building is staffed 24/7 and on-call support is available to the tenants when they require it (Oudshoorn et al, 2021).

The supportive housing model of Indwell's Woodfield Gate offers the following recommendations for building supportive housing in Canada.

Employ a values-based approach

The concept of a values-based approach to supportive housing begins with a deep recognition of people's humanity, worth, and value which affirms the dignity of the tenants. By adopting these

values, both tenants and community members are connected to a greater vision of what a healthy

community looks like. Creating conditions whereby engaging in socially disruptive behaviour as

a mechanism for survival is no longer needed and tenants can access the support, they need to

improve their lives from a secure place is fundamental to success. While the work of supporting

Canada's most vulnerable population can be challenging at times, connecting to the values of

compassion, equity, and dignity for all, can be motivating (Oudshoorn et al, 2021).

Have engaged, knowledgeable, dedicated, hopeful and flexible leadership

Indwell engaged a team of dedicated professionals with diverse skills to lead the program at

Woodfield Gate. Many of the team have previous experience working with individuals who

require mental health, addictions, and housing support. Frontline staff who support tenants, also

work directly with administrative staff who design programs, to ensure new programs are

relevant to individual and community needs. Advocacy is encouraged and staff are actively

engaged in activities related to social reform which makes the work engaging and rewarding

(Oudshoorn et al, 2021).

Navigate complex funding

Indwell's creative approach to securing funding for this new model of supportive housing was

made possible by collecting failure data from other services they had provided (group homes),

identifying service gaps, and including the voices of service users. Funding for the capital

investment for Woodfield Gate came from the municipality and the local hospital who

recognized the need for a new model of housing to support individuals leaving institutions into

chronic homelessness, only to be re-institutionalized. Due to timing issues with provincial health

funding cycles, Indwell was placed in the precarious position of completing construction prior to

securing operational funding. Indwell worked through these obstacles by partnering with large

health-based organizations to develop high support programs and unlock public funding

(Oudshoorn et al, 2021).

Focus on housing affordability

In order for individuals on social assistance to remain housed, rent must be set for at the amount

allocated by Ontario Works (OW) or Ontario Disability Support Program (ODSP). Indwell

makes their housing affordable to tenants through the use of different sources of funding,

including all levels of government, private donors, health funds, and investors, which offsets the

cost of housing and support services (Oudshoorn et al, 2021).

Involve community participation in project development

Connecting with the vision of the neighbourhood and engaging both community organizations

and neighbours throughout all phases of the project and encouraging them to be part of the

design and development process was important to building relationships and creating buy-in.

This was achieved through community consultations and conversations, bringing the community

together into one room and directly addressing their concerns by answering their questions with

factual information. By focusing on the common goals of reducing visible homelessness and

helping people to live healthier lives within the community. Converting buildings that are

unsightly into new, visually appealing housing, is beneficial for both the tenants and the

revitalization of neighbourhoods (Oudshoorn et al, 2021).

Support tenancy

There are many steps that have been taken by Indwell to support tenants in maintaining their

housing. The first step begins with the selection process and engaging tenants on the culture of

the building and what they can expect. Collaborating with existing supports and providing any

additional support that is needed to prevent crisis is initiated from the beginning of tenant

occupation. Tenancy agreements clearly identify the relationship between the landlord and tenant and outline the roles and responsibilities of each party. Eviction prevention requires continuous engagement with tenants who are at risk of losing their housing. Additional wrap-around supports are provided to the tenant to resolve issues affecting the tenancy. When eviction is unavoidable, staff at Indwell work with the individual to facilitate supportive transfers to a more suitable form of housing. Depending on the circumstances, individuals who are evicted from Indwell may have the opportunity to be rehoused in the program at a future time. (Oudshoorn et al, 2021).

Create healthy living environments

The location and design of Woodfield Gate Apartments was intentional in providing accessible housing that is not only attractive in appearance but is also well laid out and offers tenants both private and communal living spaces. Support services are available during business hours and on-call supports are available overnight. These supports attend broadly to the social determinants of health[1] and are delivered by caring staff who seek to build positive relationships with tenants. Striking a balance between harm reduction principals and tenant safety and involving tenants in the development of community rules has created a shared responsibility for maintaining a sense of safety without feelings of institutionalization (Oudshoorn et al, 2021).

Provide sustainable and professional services

Indwell attributes much of its success to its team of dedicated staff, who value a holistic and supportive approach to care. Maintaining adequate staff to tenant ratios and encouraging

---

[1] Health of Canadians Determinants of Health: Education, employment, and income; Sex at birth, gender, and sexual orientation; Disability; Immigrant status; Indigenous populations; Racialized populations.

individualized care that focuses on building relationships with tenants is integral to both staff and

tenant well-being. Indwell also encourages the help of community volunteers and students

(Oudshoorn et al, 2021).

Consistent innovation

The full integration of housing and health services, provides an opportunity to redefine what

should be considered an effective practice. Replicating supportive housing models to integrate

health services on a scale that has a meaningful impact on the health and wellbeing of the most

vulnerable population will clearly demonstrate tangible improvements and a reduced dependence

on shelters, addiction treatment programs, and emergency services (Oudshoorn et al, 2021).

Transitional Housing Case Study – Inn From the Cold

Inn From the Cold (IFTC) first opened in 2004 as a volunteer-run, warming centre and

after several re-locations, found a more permanent home at 510 Penrose Street in Newmarket,

Ontario. In 2016, Inn From the Cold transitioned from a warming center to a seasonal shelter

providing safe shelter from 7pm to 8am, 7 days a week, from November to April. During the

2019-2020 winter shelter season, Inn From the Cold had 4,273 guests from mid-November

through to June 1, provided 21,438 meals, and distributed 1,719 pieces of clothing. In total, Inn

From the Cold had 210 days in operation which includes the two-month season extension due to

the Covid-19 pandemic. IFTC's mission is to meet the needs of those who are homeless or at risk

of homelessness and to collaborate with community partners to provide a broad range of

services, including emergency shelter, for individuals with basic to complex needs in York

Region (IFTC, 2024).

In 2020, following the onset of the pandemic, the situation became dire for those without secure housing who had nowhere to go, even to access a washroom. Inn From the Cold staff worked with the York Region to pivot to a full-service, 24 hours a day, 7 days a week, emergency housing facility. The shelter is open to homeless men and women over the age of 16 who have need of shelter all year round. The shelter provides 20 beds for men in 4 rooms, and 5 beds for women in 1 room. Inn From the Cold is operated by staff and volunteers and is currently supported by 200 volunteers who work with staff to deliver the Shelter Program. On-site partners include LOFT Street Outreach, CMHA, The Krasman Centre, and York Region Homelessness Community Programs Outreach Workers, ensuring services are easily accessible (IFTC, 2024).

Getting Ahead Program – Housing Readiness

While the shelter service is the primary focus of the organization, staff wanted to do more to move people out of homelessness and into permanent housing. IFTC recognized that many people accessing their services were dealing with severe mental illness and would not be able to get ahead in life without increased support services. IFTC staff introduced a new program called "Getting Ahead". This housing readiness program gives people needed resources to move forward with their lives, such as knowledge about the rental housing market, assistance with housing applications, and proof of income documents. Staff noticed that following completion of the program, participants had a greater sense of accomplishment and confidence, and they had hope of moving out of the shelter into permanent housing. "Getting Ahead" is an 8-week, 16-session program funded by the Ontario Trillium Foundation that helps individuals in poverty build their resources for securing and maintaining permanent housing (IFTC, 2024).

Stability Now – Transitional Housing Program

The next step for IFTC was to find a solution to providing stable housing for those who had successfully completed the "Getting Ahead" program. "Stability Now" transitional housing program was created and operates within the existing building. By repurposing a large storage area at the back of the building and hiring a contractor to renovate it into a self-contained unit with 5 bedrooms, IFTC staff were able to transition individuals who had successfully completed the "Getting Ahead" program to the next stage of housing. IFTC staff were very intentional in selecting the people to go into the program and the people they chose needed to stabilize before they could focus on securing permanent housing. Having a place of their own propelled them forward to wanting to get jobs, deal with addictions, and reconcile with family members.

"Stability Now" is a Housing First program that began in January 2018, housing four chronically homeless men. Residents are able to stay for up to 18 months and work with a case manager to achieve set goals and find permanent housing. In order to make the program affordable to residents, IFTC charges the shelter portion for OW and ODSP for participants in the "Stability Now" program. Tenants meet with a case manager regularly for room checks, house meetings, and one-on-one meetings. 75% of the people who have completed the "Stability Now" transitional housing program are successfully housed for six months or more.

Although IFTC supports the Housing First model, staff were finding that some of their previous members who had secured market rent housing were back in shelter within 6 months. They needed a mediator to help them deal with their landlords and make sure they have their bills paid on time. IFTC recognizes the importance of providing ongoing care to vulnerable people and created housing stability plans to find ways to keep people housed if they fall behind in their bills, which involves connecting people to housing stability funds. While these resources

are limited, funders are recognizing that preventing homelessness is key to ending it. To provide this service on an ongoing basis, IFTC has added a housing retention worker to their staff. Since 2018, IFTC has housed over 36 people with 80% successfully maintaining their housing (IFTC, 2024). Ashley Martin, a Program Manager, noted "Now more than ever it's been extremely difficult to get someone housed. A lot of people feel hopeless because of the cost of everything" (Martin, A., personal communication, November 31, 2023).

Please Come Inn – Head Lease Program

"Please Come Inn" began in 2022, and is a head lease program, where the service provider, Inn From the Cold, leases a unit, or a block of units, from a landlord or property manager, and then sublets to a client/subtenant. In doing so, the service provider assumes a position of responsibility to both the landlord and the subtenant. Their role is to act as the go-to contact for these parties to ensure the sustainability of this arrangement. Head leases are commonly used to house individuals who face high barriers to being housed and provide individuals with the opportunity to demonstrate their reliability as tenants. Head leasing is a strategy within the successful and well-established Housing First model to end homelessness. Inn From the Cold provides a continuum of housing programs from the emergency shelter to the "Please Come Inn" program, meeting people where they are at and providing them with housing options where they can be successful.

"Please Come Inn" currently houses 14 people in 4 houses. These houses include a detached house with 4 women residents, a townhouse in Aurora that houses 4 men, and a semi-detached house with both upper and lower units, that each house 3 people. While the housing is intended to be a more permanent solution, IFTC is the legal tenant, and the program operates under a transitional housing model. Residents sign an occupancy agreement and continue to

receive supports from IFTC. The "Please Come Inn" program has navigated some challenges with having to remove individuals from the program who were unable to maintain their housing without 24-hour support services. IFTC has also had to provide the assurance of a $10,000 contingency fund per house to secure buy-in from landlords, before successfully convincing them to take part in the program. The cost of market rent for each house averages out to approximately $800.00 a room, per month, which is considerably higher than the housing allowance from Ontario Works. York Region has stepped in to provide rent subsidies for the residents to cover the difference. While there are challenges to developing and operating the program, the difference being made in the lives of the people they serve, make every effort worthwhile (IFTC, 2024). Ashley Martin, Program Manager for IFTC also commented "The staff have so much passion. If they aren't able to move forward because of the environment outside, then we figure out what we can do inside the shelter. Staff are so flexible and adaptable" (Martin, A., personal communication, November 31, 2023).

Development of IFTC's New Housing Facility

According to IFTC (2023), "By the end of 2024, Inn From the Cold will finish construction of a new, 16,000 square foot housing centre featuring a 3.5-fold increase in the number of transitional housing units plus an emergency shelter and programming space. With this purpose-built new home, IFTC will support even more people to transition to stable housing" (IFTC, 2023). The new building will include 18 transitional housing units (3.5-fold increase), dormitory-style emergency shelter with room for 26 people, case work/interview rooms and classrooms for education and training, and a dining hall, multi-purpose space and quiet room with computers and library resources.

Micro-Homes Case Study – Oshawa Micro-Housing Pilot Project

The Oshawa Micro-Housing Pilot Project is a 10-unit micro-homes community in central Oshawa, that is part of the Housing Services Division of the Regional Municipality of Durham, which owns and operates 1200 units of housing throughout Durham Region. The micro-homes units are located on regionally owned land in central Oshawa. There are 5 units on one side and 5 on the other. This location will be available until a road widening, realignment project starts, in approximately five years. The homes will then be relocated to a permanent location. The use of modular housing was strategic, and the Region can efficiently move these units to their permanent location once it is determined. Each unit is 300 square feet, and two of the 10 units are designed for full accessibility. The front door opens onto the kitchen space and beyond the kitchen is the bedroom nook, followed by the bathroom at the far end of the unit (Durham Region, 2024).

The Oshawa Micro-Housing Pilot Project offers temporary transitional housing, with a variety of social supports. These supports include employment services, mental health and addictions supports, financial assistance, life skills training and more. Residents are attached to a program where they are required to work on life skills to transition into permanent housing. The property management is coordinated through Durham Region, and Cornerstone Community Association provides support and case workers to assist residents.

The goal of this time-limited transitional housing is to help bridge the gap from homelessness to permanent housing. Residents will enter into an Occupancy Agreement, as opposed to signing a lease, that is tied into program participation. Transitional housing is not subject to the *Residential Tenancies Act* and as such, evictions do not go through the Landlord Tenant Board (LTB). Micro-homes residents can stay for up to four years until they have found

more permanent housing. The first residents moved into the micro-homes in March 2022, and there have already been several individuals who have transitioned to permanent housing.

In the first year of the project individuals with high acuity who were chronically homeless were taken into the program. These individuals were not necessarily attached to a housing worker at the time. Staff were only onsite for limited hours each day and there were problems with drug use, violence, and crime. The community raised concerns about the safety of the neighbourhood and a petition was started against the project. The main challenges have come from the NIMBYism[2] from neighbours not wanting a homeless community within proximity. Even though the area and land were suitable and owned by Durham Region, the neighbours felt there could have been more communication with the community leading up to the project opening, and they had not been included in the decision-making process. In the first year of the project, there was a least one call a day from an angry neighbour mainly related to safety and property values (Durham Region, 2024).

The Region relaunched the project after a few months and changed the intake process to accept participants with moderate acuity. Half of the 10 units are allocated for men and the other half for women. Male participants are selected by Cornerstone from individuals within their transitional housing program, who have completed a housing readiness program. Cornerstone has a shelter and a transitional housing building, and they work with residents to understand the responsibility of tenancy before they can be selected to move into the micro-homes. Similarly, female residents are selected by Muslim Welfare Home following the completion of a housing readiness program delivered by Muslim Welfare Home. There is no waitlist for this program.

---

[2] NIMBY, an acronym for "Not in My Backyard," refers to the phenomenon whereby local residents designate a new development (i.e., shelter, group home) as unsuitable and undesirable for their neighbourhood (The Homeless Hub, 2021)

When a unit becomes available, Cornerstone and Muslim Welfare Home are contacted, and residents are selected by the partner agencies (Durham Region, 2024). Residents graduate from needing 24-hour care, to having access to a support worker 8 hours a day, 5 days a week. In order to provide a space where residents can meet with their support worker, Durham Region converted one of the units into a staff office. Durham Region has future plans of expanding supports to include health providers and addictions counseling.

There have been no complaints from neighbours in the past year and the project is much more stable and successful due to the administrative changes. The current partnership with Cornerstone has been beneficial to the residents and the organization is located just down the street. There have been 5 residents who have already moved on to permanent housing, and a few who have found employment. Several have completed their goals and are currently looking for housing. There have also been a few people who have been discharged for not participating.

With the realization that Housing First models do not work for everyone, Durham Region is applying the knowledge gained from the Oshawa Micro-Housing Pilot Project to the new Beaverton Supportive Housing Site, which is a much larger project located in North Durham (Durham Region, 2024). Durham Region won the Ontario Public Works Association 2022 Project of the Year Award in the Structures, less than $2 million category for the Oshawa Micro-Housing Pilot Project and worked with NRB Modular Solutions to develop the design and layout of the 10 modular housing units (micro-homes). Durham Region is partnering with Durham College and Ontario Tech to complete an evaluation of the pilot and to co-design best practices for the implementation of housing projects to address chronic homelessness. The evaluation is expected to be complete in 2023 (Durham Region, 2024).

Findings

There were commonalities and differences between each of the three case studies involved in this research project. One of the key findings was that all three organizations have adopted a transitional housing model and are using **occupancy agreements** instead of, or in addition to, standard leases as part of their intake process. Transitional housing models are exempt from following the *Residential Tenancies Act* (RTA), and do not require landlords to engage with the Landlord Tenant Board (LTB) in order to evict. Service providers can simply tell the resident to leave if they have reasonable grounds, although they are expected make every possible attempt to avoid evictions. The terms of the occupancy must be clearly defined in the agreement and require residents to actively participate in programming. Both Inn From the Cold and Oshawa Micro-Housing Pilot Project, exclusively use occupancy agreements with their residents, while Indwell's Woodfield Gate uses both occupancy agreements and standard lease agreements. Indwell has recently adopted the use of occupancy agreements for some of their residents who have complex needs. The use of occupancy agreements is becoming a popular tool by supportive and transitional housing providers, now that the length of time for occupancy in this type of program, has been extended from one year to four years.

Each of the three case studies identify having **enough staff** to provide adequate support for residents as a determinant of success for the programs they operate and the residents remaining successfully housed. Inn From the Cold has hired a dedicated staff member to provide ongoing support to residents in their "Please Come Inn" program, which is necessary for residents to prevent situations that might put them at risk for eviction. Residents also learn valuable life skills and benefit from knowing there is someone who cares, checking in on them, or that they can reach out to. Oshawa Micro-Housing Pilot Project has converted one of the units

to a staff office, to provide a space for staff to work, and residents to connect with staff and support workers. This has been a necessary measure to ensure clients have the support they need to deal with issues as they arise before a crisis point is reached. **Integrated supports** are a key component of Indwell's supportive housing model. They are currently working in partnership with St. Joseph's Hospital in London and have health service providers onsite as part of a diverse team of dedicated professionals, that work directly with residents to ensure their needs are being met and prevent potential crisis from escalating.

The **intake processes** developed by the organizations involved in the case studies, is another significant area of interest for this research study. Each organization had a specific process that takes into consideration, the readiness of the individual to maintain housing, and their willingness to participate in programming. Indwell does require that individuals be registered on the By-Name list, but they conduct interviews to ensure potential residents fully understand they are signing up to be part of a community and participate in programming, as well as maintaining their responsibilities as a tenant. Inn From the Cold selects shelter residents who have successfully completed the "Getting Ahead" housing readiness program and are considered to be ready for the next stage of programming "Stability Now". Once they have successfully completed the transitional housing stage, they may be eligible for the "Please Come Inn" head lease program, as space becomes available. This staged approach to housing is showing excellent results in transitioning individuals from chronic homelessness to permanent housing. Oshawa Micro-Housing Pilot Project has also developed a unique intake process in partnership with Cornerstone Community Association and Muslim Welfare Home, who pre-screen participants based on successful completion of housing readiness programs and their potential for successful independent living. Individuals must also be registered on the By-Name

list to qualify. While these intake processes exclude some individuals with high acuity, they do allow for residents who are likely to be successful in the programs, a chance to improve their situations and secure permanent housing. There are few options outside of emergency shelters for those who are unable to maintain housing due to an inability to maintain the unit, pay their bills consistently, and live safely in proximity to others.

Discussion

Although much of the information for this research study was available through online sources, the informational interviews provided an insider perspective on program operations, best practises, as well as the evolution of the projects from their conception to the programs that are currently operating today. Inn From the Cold's "Stability Now" transitional housing program began with the recognition of the need to create stability for some individuals who had been living at the shelter but were ready for the next step to move their lives forward. Durham Micro-Housing Pilot Project began with the recognition of the need to house individuals experiencing chronic homelessness, but staff quickly recognized that individuals with high acuity required 24-hour staffing and modified their intake process to accept individuals with lower acuity who were more housing ready. This adjustment to their intake process has resulted in greater stability and less turnover of residents. Indwell's Woodfield Gate has proven that with enough integrated supports and staff who are invested in the well-being of their residents, long term stability can be achieved for residents with high acuity. Supportive housing models have evolved over the past decade to recognize the complex needs of clients and adopt a more wholistic approach to their housing models.

Limitations

The research study was limited by the small number of case studies and the inability to compare similar housing models due to availability and time constraints. For this research study, I was only able to include one case study for each of the three types of housing: supportive, transitional, and micro-homes. There are new housing projects currently under development that will provide opportunities to compare and contrast information on housing models that are similar. Inn From the Cold's transitional housing program, which is moving to a new location, will be expanded from 5 units to 18 units in 2025. This program may experience similar operational challenges to the Beaverton Supportive Housing project that is now completed and scheduled to open its doors in May 2024. Modular Bridge Housing Community in Peterborough was completed in November of 2023 and is another example of a micro-homes community that could be compared with Durham Micro-Housing Pilot Project to determine if the programs experience similar outcomes. Indwell's Woodfield Gate has several supportive housing sites that offer a range of supportive housing programs, and further investigation would be beneficial. Additionally, this research is limited in its exclusion of the voices of residents with lived experiences of homelessness. While this was outside the scope of this research study, it would be important to include these voices in further research.

Conclusion

Canada's social housing sector was not designed to accommodate the complex needs of individuals with high acuity and co-concurrent mental health and substance use problems (Oudshoorn et al, 2021). As a result, some individuals are unable to maintain stable housing and social housing providers are left with no option but to evict those who create unsafe living

situations or do not pay their rent (Collins et al, 2021). Housing First models are the benchmark for addressing the issue of chronic homelessness, however, they are not always effective in providing long-term, stable housing for those who require ongoing support to remain housed (Mosher, 2013). Some clients with complex needs may benefit from a staged approach to housing, such as the transitional programs offered by Indwell, Inn From the Cold, and Oshawa Micro-Housing Pilot Project. If we are to find solutions for individuals who have been evicted from social housing, we must consider opportunities for a second chance at social housing once they have completed a staged program. There is a clear need for more transitional and supportive housing to better support individuals with high acuity to secure and maintain permanent housing (Oudshoorn et al, 2021).

References

Alexander, L. T. (2017). Tiny Homes for the Homeless: A Return to Politically Engaged Community Economic Development Law? *Journal of Affordable Housing & Community Development Law*, *26*(1), 39–42. Chicago: American Bar Association.

Bartholomew, S. R., Santana, V., & Strimel, G. J. (2019). Teaching Engineering Concepts through Socially Relevant Contexts: Serving the Homeless with Smart Tiny Homes. *Technology and Engineering Teacher*, *78*(7), 24-. International Technology and Engineering Educators Association.

Brown, M, Mihelicova, M., Collins, K., Cummings, C., & Ponce, A. (2019). Housing Options for Individuals Experiencing Chronic Homelessness: Subsidized and Non- Subsidized

Housing Solutions for Complex Clients in Small Cities and Rural Areas

Housing Outcomes among Pathways to Independence Participants. Journal of Social

Service Research. 46. 10.1080/01488376.2019.1612822.

Buccieri, K., Oudshoorn, A., Waegemakers Schiff, J., Pauly, B., Schiff, R., & Gaetz, S. (2020).

Quality of Life and Mental Well-Being: A Gendered Analysis of Persons Experiencing

Homelessness in Canada. *Community mental health journal*, *56*(8), 1496–1503. New York:

Springer US.

City of Kawartha Lakes and County of Haliburton (2019). 2019 Housing and Homelessness

Assessment Report

City of Kawartha Lakes and County of Haliburton (2020). Building Stronger Communities: The

City of Kawartha Lakes & the County of Haliburton Housing & Homelessness Plan

2020-2029

City of Regina (2019). Everyone is Home: A 5-Year Plan to End Chronic and Episodic

Homelessness in Regina, Technical Report.

Clode, J., Dearden, W., & Bibbings, J. (2023). Reframing Antisocial Behaviour: A review of

homelessness prevention good practice in Wales, Welsh Housing Aid Ltd (trading as

Shelter Cymru) Registered charity number: 515902 ©Shelter Cymru 2022

Collins, D., de Vos, E., Evans, J., Severson Mason, M., Anderson-Baron, J., Cruickshank, V., & McDowell, K. (2021). "When We Do Evict Them, It's a Last Resort": Eviction Prevention in Social and Affordable Housing, *Housing Policy Debate*, DOI: 10.1080/10511482.2021.1900890

Collins, D., & Stout, M. (2021). Does Housing First Policy Seek to Fulfil the Right to Housing? The Case of Alberta, Canada. *Housing Studies*, 36(3), 336-358. Harlow; Routledge.

Cummings, C., Lei, Q., Hochberg, L., Hones, V., & Brown, M. (2022). Social support and networks among people experiencing chronic homelessness: A systematic review. *The American journal of orthopsychiatry*, *92*(3), 349–363. https://doi.org/10.1037/ort0000616

Dickenson, R. (2023). Community Engagement in Support of Housing for Complex Clients. Department of Forensic Science, Trent University.

Dohler, E., Bailey, P., Rice, D., Katch, H. (2016). Supportive Housing Helps Vulnerable People Live and Thrive in the Community. Center on Budget and Policy Priorities https://www.cbpp.org/research/housing/supportive-housing-helps-vulnerable-people-live-and-thrive-in-the-community

Donnan, M. E. (2014). Life after Neoliberalism in Canada: How Policy Creates Homelessness and How Citizenship Models Fail to Provide Solutions. International Journal of Arts & Sciences, CD-ROM. ISSN: 1944-6934: 07(05):585–596, Bishop's University, Canada

Durham Post (2023). Durham wins 'Project of the Year' award for micro-housing.

    https://durhampost.ca/durham-wins-project-of-the-year-award-for-micro-housing

Durham Region (2024). Oshawa micro-homes pilot project. By GHC Digital,

    https://www.durham.ca/en/living-here/new-supportive-housing-projects.aspx

Finn-Romero, D. (2022). Community Partnerships: Training Case Managers Working with

    Individuals Experiencing Chronic Homelessness. *Interdisciplinary Journal of*

    Partnership Studies, *9*(1), Article 8. https://doi.org/10.24926/ijps.v9i1.4651

Gordon, M., Gurnham, M., Ngo, L. & Novak, J. (2021). Housing and Homelessness Programs in

    Ontario Financial Accountability Office of Ontario, ISSN 978-1-4868-5066-2 © Queen's

    Printer for Ontario

Holmes, A., Carlisle, T., Vale, Z., Hatvani, G., Heagney, C., Jones, S. (2017). Housing First:

    permanent supported accommodation for people with psychosis who have experienced

    chronic homelessness. *Australasian Psychiatry*. 25(1):56-59.

    doi:10.1177/1039856216669916

Indwell (2024). Woodfield Gate Apartments. Website, https://indwell.ca/woodfield-gate

IFTC (2023). Inn From the Cold, Hub for the Homeless and At-Risk. Website,

   https://www.innfromthecold.ca/

Kresky-Wolff, M., Larson, M. J., O'Brien, R. W., & McGraw, S. A. (2010). Supportive housing

   approaches in the Collaborative Initiative to Help End Chronic Homelessness

   (CICH). *The journal of behavioral health services & research*, *37*(2), 213–225.

   https://doi.org/10.1007/s11414-009-9206-y

Margier, A. (2023). The institutionalization of 'tiny home' villages in Portland: Innovative

   solution to address homelessness or preclusion of radical housing practices? *Cities*, *137*,

   104333-. Elsevier Ltd.

Milaney, K., Williams, N., Lockerbie, S.L. *et al.* (2020). Recognizing and responding to women

   experiencing homelessness with gendered and trauma-informed care. *BMC Public

   Health* 20, 397. https://doi.org/10.1186/s12889-020-8353-1

Mitchell, D. (2023). How tiny shelters in Ontario are looking to fill the gap for those in need of

   housing. Global News, https://globalnews.ca/news/10023803/tiny-shelters-ontario-gap-

   permanent-housing/

Mosher, J. (2013). Housing First, Women Second? Gendering Housing First: A Brief from the

   Homes for Women Campaign,

Housing Solutions for Complex Clients in Small Cities and Rural Areas

https://povertytaskforce.files.wordpress.com/2013/12/housing-first-women-second-
final.pdf

Mosley, J. E. (2022). Sunggeun Park, Service Providers' Influence in Collaborative Governance
Networks: Effectiveness in Reducing Chronic Homelessness, *Journal of Public
Administration Research and Theory*, Volume 32, Issue 1, January 2022, Pages 130–
149, https://doi.org/10.1093/jopart/muab013

O'Meara, J. (2022). No big expansion planned for Oshawa micro-homes. Oshawa This Week,
https://www.durhamregion.com/news/no-big-expansion-planned-for-oshawa-micro-
homes/article_5020f25d-0449-50c6-8bb7-95f7aeb00525.html

O'Meara, J. (2022). What's it like inside Oshawa's new micro-homes? Oshawa This Week,
https://www.durhamregion.com/news/what-s-it-like-inside-oshawa-s-new-micro-
homes/article_7ad18c36-0f22-583a-a80e-b72cbe1b0f19.html

Ontario Human Rights Commission (2008). Right At Home: Report on the consultation on
human rights and rental housing in Ontario, ISBN: 978-1-4249-7224-1

Oudshoorn, A., Van Berkum, A., Hunter, S., Rolfe, A., Marshall, C. A., Thuemler, N., Crockett,
M., Caxaj, S., Gilliland, J., McLean, S., & Befus, D. (2021). Best Practice Guideline:
How to Build Supportive Housing in Canada, https://www.abeoudshoorn.com/wp-
content/uploads/2021/11/BPG-Supportive-Housing.pdf

Pankratz, C, Nelson, G, Morrison, M. (2017). A quasi-experimental evaluation of rent assistance for individuals experiencing chronic homelessness. *J Community Psychol*. 45: 1065–1079. https://doi.org/10.1002/jcop.21911

Province of British Columbia, Ministry of Mental Health and Addictions (MMHA) (2022). Complex Care Housing: Draft Strategic Framework, Ministry of Health (HLTH) and Ministry of the Attorney General

Province of Ontario (2016). Housing and Supportive Services for People with Mental Health Issues (Community-Based) 2016 Annual Report of the Office of the Auditor General of Ontario, Chapter 3 • VFM Section 3.07

Polcin, D. L. (2016). Co-occurring Substance Abuse and Mental Health Problems among Homeless Persons: Suggestions for Research and Practice. *Journal of social distress and the homeless*, *25*(1), 1–10. https://doi.org/10.1179/1573658X15Y.0000000004

Statistics Canada (2023). Health of Canadians Determinants of Health. Catalogue no. 82-570-X, https://www150.statcan.gc.ca/n1/pub/82-570-x/2023001/section4-eng.htm

Strobel, S., Burcul, I., Hong Dai, J., Ma, Z., Jamani, S. & Hossain, R. (2021). Characterizing people experiencing homelessness and trends in homelessness using population-level emergency department visit data in Ontario, Canada

Housing Solutions for Complex Clients in Small Cities and Rural Areas

https://www150.statcan.gc.ca/n1/pub/82-003-x/2021001/article/00002-eng.htm

The Homeless Hub (2021). NIMBY (Not in My Backyard). Website,

https://www.homelesshub.ca/solutions/affordable-housing/nimby-not-my-backyard

Trglavcnik, V. (2010). "Eviction Notice – Arrears Due: A Report on Ontario Social Housing

Providers' Discretion to Evict". MPA Major Research Papers. 90.

https://ir.lib.uwo.ca/lgp-mrps/90/

Waegemakers Schiff, J. & Turner, A. (2014). Housing First in Rural Canada: Rural

Homelessness and Housing First Feasability Acroos 22 Canadian Communities. Calgary

Alberta; Faculty of Social Work, University of Calgary.

Whalen, M. (2021). The Effectiveness, Need and Success of Transitional Housing Facilities

Department of Forensics, Trent University

York Region (2021). Innovative Housing Options to Support Affordable Housing.