

**The Homeless  
and  
At-risk Population in  
New Westminster  
and  
A Needs Assessment of  
Services**

**Prepared for the City of New Westminister and the New  
Westminster Homelessness Coalition**

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# Table of Contents

<b>1</b>	<b>EXECUTIVE SUMMARY</b> .....	<b>I</b>
<b>2</b>	<b>INTRODUCTION</b> .....	<b>1</b>
<b>3</b>	<b>DEFINITION OF HOMELESSNESS AND AT RISK OF HOMELESSNESS</b> .....	<b>3</b>
<b>4</b>	<b>THE HOMELESS POPULATION IN NEW WESTMINSTER</b> .....	<b>4</b>
4.1	PROFILE OF THE HOMELESS FROM THE 2005 HOMELESS COUNT .....	4
4.2	INTERVIEWS WITH HOMELESS AND FORMERLY HOMELESS INDIVIDUALS .....	17
<b>5</b>	<b>THE POPULATION AT-RISK FOR HOMELESSNESS</b> .....	<b>23</b>
<b>6</b>	<b>ADDRESSING HOMELESSNESS AND THE AT-RISK POPULATION</b> .....	<b>33</b>
6.1	THE CONTINUUM OF HOUSING AND SUPPORT.....	33
6.2	THE HOUSING CONTINUUM .....	34
6.2.1	<i>Emergency Shelters</i> .....	34
6.2.2	<i>Transition Houses</i> .....	37
6.2.3	<i>Transitional and Supported Housing</i> .....	38
6.2.4	<i>Independent housing</i> .....	42
6.3	THE INCOME CONTINUUM .....	50
6.4	SUPPORT SERVICES.....	59
6.4.1	<i>Addiction Services</i> .....	60
6.4.2	<i>Drop-in Centres</i> .....	62
6.4.3	<i>Outreach Services</i> .....	63
6.4.4	<i>Food, clothing, furniture and other support programs</i> .....	65
6.4.5	<i>Employment services</i> .....	66
6.4.6	<i>Mental Health</i> .....	67
6.4.7	<i>Health Services</i> .....	68
6.4.8	<i>Prevention Services</i> .....	69
<b>7</b>	<b>SURVEY OF NEW WESTMINSTER SERVICE PROVIDERS</b> .....	<b>71</b>
	<b>GLOSSARY</b> .....	<b>75</b>
	<b>BIBLIOGRAPHY</b> .....	<b>79</b>
	<b>GRAPHS</b> .....	<b>80</b>
	<b>TABLES</b> .....	<b>81</b>

# 1 Executive Summary

This report was commissioned by the City of New Westminster and the New Westminster Homelessness Coalition (the Coalition). The Coalition, formed in September 2005, has representatives from social service agencies, the City of New Westminster, the Greater Vancouver Regional Steering Committee on Homelessness, provincial ministries, interested parties, as well as elected officials. The purpose of the Coalition is to act as both a planning and implementation table for the response to homelessness in New Westminster.

This report includes a count and profile of the homeless and at risk of homelessness population in New Westminster, with comparisons to other communities and the GVRD. It also includes first person interviews with people who are currently or were formerly homeless and an analysis of housing, income and support services to the homeless and at risk in New Westminster. Gaps in housing, income and support services were identified from the research, from a survey of service providers in the City and through workshops with the Homelessness Coalition of New Westminster. The identified gaps were then used to create an action strategy and implementation plan. The Strategy and Plan are contained in a separate document. As well, the Inventory of Services is contained in two separate Excel spreadsheets, one for adults and one for youth, which can be updated as necessary.

## The Homeless Population in New Westminster

Like almost all municipalities in the Greater Vancouver Region, New Westminster had an increase in its homeless population between the 24-hour counts of 2002 and 2005. The New Westminster increase was 33%. In 2005, 92 individuals were counted: 45 sheltered homeless and 47 street homeless. Like all point-in-time counts, the results are considered an undercount.

80% of the homeless counted in New Westminster in 2005 were male. The sheltered homeless were, on average, slightly older than the street homeless. Four individuals were age 55+, with one, a street homeless individual, over 65 years. The majority of sheltered homeless had been homeless for less than one month while the majority of street homeless had been homeless for one month but less than one year. However, 25% of the street homeless had been homeless for more than a year. Reasons for the homelessness included lack of income and abuse/conflict. More than half the homeless had a "secure" source of income, i.e. from a government transfer, while 25% had no income. Most of the street homeless had stayed at someone else's place the night before, (although a considerable number had stayed outside), and most had been alone. Addictions was the health condition most cited by the street homeless.

In 2001, the Aboriginal population in New Westminster was 3%. 17% of those enumerated in the 2005 count self-identified as Aboriginal.

## The At-Risk for Homelessness Population

Households considered at-risk for homelessness are measured by INALH data. INALH data is obtained from Statistics Canada and the Canada Mortgage and Housing Corporation (CMHC). INALH stands for: **In** Need and spending **At** **Least** **Half** of income

on shelter. In the GVRD an M is added, becoming INALHM, because data for the GVRD was modified to include Aboriginal households. (INALHM data in this report is from the 2001 census. The data will be updated with the 2006 census)

In need refers to Core Housing Need, i.e. living in a dwelling that is:

- inadequate (in need of major repairs,
- unsuitable (not enough rooms for size of household), or
- unaffordable.

In 2001 there were almost 2,300 INALHM households in New Westminster. This was an increase of 2.7% since 1996, whereas in the same period, the Greater Vancouver Region (GVR) saw a small decrease in the number INALHM households. 75% of INALHM households in New Westminster were renters representing 13% of all renter households in the City. Those likely to be INALHM households included:

- People living alone, (61% of INALHM households considerably higher than for the GVR),
- Lone-parent families,
- Seniors, and
- Immigrants.

The average income of INALHM renter households was far below the poverty line at \$12,745. Owner households had considerably higher average income (\$21,530) but still considered a low income, especially if supporting a family. The high cost of housing combined with these low incomes is the cause for INALHM households to have spent, on average, two thirds of gross income on shelter costs. Other findings included that:

- More than half of INALHM households received their major source of income from government transfers, i.e. pensions, income assistance, and employment insurance;
- INALHM lone parent families (largely female-led) were 12% of all lone-parent families in the City while INALHM couple families with children at home were only 5% of New Westminster couple families; and
- 55% of primary household maintainers (the person in the household 15 years or older who pays the rent, mortgage, taxes, electricity, etc.) were female, while 20% were a visible minority and 43% reported a disability.

### Services to the homeless and those at risk of homelessness

Addressing homelessness in this report is based the Continuum of Housing and Support adopted by the Regional Homelessness Plan for Greater Vancouver and its update, *3Ways to Home* (2003). The Continuum is a framework for preventing and alleviating homelessness.

The Continuum of Housing and Support		
<b>Housing Continuum</b>	<b>Adequate Income</b>	<b>Support Services</b>
Emergency shelters	Employment	Addiction services
Transition houses	Employment	Drop-in centres
Transitional housing	Insurance	Outreach services
Supported housing	Income	Mental health services
Independent housing	assistance	Health services

While it is felt that the full range of services in the Continuum are necessary to address homelessness within Greater Vancouver, not all communities need to offer the entire range of services. Some services might adequately be delivered either by partnerships between communities or on a regional basis.

## **Housing**

Emergency shelters and transition houses for women and children fleeing abuse are an important but interim response to homelessness, providing short stays of up to 30 days. Currently New Westminster has three shelters, offering 45 beds (34 for men only) plus cold wet weather and extreme weather capacity. As well as these emergency beds there are 12 beds in a transition house for women and children fleeing violent abuse.

The need for a minimum barrier, enhanced\*, emergency shelter beds for all populations was identified through this project. Emergency capacity for women with or without children who are not fleeing abuse, couples and beds for those with pets was specifically noted. As well, current shelter beds may not always be appropriate for the needs of seniors.

Since the adoption of the Continuum of Housing and Support as a framework for addressing homelessness, the concept of *housing first* has gained prominence in Canada and the United States. Using the *housing first* approach, homeless individuals are moved directly, and as quickly as possible, into permanent housing, either from the street or from an emergency shelter, and are linked to services to help maintain them in their housing. *Housing first* is based on the premise that an individual or household can best work on the reasons for their homelessness from a position of stable housing. This leads to an approach to homelessness that focuses on the availability of affordable housing and prevention of eviction. Supported housing, then, is considered by many to be the key factor in addressing homelessness, especially for the chronically homeless. There are a number of transitional and supported housing<sup>1</sup> facilities in the City, but not enough to meet demand.

Affordable independent housing is difficult to find in New Westminster, as in all areas of the Lower Mainland. Rental vacancy rates in New Westminster in October 2005 were low, at 2%. As of August 2006 there were 541 qualifying New Westminster households waiting for social housing units. 86 of these were already homeless, either staying with friends or family, or living in hotels/motels, shelters or on the street. To assist seniors with subsidies to afford market rental housing units the province provides the SAFER program. All seniors who qualify are eligible for assistance. However, the number of rental subsidies for market housing for New Westminster mental health clients is currently fixed at 20 and the wait list has been closed due to the very low turnover rate.

## **Income**

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<sup>1</sup> Transitional housing accommodates residents for a particular time period, and is usually housing after a person has come from another facility, such as addiction treatment or a transition house. Supported housing is intended to be permanent and different types meet different needs. For example, supported housing is an important resource for people with special needs including those with severe and persistent mental illness.

In 2001, 22% of the New Westminister population was of low income. This compared with only 18% in the province and it included more than one-quarter of those 55-74 years and close to half of recent immigrants. Lone-parent families had incomes that were just above half the income of two parent families. Between 2001 and 2004 the number of people on Income Assistance in the City dropped dramatically, from 6% of the population to 2%.

BC Shelter Allowances are considerably lower than average rents in New Westminister. As well, a single person earning minimum wage, currently \$8/hour, falls below the core need income thresholds for any sized apartment in New Westminister. Core Need Income Thresholds are a measure of income that would allow for affordability of rental units in New Westminister, where affordability is determined by paying no more than 30% of gross income in shelter costs (rent + utilities). It is the measure used by BC Housing to determine a household's qualifications for social housing.

**Rental affordability by unit type, New Westminister**

Unit type	Average monthly rental costs, 2005	Core Need Income Thresholds by unit size	Monthly income needed to reach affordability	Minimum Housing Wage: Hourly wage needed to reach affordability*	Monthly Shelter Allowance from BC Government Income Assistance
Bachelor	\$543	\$27,500	\$2,291	\$13.22	Single person \$325
1-Bedroom	\$656	\$31,000	\$2,583	\$14.90	2 adults \$520
2-Bedroom	\$826	\$37,500	\$3,125	\$18.02	Single mother, 2 children of same gender \$555
3-Bedroom	\$1,043	\$44,000	\$3,667	\$21.15	2 adults, 5 children \$695

\*Based on earning the hourly wage for 52 weeks and a 40-hour week

Clearly, those on income assistance, or earning minimum wage will find it almost impossible to find housing that is affordable in the City. As with many low-income earners, if they find themselves paying more than 50% of gross income on rent they are at risk of becoming homeless. Also identified was the need for easier access to income assistance. Many who qualify find the process so daunting they give up.

**Supports**

Identified as a gap in New Westminister was the lack of a minimum barrier drop-in centre for the homeless where they might come in off the street to shower, use laundry facilities, access meal service, telephones and connect to other services. Other identified gaps were:

- addiction services,
- outreach support to the chronically homeless, and to women and children fleeing violence,
- the delivery of health care to those without a care card,
- the delivery of dental services to adults, and
- prevention services to avoid eviction.

## 2 Introduction

“Homelessness exacerbates issues associated with poverty. Studies have found that homeless people experience problems and use services more than low-income individuals who are housed.”

“Issues arising from homelessness are more costly to deal with after the fact than if homelessness were prevented in the first place.”

*Homelessness – Causes and Effects, The Relationship Between Homelessness and the Health, Social Services and Criminal Justice Systems: a Review of Literature*, BC Ministry of Social Development and Economic Security and BC Housing, 2001

### Overview of project

Like other municipalities in the region, New Westminster has seen an increase in homelessness. The City recognizes that, among other things, addressing homelessness would:

- *Eliminate human suffering and the waste of potential lives;*

(E.g. For some young people the street is the safest place to be and “represents the only viable alternative to an abusive and dangerous home situation.”<sup>2</sup>)

- *Reduce the drain on public and private supports;*

(E.g. A BC study found that homeless individuals cost the province 33% more than formerly homeless individuals who had been housed.)

- *Avoid the negative effects on communities, business and civil society.*

(E.g. “Several long-time businesses are near to closing or have closed because they cannot afford the crime, intimidation or cost of preventative services. Sometimes it is the perception of street crime alone that kept people away from the business. This is reinforced by the number of homeless people and beggars on the street.”<sup>3</sup>)

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<sup>2</sup> Caputo, Tullio et al, *The Street Lifestyle Study*, prepared for Health Canada, 1997, p. V

<sup>3</sup> Focus Group with Downtown Business Improvement Association, Vancouver, 2005, cited in *Beyond the Revolving Door: A New Response to Chronic Offenders*, BC Justice Review Task Force

To this end, the City committed itself to the creation of a homelessness strategy as a strategic priority for 2006. In this task it worked closely with the New Westminster Homelessness Coalition, formed in September 2005, with representatives from social service agencies, the City, the Greater Vancouver Regional Steering Committee on Homelessness, provincial ministries, interested parties, and elected officials. The purpose of the Coalition is to act as both a planning and implementation table for the response to homelessness in New Westminister. The City hired Jim Woodward & Associates Inc to assist with developing a strategy.

The first task leading to a strategy is this report, covering current conditions in New Westminister for the homeless and those at risk of homelessness. The report includes:

- An examination of the count and profile of the homeless in New Westminister based on the 2005 Regional Homeless Count, comparisons with the 2005 homeless profile for Burnaby, the Tri-Cities and the Greater Vancouver Regional District (GVRD), and changes in the New Westminister profile between the 2002 and 2005 counts;
- Additional statistical and anecdotal material on the numbers and profile of the homeless and those at risk of homelessness collected from service providers.
- An examination of at-risk of homelessness statistical data for New Westminister provided by Statistics Canada and the Canada Mortgage and Housing Corporation (CMHC) to the GVRD;
- An examination of services in New Westminister for those who are homeless or at-risk of homelessness, based on the Continuum of Housing and Support, a framework for addressing homelessness adopted by the GVRD and its member municipalities, including New Westminister. The Continuum includes housing (emergency shelters, transitional, supported and independent housing), income and support services (such as health and mental health services, drop-in centres, outreach services and addiction and prevention services);
- Results of a survey of service providers in New Westminister;
- An inventory of services to the homeless and those at-risk that can be updated as needed (Appendix 1 as an Excel spreadsheet);
- Interviews with homeless individuals, formerly homeless individuals, and those at risk of homelessness; and
- An analysis of the gaps in services.

This report is intended to be used as background and research material to help develop the Strategy and Implementation plan.

### 3 Definition of homelessness and at risk of homelessness

As defined by the United Nations, homelessness has two components: the absolute homeless and the relative homeless.

**Absolute Homeless** are those who literally have no home, who sleep in parkades, on benches, in doorways, under bushes in parks, or who use the emergency shelter system.

**Relative Homeless** are those at risk of homelessness. Their housing does not meet basic health and safety standards, provide them with security of tenure or personal safety, nor is it affordable.<sup>4</sup>

The homeless and those at-risk are a highly diverse population - men, women, children, youth, seniors, people who have lived in a community for a long time and people who are recent immigrants and refugees. Diverse, too, are the reasons for becoming homeless or being at-risk. These include inadequate income or loss of income; loss of housing through eviction or gentrification; individuals, families or youth fleeing abuse; release from a treatment facility, or hospital without adequate community support; difficulty finding a place to rent if one has mental health concerns or other issues; or coming out of jail with no place to go to.

In addition, being homeless or at risk of homelessness does not affect all individuals in the same way. What this population has in common is a need for adequate housing and sufficient resources, through employment or some form of social assistance, to sustain themselves. As well, some, if not many, require specialized support services, such as addiction or mental health services. In an extensive Toronto study, 84% of emergency shelter clients in the study sample were found to have either a mental illness or an addiction or both.<sup>5</sup> In New Westminster, 25% of the street homeless in the 2005 Greater Vancouver Homeless Count (2005 Count) self-reported a mental illness and 40% an addiction. Those at-risk may need other types of services, such as preventative support. For example, since 2004 more than 4,000 people in Ontario have been saved from eviction through participating in rent banks.<sup>6</sup>

The Regional Homelessness Plan for Greater Vancouver, updated in 2003 as *3 Ways to Home*, and endorsed by New Westminster and other municipalities of the GVRD, recognized that while creating sufficient affordable shelter would go a long way towards addressing homelessness, it would not go all the way. To alleviate homelessness and to address the needs of the at-risk population, a community needs a varied and extensive approach. To this end, *3 Ways to Home* adopted the Continuum of Housing and Support, discussed in Section 6 of this report.

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<sup>4</sup> *Regional Homelessness Plan for Greater Vancouver*, 2001.

<sup>5</sup> Canadian Mental Health Association, Mental Health Policy Research Group, Toronto, *Mental illness and pathways into homelessness: proceedings and recommendations*, 1998

<sup>6</sup> "A rent bank is a short-term funding mechanism through which low-income tenants may apply to receive financial assistance to address short-term rent arrears."

[http://www.mah.gov.on.ca/userfiles/HTML/nts\\_1\\_16739\\_1.html#g3](http://www.mah.gov.on.ca/userfiles/HTML/nts_1_16739_1.html#g3)

## 4 The homeless population in New Westminster

### 4.1 Profile of the homeless from the 2005 Homeless Count

The 2005 Homeless Count data suggests that:

A person who was **street homeless** in New Westminster on count day was most likely to have been a male, aged 45-54 years, who had been homeless for 1-12 months. He became homeless due to lack of income, and had no source of income. He stayed alone the night before in someone else's place, and he did not go to a shelter because he was able to stay with this friend. He had a medical condition and a physical disability and/or an addiction. His last permanent home was in New Westminster, as opposed to another locale.

A person who was **sheltered** in New Westminster on count night was most likely to have been a male, aged 35-44 who had been homeless for less than one month. He became homeless due to abuse/conflict, followed closely by lack of income, and he is either receiving Income Assistance or is in a training program. He stayed alone in the shelter. He may be without a medical problem, but if he has one it is an addiction or a medical condition. His last permanent home was in New Westminster, as opposed to another locale.

That said, the homeless are a diverse population with a variety of reasons for their homelessness, and distinct service needs.

## ***The Point-in-Time Homeless Count of March 15, 2005***

### **92 Homeless Counted in New Westminster, 2005**

#### **Sheltered Homeless**

**45**

#### **Street Homeless**

**47**

### **Methodology**

The 2005 Homeless Count in the Greater Vancouver Region (GVR) provided an estimate of the homeless population at a single point in time, the 24-hour period that was March 15, 2005.<sup>7</sup> It was designed using a similar methodology as the 2002 count. For these counts, a person was considered homeless if they did not have a place to stay for more than 30 days that they called their own and if they did not pay rent. This includes people with no physical shelter, such as those sleeping rough in doorways, in parks, in vehicles, on the beaches, etc. It also includes those staying the night in emergency shelters, transition houses for women and children fleeing abuse and in youth safe houses, and those who “couch-surfed” with friends or relatives, since this accommodation has no security of tenure.

For the night count, (the “sheltered homeless”), staff at emergency shelters, transition houses and safe houses completed a survey form that anonymously catalogued those who were sheltered as of 12:01 March 15<sup>th</sup>, as well as those who came in prior to daylight, (which on March 15<sup>th</sup> was approximately 5 a.m.), and some demographic information on each individual.

The daytime count (the “street homeless”) enumerated those who did not stay in shelters, transition houses or safe houses the night before. Beginning at 5:30 a.m. teams of volunteers canvassed locations visited by the homeless. These included bottle depots, drop in centres, meal programs, parks, etc. Volunteers elicited demographic information from those who identified themselves as homeless and who stated that they had not slept in a shelter the night before.

The homeless counts must be considered undercounts. Not enumerated were those who neither slept in shelters nor attended any of the daytime locations visited by volunteers. Also not counted were those in detox facilities, recovery houses, holding cells or hospitals who did not have a place of their own to go to when leaving. As well, while attempts were made to count those who couch surfed by seeking the assistance of various agency staff and outreach workers, likely many were missed. A study on the hidden homeless in the GVR interviewed homeless individuals in six communities including New Westminster.<sup>8</sup> Half of the study sample stated they were currently sofa-surfing or staying with friends and almost three-quarters stated that previously they had stayed with family and friends on an emergency basis.

<sup>7</sup> Material in this section comes from *On Our Streets and In Our Shelters...Results of the 2005 Greater Vancouver Homeless Count*, September 2005 available at: <http://www.gvrd.bc.ca/homelessness/research.htm>

<sup>8</sup> Boyes, et al. *Hidden Homelessness: Lessons From Experience*, 2005, p. 77

## Results

The following is a profile of the homeless counted on March 15, 2005 in New Westminster, and where possible, comparisons with the Greater Vancouver Region, with Burnaby and with the Tri-Cities. The Tri-Cities are included because the vast majority of homeless in that sub-region were counted in Port Coquitlam, a city whose projected population for 2005 is identical to New Westminster's.

**NB:** It should be noted that municipal level profile results for the homeless are only available from the 2005 count and not the 2002 count. However, profiles should be available from future counts for comparison.

### A. How many counted in New Westminster?

Homelessness in New Westminster increased by 33% between the counts of 2002 and 2005.

Whereas 69 individuals were counted in New Westminster in 2002, 92 individuals were counted in 2005. This is in keeping growing homelessness throughout the GVR (except for the Ridge Meadows sub-region, where the homeless population declined between the two counts).

Between the counts of 2002 and 2005, homelessness in New Westminster increased by 33%.

The graph below shows the change in sheltered, street and total homeless for New Westminster between the 2002 and 2005 counts. It must be reiterated that these are individuals who were counted during one particular 24-hour period. On another day you might find some of the street homeless staying in shelters and some of the sheltered homeless staying the night on the street, as well as other differences.

**Figure 1: Number of people counted in the 2005 and 2002 Homeless Counts, New Westminster**



The proportion of sheltered to street homeless in New Westminster was 49% sheltered to 51% street. This is similar to the ratio for the GVR (48% sheltered to 52% street).

The New Westminster percentage increases in homelessness from 2002 to 2005 were less than the percentage increases for the GVR, and considerably less for the street homelessness. However, while the numbers are small, it should be noted that in the 2005 Count, New Westminster, with 2.7% of the GVR's population, enumerated 4.3% of the homeless in the region. This might partially be explained by the number of shelter

beds in New Westminster compared with municipalities with considerably less shelter capacity.

**Table 1: Difference between 2002 and 2005 Homeless Counts in New Westminster and the GVR<sup>9</sup>**

	<b>Change in number of homeless in New Westminster</b>	<b>% Change for New Westminster</b>	<b>% Change for GVR</b>
Total Homeless	+23	+33%	+94%
Sheltered Homeless	+9	+25%	+33%
Street Homeless	+28	+42%	+238%

Comparison:

*Both the Tri-Cities and the street homeless in Burnaby<sup>10</sup> showed far greater percentage increases than New Westminster. It should be noted that unlike New Westminster neither municipality has emergency shelter capacity other than transition houses.*

*Burnaby – Street homeless increased by 280% from 2002.*

*Tri-Cities - Total homelessness increased by 192%.*

**B. Last Permanent Home**

Homeless individuals move around, often travelling from one municipality to another. Only 36% of the New Westminster street homeless and 26% of the sheltered homeless stated the city as their last permanent home. Conversely, both sheltered and street homeless enumerated in other municipalities declared a last permanent home in New Westminster.

**Table 2: Last permanent home of the sheltered and street homeless, New Westminster, 2005 Homeless Count**

<b>Last permanent home of the sheltered homeless (Total – 45)</b>		<b>Last permanent home of the street homeless (Total – 46 – 1 no answer)</b>	
	<b>Number</b>		<b>Number</b>
Other Canada	9	Vancouver	9
Burnaby	7	Other BC	5
Surrey	5	Surrey/White Rock	4
Vancouver	5	Coquitlam	3
Langley	3	Langley	2
Port Coquitlam	2	Other Canada	2
Maple Ridge	1	Burnaby	1
Other BC	1	Port Coquitlam	1
<b>Subtotal</b>	33	Delta	1
New Westminster	12	Outside Canada	1
		<b>Sub Total</b>	29
		New Westminster	17

Comparison:

<sup>9</sup> *On Our Streets and In Our Shelters...Results of the 2005 Greater Vancouver Homeless Count,*

<sup>10</sup> Burnaby's sheltered homeless on count day consisted of 2 people staying in the transition house. Therefore all statistics relating to Burnaby during the count are for their street homeless.

*Burnaby – Of the 38 street homeless counted in Burnaby, 34% stated their last permanent home was Burnaby. This is similar to the percentage of the street homeless in New Westminister who gave New Westminister as their last permanent home.*

Most of the street homeless counted in other municipalities who stated New Westminister as their last permanent home were found in Surrey. Most of the sheltered homeless were found in Vancouver.

**Table 3: Enumeration locations of those who stated a last permanent home in New Westminister, 2005 Homeless Count**

Municipality where enumerated	Sheltered Homeless	Street Homeless
Vancouver	9	8
Surrey	1	10
Burnaby		2
Maple Ridge/Pitt Meadows		1
North Vancouver	1	
Total	11	21

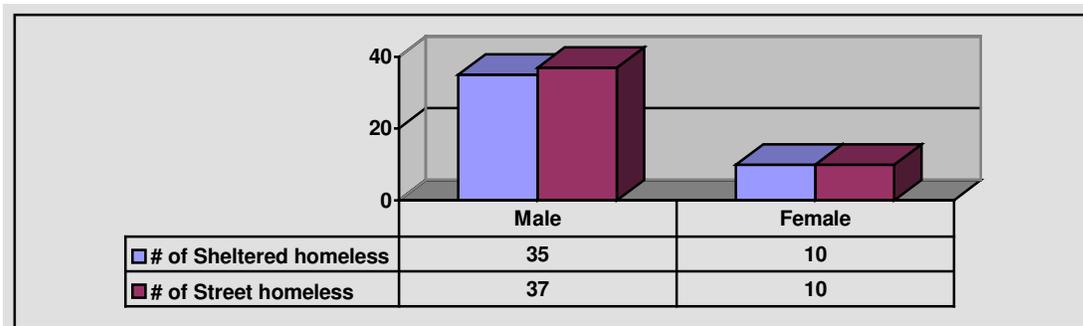
Comparison:

*21 street homeless found in the GVR on count day stated that their last permanent home was in Burnaby.*

**C. Gender**

During the 2005 count, questions were asked of the homeless leading to a profile. Close to 80% of the homeless counted in New Westminister were males.

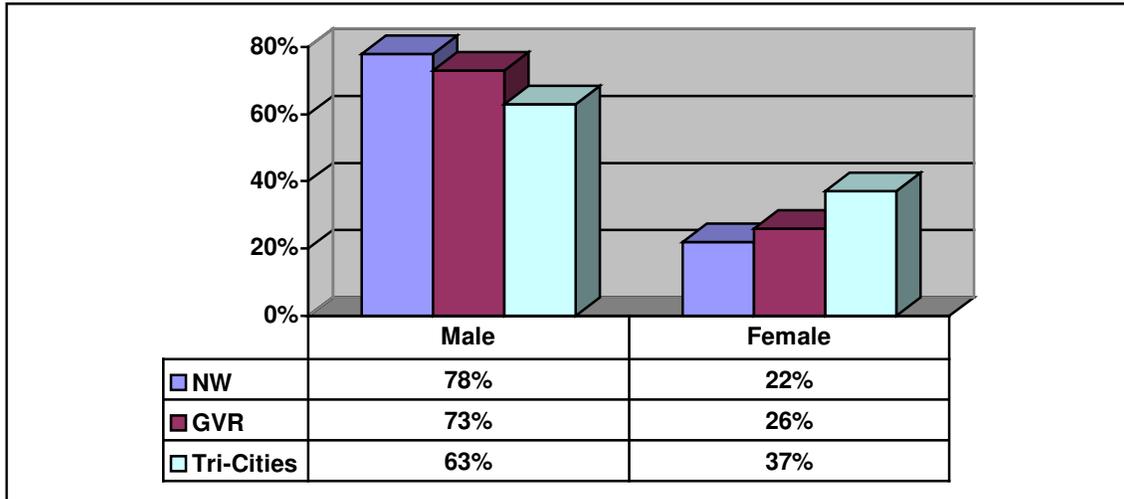
**Figure 2: Gender of homeless, New Westminister, 2005 Homeless Count**



Comparison:

*New Westminister had a higher percentage of males than did the GVR or the Tri-Cities.*

**Figure 3: Percentage of males and females in the total homeless populations of New Westminster, GVR, and the Tri-Cities, 2005 Homeless Count**



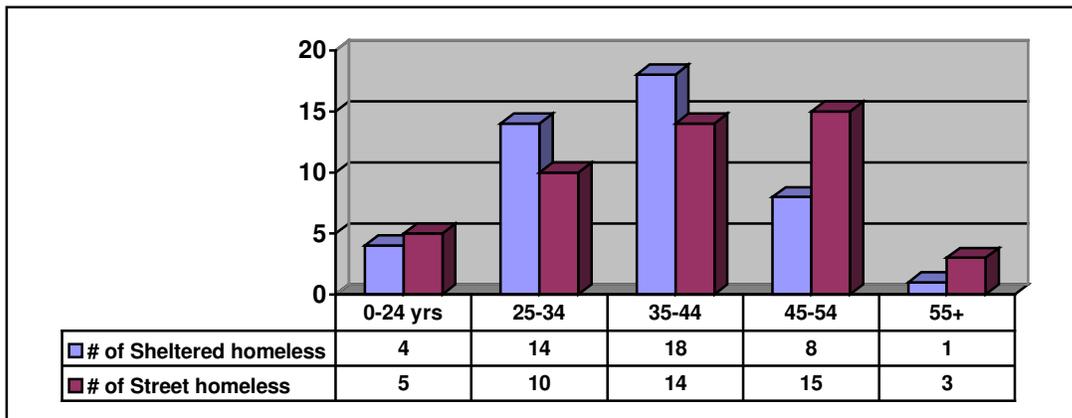
Comparison:

*New Westminster had much higher percentage of females (21%) among the street homeless than Burnaby (5%).*

**D. Age**

The majority of the street homeless in New Westminster were between 35 and 54 years. The sheltered population was slightly younger, largely between 25-44 years. Four people over 55 years were found among the street homeless, including one over 65.

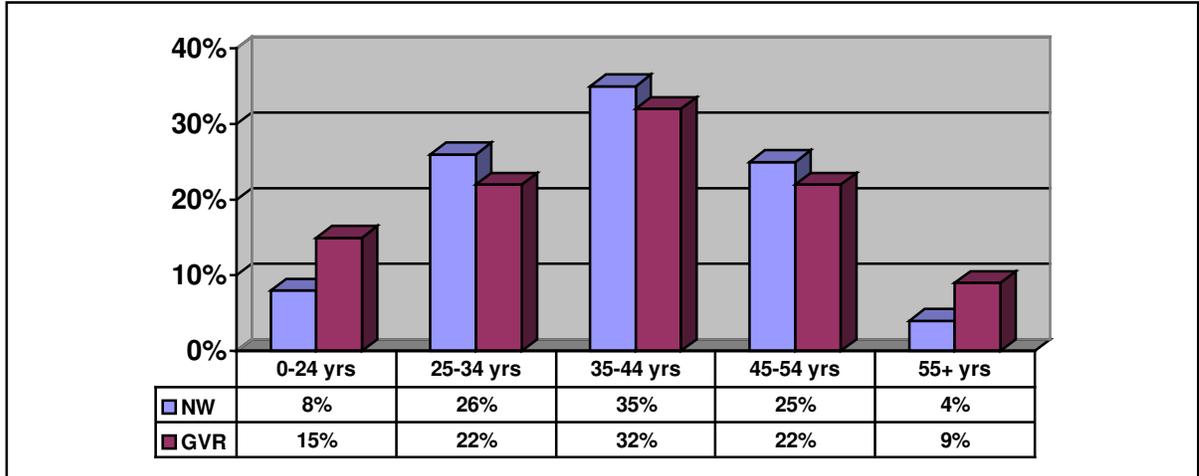
**Figure 4: Age of homeless, New Westminster, 2005 Homeless Count**



Comparison

New Westminster had a smaller percentage of homeless youth under 24 and seniors than did the GVR, but a higher percentage of those aged 34-44 year.

**Figure 5: Percentage of homeless in each age group, New Westminster and GVR, 2005 Homeless Count**



### E. Aboriginal status

In 2001, the Aboriginal population in New Westminster was 3% of the City's population.<sup>11</sup> In 2005, 17% of the homeless enumerated in the city self-identified themselves as Aboriginal. Four were enumerated in shelters, and 12 on the street.

#### Comparison

*30% of the homeless counted in the GVR identified themselves as Aboriginal, considerably out of proportion to their percentage of the general population (2%). Like New Westminster, the majority of those identifying as Aboriginal in the GVR were found among the street homeless.*

### F. Length of time homeless

**SHORT TERM: Less than one month**

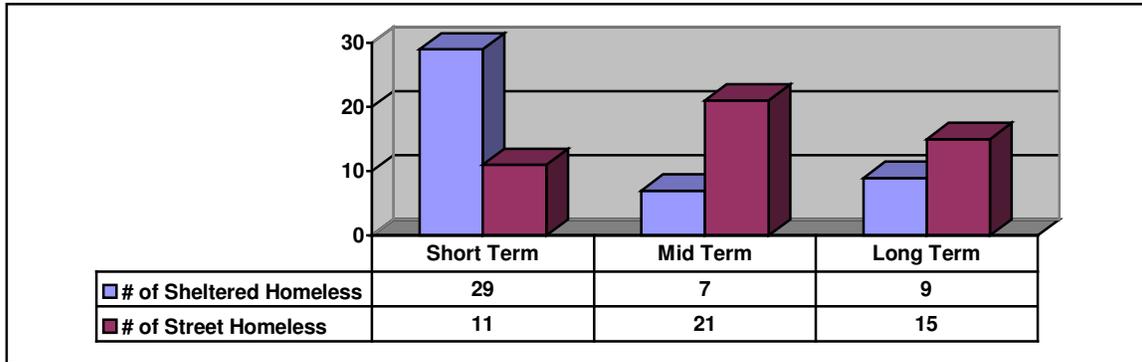
**MID TERM: One month to less than one year**

**LONG TERM: More than one year**

<sup>11</sup> Statistics Canada, Aboriginal Population Profile, 2001

Almost two-thirds of the sheltered homeless enumerated in New Westminster had been homeless for less than one month. However, most of the street homeless had been homeless for a longer period.

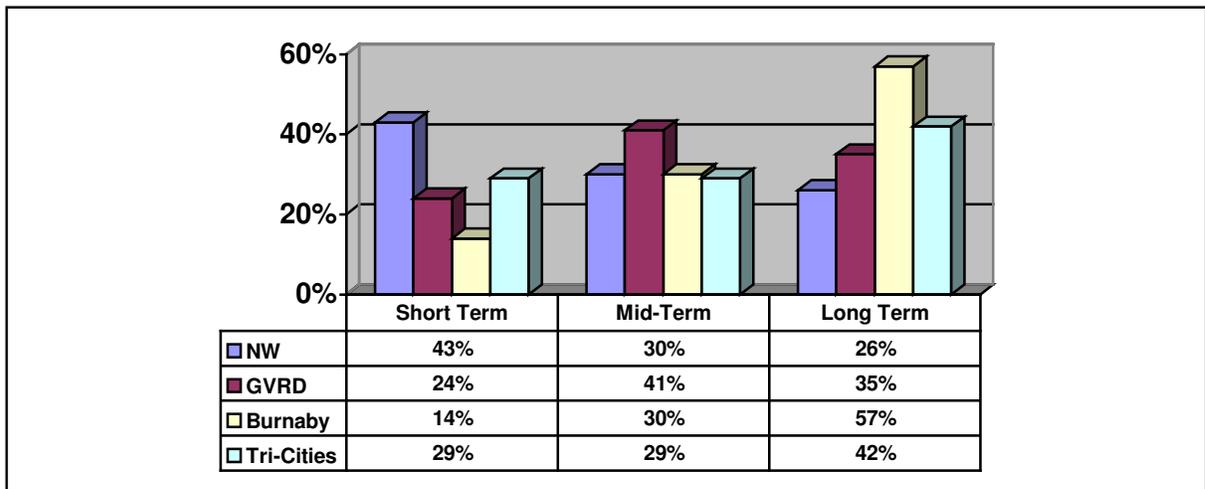
**Figure 6: Length of time homeless, New Westminster, 2005 Homeless Count**



Comparison

*New Westminster had a much greater percentage of short-term homeless and a smaller percentage of mid and long-term homeless than did the GVR. Both Burnaby and the Tri-Cities had a much higher percentage of long-term homelessness than New Westminster*

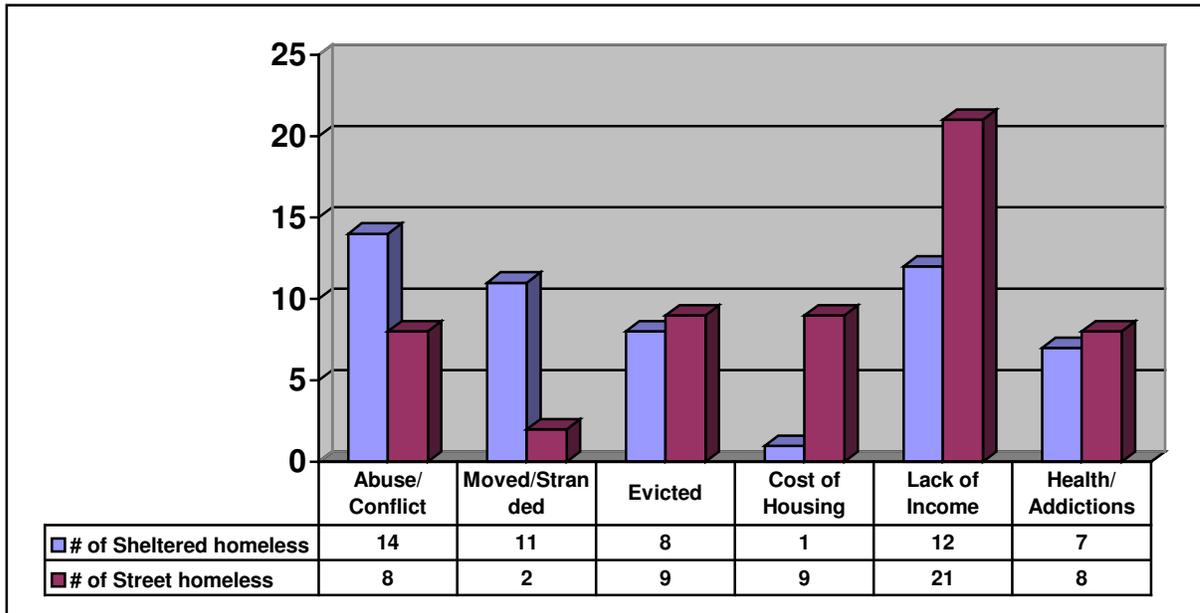
**Figure 7: Length of homelessness, by percentage, New Westminster, GVR, Burnaby and the Tri-Cities, 2005 Homeless Count**



**G. Reason for homelessness**

While lack of income played a major role in becoming homeless for those enumerated in New Westminster, other factors leading to homelessness indicate that support services will be necessary to keep the homeless in housing.

**Figure 8: Reasons for homelessness, New Westminster, 2005 Homeless Count**



(More than one answer possible.)

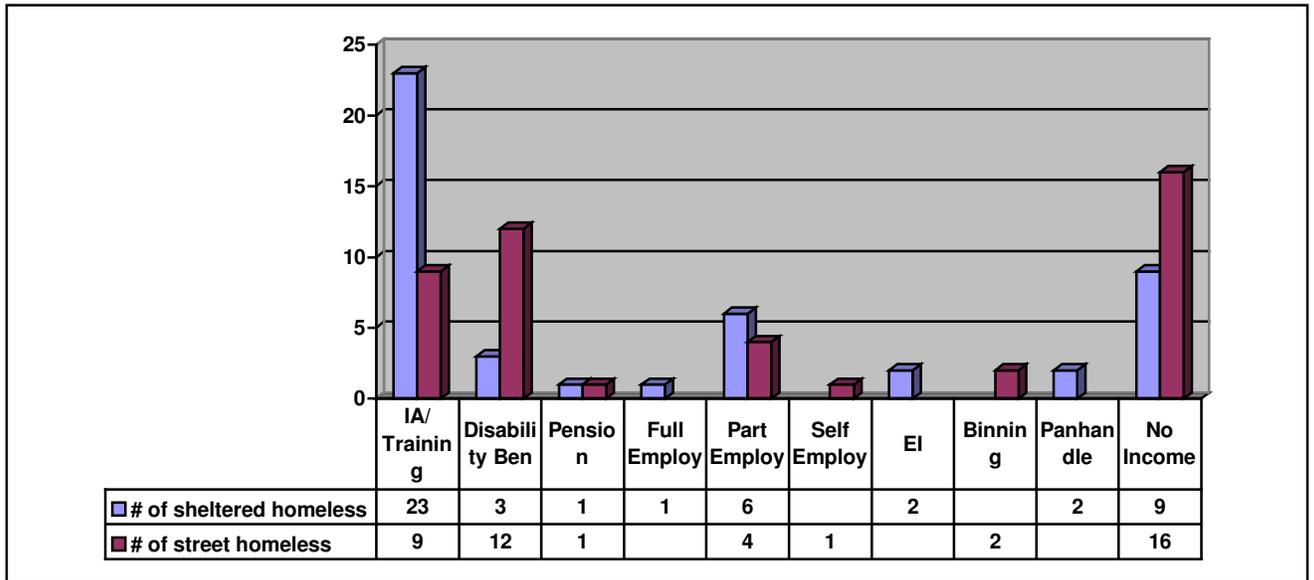
### Comparison

*Like New Westminster, respondents in Burnaby and the GVR cited lack of income as the major reason for homelessness although for both, less than 45% of the homeless chose this reason. For GVR, the second highest response was health/addiction, while in Burnaby it was cost of housing.*

### **H. Source of Income**

55% of the homeless counted in New Westminster had a “secure” source of income from the federal or provincial government. These included 32 individuals who were on Income Assistance (IA) or in a training program and 15 individuals who were receiving disability benefits. While slightly more than 25% stated no source of income, 13% had some form of employment, including one person employed full time. The sheltered homeless more frequently reported receiving IA/training program assistance, while the street homeless more frequently reported receiving disability benefits.

**Figure 9: Sources of income, New Westminster, 2005 Homeless Count**

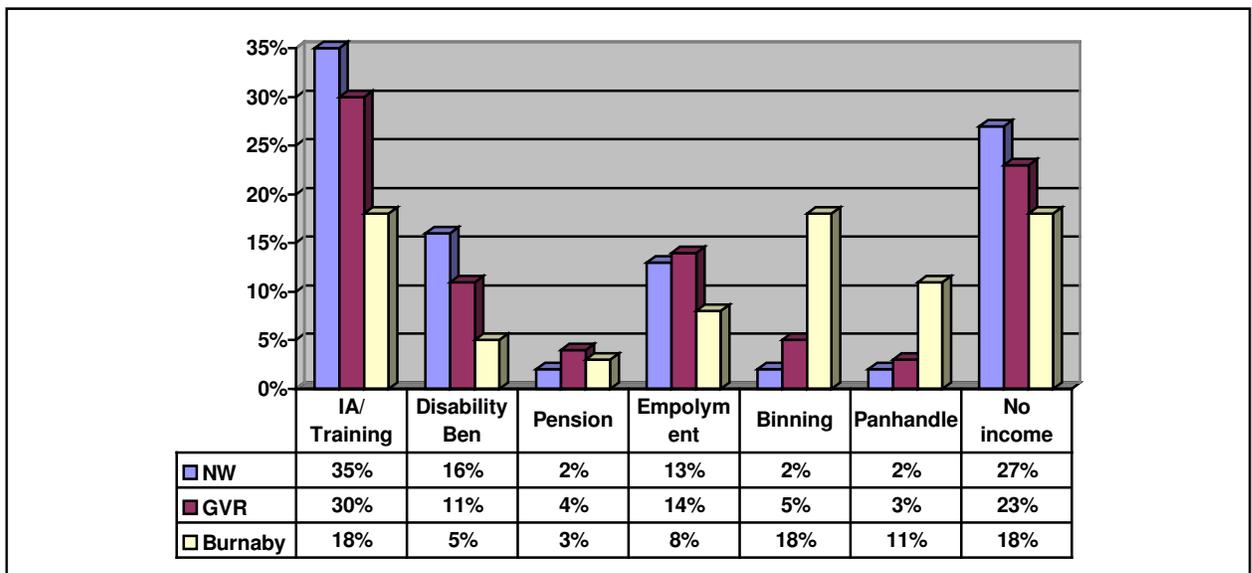


More than one answer per person possible

Comparison

New Westminster had a greater percentage of homeless on IA or in a training program or without any source of income than either the GVR or the street homeless in Burnaby. In the Tri-Cities, 40% reported no source of income

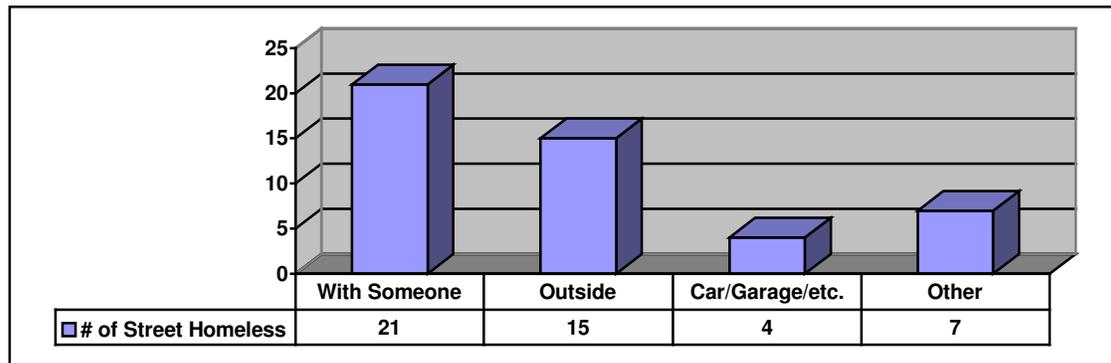
**Figure 10: Sources of income by percentage, New Westminster, GVR and Burnaby, 2005 Homeless Count**



### I. Where did you stay the night before?

The street homeless in New Westminster largely couch-surfed (45%), that is stayed in someone else's accommodation.

**Figure 11: Where street homeless stayed the night before, New Westminster, 2005 Homeless Count**



#### Comparison

*Approximately half of the street homeless counted in the GVR and Burnaby stayed outside the night before. This compares with 32% in New Westminster. In Burnaby, 18% stayed in someone else's accommodation and another 18% in a car/garage/public building, while in the GVR close to 25% stayed in someone else's place.*

### J. Who was with you the night before?

84% of the sheltered homeless and 87% of the street homeless in New Westminster were alone the night of the count. Three of the sheltered homeless and two of the street homeless were with a partner/spouse. One street homeless individual was with a pet.

#### Comparison

*82% of the homeless in the GVR reported staying alone on count night, a similar number to New Westminster. 10% in the GVR stayed with a partner/spouse. Comparatively, only 68% of the street homeless were alone in Burnaby.*

### K. Did not stay the night before in a shelter because...

The homeless were asked why they did not stay in a shelter the night before. Most said it was because they were able to stay with friends. 11 declared it was because they disliked shelters. Ten stated it was for reasons other than offered by the questionnaire.

#### Comparison

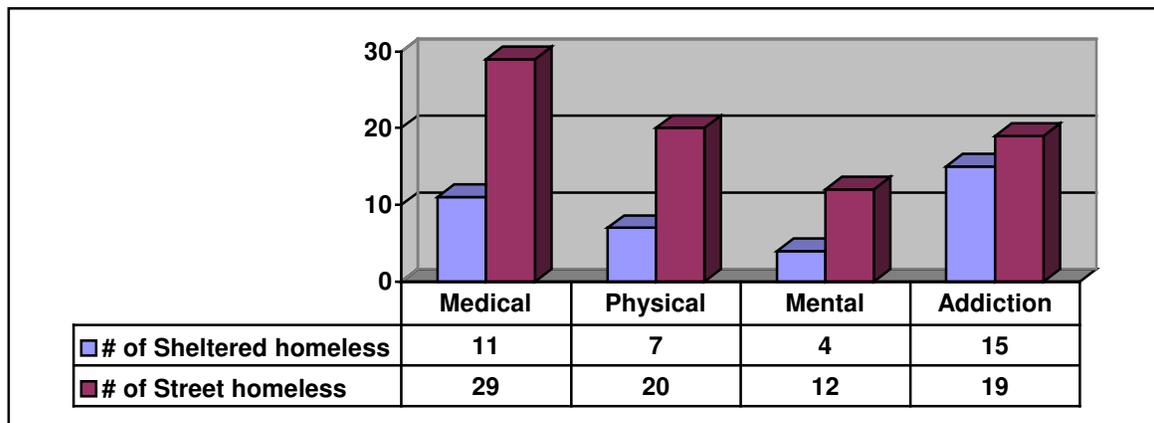
*55% of the street homeless in Burnaby and 44% in those counted in the GVR said they did not stay in a shelter because they disliked them. This compares to 23% in New*

Westminster.<sup>12</sup> 16% in Burnaby stated they didn't seek a shelter because there were none in the area. Only 17% of the street homeless in the GVR said they were able to stay with friends, compared to the much higher figure in New Westminster of 36%. 12% in the GVR were turned away because the shelter was full. This compares to only 4% in New Westminster.

## L. Health conditions

Enumerators asked each individual if they had a medical condition, a physical disability, a mental health illness or an addiction. As might be expected, a higher percentage of street homeless in New Westminster stated health conditions than did the sheltered homeless. It should be noted that answers were self-referred and should be regarded as an undercount. While everyone counted in New Westminster answered at least some aspect of the questions relating to health conditions, some individuals may not have wanted to reveal a particular health condition.

**Figure 12: Number Stating Health Conditions, New Westminster, 2005 Homeless Count**



*More than one answer possible*

27 of the 92 homeless counted in New Westminster stated no health conditions. Of those who stated health conditions:

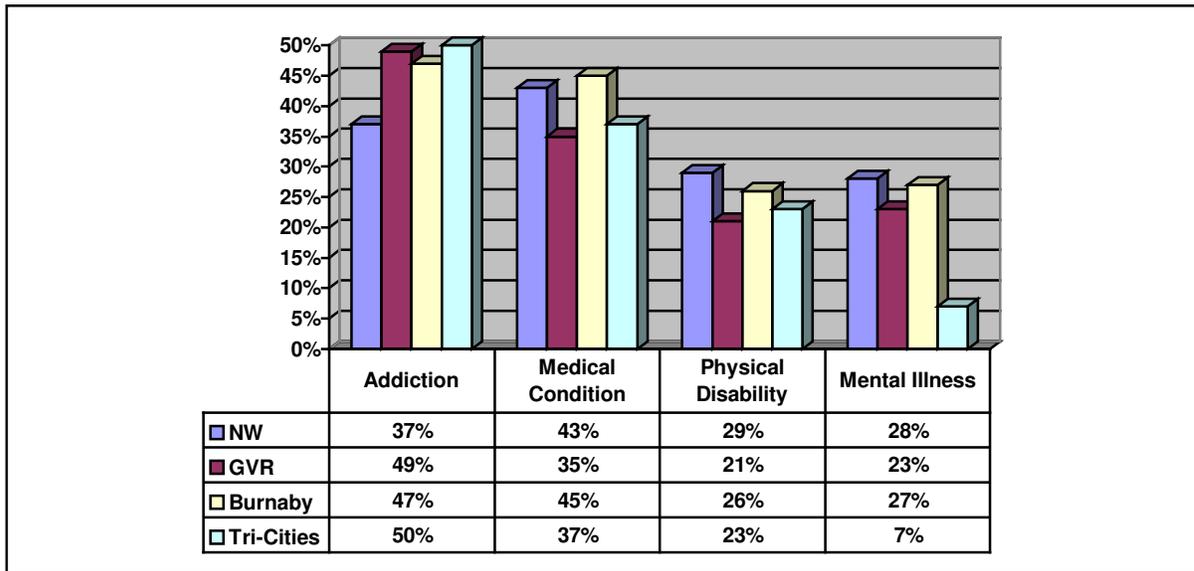
- 30 stated 1 health condition;
- 19 stated 2 health conditions;
- 15 stated 3 health conditions; and
- One stated having all four health conditions.

### Comparison

*New Westminster had a much lower percentage of those self-reporting an addiction than the other jurisdictions.*

<sup>12</sup> When a Burnaby outreach worker questioned homeless individuals subsequent to the count, many told her it was not necessarily shelters they disliked but staying in shelters in the Downtown Eastside.

**Figure 13: Health conditions by percentage, New Westminster, GVR, Burnaby, 2005  
Homeless Count**



***Other evidence of homelessness in New Westminster***

- Between Feb. 6<sup>th</sup> and July 19<sup>th</sup> 2006, the By-law Officer in New Westminster moved a total of 124 people who were sleeping rough in the city. A number of these were duplicates. Some males were moved two or three times, others six or seven times. One female was moved nine times. Individually, 58 homeless people were found by the By-law Officer, 42 males and 16 females.
 

In 5½ months in 2006 the City Bylaw Officer moved 58 different homeless individuals sleeping on the city’s streets.
- From April 1, 2005 to March 31, 2006,
  - The Fraserside shelter served 333 individuals including children
  - Lookout Emergency Aid Society reported that there were 97 stays in their shelters in Vancouver and North Vancouver by people who stated their last permanent address was New Westminster.
  - Monarch Transition House in New Westminster housed 135 women and 134 children.
- In 2005, the Salvation Army sheltered 967 people. The average length of stay was 4.4 days.

## 4.2 Interviews with homeless and formerly homeless individuals

A goal of this project was to hear directly from individuals who were currently homeless or who had experienced homelessness in the recent past. The purpose was to gain some insight into factors that can contribute to homelessness, the experience of being homeless, what helps to exit homelessness, and the impact of housing on their quality of life.

The researchers approached a number of agencies in New Westminster who volunteered to conduct face-to-face interviews with a few of their clients. Interviewers were asked to read a consent form to each potential interview candidate. The consent form explained the purpose of the project, what participants would be asked to do, and how the information from the interview would be used. Participants were also informed that their participation was voluntary. Each participant signed a consent form.

The interview guides can be found in Appendices 4 and 5.

**Julie**

### ***Young mother struggles to find a safe and stable living environment***

Julie says she would like to improve her life, to complete her education and get a job. But right now she needs a place to live.

“The challenge is, I can’t have any more damage deposits from the ministry,” she says.

Julie, 28, has spent the last two weeks at a New Westminster homeless shelter. She spent two months there last winter.

Most recently she was living with four other people in a basement suite. She was able to pay her share, but the situation wasn’t good.

“This time, I was living with the wrong people,” she says. “It wasn’t safe.”

Last winter she found herself homeless once she became pregnant for the second time. She already had two children, twins, and her landlord said he did not want any more children in the unit.

Julie says that even before she became homeless she frequented soup kitchens and food banks to get by.

“It can be stressful,” she says. “I go for walks, meditate.”

More than just a damage deposit, Julie says she needs to find decent paying work, a job that will allow her to cover not just her rent but utilities, food and transportation costs.

Until she gets that job she says renting a place of her own will be difficult.

“Landlords don’t want to rent to people on welfare,” she says.

Julie’s goals over the next year include finding a “safe and stable” environment to live in, going back to school and finding work.

Martin

### **Landlord’s renovation plans puts tenant on the streets**

Martin was unceremoniously turfed from his apartment when his landlord decided to renovate and sell the place. He didn’t get adequate notice, but he couldn’t launch a formal complaint because he did not have the \$50 it requires.

He is now on the streets and is depending on handouts from friends and strangers, as well as charities.

Two years ago, Martin, 49, left his railway job and went on employment insurance. He later cashed in a portion of his pension contributions and worked for a temp agency. To stretch his food dollars, he ate lots of starchy, inexpensive meals. But keeping up with his rent and other expenses was a continuous challenge. He estimates he earned less than \$12,000 annually doing temp work and odd jobs.

Now that he’s homeless, Martin carries his entire belongings on his back, which is causing him foot pain. And he’s constantly wondering where his next meal will come from.

“That’s certainly added a tremendous amount of stress to my life,” he says.

He’s also craving a beer much more often since becoming homeless.

Martin believes he could find housing if he could “just get some financial assistance from the government” and some help with transportation. As well, he needs regular use of a phone so prospective landlords can reach him.

He’d also love to have a shower and the use of a drop-in centre in New Westminster.

“I manage to sponge bath, but I’d rather take a regular shower,” he says.

Martin says that his family background has nothing to do with his homelessness. He firmly believes that he could live on his own if he found a decent paying job.

David

***Senior longs for a peaceful, quiet place to call home***

David spent a harrowing eight months living on the streets before he finally found an apartment he could afford. His goal now is to find a place he can truly call a home.

His neighbours consist of several crack heads and a sex trade worker. Police are routinely called to the building to deal with a variety of complaints.

“The location and rent are okay, but the partying goes all night long,” says David, 61. “It’s not what I deserve after working all my life. Because of all the drug and sex trade activity in the building, I don’t feel safe.”

David used to work as a tow truck driver. He now works part-time distributing newspapers at Sky Train stations. Although he drank heavily while he was homeless - mostly living in a city park - he’s quit drinking since he got this apartment.

A diabetic who lost his toes while living on the streets, David was able to afford his current residence once he secured regular social assistance. However, he still does not have enough money each month for food, and frequently relies on soup kitchens and friends.

Prior to becoming homeless, David was living in New Westminster with his girlfriend. They were renting a two-bedroom basement suite. The rent was paid directly to the landlord by income assistance. He had \$175 left each month to live on.

He was forced out of this housing arrangement when his girlfriend decided to break up with him and refused to let him stay there. He was in hospital for treatment of a diabetes-related illness when she ended the relationship.

David has applied for subsidized housing so he can move out of his current place. He’s lived there for three years and, as he gets older, increasingly fears for his safety.

“I continually keep in touch with BC Housing,” he says, “but I have yet to be offered a suite.”

## Barbara

### ***Long-time New West resident longs to stay in her community***

Barbara knows what she would like to do, but feels overwhelmed by the mounting obstacles. As the cost of living rises, her housing options dwindle and her confidence plummets.

The long-time New Westminster resident has been homeless, off and on, for the past year. She's spent the last two months on the street.

Often depressed, she's finding "it's easier to stay down than it is to crawl back up."

Barbara, 40, was born in a small town in B.C. The only girl, she had 16 brothers. She was sexually abused by her father. At age 14, she got into trouble with the law. She admitted to stabbing her roommate's boyfriend when she caught him sexually abusing a small child. She subsequently served several years in jail.

She then moved to New Westminster to begin a new life, attracted by its reasonable rents. She thought it would be a good place to raise her children. She's stayed for 21 years and doesn't want to have to leave.

Barbara lost her first apartment because her landlord failed to pass along her rent money to the building's owner. She had not insisted on getting a receipt. She recently became homeless because of the unruly behaviour of some of her boyfriend's guests. She feels it's safer for her to sleep on the streets than it is for her to stay at a shelter.

Even when Barbara did have a home, she found it a challenge to get by on the \$200 she had left over each month from her disability income. Her youngest son, 16, was living with her at the time. She frequently had to access food banks and soup kitchens.

Barbara was diagnosed with brain cancer as a child. She wasn't expected to live beyond age 20. She continues to suffer bouts of severe headaches and nausea. No longer on prescription drugs, she uses street drugs to help dull her pain.

She's also extremely discouraged and feels ill equipped to improve her lot in life.

Barbara's search for new housing has been hampered by her inability to leave a call back number with prospective landlords. She also feels in need of some life skills training. A number of landlords have rejected her outright.

"Being homeless, you forget how to conduct yourself," she confides. "They should have classes to teach us how to conduct ourselves to get a place. With the government closing so many services down it makes it harder to get off the street."

To make living on her own viable, Barbara says she would need to find lower cost housing. But, at this point, she's all but given up.

## Maria

### ***Battered woman finds safety, positive influences and hope***

For Maria, the most immediate challenge was getting her thoughts straight.

She had just fled from the home she'd shared with an abusive partner and was being forced to fend for herself.

"I was pretty confused," Maria, 41, recalls, "I really didn't know where to turn, who could help me."

She was overwhelmed and had been abusing alcohol to ease her pain.

"I had always been the one who took care of others instead of me," she says. "I also made some bad choices."

And some good ones. She turned to a shelter for battered women for help and has managed to turn her life around. But it hasn't been easy.

"I've found what I needed, but I had to jump through hoops first," she says.

Maria's family history is horrific. Her mother was an alcoholic and Maria became a ward of the court at age 3. Over the next 10 years, as a young Aboriginal girl, she lived in 38 different foster homes. Maria starting smoking marijuana at age 12, the same year she was raped by her foster dad at knifepoint, and began drinking at age 15.

"I was a very dysfunctional kid," she recalls.

She's spent the past two months living in a shared home environment where she is enjoying the safety, privacy and spaciousness it offers. She is receiving counselling, wants to complete grade 12 and lead a healthier, more productive life.

"My thoughts are clearer now," says Maria, who is on disability assistance. "I've eliminated negative friends from my life and I don't drink anymore. All in all, I have a really good feeling about the future."

She's also become a member of a church and is hoping to volunteer at a hospice.

Kathy

***Newly single mom wonders where she'll find affordable housing***

Kathy isn't looking for sympathy. But she admits she certainly could use more help.

The 47-year-old newly single mom wants to take business classes so she can find a decent paying job. But her priority is to find a clean and comfortable place for herself and daughter to live.

Kathy never dreamed it would come to this. But when she recently returned home from an outing with her daughter, her husband had packed up and moved out. And he'd taken most of their belongings with him.

She couldn't afford to keep the apartment they lived in as a family. So, for now, she's officially homeless.

Kathy had employment, but is currently on income instance. She is eager to find another job - and some way to upgrade her skills - so she can provide her daughter with a better life.

"I'm very positive about my future and my daughter's future," she says. "I want to work while I'm going to school. I know we will be happy."

Kathy believes it's important to stay strong for her daughter's sake. She remembers her own childhood fondly. As a youngster, she used to bike for hours and read a lot of books.

"I liked to read," she says. "I still read a lot."

Kathy says she needs help finding the right business classes to take, and with her hunt for affordable housing.

"Rents are really high and some of the apartments we've viewed were disgraceful," she says.

Kathy knows her search for a place to live will be daunting, yet she remains hopeful. She's determined to make the best of life in a homeless shelter until she can find something suitable. Meantime, she is grateful for all the assistance she is now receiving through Fraserside Community Services.

**NB:** Since this interview Kathy and her daughter have found accommodation in Burnaby, close to the New Westminster border. Kathy had trouble finding a place, as many landlords would not rent to people on assistance.

## 5 The population at-risk for homelessness

### What is INALHM data?

Households considered at-risk for homelessness in the GVRD are measured by INALHM data. This is a blend of data from Statistics Canada and the Canada Mortgage and Housing Corporation (CMHC) compiled especially for the GVRD. INALHM data applies to private non-reserve, non-farm households, and is updated at each census. INALH stands for **In Need** and spending **At Least Half** of income on shelter and the **M** stands for **Modified**. Because data specifically organized for the GVRD includes Aboriginal households, it is considered *Modified* from the standard INALH data, which does not include Aboriginal households.

Households included in INALH data:

- ❑ Are in Core Housing Need (that is, living in a dwelling that falls below at least one of the adequacy, suitability, or affordability standards)
- and
- ❑ Spend 50% or more of their gross income on shelter.

**Core Housing Need** is determined by the inadequacy, unsuitability or non-affordability of shelter dwellings. CMHC defines dwellings in the following manner: <sup>13</sup>

▪ Adequate dwellings	Those reported by their residents as not requiring any major repairs. (Major repairs include “defective plumbing and/or electrical wiring, structural repairs to walls, floors or ceilings, etc.”) <sup>14</sup>
▪ Suitable dwellings	Those with enough bedrooms for the size and make-up of resident households according to National Occupancy Standard (NOS) requirements. <sup>15</sup>
▪ Affordable dwellings	Those costing less than 30% of before-tax household income. This is the standard of affordability used by non-profit housing and by organizations such as BC Housing. <ul style="list-style-type: none"><li>○ For renters: costs include rent and utilities</li><li>○ For owners: costs include mortgage payments, condominium payments, property taxes and utilities.</li></ul>

<sup>13</sup> CMHC 2001 Census Housing Series: Issue 8 revised-Households Spending At Least 50% of their Income on Shelter, April 2005

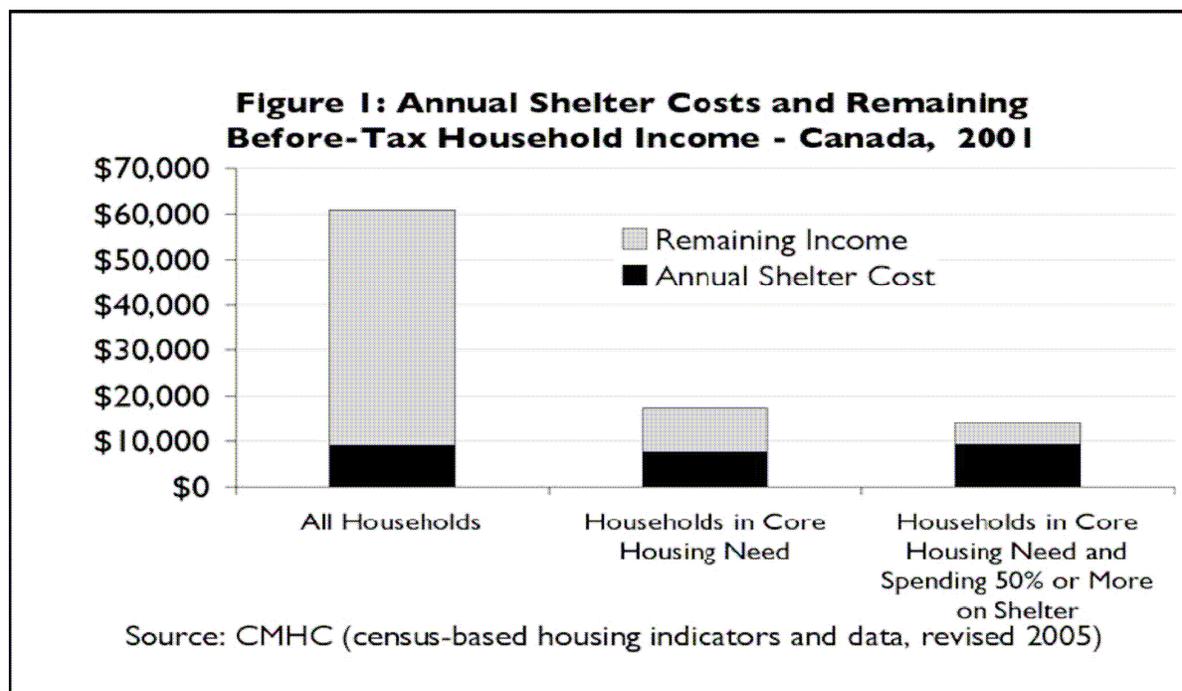
<sup>14</sup> Statistics Canada – Cat. No. 92-351-UIE1996 Census Dictionary – Final Edition, p. 156

<sup>15</sup> According to the National Occupancy Standard enough bedrooms means one bedroom for each cohabitating adult couple; unattached household member 18 years of age and over; same-sex pair of children under age 18; and additional boy or girl in the family, unless there are two opposite sex siblings under 5 years of age, in which case they are expected to share a bedroom. A household of one individual can occupy a bachelor unit (i.e. a unit with no bedroom). Ibid.

Households with sufficient income to spend more than 50% of gross income on shelter that is adequate and suitable are not included in INALHM data. They are *not* considered to have severe affordability problems, and are not at risk of homelessness. To be included in INALHM data, a household must spend more than 50% of income *and* be in core housing need.

While people become at-risk of homelessness for many reasons (family violence, health problems, dramatic changes in income), INALHM data focuses only on economic factors. As such it is a conservative estimate of the at-risk population, especially when compared with other housing/poverty measures such as Low Income Cut Offs (LICOs). “For example, a women at risk of homelessness due to violence in her home would not be included in (INALHM) statistics if her present household is not also in core housing need and spending more than 50% of (its) income for housing.”<sup>16</sup> Those who fit the criteria for INALHM are considered to have severe affordability problems.

As shown in the graph below, severe affordability means that in an INALHM household little remains of the household’s income for food and all other items. “For (those households) in core housing needs, spending 50% or more on shelter and reporting a before tax income of less than \$10,000, only \$2,016 remained after paying shelter costs. In contrast, Canadian households in general had \$51,808 in before-tax income remaining after accounting for shelter costs.”<sup>17</sup>



CMHC research highlight April, 2005, *2001 Census Housing Series: Issue 8 Revised-Households Spending At Least 50% of their Income on Shelter*

<sup>16</sup> Greater Vancouver Regional District, *Research Project on Homelessness in Greater Vancouver, Vol. 2: Profile of people at risk of homelessness and homeless in the GVRD*, 2002, p. 7.

<sup>17</sup> CMHC research highlight April, 2005, *2001 Census Housing Series: Issue 8 Revised-Households Spending At Least 50% of their Income on Shelter*, p.4

## INALHM data for New Westminster, 2001

### NOTE

CMHC discovered that errors were made in classifying households for core housing needs. Consequently, some households were classified in core housing need when they were not, and others were not classified when they were. The errors apply to the 1996 and 2001 census and the outcome is to overestimate core housing need. The impact of the misclassification varies across geographic regions and socio-economic groupings. For example, one-person and senior-led households were more likely to be incorrectly identified as being in core housing need than others. Correspondingly, larger households living in crowded conditions were more likely to have been incorrectly identified as not being in core housing need.

The error involves an overestimation of 27,700 households for British Columbia in 2001. CMHC has begun releasing revisions to the data, but at the time of this report the GVRD did not have these revisions. Therefore the INALHM data included in this report for households in New Westminster is not revised.

It should be noted that the effect of the error in New Westminster is minimal.

- In 2001, New Westminster had less than 2% of the households in BC.
- The miscalculation occurred for all households in *Core Housing Need*. INALHM households must not only be in Core Housing Need but must also spend more than 50% of gross income on shelter costs. As such, INALHM households represents a subset of Core Housing Need households and, therefore, only a portion of the miscalculated households.

Because the 2006 Census data on the at-risk population will not be available until 2008, the INALHM tabulation used in this report is from the 2001 Census. The INALHM tabulation uses a 20% sample and includes the following variables:

- Number, percentage and make-up of INALHM households; their incomes and shelter costs; their type of income and housing;
- For the primary household maintainer: age and gender, immigrant, visible minority, employment and mobility status, and income and education level. A household maintainer is defined by Statistics Canada as the person in the household 15 years or older who pays the shelter costs for the dwelling.<sup>18</sup>

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<sup>18</sup> Statistics Canada – Cat. No. 92-351-UIE1996 Census Dictionary – Final Edition, p. 142.

## INALHM households

**In New Westminster in 2001:  
There were 2,295 INALHM households  
with  
3,805 people, mainly renters**

Like the Greater Vancouver Region (GVR), New Westminster INALHM households were much more likely to be renter households (1,750) than owner households (540). More than 60% of INALHM households were single person households, much higher than in the GVR (43%).

Between 1996 and 2001, New Westminster saw a 2.7% increase in INALHM households, while the GVR and Burnaby saw a decrease. Even though INALHM renter households in New Westminster declined in that period, INALHM owner households increased by 35%, leading to an overall increase.

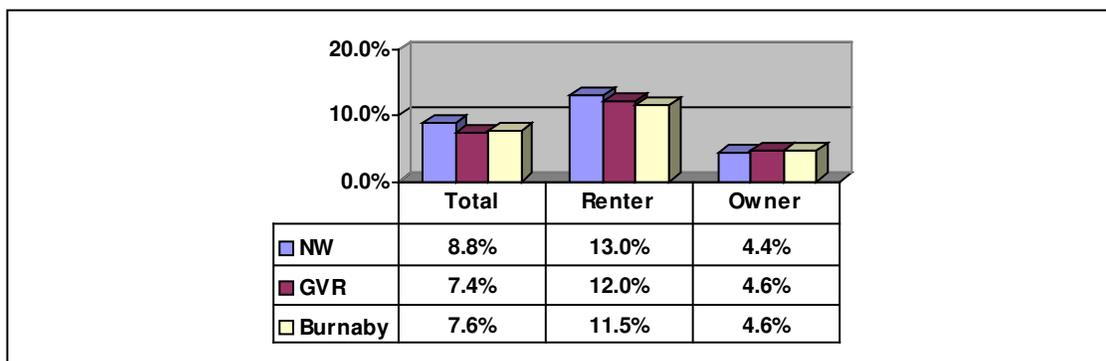
**Table 4: Percentage change in number of INALHM households between 1996 and 2001, New Westminster, GVR, Burnaby**

	<b>Total</b>	<b>Renter households</b>	<b>Owner households</b>
New Westminster	+2.7%	-4.6%	+35%
GVR	-2.5%	-12%	+18.9%
Burnaby	-5.2%	-10.7%	+8.3%

### **Percentage of INALHM households**

While the percentage of people living in INALHM households relative to the city's total population was similar for New Westminster and the GVR (6.7% in New Westminster and 6.1% in the GVR), New Westminster had a slightly higher percentage of INALHM households relative to all households in the city than either the GVR or Burnaby.

**Figure 14: Percentage of INALHM households in New Westminster, GVR, and Burnaby relative to all households, 2001**



### ***Likely to be INALHM households in New Westminster***

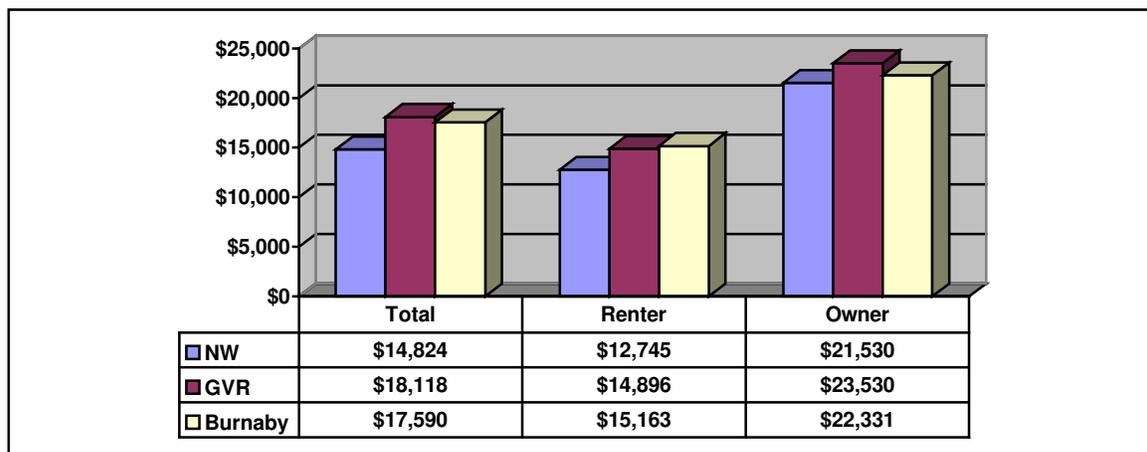
A number of low-income groups are likely to be INALHM households.

- **People living alone** made up 61% of INALHM households in New Westminster. This is considerably higher than for the GVR (43%). 63% of renter households and 53% of owner households in New Westminster were single people living alone.
- **Lone parent families** made up 12% of INALHM households in New Westminster, almost all female-led. Female-led lone parent families accounted for 12% of INALHM renter households and 7% of owner households. The percentage of female led lone parent INALHM families in New Westminster (11%) was less than that for the GVR (14%).
- **Seniors** (over 65 years) were the primary maintainers of 24% of INALHM households. This is higher than the GVR (18%). Households where seniors were primary maintainers accounted for 22% of renter households and 30% of owner households.
- **Immigrants** were the primary maintainers in 35% of INALHM households. This was lower than for the GVR (47%). In New Westminster, immigrant households were more likely to be owner households (43%) than renter households (32%).

### ***Income***

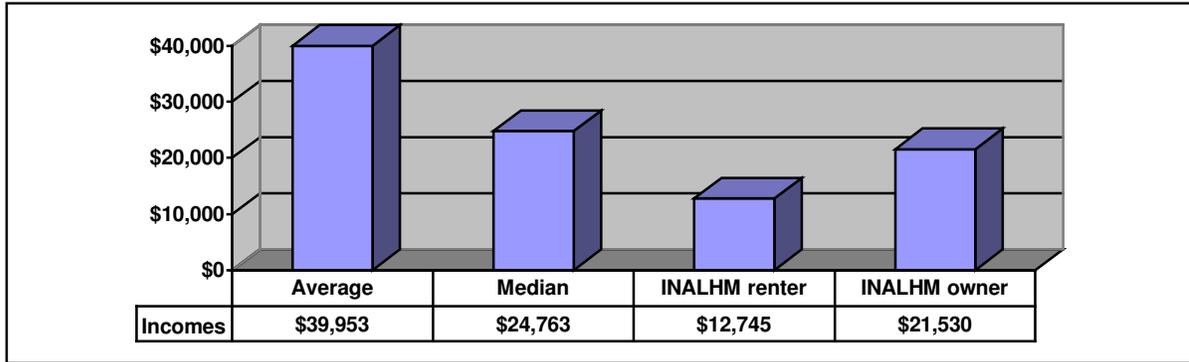
The average annual household income of INALHM households in New Westminster was less than those in the GVR and Burnaby. The average renter INALHM household income in New Westminster was only \$12,745, considerably lower than the average owner income at \$21,530.

**Figure 15: Average annual income of INALHM households, New Westminster, GVR, and Burnaby, 2001**



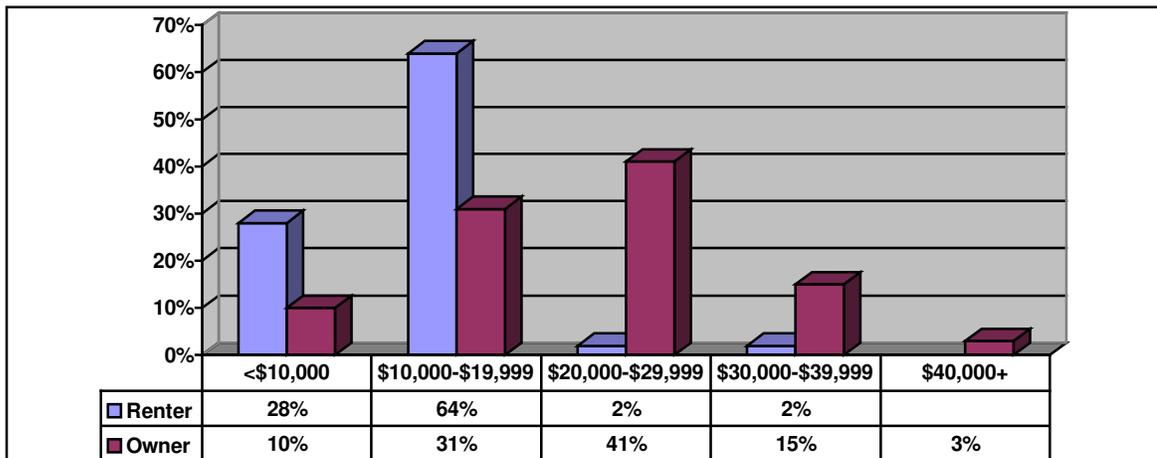
As would be expected, INALHM renter and owner households had incomes that were less than the average and median household income in New Westminster. (See the chapter on the Income Continuum.) The average INALHM renter household income was approximately half the median income and less than one-third of the average income.

**Figure 16: Average and median incomes in New Westminster compared with average incomes of INALHM renter and owner households, 2001**



80% of INALHM households earned less than \$20,000 per year. The Statistics Canada Low Income Cut-Offs (LICO)<sup>19</sup> for a single person household in New Westminster was \$17,219. The average income for INALHM renter households in the city was nearly \$5,000 per year less.

**Figure 17: Percentage of renter and owner INALHM households in each income category, New Westminster, 2001**



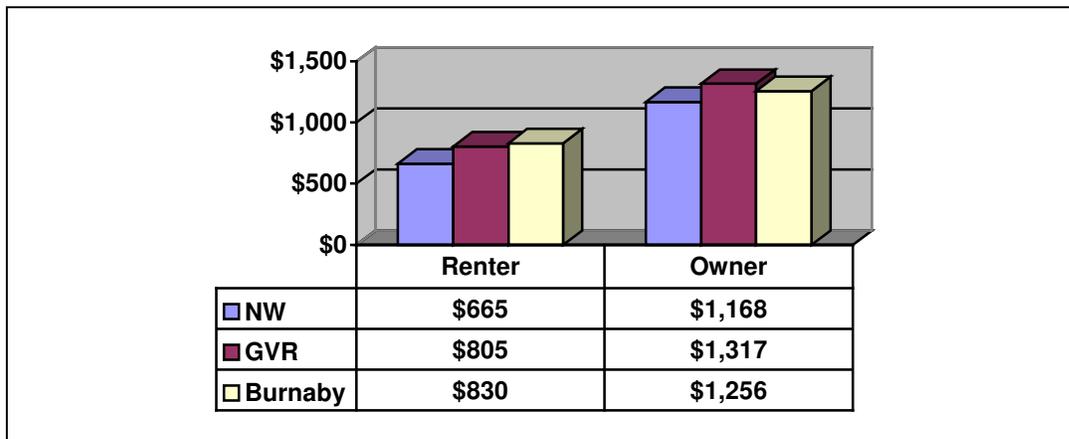
### **Average Shelter Costs**

<sup>19</sup> LICOs are explained in the section on Incomes.

The average rent for a bachelor apartment in the New Westminster in October 2005 was \$543/month. Using the standard measure of housing affordability, i.e. 30% of pre-tax income spent on shelter, a household would need an annual income of more than \$21,720, and have an hourly wage more than \$10, to be able to afford the smallest market unit available in the city. Even given a slight increase in income since the 2001 census, it is easy to see why INALHM households cannot afford a suitable place to live at an affordable price.

Shelter costs for INALHM households were lower in New Westminster than in either the GVR or Burnaby.

**Figure 18: Average monthly shelter costs of INALHM households, New Westminster, GVR, Burnaby, 2001**



**Average shelter cost to income ratio**

In 2001, the average shelter cost to income ratio (STIR) in the Vancouver CMA was 21% for renters and 30% for owners.<sup>20</sup> For at-risk households this was much higher.

In New Westminster, the average shelter-cost-to-income ratio for the 1,750 at-risk renter households was 65% and for the 540 at-risk owner households, almost 67%. This means that in 2001, the average at-risk household in New Westminster was spending two thirds or more of its income on shelter costs, leaving one-third for all other needs. (Average shelter-cost-to-income ratio for the GVR was slightly higher, at 67% for renters and 69% for owners.)

In 2001, the average INALHM household in New Westminster was spending approximately two thirds of its income on shelter costs, leaving one-third for all other needs.

This is more than double the standard for shelter affordability. It is also considerably more than the 50% of income that is the criteria for INALHM households.

<sup>20</sup> Engeland, John, Roger Lewis, Steven Ehrlich, CMHC & Janet Che, Statistics Canada, *Evolving Housing Conditions in Canada's Census Metropolitan Areas, 1991-2001, 2005*

### ***Major source of household employment***

56% of INALHM households in New Westminster received their major source of income from government transfers, i.e. pensions, income assistance, and employment insurance. This compares with 42% in both the GVR and Burnaby. The income of renter households was almost twice as likely to come from government transfers as the income of owner households.

38% of INALHM households received their major source of income from employment, (33% of INALHM renter households and 56% of INALHM owner households). This compares with approximately half of INALHM households in the GVR and Burnaby.

7% of INALHM incomes in New Westminster came from self-employment.

### ***Household type***

61% of INALHM households were one-person households while 34% were single-family households, including 12% that were lone parent families.

The 285 INALHM lone parent families in New Westminster (mostly female led at 260 families) represent 12% of all the city's lone-parent families. In contrast, INALHM couple families with children at home were only 5% of the total number of similar families in New Westminster.<sup>21</sup>

### ***Structural Type of housing of INALHM households***

12% of INALHM households in New Westminster lived in single detached homes and 76% in apartments. The remaining lived in duplexes, semi-detached houses or row houses. This compares with 30% in the GVR living in single detached homes and 50% in apartments.

335 dwellings, (210 rental units and 125 owner housing), needed major repairs. This represents only 15% of INALHM housing, demonstrating that the major reason for a household to be at-risk of homelessness was affordability.

### ***Primary Household Maintainer***

A primary household maintainer is the person in the household 15 years or older who pays the rent, mortgage, taxes, electricity, etc. In INALHM households in New Westminster:

- 55% of primary household maintainers were female;
- 20% were a visible minority; and
- 35% were immigrants.

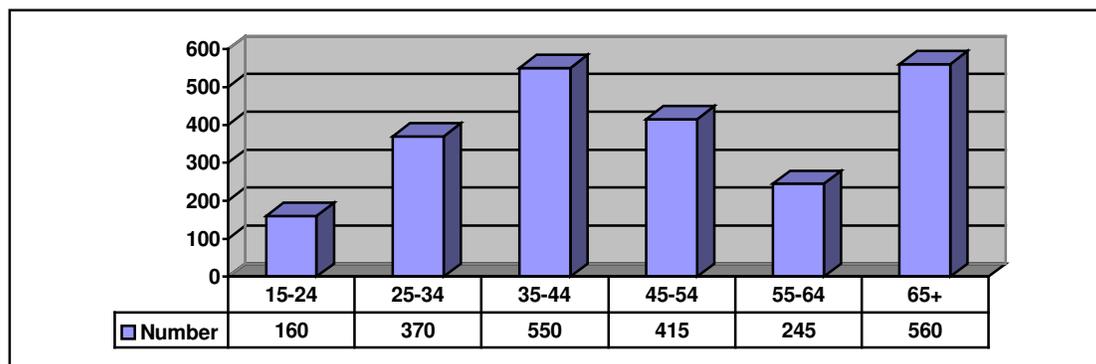
43% of households had a primary maintainer who reported at least some disability that reduced their ability to participate in activities at work and/or home.

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<sup>21</sup> BC Stats

Seniors are well represented as primary maintainers in New Westminster INALHM households. There are more primary maintainers who are over 65 than any other age group. As well, 35% of all primary maintainers are over 55. In the GVR and Burnaby, only 30% were over 55 years.

**Figure 19: Age of Primary Maintainers in INALHM households in New Westminster, 2001**



As might be expected, a high percentage of primary maintainers less than 35 years live in rental units. The percentages of renters and owners evens out between age 35 and 54. With those over 55, there is a higher percentage that are INALHM owners (43% of those over 55 are owners and 32% renters).

### ***Education of primary household maintainer***

Two-thirds of primary household maintainers in New Westminster INALHM households graduated from high school. This is higher than in both the GVR and Burnaby. As seen from the Table 5 people of all educational levels, even those with bachelor or higher degrees, can be at risk of homelessness.

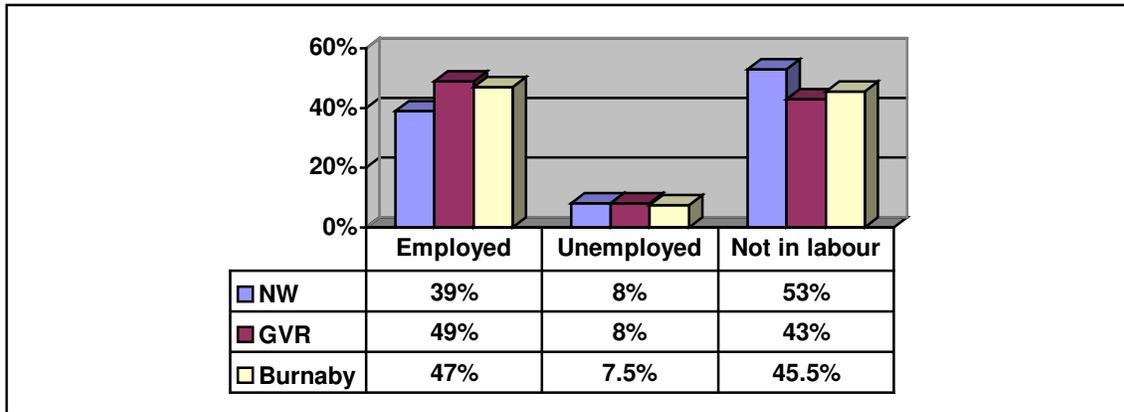
**Table 5: Level of education of primary maintainer in INALHM households, New Westminster, GVR, Burnaby, 2001**

Level of education	New Westminster	GVR	Burnaby
Less than grade 9	10%	8%	9%
Grades 9-13	22%	20%	19%
Secondary school graduation certificate	11%	11%	14%
Trades certificate or diploma	2%	2%	3%
Other non-university education	28%	26%	25%
University without degree	13%	13%	13%
University with bachelor's degree or higher	13.5%	18%	19%

### ***Employment of primary household maintainer***

Slightly more than half of primary maintainers in INALHM households in New Westminster were not in the labour force, a higher percentage than in the GVR or Burnaby, while 39% were employed and 8% were unemployed.

**Figure 20: Percentage employed, unemployed and not in labour force, New Westminster, GVR and Burnaby, 2001**



Of those who were employed, approximately two-thirds worked mainly full time and one-third mainly part time.

## 6 Addressing homelessness and the at-risk population

Homelessness has many costs. There are those borne by the individual who becomes homeless, such as diminished health and well-being, and family breakdown, and there are those borne by the community. In a study undertaken for the BC government, researchers found that of their study sample, homeless individuals “cost, on average, 33 per cent more than housed individuals, (\$24,000 compared to \$18,000).”<sup>22</sup> Criminal justice was the major cost category for many of the homeless (averaging \$11,000 for one year) while social services, primarily BC’s income supports program, was the major cost category for most of the housed individuals. A study in New York City concluded that the city spent at least \$62 million annually to shelter the 2,500 people who were chronically homeless.<sup>23</sup> The chronically homeless often are either mentally ill, addicted or both, or are physically disabled. A Philadelphia study found that only 10% of the homeless were chronic, while another 10%, often young and drug users, were episodically homeless. 80% were homeless for only a short period, even as little as a day or two.<sup>24</sup> The results of the 2005 Homeless Count in New Westminster also show that most (43%) had been homeless for the least amount of time asked, i.e. less than one month. However, 26% had been homeless for more than a year.

### 6.1 The Continuum of Housing and Support

The Regional Homelessness Plan of Greater Vancouver, and its 2003 update *3 Ways to Home*, adopted a framework for addressing the needs of the homeless and those at-risk of homelessness called the Continuum of Housing and Support. Originally designed by the Housing and Urban Development (HUD) Department of the U.S. government, the Continuum has been modified to meet local conditions.

The Continuum consists of three crucial elements, housing, income and support services, and a number of subcategories.

#### The Continuum of Housing and Support for alleviating homelessness

<b><u>Housing Continuum</u></b>	<b><u>Adequate Income</u></b>	<b><u>Support Services</u></b>
Emergency shelters Transition houses Transitional housing Supported independent housing Independent housing	Employment Employment Insurance Income assistance	Addiction services Drop-in centres Outreach services Mental health services Health services Prevention services

<sup>22</sup> Eberle, Margaret, et al., *Homelessness - Causes and Effects, The Costs of Homelessness in British Columbia*, 2001, p.2

<sup>23</sup> Mason, Gary, *Sooner or later we all pay for homelessness*, Globe & Mail, 2 September 2006

<sup>24</sup> Ibid.

This report has adopted the Continuum as a model to describe services currently available to the homeless and those at risk for homelessness in New Westminster and to analyze gaps in services. An Inventory of Services to those in the city, modelled after the Continuum, is available in Appendix 1. Added to the Continuum are employment and food, clothing and furniture services.

It should be noted that while the Continuum offers a framework for alleviating homelessness, not all communities have a homeless population sufficient to warrant the entire range of services. Some services might be adequately delivered either by partnerships between communities or on a regional basis. For example, Burnaby and New Westminster share the same Health Authority and some health services, such as the needle exchange program, serve both communities. Since the first GVRD Homeless Plan in 2001, Burnaby and New Westminster have been considered as part of a sub-region within the GVRD. Sub-regions (such as South of Fraser, the North Shore, and the Tri-Cities) were created because homeless individuals often utilize services in an area broader than just within a single municipality. As well, in this context, the Inventory includes services in Burnaby reporting that they also serve those from New Westminster. It also includes some services designed to serve those in the entire region. In addition, New Westminster service providers listed services in other jurisdictions to which they refer their clients (see Section 7).

## 6.2 The Housing Continuum

The Housing Continuum includes:

- Emergency shelters;
- Transition houses;
- Transitional housing;
- Supported housing; and
- Independent housing.

### 6.2.1 Emergency Shelters

“Emergency shelters are an interim response to homelessness providing short stays,<sup>25</sup> of up to 30 days. Included are youth safe houses and government funded single room occupancy (SRO) beds. Residents may be accommodated in beds in dormitory rooms, or in single or shared rooms. Some shelters are able to accommodate families. Some have no or minimum barriers while others have restrictions. Many only take clients who are on Income Assistance and are referred from the appropriate government ministry. Services vary depending on the shelter.

There are three emergency shelters in New Westminster, offering 46 beds.

1. **The Way**, (formerly the Garfield Hotel) operated by the Salvation Army, with space for 24 adult men. Length of stay is 1-30 days. Among the 24 beds are four that are reserved for men from Port Coquitlam who are brought to the shelter in a vehicle. On nights where there are less than four men from Port Coquitlam, the available beds go to other clients. Residents of the shelter are either referred from the Ministry of Employment and Income Assistance (MEIA), or are self-referred.

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<sup>25</sup> SPARC BC, *3Ways to Home*, 2003, p. 25

2. **Stevenson House**, also operated by the Salvation Army, provides beds for 10 men who are 19 years or older. Length of stay is 1-30 days. Residents are either referred from the MEIA or are self-referred.

**Services offered through the Salvation Army shelters:** The Productive Choices Programs is a personal development program offered to men who stay in the Salvation Army emergency shelters. Admission requires that the person enter into a specific training and development plan for either 30, 60, or 90 days. The program is designed to help break the cycle of homelessness. It assists the client to transition into sustainable employment and longer term housing. Many clients require immediate medical and/or addictions treatment. Others simply require instruction in basic hygiene, social skills, literacy, budgeting etc.

3. **Fraserside Emergency Shelter**, operated by Fraserside Community Services, has 12 beds for families with children, single women and couples who have been referred to the shelter by MEIA. Length of stay is 1-14 days, but there are renewals.

From April 1, 2005 to March 31, 2006, the Fraserside shelter served 374 individuals (126 men and 247 women plus 1 transgendered individual). These include 141 children and youth, 0 to 20 years. Twenty-seven individuals came twice to the shelter, four came three times and two came four times.

It was pointed out by service providers that there no minimum barrier shelter beds for women who are not fleeing abuse, for those who have pets, and for couples who wish to stay together.

### **Cold/Wet weather and Extreme Weather beds**

During the winter of 05/06 the Salvation Army provided 9 cold/wet weather beds

During periods of extreme weather they provided 40 mats.

The Salvation Army also provides additional beds. During the winter months of 2005-06, it provided nine cold wet weather beds and 40 extreme weather mats. Cold/wet weather beds are an emergency shelter capacity open only during the winter, generally from November to March or April, or at other times in the case of extreme wet weather. Extreme Weather beds operate on nights

when conditions are deemed severe enough to present a substantial threat to the life or health of homeless persons, usually when the temperature is at or below -4 or -5 degrees Celsius or there is significant snow accumulation. These added beds are funded by the Cold/Wet Weather Strategy, a regional partnership among service providers, community agencies, health authorities, and provincial and municipal governments to provide increased capacity in inclement weather.

From January 2005 to March 2006, the Salvation Army sheltered a total of 967 men. The average number per night was 40 individuals and the average length of stay was 4.4 days. The average age was 40 years. However, 103 were youth aged 18-24, and 44 were 55 years or older.

### **Examples of other shelter usage by those from New Westminster**

People who stated that their last permanent home was in New Westminster have sought shelter in other municipalities. Three emergency shelters operated by Lookout Emergency Aid Society (Lookout) in Vancouver and North Vancouver saw 97 stays by people from New Westminster from April 2005 through March 2006.

In 2004/05, Outreach staff at the Cliff Block referred 100 New Westminster citizens to shelters outside of New Westminster because no minimum barrier space existed in the city.<sup>26</sup>

### **Filling a gap**

According to the BC Seniors Service, there is a lack of appropriate emergency shelters in the Lower Mainland for seniors. For example, older adults fleeing abuse do not fit well into the current structure of transition houses. To address this gap,

“The apparent ‘aging’ of the homeless population could have important implications for homeless service providers, including housing and shelters, and for costs to the health care system.”

the Service is piloting the three-year Temporary Housing Pilot Program (TTPP). The goal of this project is to support at-risk and homeless seniors and vulnerable adults, by providing a safe, affordable, appropriate alternate temporary housing option outside the Downtown Eastside of Vancouver that is as low-barrier as possible. Many of the potential clients will be those who are considered hard-to-house, as they have been previously evicted and have very low incomes. However, most of the clientele just need a safe and appropriate place to live in for a short period of time to get their lives back on track and deal with the issues keeping them from securing permanent housing. The satellite unit model involves renting two units in a New Westminster apartment building, which will then be provided at low or no cost to the appropriate outreach clientele. Funding for this pilot project was obtained from the United Way of the Lower Mainland.

### **Emergency shelter gaps**

**GAP** There is a need for minimum barrier, enhanced\*, emergency shelter beds for all populations, including men, women, with or without children who are not fleeing violence and couples.

**GAP** There is a need for a protocol with the New Westminster Humane Society to shelter a pet while the owner stays in a New Westminster shelter or enters a treatment facility.

**GAP** Current shelter beds may not always be able to respond to the needs of seniors.

\***Minimum barrier** refers to access to flexible, non-judgemental service based on need, without restrictions to lifestyle, conditions (e.g. intoxicated), eligibility, or number of times

<sup>26</sup> Lookout Emergency Aid Society Annual Report, June 2005

receiving the service, in a building that is accessible to everyone regardless of physical condition while acknowledging that the acuteness of health needs, behaviour or level of intoxication may limit the ability of the provider to give service. **Enhanced** means that a full range of services are offered at the shelter.

## 6.2.2 Transition Houses

Transition house are emergency accommodation for women and their children who are fleeing violent abuse. The maximum stay is 30 days. The New Westminster transition house is Monarch Place with 12 beds.

From April 2005 through March 2006, Monarch House served 135 women and 104 children. They turned away 463 women and 282 children. For 385 women and their children there were no available beds. 98 women were turned away for other factors such as the woman's homelessness was a housing issue not an abuse issue and for drug/alcohol issues.

The turnaway ratio for Monarch House has remained steady over the past three years. (It should be noted that women and children turned away from one transition house due to lack of available space often find shelter in other houses in other areas. It should also be noted that women and children staying in transition houses in BC may come from a wide geographic area, including other places in the region, the province, the country and even from the United States and that New Westminster women and children fleeing abuse may prefer to seek shelter in other jurisdictions.)

Trends observed in recent years at Monarch House include that women:

- Have been subjected to more extreme violence and types of abuse, including the use of weapons;
- Have presented with more complex situations (e.g. concurrent disorders and drug/alcohol issues); and
- Have to navigate an increasing number of barriers (e.g. long/complicated application process for Income Assistance, limited access to Legal Aid, inadequate finances to secure affordable housing, etc.)

As well a growing number of immigrant and refugee women are leaving abusive situations.

Women leaving the shelter either return home to the abusive situation, stay with family or friends, apply and enter a second stage housing supportive program (from 6 to 18 months) or find some kind of housing. The lack of a streamlined, easy process to receive financial aid can make it difficult for these women, as well as a lack of recognition of both the extent of the debilitation that results from abuse, and the need for healing and recovery. Monarch considers the affordable housing stock as inadequate for the need and that because the shelter portion of Income Assistance is so low, women and children leaving the transition house for independent housing often have to settle for unsafe and or unclean accommodation. As well, it is Monarch's experience that the wait for BC Housing is long - several years potentially - even though women exiting a transition house are at "the top of the list". The problem of adequacy and availability of

accommodation contributes to sending women back to their abusive partner. Unable to find suitable accommodation, they give up hope of establishing a new life.

### 6.2.3 Transitional and Supported Housing

Transitional and supported housing is affordable housing that includes ongoing supports and services to residents who cannot live independently and may not ever become fully self-sufficient. This form of housing may be located in a purpose-designed building or in scattered site apartments. Added support services may include providing life skills, training and support with housekeeping, meal preparation, banking support and access to medical care, counselling, referrals, crisis response and intervention. Housing of this type enables individuals to stabilize their personal situation and re-establish connections with the community.<sup>27</sup>

- **Transitional housing** accommodates residents for a particular time period, most often somewhere between six months and two years, although extensions may be possible.
- **Supported housing** is intended to be permanent and different types meet different needs. For example, supported housing is an important resource for people with special needs including those with severe and persistent mental illness. It is also an important part of the continuum for addiction treatment. Research has shown that supported housing is very effective in reducing homelessness.

#### Transitional housing

Table 6 notes the transitional housing in New Westminster.

**Table 6 Transitional housing in New Westminster**

Facility	Client Group	Description
Chrysalis Place (Wings Housing Society)	Women and children fleeing abuse	<b>10</b> -bed facility offering supportive and affordable housing for up to 12 months after the initial crisis phase
Pathways (Elizabeth Fry Society)	Single women	<b>9</b> -bed second stage housing for single women. Length of stay is 18 months, with extensions where needed. Clients are provided case management, peer support and assistance with daily living. Support is provided 24/7. Cost is \$340/month.
Cliff Block (Lookout Emergency Aid Society)	Single men and women with a history of homelessness	<b>16</b> units of minimum barrier transitional housing for men and women with a history of homelessness who need support. There is a two-year time frame, which is observed as much as possible, but length of stay is based on a tenant's needs and available options. For those who are capable of moving to a more independent situation, assistance is given to find appropriate accommodation in New Westminster. Some leave early for other reasons, such as increased care considerations. Priority is given to applicants who are in a housing crisis. Most come from New Westminster. 24-hour staffing on site.

<sup>27</sup> 3 Ways to Home

Facility	Client Group	Description
Fraser Health / Canadian Mental Health Association (CMHA)- Simon Fraser Branch	Mental health consumers	Mental Health Transition Homes - 3 facilities with a total of <b>14</b> units; communal living homes where individuals have their own rooms but share other facilities. A support worker assists with community living skills. Length of stay is usually 6-12 months. Considered a transition to independent living.  Most mental health clients in the mental health housing program of FH are also placed on the BC Housing waitlist since FH programs are intended to promote rehabilitation where clients develop skills to allow them to live in independent housing with support services.
Genesis House - Westcoast Genesis Society	Males on conditional release from a correctional facility	<b>20</b> -bed facility serving male offenders with Foetal Alcohol Spectrum Disorder (FASD) who transitioning from a corrections facility to the community. Length of stay varies from a few months to years. Residents come primarily from the Lower Mainland, but can be referred from anywhere in Canada. It is the only specialized program in Canada for offenders with FASD.  Also offers Core Corrections Programs for resident and non-resident offenders in areas of problematic substance use, critical thinking skills and other life skills.
Agape House - Lower Mainland Purpose Society	Youth 16-18 years	<b>5</b> -bed transitional housing for youth with youth agreements; group living with adult supervision

### **Filling a gap**

The Westcoast Genesis Society is planning a second facility on Carnarvon Street, the 14-bed Maria Keary Cottage to provide transitional and supportive housing for adults impacted by Foetal Alcohol Spectrum Disorder. Residents will come primarily from New Westminster. According to the Society, adults with FASD make up a significant proportion of the homeless and at-risk population. Staff at the Society know from experience that offenders with FASD require follow-up support after discharge to achieve and maintain stability in the community. Some FASD-impacted adults will be able to move into independent accommodation with support after a transitional stay at Maria Keary Cottage, and others will live indefinitely in this supportive housing facility. The goal is to help them live safe, healthy and meaningful lives.

### **Supported independent housing**

A number of studies have demonstrated that supported (or supportive) housing increases the health and well being of formerly homeless individuals and their families, as well as reducing their burden on the taxpayer, by, for example, decreasing the number of visits to detox facilities and/or hospital emergency rooms.

“Clearly all the studies show that supportive housing is the key to solving the problem of homelessness. It’s just a matter of getting the funding to start making it available”

Jill Davidson, Senior Housing Planner, Housing Centre, City of Vancouver quoted in the article, *Sooner*

An example: “Researchers tracked the cost of nearly 5,000 mentally ill people in New York City for two years while they were homeless and for two years after they were housed. They concluded:

- Supportive and transitional housing created an average annual savings of \$16,282 by reducing the use of public services: 72% of savings resulted from a decline in the use of public health services; 23% from a decline in shelter use; and 5% from reduced incarceration of the homeless mentally ill.
- This reduction in hospitalizations, incarcerations, and shelter costs nearly covered the cost of developing, operating and providing services in supportive housing. After deducting the public benefits, the average supportive housing unit cost only \$995 per year.

“In other words, based on the most conservative assumptions - without taking into account the positive impacts on health status and employment status, or improvements to neighborhoods and communities - it costs little more to permanently house and support people than it does to leave them homeless.”<sup>28</sup>

### ***Housing First to address homelessness – a combination of affordable housing and supports***

Since the adoption of the Continuum of Housing and Support as a framework for addressing homelessness, the concept of *housing first* has gained prominence in Canada and the United States. Using the *housing first* approach, homeless individuals are moved directly, and as quickly as possible, into permanent housing, either from the street or from an emergency shelter, and are linked to services to help maintain them in this housing. *Housing first* is based on the premise that an individual or household can best work on the reasons for their homelessness from a position of stable housing. This leads to an approach to homelessness that focuses the availability of affordable housing and then preventing eviction.

In Canada, a number of communities, including Vancouver, Toronto, Edmonton, Ottawa and Saskatoon, have identified affordable housing with supports as a need when addressing and preventing homelessness. As an example, the City of Vancouver’s Homeless Plan states that a good supply of affordable housing diminishes the need for emergency shelter spaces. Not only would people be able to exit the street directly into permanent housing accompanied by supports provided through outreach or other means, but also emergency shelters would be able to quickly place their clients, thereby freeing up needed beds and reducing demand.<sup>29</sup> In an extreme example, in 1990 the City of New York had an estimated 12,000 people sleeping in shelters in any given night and a further 10,000 sleeping rough, with this number considered an undercount. In six years, after creating 21,000 units of permanent housing, the numbers in shelters dropped to 4,000 per night and the street homeless to between 3,500 and 4,000.<sup>30</sup>

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<sup>28</sup> Corporation for Supportive Housing website  
<http://www.csh.org/index.cfm?fuseaction=Page.viewPage&pageID=345>

<sup>29</sup> City of Vancouver, *Homeless Action Plan*, 2005, p.39  
<http://vancouver.ca/commsvcs/housing/homelessness.htm>

<sup>30</sup> Mason, Gary, *Big Apple’s homelessness model bears fruit*, Globe & Mail, 5 Sept. 2006

In a pilot program undertaken in 2005, (The Vancouver Homeless Outreach Project), and then extended and expanded for another year, the Ministry of Employment and Income Assistance and City of Vancouver provide street homeless people with immediate income assistance and access to housing. Because many homeless people find applying for income assistance too daunting, and so do not even try, outreach workers approach homeless people and accompany them to provincial government offices where income and housing arrangements are made on the same day. This program connected 200 people to support services between October 2005 and September 2006 and more than 80 per cent of those individuals remain in housing and on income assistance.<sup>31</sup> Anecdotal information from business owners in Vancouver's West End implies that there had been a reduction in the neighbourhood's street homeless.<sup>32</sup>

(Another pilot, this one at Lookout Emergency Aid Society's Yukon shelter, is also targeting the application process for income assistance, in an attempt to make it easier for the homeless to apply for IA, and therefore more likely to make the application.)

### ***Supported facilities in New Westminster***

New Westminster has a number of supported housing facilities for different populations.

**Table 7: Supported housing facilities in New Westminster**

<b>Facility</b>	<b>Client Group</b>	<b>Description</b>
Chrysalis Place (Wings Housing Society)	Women and children fleeing abuse	<b>10</b> -bed facility offering supportive and affordable housing for up to 12 months after the initial crisis phase
Pathways (Elizabeth Fry Society)	Single women	<b>9</b> -bed second stage housing for single women. Length of stay up to 18 months. Clients are provided case management, peer support and assistance with daily living. Cost is \$350/month
Elizabeth Barnett Terrace (Pioneer Community Living Association)	Mental Health consumers	<b>23</b> units of supported apartments
Cliff Block (Lookout Emergency Aid Society)	Single men and women with a history of homelessness	<p><b>7</b> permanent bachelor units. Preference is given to those already resident in the transitional housing units who might benefit from ongoing support and who might not necessarily be able to live independently.</p> <p>A total of 31 people lived in the Cliff Block during the fiscal year, 05/06. There was 1 turnover in permanent housing and 6 in the transitional housing.</p> <p>On average, 20 people per month come to the door seeking housing. However, the majority do not meet Cliff Block's criteria for residents. At the time of this report, there were 19 people on the waiting list.</p>

<sup>31</sup> Minister of Housing, [www2.news.gov.bc.ca/news\\_releases/2005-2009/2006FOR0140-001248.htm](http://www2.news.gov.bc.ca/news_releases/2005-2009/2006FOR0140-001248.htm)

<sup>32</sup> BC Housing, [http://www.bchousing.org/news/news\\_releases/archive/2006/05/31/20\\_0605311614-836](http://www.bchousing.org/news/news_releases/archive/2006/05/31/20_0605311614-836)

At the Cliff Block there are transitional residents who have come to the end of their term, but who cannot live independently. There are few options. One resident is being transferred to Vancouver to another Lookout facility. “Unfortunately, we find an increasing number of clients within our system becoming part of the *revolving residential site doors* due to the difficulty in finding suitable accommodation for them to move on to, because they have needs that cannot be met by independent or second stage housing.”

***The Supported Independent Living (SIL) Program for mental health clients***

The Supported Independent Living program is a partnership between the Ministry of Health, and health authorities. It subsidizes the rent of individuals with a serious and persistent mental illness so that they may live independently in affordable, self-contained, market rental housing with the assistance of outreach services. For adult SIL, recipients must be 19 years or older, be diagnosed with a serious and persistent mental illness and be a registered client of a mental health centre, able to live independently, i.e. not require 24-hour residential care, and be in need of support services to maintain their independent housing. There is also a Youth SIL program serving youth 16-19 years.

- There are 66 adult SIL recipients in New Westminster.
- There are 10 Youth SIL recipients in the Fraser North area, which includes New Westminster.
- As of the end of August 2006, there were 14 people on the adult SIL waiting list.

**NB:** Wait list numbers can be deceptive, as referrals tend to drop off with extensive wait times or when the waitlist is cut off.

**Filling the gap**

The Elizabeth Fry Society is planning to expand its transitional housing program, Pathways, with 16 additional housing units that will support women in the community who require long-term supported housing. The new units will be located at the current Pathways site, and will be created through renovation and construction of an additional floor.

<b>GAP</b>	There is a need for a minimum barrier, harm reduction supported housing facility for the chronically homeless.
<b>GAP</b>	There is a need for additional transitional and permanent supported housing for adults and youth who are homeless and at-risk.
<b>GAP</b>	There is a need for transitional and supported housing capacity to serve older residents.

**6.2.4 Independent housing**

“Independent affordable housing refers to permanent housing that is affordable to households with low and modest incomes, who can live independently in the community

with little or no support services.” (From Vancouver’s Homeless Action Plan)

### **Private dwellings**

#### **Housing Stock**

New Westminster is a city with a high percentage of renters. 52% of households in New Westminster in 2001 were renter households, compared with 33% in the province.<sup>33</sup>

#### **Affordability**

In 2001, Vancouver was one of four Census Metropolitan Areas (CMA) in Canada with the least affordable housing. (New Westminster is in the Vancouver CMA.) Almost one in five households in the Vancouver CMA were core need households.<sup>34</sup> (For a complete description of Core Housing Need see page 23 in the section on INALHM data.)

In 2001, more than a quarter of all households in New Westminster, (6,875 households), were spending more than 30% of income on shelter. More than two-thirds of these households were renters.

In 2001, more than a quarter of all households in New Westminster, (6,875 households), were spending more than 30% of income on shelter. More than two-thirds of these households were renters. While some households earn sufficient income so that spending more than 30% on shelter is not a burden and others receive assistance in paying rent, (e.g. a student with a minimal income whose family is helping with shelter costs or someone with a low income receiving support payments from a former spouse), many are experiencing affordability problems. Those who are spending more than 50% of income, and whose income is not sufficient to afford acceptable housing, (i.e. meeting the standards of adequacy, suitability and affordability), are considered by CMHC to have *severe* housing affordability problems. These are the households included in the INALHM data.

Nationally, certain population groups were found to be most vulnerable to being in core housing need. These included:

- Aboriginal households, particularly renters;
- Lone-parent households and people who live alone, and within these two groups, particularly seniors and women; and
- Recent immigrant households, especially renters.

In the Vancouver CMA, for example, 39% of recent immigrant renter households were in core housing need in 2001, compared with 30% of non-immigrant renters. *The Longitudinal Survey of Immigrants to Canada* found that recent immigrants tend to congregate in cities to be close to family and friends and job prospects, and that over

<sup>33</sup> BC Stats, 2001 Census Profile of British Columbia’s Provincial Electoral Districts, New Westminster

<sup>34</sup> Engeland, John, Roger Lewis, Steven Ehrlich, CMHC & Janet Che, Statistics Canada, *Evolving Housing Conditions in Canada’s Census Metropolitan Areas, 1991-2001*, 2005.

90% of recent immigrants lived in the census metropolitan areas, 70% in the three areas of Toronto, Vancouver, and Montreal.<sup>35</sup>

**NB:** Non-family households with at least one maintainer aged 15 to 29 attending school full-time are considered not to be in core housing need regardless of their circumstances. Attending school full-time is considered a transitional phase, and low incomes earned by student households are viewed as being a temporary condition.

### ***Highest needs tracts***

Highest needs tracts are those 10% of all census tracts (neighbourhoods) in a CMA with the highest incidence of core housing need. The Vancouver CMA has 39 highest need tracts. These represent 10% of neighbourhoods in the CMA and 23% of households in core housing need live in these 10% of neighbourhoods. Average rents are lower and neighbourhoods tend to be denser. Households in these highest needs neighbourhoods are more likely to be unemployed, receiving government transfer payments, one person households and/or lone parent families than other households in the CMA, and considerably more likely to be renters. These households had an average income that was \$27,000 less than the average income in other neighbourhoods.<sup>36</sup>

#### **Highest needs tracts**

Highest needs tracts are those 10% of all census tracts (neighbourhoods) in a Census Metropolitan Area with the highest incidence of core housing need.

New Westminister has two highest needs tracts, roughly equivalent to the Uptown and the Kelvin/Moody Park neighbourhoods.

New Westminister has two highest needs tracts (roughly equivalent to the Uptown and Kelvin/Moody Park neighbourhoods) and four high need tracts (roughly encompassing the Queensborough, the downtown area and Brow of the Hill neighbourhoods.)

### **Secondary Suites**

Secondary suites can be a form of more affordable housing. All neighbourhoods in New Westminister are permitted to have a legal secondary suite in a home.<sup>37</sup> Suites must meet Building Code requirements and the city's Zoning By-law Design standards, and

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<sup>35</sup> *ibid.*

<sup>36</sup> *ibid.*

<sup>37</sup> New Westminister defines a secondary suite as "an accessory dwelling unit in a house that consists of one or more rooms that are designed, occupied or intended for use, including occupancy, by one or more persons as an independent and separate residence in which a facility for cooking, sleeping facilities and sanitary facilities are provided for the exclusive use of such person or persons." City of New Westminister, *Secondary Suites, A General Guide*, 2005

must pass final inspection by a city Building Inspector and the Secondary Suites Coordinator. The owner must obtain a building permit. A secondary suite that has not received a building permit is not a legal suite. For legal suites, the owner must register a secondary suite covenant on title declaring that the suite will always be maintained at the standards at which it was built.

There are 3,167 known secondary suites in New Westminster of which 191 are legal.

At this time, the city is not enforcing the bylaw against secondary suites created prior to July 6, 1998, provided the suite does not become a source of

serious health, safety or neighbourhood impact problems. However, a suite built after this date and discovered will result in two choices for the owner: either removing the suite or legalizing it.

At the time of this report, there were 3,167 known secondary suites in New Westminster of which less than 200 were legal.

### ***Vacancy rates***

CMHC conducts its Rental Market Survey in October of each year. After surveying private purpose-built rental buildings of more than three units, they calculate vacancy rates and rental rates. To be considered vacant, a unit must have been on the market for at least three months. It must also be available for immediate occupancy.

Between October 2004 and October 2005, the provincial vacancy rate dropped from 2.4% to 1.9%. CMHC attributed this decline to rising commodity prices leading to more employment and therefore to increased housing demand. For example, the downtown area of Prince George went from a vacancy rate of 14.5% in 2004 to 4.2% in 2005. However, some communities, including Vancouver and Abbotsford, experienced a rise in vacancy rates attributed to increased home ownership fuelled in part by low interest rates.<sup>38</sup>

In New Westminster, vacancy rates declined from 2.4% in 2004 to 2.0% in 2005. The vacancy rate of 2.0% was higher than for the Vancouver Census Metropolitan Area (CMA), which was at 1.4%. CMHC declined to state any guidelines for determining whether a rate is high or low, but other sources have used a benchmark of 2.5%-3% as a measure of a low vacancy rate.

Rental availability rates are higher than vacancy rates. A suite is considered available if it is vacant and ready for immediate occupancy or if the current tenants have given notice and no new tenants have signed a lease. For example, the vacancy rate in the Vancouver CMA in 2005 was 1.4% while the availability rate was 2.7%, higher but still a low rate, indicating a tight rental market.

In 2004 and 2005, the greatest difficulty in New Westminster was finding a 2-bedroom unit.

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<sup>38</sup> CMHC Rental Market Report , BC Highlights, 2005

**Table 8: Vacancy rates in New Westminister, 2001 - 2005**

	2001	2002	2003	2004	2005
Bachelor	1.2	1.1	2.1	2.5	2.0
1-Bedroom	1.4	2.3	2.6	2.3	2.1
2-Bedrom	1.6	1.1	3.5	2.2	1.6
3-Bedroom plus	2.1	0.9	3.2	4.9	3.3
Total	1.5	1.8	2.8	2.4	2.0

Canada Mortgage and Housing Corporation

### **Average rents**

Not surprisingly, rents have increased for all unit types since 2001. New Westminister's rental rates are generally lower than for the Vancouver CMA.

**Table 9: Average rents in New Westminister by unit size, 2001-2005**

	2001	2002	2003	2004	2005
Bachelor	\$507	\$516	\$524	\$538	\$543
1-Bedroom	609	626	635	652	656
2-Bedrom	779	801	805	826	826
3-Bedroom plus	958	1,014	1,049	1,031	1,043

Canada Mortgage and Housing Corporation

*NB: An analysis of annual income needed by household so that each unit type is to be considered "affordable" is included in the Income section on page58.*

### **Average rents and BC Shelter Allowance**

In 2005, the maximum BC Shelter Allowance was:

- \$325 for a single person;
- \$520 for two persons;
- \$555 for 3 persons; *up to*
- \$695 for a 7-person household.

The shelter allowance portion of BC Benefits is insufficient to rent any average suitable unit in New Westminister, e.g. a bachelor unit for one person, a one-bedroom for two people, or a two-bedroom for a couple with a child.

### **Subsidy programs to aid renters in market housing**

- ***The SAFER program – Shelter Aid for Elderly Renters***<sup>39</sup>

Seniors, most of whom live on a fixed income, can find it difficult to locate affordable accommodation in housing markets such as in the Lower Mainland. For example, from April 2005 through March 2006, the Seniors Services Society served 2,409 seniors with housing issues.

<sup>39</sup> BC Housing, <http://www.bchousing.org/programs/SAFER>

The provincial government's SAFER program assists seniors with housing. This is a rent assistance program administered by BC Housing that offers cash assistance to low to moderate-income seniors over 60 years who live in market rental housing and pay more than 30% of their income in rent. The subsidy is calculated to give the most assistance to people with the least income. If a senior is eligible, SAFER subsidizes rent costs above 30% of gross income. However, SAFER will only consider amounts up to maximum rent levels. For New Westminster these maximum levels per month are:

As of 18<sup>th</sup> August 2006 there were 444 SAFER recipients in New Westminster

Singles	\$700
Couples	\$755
Shared	\$975

A senior may be ineligible for SAFER for a number of reasons: citizenship or residency requirements, already living in subsidized housing or gross monthly income exceeds the following caps:

For singles	\$2,333
For couples	\$2,517
For shared	\$1,625

As of 18<sup>th</sup> August 2006 there were 444 SAFER recipients in New Westminster<sup>40</sup>.

- ***Housing subsidies for mental health consumers***

BC Housing funds 20 scattered rent subsidies for mental health consumers in New Westminster. These subsidize the cost of market rental apartments to make the unit affordable. They are managed by the Simon Fraser Branch of CMHA. At the time of this report there were 23 people on the waiting list and no new referrals were being accepted. This equates to a waiting list of many years because there is almost no turnover. It is almost impossible in the current market for those on low-incomes or income assistance to find affordable housing and move out of the subsidy program.

Unlike the SAFER program, where any senior who qualifies can receive a housing subsidy, the scattered housing subsidies for mental health clients are limited to 20. "If there were more affordable housing options available, such as from BC Housing or scattered address subsidies, then the stock of mental health housing could better serve clients with support/skill developmental needs. People are kept in SIL units and transitional housing options far longer than is sometimes necessary because to move them would involve moving them into poverty and unaffordable housing."<sup>41</sup>

### **Social Housing**

In 2001, one in six households in the Census Metropolitan Areas (CMAs) of Canada<sup>42</sup> lived in core housing need. It is rare for the condition of the housing to be the cause, i.e. that the housing is either inadequate, in need of major repairs, or overcrowded. Much

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<sup>40</sup> BC Housing

<sup>41</sup> From survey of New Westminster service providers

<sup>42</sup> New Westminster is in the Vancouver CMA.

more common is that the housing is unaffordable. “The main hurdle for households in need, especially renters, is finding affordable housing. Renters are much more likely to be in core housing need than owners.”<sup>43</sup>

Subsidized housing encompasses all types of housing where the provincial government provides some type of subsidy or rent assistance. (This includes rent supplements for people living in private market housing.) The assistance is for people with low to moderate incomes, including:

- Seniors;
- People with mental or physical disabilities;
- Individuals who are homeless or at risk of homelessness;
- Women and children fleeing abusive relationships;
- Aboriginal people; and
- Low income families<sup>44</sup>

Financial support for subsidized housing is generally based on a “rent-geared-to-income” calculation. Tenants pay rent based on the gross household income rather than paying the market rate. Affordable rent is defined as costing no more than 30% of a household’s total gross monthly income, subject to a minimum rent, based on the number of persons living in the home. Rent-geared-to-income units include all public housing stock and many developments managed by non-profit and co-operative housing providers.

1. **Public housing:** BC Housing manages 7,800 public housing units across the province for low-income families, seniors and people with disabilities.
2. **Non-profit housing:** Non-profit housing societies manage subsidized housing developments, and select tenants for these buildings. Non-profit societies are landlords under the Residential Tenancy Act.
3. **Co-operative housing (Co-ops):** Housing co-operatives are jointly owned and managed by residents, who become co-operative members. Members participate in decision-making, share the responsibilities of running the co-operative, and select new members.
4. **Low end of market units:** Some non-profit and co-operative housing developments include low end of market units, in addition to rent-geared-to-income units. Some providers offer only low end of market units. Low end of market unit rents are set at, or slightly below, the rents charged for similar apartments in the private market.

To qualify for subsidized housing through the BC Housing Registry, applicants must be

- A senior 55 years or older;
- A family (defined as a minimum of two people, with one person dependent on the other);
- A person with a disability who can live independently and qualify for a disability pension, or who cannot work because of a disability; or
- A single individual with a low income who is living in a city and who is at risk of homelessness.

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<sup>43</sup> Engeland, et al. CMHC and Statistics Canada, *Evolving Housing Conditions in Canada's Census Metropolitan Areas, 1991-2001*, p. 6 ,

<sup>44</sup> BC Housing

Priority for public housing units managed by BC Housing is provided to those individuals with the greatest need.

***Permanent, independent social housing units in New Westminster***

Bachelor and one-bedroom units in social housing developments serve seniors over 55 years or disabled single individuals, including mental health consumers, who are under 55. There are approximately 778 social housing units of this type in New Westminster.

Two, three and four-bedroom units serve families. The size of the unit required by a household is governed by federal/provincial Occupancy Standards. For example, a single- or two-parent family with two children of the opposite sex, where one child is over five years, requires a three-bedroom unit.<sup>45</sup> There are approximately 644 social housing family units in the city.

Applicants for social housing in the province may apply for a unit through the BC Housing Registry, available online at the BC Housing website. Co-ops and some non-profit developments maintain their own waiting lists and one must apply to them directly.

**NB:** A list of non-profit and cooperative developments in New Westminster and their units is available in Appendix 3.

***Waiting list data from the BC Housing Registry***

As of August 2006, 556 households who state their home municipality is New Westminster are on the BC Housing Registry waiting list for affordable accommodation. (NB: These households may or may not wish to remain in New Westminster.) 15 of these households are already accommodated but wish to transfer to another unit, leaving 541 qualifying households unable to access social housing. The list includes:

- 273 families;
- 123 seniors (55 years or older);
- 114 under 55 yrs. in receipt of a disability pension;
- Four requiring a wheelchair modified unit;
- 15 transfers – already in subsidized units, awaiting transfers;
- 27 singles under 55 years not disabled or on list for HAR/LIUS developments: (HAR – Homeless at-risk; LIUS – Low Income Urban Singles)

Of these 556 households seeking affordable accommodation, 89 would be considered homeless.

89 New Westminster households on BC Housing's Registry for affordable accommodation are homeless
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<sup>45</sup> Occupancy Standards – The standards for household size of a tenant relative to the number of bedrooms in a unit. According to the National Occupancy Standard enough bedrooms means one bedroom for each cohabitating adult couple; unattached household member 18 years of age and over; same-sex pair of children under age 18; and additional boy or girl in the family, unless there are two opposite sex siblings under 5 years of age, in which case they are expected to share a bedroom. A household of one individual can occupy a bachelor unit (i.e. a unit with no bedroom). CMHC, Research Highlights, April 2005, 2001 Census Housing Series, Issue 8 Revised.

- Six are staying in an emergency shelter;
- Three have no fixed address;
- Eight are living in a hotel/motel;
- 52 are living with family or friends: and
- 20 are in a transition house.

***Waiting list at Fraserside Community Services Society***

From April 2005 through March 2006, the housing support worker of Fraserside Community Services Society saw 236 clients (182 females, 168 males, 1 transgendered and 115 accompanying children). 75% of these clients lived in New Westminster and the rest came from other GVRD communities, primarily Burnaby. 13% were 55 years or over. Almost one-third had mental health concerns and 28% had physical disabilities. Only 3 people had drug/alcohol problems. 14% were First Nations

<b>GAP</b>	There is a need for additional affordable independent housing.
<b>GAP</b>	There is a need for additional “scattered addresses” market rental subsidies for mental health clients.
<b>GAP</b>	There is a need for a “scattered addresses” rental subsidy program that is not limited to mental health clients, but is open to those who are homeless or at-risk with challenges in their lives but who can live independently.

**6.3 The Income Continuum**

The incidence of low income in the New Westminster population was 22% in 2000. This compares with 17.8% in the province.

***Definitions of Low-Income Cut-Offs (LICOs) and Poverty Rates***

“Although Canada has no official measure of poverty, the Statistics Canada measure is probably the best known. Virtually all of the statistics used by other national measures of poverty in Canada come from Statistics Canada’s annual survey of incomes. Statistics Canada itself does not claim to measure poverty; rather, it defines a set of income cut-offs (Low Income Cut-Offs or LICOs) below which people may be said to live in *strained circumstances*. Most social policy analysts, politicians and editorial writers treat the cut-offs as poverty lines.”<sup>46</sup> According to Statistics Canada, LICOs identify “those who are substantially worse-off than average”.<sup>47</sup>

LICOs are calculated periodically and adjusted for inflation, spending patterns, population of the city where the household lives, and the household’s size. They identify households that spend 20 percentage points more of their income on the necessities of

<sup>46</sup> Canadian Council on Social Development, *The Canadian Fact Book on Poverty 2000*, p.2.

<sup>47</sup> <http://www12.statcan.ca/english/census01/Products/Reference/dict/fam021.htm>

food, clothing and shelter than does the average Canadian family. The Canadian Council on Social Development goes further in its identification of necessities of life. It considers LICOs as a measurement of the minimum income an individual or family may have and still participate as a citizen of Canada. As well, the Council believes there is strong evidence to suggest, “that children raised on incomes below the LICO are at risk of less healthy development.”<sup>48</sup>

The poverty rates discussed below are calculated using Statistics Canada’s 2001 data. The poverty line is consistent with Statistics Canada’s LICO levels. The poverty rates are determined by dividing the number of families or individuals that fall below the LICO by the total number of families or individuals reported for the given region. Therefore the poverty rates are the percentage of people living below the LICO levels.

### ***LICOs for New Westminster***

The Statistics Canada 2005 before tax Low Income Cut-Offs from for New Westminster are:

Family Size	LICOs
1	\$17,219
2	\$20,956
3	\$26,095
4	\$32,556
5	\$37,071
6	\$41,113
7+	\$45,155

### ***Income Facts and Trends for New Westminster***

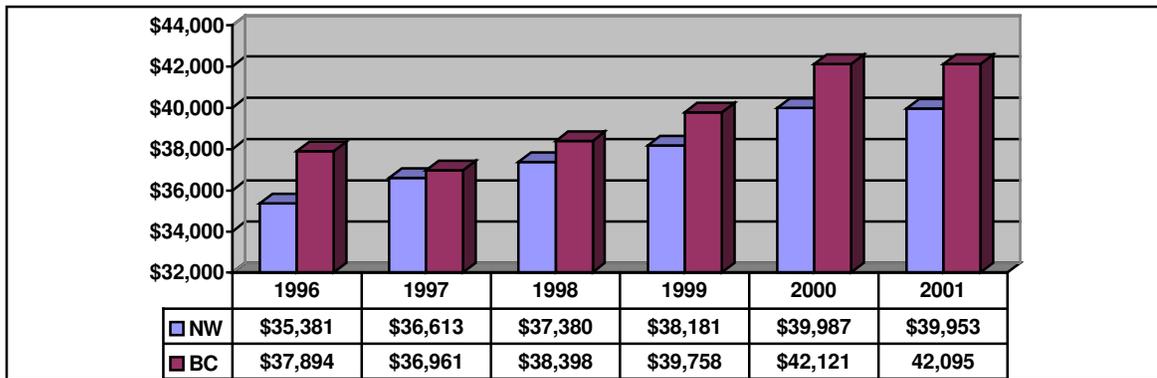
#### **Average Incomes**

Since 1996, the average incomes in New Westminster have been consistently lower than the average incomes for British Columbia.<sup>49</sup> The average incomes in both New Westminster and BC have both increased yearly, with the exception of 2001, where both regions saw a slight decline.

**Figure 21: Average incomes per year, New Westminster and BC**

<sup>48</sup> Canadian Council on Social Development, *Urban Poverty in Canada: A Statistical Profile*, 2000

<sup>49</sup> The average incomes are nominal, meaning it has not been adjusted for inflation or purchasing power.

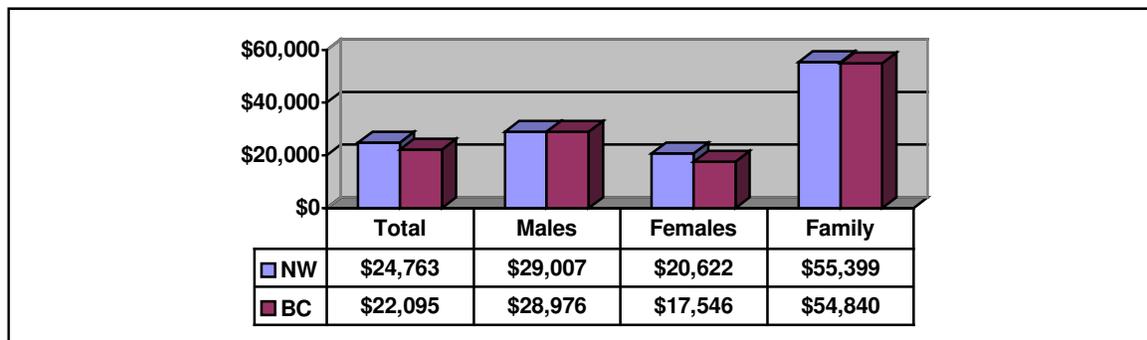


Source: BC Stats

### Median Incomes

The median income for New Westminister in 2001, however, was higher than for BC, with the total New Westminister median income being \$24,763 compared to \$22,095 for the province. The higher median income in New Westminister indicates that there is a smaller disparity in income distribution for New Westminister than for the province. Some people in BC earning high incomes inflate the provincial average income.

Figure 22: Median Incomes, New Westminister and BC, 2000

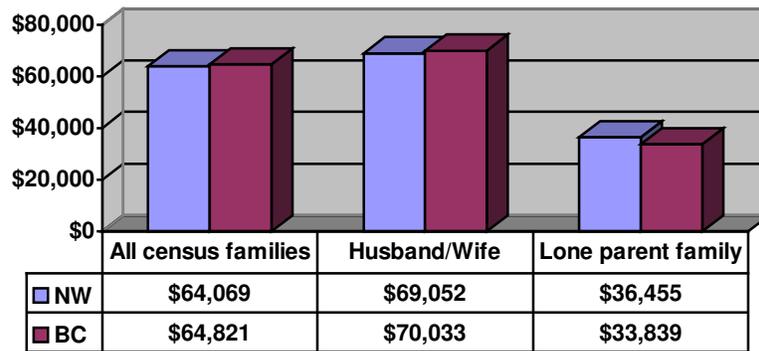


Source: BC Stats 2001

### Family Incomes

In terms of family incomes, the median family income in 2000 in New Westminister was \$55,399, which is slightly higher than the BC median family income of \$54,840. The average family income for New Westminister was only slightly lower than the BC average (\$64,069 for New Westminister, compared to \$64,821 for BC). The average family income for two-parent households was almost double the average incomes for female-headed lone-parent families. This is consistent with the BC average incomes.

**Figure 23: Average Incomes by Family Structure, New Westminster and BC, 2000**



Source: BC Stats, 2001

### How income is obtained

While more than half of the total income earned by New Westminster residents (54.4%) was earned through employment, this figure is much lower than for the province. This indicates that a larger proportion of residents in New Westminster receive their income from other sources. For example, 18% of the total income of New Westminster residents comes from investments, while the BC proportion was only 7.6%. Other significant sources of income for New West Minster residents are pensions and self-employment.

**Table 10: Source of Income, New Westminster and BC, 2000**

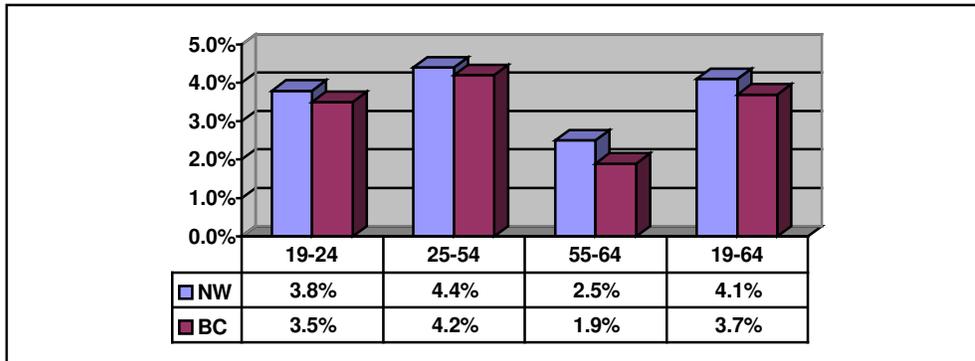
Source of Income	New Westminster	BC
Employment	54.4%	66.5%
Pension	12.2%	12.3%
Investment	18.0%	7.6%
Self-Employment	11.0%	5.3%
Other	4.0%	4.9%
Tax Exempt	0.4%	3.4%
Total	100%	100%

Source: BC Stats, 2001

### Dependence on the social safety net

In 2005, New Westminster had a slightly higher proportion of its residents depending on social assistance than the BC average. Recipients include those who received temporary benefits only, not those receiving continuous assistance, such as the disabled or those with persistent multiple barriers to employment. 4.1% of New Westminster residents between the ages of 19 and 64 years relied on social assistance, compared to 3.7% of BC residents. Those who are 55-64 years had the lowest dependency rates for social assistance, both in New Westminster and BC, compared to the other age groups. However, this age group showed the greatest difference in percentage of dependent residents compared with the same age group in BC.

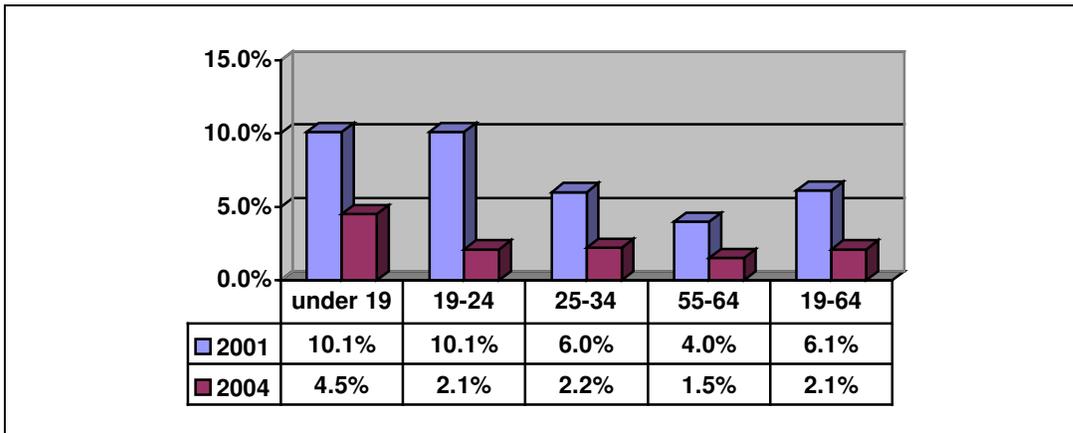
**Figure 24: Total BC Basic Income Assistance and EI Beneficiaries by Age Group, New Westminister and BC, September 2005**



Source: BC Stats 2005

Between 2001 and 2004, the percentage of the New Westminister population receiving both BC Benefits (Income Assistance or Disability Pension) fell dramatically, reflecting both an improved labour market and budget reductions to the funding ministry as well as changes to eligibility rules and the application process.<sup>50</sup>

**Figure 25: Percentage of New Westminister population by age receiving BC Benefits\*, 2001 and 2004**



BC Stats

\* BC Benefits is now called Income Assistance

In a recent study, the Social Policy and Research Council of BC (SPARC BC) estimated the minimum living costs for different household units and compared them with income assistance to such a household. The study concluded that the IA received by a single parent with either a toddler or a teenager or by a couple with two children aged 4 and 1, was less than 60% of estimated minimal living costs. For a single adult or a couple with no children the IA received was 41% and 45% of estimated living costs. In all cases the percentage of estimated living costs received through IA had declined since 2001.<sup>51</sup>

<sup>50</sup> Klein, Seth and Andrea Smith, *Budget Savings on the Backs of the Poor: Who Paid the Price for Welfare Cuts in BC*, Canadian Centre for Policy Alternatives, 2006.

<sup>51</sup> Goldberg, Michael and Kari Wolanski, *Left Behind: A comparison of living costs and employment assistance rates in British Columbia*, SPARC BC, 2005

As well, in the summer of 2006, the Nation Council on Welfare, an advisory group to the federal Minister of Human Resources and Social Development, published a paper, entitled *Welfare Incomes, 2005*, which concluded that Canadians receiving welfare were living far below the poverty line (national Statistics Canada's pre-tax low income cut-offs.) They examined four households: a single employable person, a person with a disability, a lone parent with one child and a couple with two children. BC was one of the five provinces that recorded the lower welfare incomes between 2000 and 2005. For a couple with two children, the BC welfare rate scored the lowest in the country in 2005, at 48% of the poverty line. As in the SPARC findings, rates in BC for the four examined households were all below 60% of the poverty line, and for a single employable person, it was close to 30% of the poverty line.<sup>52</sup>

### Poverty rate by age group, gender and population type

According to a report from Human Resources and Social Development Canada, based on the previous census, almost one in ten people live in poverty in Greater Vancouver. This is the highest rate of any major centre in the country. As well, BC had the highest rate of working poor, more than 10% of the total workforce, nearly twice the national average. Working poor were defined as working at least 910 hours/year, but whose family income was below the poverty line.<sup>53</sup> Since 2001, economic conditions in the province have improved. The census of 2006 will determine if the GVR and BC are still in the lead.

The poverty rate by all age groups is slightly higher in New Westminster than the BC average; however, the New Westminster rates are fairly similar to the GVRD rates. The largest difference in poverty rates is for seniors. Seniors in New Westminster have a significantly higher poverty rate than do seniors in both BC and the GVRD. The poverty rate for seniors aged 65 to 74 is more than double the BC rate and 41% higher than the GVRD rate. Again, the poverty rate for seniors in New Westminster over 75 is almost double the BC rate and is 37% higher than the GVRD rate. Youth between the ages of 15 and 24 years also have a high poverty rate in New Westminster.

Cliff Block staff have noted an increase in the number of outreach clients that claim to have no visible means of support. Numbers have been rising from less than 5% of clients in April 04 to over 48% by March 05. "It appears local street people are becoming incredibly desperate. Many have taken up binning and collecting bottles to support themselves, while others confess to criminal activity to live."

Lookout Emergency Aid Society, *Annual Report*, June 2005

**Table 11: Poverty Rates by Age Group, 2001**

	Total	0-14 years	15-24 years	25-34 years	35-44 years	45-54 years	55-64 years	65-74 years	75 and over
New	22.2%	22.4%	27.7%	22.0%	19.4%	15.4%	18.6%	27.7%	36.1%

<sup>52</sup> National Council on Welfare, *Welfare Rates 2005*, 2005, p. 12

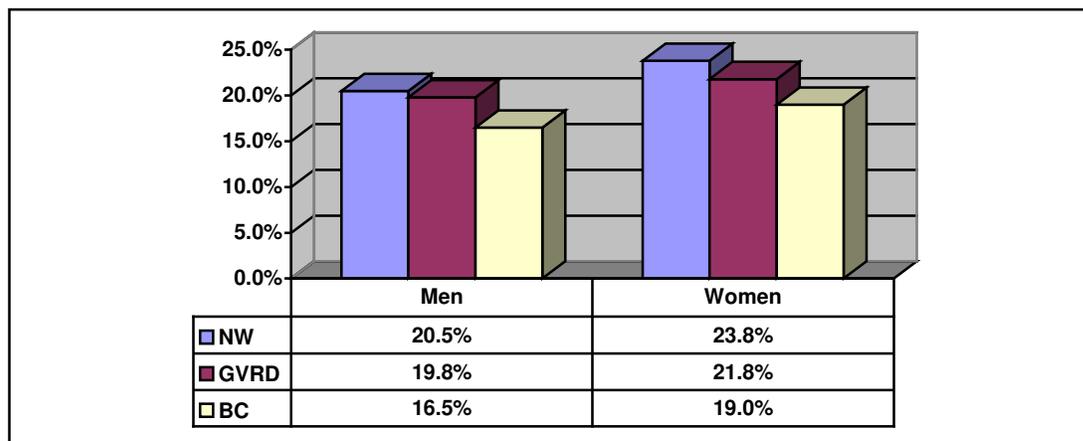
<sup>53</sup> Skelton, Chad, *BC has largest share of working poor*, Vancouver Sun, 5 Sept. 2006

Westminster									
GVRD	20.8%	23.2%	26.2%	20.1%	19.5%	16.7%	16.8%	19.6%	26.3%
BC	17.8%	20.3%	23.1%	18.7%	16.3%	13.9%	15.2%	13.8%	19.7%

Source: Statistics Canada, 2001

Given that the median incomes for men is 40% higher than for women in New Westminster, it is not surprising that the poverty rates for women living in the New Westminster is 3.3% higher than the poverty rate for men. In fact, the gap between the male and female poverty rates for New Westminster is slightly larger than in both the GVRD and BC.

**Figure 26: Poverty Rates by Gender, New Westminster, GVRD, BC, 2001**



Source: Statistics Canada 2001

People in New Westminster belonging to populations that are considered to be at a greater risk of poverty, such as Aboriginal people, people belonging to visible minority groups, people with physical disabilities, and immigrants, have poverty rates similar to the rates for those populations living in the GVRD and BC. The main inconsistency is that the Aboriginal population in New Westminster has an extremely high poverty rate, with almost half of the Aboriginal population in the community living on incomes that fall below the poverty line. The Aboriginal population has the highest poverty rate of the at-risk groups in New Westminster. This differs from the GVRD and BC. While the Aboriginal populations' poverty rates are high for the GVRD and BC, the population with the highest poverty rates for these areas is the recent immigrant population.

**Table 12: Poverty Rates by At-Risk Population, New Westminster, GVRD, BC, 2001**

	Total Population	Aboriginal Population	Visible Minority Population	Population with Limited Mobility	Immigrant Population	Recent Immigrant Population
New West	22.2%	49.4%	26.0%	33.6%	26.0%	44.80%
GVRD	20.8%	40.2%	30.0%	28.0%	27.8%	48.7%
BC	17.8%	35.9%	28.4%	23.7%	24.0%	46.2%

Source: Statistics Canada, 2001

### **Core Need Income Thresholds for New Westminster**

Core Need Income Thresholds (CNITs) represent the income required to pay the average market rent for an appropriate-sized unit in the private market, where the rent is no more than 30% of income. Average rents are derived from CMHC's annual Rental Market Survey. The size of the unit required by a household is governed by federal/provincial occupancy standards.<sup>54</sup> BC Housing uses CNITs to determine the maximum eligibility income that a household can have and qualify as a Rent Geared to Income (RGTI) tenant, eligible for social housing units.

The following are the CNITs for New Westminster based on the 2003 rental Market Survey. As with other smaller centers in the Lower Mainland, CMHC does not calculate CNITs specifically for New Westminster and BC Housing uses the Vancouver CNITs to determine eligibility. CMHC has recently released a draft of 2005 CNITs and BC Housing is currently reviewing it. CNITs are available on the BC Housing website.

**Table 13: Core Need Income Thresholds for New Westminster**

<b>Unit size</b>	<b>Bachelor</b>	<b>1 - BR</b>	<b>2 - BR</b>	<b>3 - BR</b>	<b>4+ - BR</b>
CNITs	\$27,500	\$31,000	\$37,500	\$44,000	\$48,500

BC Housing

All categories of recipients of BC provincial support and shelter allowances (posted on MEIA's website) have incomes well below the Core Need Income Thresholds and therefore would either qualify for subsidized social housing, or would find themselves with severe affordability problems. To come close to the CNIT for a bachelor apartment in New Westminster, a household receiving IA and federal child tax credit(s), would have to be a couple with five children, where the parents were both over 65.

While incomes can be expected to rise somewhat between the last census, using incomes from 2000, and the CNITs from 2003, it should be noted that:

- The median income for females in New Westminster in 2000 (\$20,007) was lower than the 2003 CNITs for a bachelor suite (\$27,500).
- The median income for males in 2000 in New Westminster (\$29,007) was higher than the CNITs for a bachelor suite but lower than for a one-bedroom unit (\$31,000).
- The median income for families in 2000 was higher than all the CNITs.
- The average income in New Westminster in 2000 (\$39,953) was higher than the CNITs for a two-bedroom unit but less than the CNITs for a unit of larger size.
- The average income for female lone parent families in 2000 (\$36,455) was below the CNITs for a two-bedroom unit.

Using CNITs as the measure of income that would allow for affordability of rental units in New Westminster, Table 13 demonstrates the income a household must generate for each type of rental unit. The minimum housing wage (MHW) is the hourly wage that a households must earn to rent accommodation at less than 30% of their gross income.

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<sup>54</sup> BC Housing website

“To afford an average bachelor apartment workers in Toronto and Vancouver must earn over \$13 per hour.”<sup>55</sup> This is \$5/hour above BC’s minimum wage.

**Table 14: Rental affordability by unit type, New Westminster**

Unit type	Average monthly rental costs, 2005	Core Need Income Thresholds by unit size	Monthly income needed to reach affordability	Minimum Housing Wage: Hourly wage needed to reach affordability*	Monthly Shelter Allowance from BC Government Income Assistance	
Bachelor	\$543	\$27,500	\$2,291	\$13.22	Single person	\$325
1-Bedroom	\$656	\$31,000	\$2,583	\$14.90	2 adults	\$520
2-Bedroom	\$826	\$37,500	\$3,125	\$18.02	Single mother, 2 children of same gender	\$555
3-Bedroom	\$1,043	\$44,000	\$3,667	\$21.15	2 adults, 5 children	\$695

\*Based on earning the hourly wage for 52 weeks and a 40-hour week

The general minimum wage in BC at this time is \$8/hour. A single person earning minimum wage would not find a bachelor unit affordable. Two people earning minimum wage, with a child or children would only find a one-bedroom unit affordable.

<b>GAP</b>	There is a need to increase the BC Income Assistance and shelter allowance.
<b>GAP</b>	There is a need to increase minimum wage.
<b>GAP</b>	There is a need for a less complicated access to BC Income Assistance and shelter allowance.

### **Employment**

In 2001, 62% of New Westminister residents 15 years or over were employed. The unemployment rate was 7.8%. This was lower than the provincial unemployment rate at that time, which was 8.5%. Youth in New Westminister, (those 15-24 years), had a higher unemployment rate. The male youth unemployment rate (16%) was higher than the female youth rate (12%). 41% of those 15-24 were not attending school. This is higher than the provincial percentage at 37%.

**Table 15: Percentage of New Westminister residents employed, unemployed, or not in the labour force, 2001**

	Employed	Unemployed	Not in labour force	Unemployment rate

<sup>55</sup> Pomeroy, Steve, *Minimum Housing Wage - A New Way to Think About Rental Housing Affordability*, undertaken for the Canadian Housing Renewal Association, 2006

15 years and over	62%	5%	33%	7.8%
Youth: 15-24 years	58%	9%	34%	13.6%
25 years and older	62%	4%	32%	6.6%

BC Stats

### Employment Insurance

Between 2001 and 2004, the percentage of New Westminister residents receiving Employment Insurance (EI) fell in almost all age categories.

**Table 16: Employment Insurance Beneficiaries, New Westminister, 2001 and 2004**

Employment Insurance Beneficiaries			
Age group	2001		2004
19-24	4%		1.8%
25-54	4%		3.3%
55-64	2%		2%
19-64	3.8%		2.9%

### Education levels

35% of New Westminister residents 20 years or older had either a high school education or less. 17.2% had a bachelor's degree or higher. 12% had a trades certificate.

## 6.4 Support Services

The following is a compilation of services to the homeless and those at risk of homelessness in the City of New Westminister based on the Continuum of Housing and Support employed by the updated Regional Homelessness Plan, *3Ways to Home*.

As has been noted previously, the Continuum offers a *framework* for alleviating homelessness. Not all communities have a homeless population sufficient to warrant the entire range of services. Certain services might adequately be delivered either by partnerships between communities or on a regional basis. As well, homeless individuals often utilize services in an area broader than a single municipality. For example, the Greater Vancouver Food Bank reports that a large number of New Westminister residents use the Food Bank that is located just across the border in Burnaby because it is more convenient. A number of other Burnaby service providers also report serving people from New Westminister. While only services located in New Westminister are included in this section, the Burnaby services that reported serving people from New Westminister are included in the Inventory in Appendix 1. Also included in the Inventory are a number of services located in other areas of the GVR that are structured to serve clients throughout the whole region.

Support services include:

- Addiction services;
- Drop-in services;

- Outreach services;
- Food, clothing, furniture services;
- Employment services;
- Mental health services;
- Health services; and
- Preventions services.

#### 6.4.1 Addiction Services

“The life of the addicted person is all too often focused on acquiring and using the drug or alcohol... Having a job is not as critical as having a fix or a drink. The more isolated the person becomes, the greater the effect of the addiction and the faster the decline towards instability and homelessness. People with money, stable housing, and supportive family or friends can often maintain stability in their life for long periods of time while being addicted. Addicted people who are unemployed, poor, or disabled, however, may soon find themselves unable to pay the rent and may end up on the street. In addition, because of the fear of detection or arrest, drug users tend to isolate themselves from other people and avoid using the health care system. As a result, they are at a much higher risk for infections such as hepatitis, tuberculosis and HIV, as well as higher rates of trauma or death (from overdose, self-harm, or suicide).“

City of Toronto Mayor’s Homelessness Action Task Force, *Taking Responsibility for Homelessness: An Action Plan for Toronto*, 1999

Substance abuse, like mental illness, is seen as both a pathway to homelessness and a factor in prolonging it. 42% in the 2005 Nanaimo Homeless Count identified substance abuse as the cause of their homelessness. 37% of those enumerated in New Westminster in the 2005 Homeless Count self-reported an addiction.

Studies vary as to the prevalence of addictions in the general population, but all agree that the incidence in the homeless population is much higher. A study of Toronto shelter users found 66% of the study sample had a substance abuse.<sup>56</sup> In the 2002 Greater Vancouver Homeless Count, 39% self reported an addiction. By 2005, this had grown to 48%, with addiction self reported more frequently in the street homeless than in the sheltered homeless. In the McCreary Centre Study on BC street youth, 51% of their study sample self-identified as addicted to drugs, alcohol and/or inhalants. (It should be noted that self-reported numbers are considered an undercount.)

New Westminster has a number of programs to address addictions and issues arising from addictions. These include residential treatment facilities, a needle exchange program, concurrent disorders programs, and non-residential treatment and prevention programs.

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<sup>56</sup> *Mental Illness and Pathways into Homelessness: Findings and Implications Proceedings and Recommendations*, Canadian Mental Health Association, Mental Health Policy Research Group, Toronto, 1998

### ***Residential treatment, supportive recovery and transitional living***

- **Westminster House** of the Julien House Society is a 9-bed licensed supportive recovery house with 24-hour supervision for adult **women** recovering from a chemical dependency. Referrals to the waiting list are open, but application forms must be filled out by an addiction counsellor, physician, or mental health worker. Westminster House will accept women using methadone. It is funded by FH and the length of stay is 3-9 months. The facility primarily serves the geographic area administered by Fraser Health, but also accepts clients from throughout B.C as well as across Canada and the United States.
- **Last Door Recovery Centre** – 40-bed residential treatment program for adult **men** and 10 beds for **male youth**. Length of stay is three to six months. Last Door is increasing capacity. They have purchased the apartment building next to the adult program and are using it for various forms of transitional living including youth transition, adult transition and a family suite. Their program is now geared towards younger, early intervention clients and they are accepting more concurrent disorder clients as per policy from Fraser Health and the provincial Ministry of Health.

In 2005, they served 137 adults and 37 youth. They have had to turn away potential clients either because they were fully booked or because the potential client did not fit their mandate. Their average waitlist is 28 adults and five to seven youths per month. Youth wait an average of two to three weeks for intake. Some potential clients never do make it off the wait list because they are in crisis and need more immediate service than Last Door can provide.

Last door is a Community Care licensed facility partially funded by FH. (FH pays a portion of the cost of twenty beds at the adult program. They also fully fund one youth bed). Most clients in both the adult and youth program self-pay. For those who can qualify for income assistance, the provincial government will provide \$40 per bed for 20 beds. However, income assistance (IA) has become increasingly difficult for single men. There are extensive waiting periods to open an IA file, even with a referral from a recognized addiction service provider. For youth, qualifying for income assistance is even more difficult. For those who do not qualify for IA and have no resources, FH has an Accommodation Fee Subsidy paying \$40 per day for up to three months. A “means” test is applied that can result in a person paying a portion of the fee privately and FH Fee Accommodation paying the remainder. There is no Accommodation Fee Subsidy as yet for youth although FH is currently planning to implement one.

- **Lana House Society** – 12-bed facility for adult **men** and some **youth** who have completed a treatment program within the past year, have knowledge of and apply the 12-steps, and are ready to integrate into society. Does not accept men using methadone. The length of stay depends on the individual, but the average stay is one year.

### ***Needle Exchange Program***

The New Westminster Public Health Services provides a needle exchange program in the city. The service can also provide referrals and brief interventions. FH reports that there is no change in the numbers using this program.

### ***Detoxification – Residential facilities***

The regional detoxification centre is Maple Cottage, once located on the Woodlands site in New Westminster. It is now in Burnaby and will be moving to a new facility in Surrey. It serves 22 adults and 3 youth at a time. The centre is staffed by a multi-disciplinary team including physicians, healthcare workers, nurses and social workers, and provides detoxification, education, treatment preparation, and referral services.

### ***Non-residential Drug and Alcohol Addiction, Treatment and Prevention***

- The **Elisabeth Fry Society** operates drug and alcohol counselling services for youth in secure and open custody. Fraser Health Addiction Services provides three specialized day treatment programs for adults and one-day treatment program for youth. The adult program travels between communities on a set schedule.
- The **Day, Evening, Weekend Youth (DEWY) program** of Pacific Community Resources, provides day treatment to youth 12-18 years, who have substance misuse problems.

<b>GAP</b> There is a need for more addictions services.
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## **6.4.2 Drop-in Centres**

Drop-in centres for the homeless are places where people can come in off the street, have a cup of coffee and perhaps a meal, wash their clothes, use a washroom, and receive assistance. For those at-risk, these centres are a place where people can associate together, and where they may receive counselling or assistance with addictions or medical needs, housing, employment, income assistance, etc.

Drop in centres in New Westminster include:

- The **Union Gospel Mission** drop-in centre which serves all and provides emergency food and clothing as well as counselling;
- **Friendship House** of the Fraserside Community Services Society serves mental health clients with a variety of programs in the morning and a drop-in centre in the afternoon;
- **The Elisabeth Fry Society** operates a resource centre offering services to women and their families (children and/or partners as accompanied by a woman) including: hot showers, low cost laundry facilities, a Thursday community lunch program, computer training and Internet access, a clothing bank, a basic food kitchen, community referral, and accompaniment (upon request); basic legal information; assistance completing forms, and support and friendship. Their client

base is approximately 1,600 people. An overview of the client base from self-reporting shows that:

- 60% had incomes of less than \$15,000 dollars a year and a further 23% incomes between \$15,000 and \$24,999;
  - 78% of adult clients had not graduated high school;
  - 54% had not been employed in the past two years and 56% have never been employed for a period over three months at any one time;
  - 68% had an infectious disease, such as HIV/AIDS, tuberculosis, or hepatitis;
  - 23% had mental health issues;
  - 43% had been convicted of a crime, and 38% were currently on probation or parole.
- **Youth Source** of Lower Mainland Purpose Society serves youth-at-risk under 21 years with food, personal hygiene items, showers, laundry, clothing, the assistance of youth workers, mental health consultations and a medical clinic. (At-risk youth are those who are most “at risk of failing to make a healthy transition to adulthood.”<sup>57</sup>)

<b>GAP</b> There is a need for more comprehensive, minimum barrier drop-in services in New Westminster.
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### 6.4.3 Outreach Services

Outreach services are designed to go out into the community to locate those in need of the services and, by establishing rapport, make it possible for the person in need to access services.

New Westminster has three outreach services for adults and two for youth. In October 2006, the Minister Responsible for Housing announced \$100,000 to fund a three-year outreach services program in the City. “Outreach workers help people who are homeless get the services they need...The program is designed to help people break out of the cycle of poverty and homelessness by moving people from temporary, emergency shelter into more permanent, supportive housing... The outreach projects will provide immediate and long-term assistance by offering food, clothing and shelter but also access to transition services such as life-skills training and health and social programs. By providing intensive, one-on-one help such as arranging and attending appointments with the homeless, the outreach workers enable them to receive health, nutrition and other basic services often taken for granted by the public, but not always used by those in need.”<sup>58</sup>

#### Adults

<sup>57</sup> McCreary Centre Society, *No Place to Call Home: A profile of street youth in British Columbia*, 2001

<sup>58</sup> [http://www2.news.gov.bc.ca/news\\_releases\\_2005-2009/2006FOR0140-001248.htm](http://www2.news.gov.bc.ca/news_releases_2005-2009/2006FOR0140-001248.htm)

- The **Cliff Block** offers an outreach program for the homeless, those with low incomes, and otherwise disadvantaged individuals. Their services are based on a non-judgmental approach and building relationships. Through their community development work they have become integrated with other city services and those in surrounding communities.

In 2004/05, the Cliff Block outreach workers averaged 312 contacts per month, an increase from 250 in 2003/04.<sup>59</sup> The percentage of female patrons rose from 25% in 2003/04 to 31% in 2004/05, possibly indicating a change in the male to female ratio of the New Westminster street population and an increase in the number of women forced, by economic conditions, to access survival services.

- **Hope on Wheels** is a street outreach advocacy program run out of The Salvation Army. It is a two-person team that use bicycles to reach areas of the city such as alleyways, under bridges, behind businesses, around garbage dumpsters, park trails and other secluded areas. The main goal of Hope on Wheels is to develop relationships with people on the street. Once that trust is developed, the intention is to offer opportunities for treatment, housing, financial assistance, legal aid, etc. The team is active on the street Thursday, Friday and Saturday nights from 1800 to 0200. They are also on duty Tuesday and Wednesday from 0900 to 1700 in order to follow up on connections made during the night shifts. In 95 days on the street:
  - 97 persons have accepted shelter. These are almost exclusively people who had not sought shelter with the Salvation Army before. They include men, women and children. The women and children were brought to non-Salvation Army shelters.
  - Seven people have accessed permanent housing with the help of the program.
  - Four people who were living on the street due to family difficulties were reconciled with their family.
  - Ten people entered detox.
  - 15 people entered drug and/or alcohol treatment.
  - 180 received food and clothing assistance.
  - 90 were referred to other agencies for assistance.
  - 141 were provided with bus tickets to allow them to attend appointments, travel to shelter, etc.
- The **Fraser Health Mental Health Centre** provides outreach services for both mental health and addiction clients. These include Assertive Community Management, Geriatric Psychiatry Outreach Services, After Hours Emergency Mental Health Services. FHA funds two outreach workers through a contract with Lookout Emergency Aid Society.

## Youth

- **Perspectives Youth & Family Outreach Services** of Fraserside Community Services Society that offers outreach services for children, adolescents and families who are experiencing substance abuse.

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<sup>59</sup> Lookout Emergency Aid Society Annual Report, June 2005

- The **Purpose Health Van**, of the Lower Mainland Purpose Society, which operates in New Westminster and Burnaby two evenings a week, offering needle exchange, condoms, referrals and food.

Women fleeing abuse and having to leave their homes

Monarch Transition House staff see a need for sufficient, appropriate services for those who have experienced abuse and have left their homes, (e.g. appropriate medical care, counselling, legal counsel, etc.) There is also a need for sufficient multicultural services and integration opportunities offered to those who have left their homes because of abuse.

<b>GAP 5</b>	There is a need for sufficient multicultural services and integration opportunities for immigrant women who have left their homes because of abuse.
<b>GAP 6</b>	There is a need for service providers to recognize needs specific to women and their children fleeing abuse, and the trauma associated with having to leave their home, and provide them with appropriate services.

**6.4.4 Food, clothing, furniture and other support programs**

***The Food Bank***

The New Westminster Food bank is the largest depot of the 17 food banks operated by the Greater Vancouver Food Bank Society. To accommodate the number of recipients, it operates two days per week, whereas most depots operate one day per week. (The Food Bank does not operate on the week when Income Assistance cheques are issued.)

The New Westminster Food bank is the largest depot of the 17 food banks operated by the Greater Vancouver Food Bank Society.

The Greater Vancouver Food Bank Society also operates a food bank in Burnaby, very close to the New Westminster border. Many people from New Westminster find this food bank more convenient to attend. Statistics are not available to track the number of New Westminster recipients at the Burnaby Food Bank, but it should be noted that the total number of people in New Westminster using a food bank is higher than that shown by statistics from the New Westminster Food Bank alone.

From April 1, 2005 to March 31, 2006, the New Westminster food bank handed out a total of more than 17,000 food parcels or an average of 1,450 food parcels per month. This represents households receiving food assistance. Approximately 50% of the food parcels went to families, with single parent families receiving one-third of these. Almost half the parcels went to households on income assistance and another third to households receiving other government assistance, i.e. pensions, disability pensions or

EI. Approximately 1000 people per week receive food assistance through the New Westminster Food Bank.

### **Other food services**

		<b>Attendance</b>
▪ Salvation Army Family Services	Provides breakfast every Friday and lunch every Monday. Also provides emergency clothing and furniture.	30-50/meal
▪ Union Gospel Mission	Monday to Saturday provide soup and bread just after 1:00 p.m., pastries just after 2:00 p.m. and dinner at 5:00 p.m.	120-130 for supper 6000 meals/month
▪ Holy Trinity Anglican Church	Provide a food cupboard for emergency food Monday from 9:00 - 10:30 and a community breakfast on Thursdays from 8:00 a.m. - 9:00 a.m.	100 people/week
▪ Saint Barnabas Church	Community lunch on Thursdays from 11 a.m. - 12:00 noon. Also have an emergency food cupboard on Friday mornings. Operates a thrift store that sells used clothing at 5th Ave and 10th St.	100-200 at lunch
▪ Queens Avenue United Church	Lunch Wednesdays 11:30 a.m. - 1:00 p.m. Will provide leftovers.	100-200 served/meal
▪ Elizabeth Fry Resource Centre	Community lunch on Thursdays, basic food kitchen, clothing bank	
▪ Operation Food Justice	A project of Shiloh-Sixth Avenue United Church, St. Aidan's Presbyterian Church and St. Barnabas Anglican Church. Supports service programming at each of the three churches related to food security and provision of clothing.	
▪ West Burnaby United Church	Hot lunch and clothing room on Tuesdays from 11:30 a.m. to 12:30 p.m.	60/meal

### **6.4.5 Employment services**

New Westminster has a number of employment services including:

- **Horizons**, operated by Fraserside Community Services Society, a supported employment program offering assistance with job searches and to maintain employment. The program has a mobile supervised work crew that provide gardening, lawn maintenance and snow removal services;
- **Aware Society** offering career planning and job search for adults as well as a wage subsidy program for people on Employment Insurance. They also have a works skills program for youth; and
- **CAVE (Career and Vocational Exploration) Youth Employment Centre** operating an employment drop-in centre that provides job search and career planning assistance for youth ages 15 to 30. CAVE offers workshops in career

planning, personal management skills, job search, employment maintenance, and computer technology and provides a resource library.

#### **6.4.6 Mental Health**

The Canadian Mental Health Association (CMHA) reports that one in five Canadians will experience a mental illness at some point in their lifetime.<sup>60</sup> Mental illness refers to a range of illness, including anxiety, mood disorders, schizophrenia, personality disorders, eating disorders, and organic brain disorders. Those with a lifetime diagnosis of serious and persistent mental illness, e.g. schizophrenia or bipolar disorder, represent only a small portion of those that experience one or more of the range of mental illnesses. Vancouver Coastal Health works on the premise that in any one year, 2.5% - 3.5% of the general population will have a serious and persistent mental illness. (This figure would be somewhat higher if given as lifetime prevalence.) Concurrent disorders, where someone has both a mental illness and an addiction, is on the rise and has significant health costs. On their website, Fraser Health estimates that as many as 70% of mental health clients also have a substance abuse.

Mental illness, like addictions, can be the cause of homelessness. Odd behaviours can lead to eviction or the illness can make one incapable of either employment or seeking help. Being homeless can also increase the duration and seriousness of mental illness and for some, homelessness is a trigger for mental illness.

The incidence of mental illness in the homeless population is higher than in the general population, but the reported range varies according to prevalence criteria, study sample, methods of data collection, etc. The range can be anywhere from 33% to 66%. In the 2005 count, 23% in the GVRD self-reported a mental illness, while in New Westminster, the figure was 17%. Depression was the mental health concern most reported by the homeless.

Mental Health Services in New Westminster are provided by:

- **Fraser Health** at:
  - The Mental Health Centre;
  - Se-Cure Burnaby Mental Health Service; and
  - Royal Columbian Hospital.
  - The CRESST program (Community Residential Short Stay Treatment Program), providing a crisis short stay, intensive care alternative to psychiatric hospitalization for adults who can be treated safely outside a hospital.

The Mental Health Centre has more than 70 new referrals per month, aged 19 and over, generally an equal mix of males and females. Referrals have doubled in the last two years, and the complexity of clients' needs has also increased.

- **Ministry of Children and Family Development** (office in Burnaby)

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<sup>60</sup> Canadian Mental Health Association website, [http://www.cmha.ca/bins/content\\_page.asp?cid=3&lang=1](http://www.cmha.ca/bins/content_page.asp?cid=3&lang=1)

- **Canadian Mental Health Association** Simon Fraser Branch
  - Two transition houses serving 19 people with mental illness. Residents learn skills so that they may live in their own;
  - 14 Community Living Support Program (CLS) clients; and
  - 66 Supported Independent Living (SIL) clients.

CLS provides community support to individuals living with mental health issues. It is similar support to the SIL program but there is no rent supplement attached. Participants in both these programs must be clients of a mental health team.

## 6.4.7 Health Services

### *Primary health care*

Homeless people have an increased risk of dying prematurely. Diseases include seizures, chronic obstructive pulmonary disease, musculoskeletal disorders, tuberculosis, and skin and foot problems. “Disease severity can be remarkably high because of factors such as extreme poverty, delays in seeking care, nonadherence to therapy, cognitive impairment and the adverse health effects of homelessness itself. Homeless people in their forties and fifties often develop health disabilities that are more commonly seen only in people who are decades older. Individuals living on the street tend to have a worse health status than shelter residents.”<sup>61</sup> A Toronto study of the homeless found that individuals visited an emergency room three times more than did housed formerly homeless individuals.<sup>62</sup>

In New Westminster, there is a Fraser Health drop-in youth clinic operated by Lower Mainland Purpose Society for youth under 21. It is open two days a week. It provides primary care and does not require a care card. FH reports that there is an increased proportion of youth clinic drop-in clients that are at-risk youth.

There is no clinic in New Westminster for adults without a Care Card. As well, Royal Columbian hospital reports that many of its patients with no fixed address do not have Care Cards, preventing them from accessing general practitioners and walk-in clinics.

**GAP** There is a need for primary care services for adults without a Care Card.

### *Dental health*

All available dental health programs are for children, and they are limited.

<sup>61</sup> Hwang, Stephen H., *Homelessness and Health*, 2001

<sup>62</sup> *From Tent City to Housing: An Evaluation of the City of Toronto's Emergency Homelessness Pilot Project*, Gloria Gallant, Joyce Brown and Jacques Tremblay, 2004

<b>Operator</b>	<b>Program</b>
Fraser Health	Fluoride Varnish Program - a free program for children four years and younger from families who are unable to visit the dentist on a regular basis. Prevents decay.
Fraser Health and UBC Faculty of Dentistry	Provides free treatment for children from families who do not qualify for government-sponsored dental coverage or do not have dental coverage through work. Specifically for treating cavities. Not meant for regular check-ups.
MEIA	Families on premium assistance for their Care Card may qualify for financial assistance for dental treatment and eyeglasses for their dependent children under 19 years.

Fraser Health does not have any dental programs for adults, but offers a list of clinics that perform dental services at a reduced rate. These include a program at Douglas College (the program is for dental assistants only) and one at the University College of the Fraser Valley. The rest of the clinics are in Vancouver.

**GAP** There is a need for comprehensive dental care available in New Westminister to adults who are unable to afford a dentist.

#### **6.4.8 Prevention Services**

“Prevention services are defined as programs or services aimed at helping to prevent people from becoming homeless.”<sup>63</sup> Examples are rent banks (through which funds are made available to households about to be evicted for non-payment of rent), counselling services to prevent breakdown of a family in crisis, legal advocacy, education and information to support stable tenancies, and registries and other assistance to help households find affordable housing.

New Westminister has a number of prevention services.

##### Adults:

- A housing registry is available through **BC Housing**.
- Education, information and assistance to help find affordable housing is available to seniors through the **BC Seniors Services Society**,
- Assistance to help find affordable housing to all is available through **Fraserside Community Services Society’s Housing Support Worker**.
- The **Salvation Army’s Family Services Program** - From April 1, 2005 to March 31, 2006, the Salvation Army Family Services Program Assisted 769 families.

##### Youth:

- The **Reconnect Program** operated by the Lower Mainland Purpose Society supports youth with housing related problems.
- **The Federation of BC Youth in Care Networks (FBCYICN)** - Pacific Legal Education Association Promotes the improvement of conditions for youth

<sup>63</sup> SPARC BC, *3 Ways to Home: The Regional Homeless Plan for Greater Vancouver, Update 2003*, prepared for the Greater Vancouver Regional District, 2003

currently or formerly in the care of MCFD through support, education and advocacy. Works in partnerships to develop local groups run by and for these youth.

- **The Parent/Teen Mediation Family Services of Greater Vancouver** Assists teens and parents with solving conflicts, developing guidelines for daily living, and identifying ways to resolve difficulties that may arise in the future. Services available in the home or at the office. Referral from MCFD in Burnaby, New Westminster, or Vancouver. No fees for service.

<b>GAP</b> There is a need for prevention services for households facing eviction such as legal services or financial assistance such as a rent bank.
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## 7 Survey of New Westminster service providers

Surveys were distributed to service providers in New Westminster who serve the homeless or those at risk of homelessness and to other participants of the New Westminster Homelessness Coalition who might have insight into gaps in services to these populations. Responses were received from the following organizations:

<b>Organization</b>	<b>Brief description of services</b>
B.C. Seniors Services and Housing Information Society	Housing and support services, community education for seniors
Canadian Mental Health Association (CMHA) – Simon Fraser Branch	Housing and services for people living with mental illness challenges
Elizabeth Fry Society of Greater Vancouver	2 <sup>nd</sup> stage (transitional) housing for women either single or with young children; resource centre for women and their families
Fraser Health – Mental Health	Mental health and addiction programs
Fraser Health – New Westminster Home Health	Case management and long term care services to those facing eviction from their homes
Fraserside Community Services Society	Emergency shelter, short stay shelter, housing support worker
Last Door Recovery Centre	Long term residential substance misuse treatment
New Westminster By-Law Officer	
New Westminster Police Service	
Operation Food Justice	Food and clothing, advocacy, referral services
Pioneer Community Living Association	Housing for those with mental health challenges
Salvation Army	Emergency shelters, Cold/Wet Weather emergency shelter, Extreme Weather Mat Program; transitional housing; referrals, food programs, street outreach advocacy program, emergency assistance programs
Union Gospel Mission, New Westminster	Drop-in centre, meal program
Westcoast Genesis Society	Transitional housing, programs for adult male federal offenders on conditional release

Nine respondents stated they served both those who are homeless and those at-risk. Three respondents served only those at risk of homelessness. Two respondents stated they “served” neither community, but were familiar with issues.

### **Reasons for clients being homelessness or at-risk**

#### Mentioned more than once, in order of frequency:

- Drug and alcohol use and/or abuse
- Lack of adequate income
- Mental health issues
- Lack of support to maintain housing/poor living skills
- Health problems
- Abuse/family breakdown/youth kicked out of home
- Lack of affordable housing

#### Others:

- Unruly behaviour leading to eviction
- Violence in the home but victim unable to access a transition house due to mental health or addiction issues.
- Policies related to obtaining provincial Income Assistance or other funding such as WCB or housing through BC Housing
- Aging
- Relocating
- Social isolation
- Language and cultural barriers
- Criminal activity
- Poor management of resources
- Reluctance on part of landlords to lease to certain populations
- Lack of positive social and family supports
- Minimal education and poor literacy
- Lack of job skills and work experience

### **Turnaways**

Eight respondents reported they had to turn people away. Most stated that either they were fully booked or lacked the proper beds/service, or the person did not fit the program mandate. In some cases the person was turned away because the program was not specialized enough to meet their needs. Another stated that those with greatest need are given first preference, which can result in a lack of service for people who have needs that are not quite as urgent as others. Other reasons were that the person was a source of disruption or harmful to other clients and staff, lack of staff capacity, and the lack of adequate housing resource.

The above is not meant to indicate that turnaways are abandoned. Several respondents stated that turnaways from their facilities/services are given alternatives to seek or placed elsewhere.

### **Client load**

Five respondents stated that their client load had increased. One stated that the load had remained stable but the complexity of the issues had increased. One reported no significant change in numbers.

### **Changes in needs of clients**

Respondents saw the following changes:

- Homelessness becoming more common and those who are homeless being more entrenched; more youth couch-surfing
- Increased aggression due to:
  - Increased frustration relating to the client's situation and to dealing with social services ministry staff as well as getting assistance from the social service community (e.g. few minimum barrier shelter beds, won't accept those using methadone, etc.).
  - The violence and risk associated with living on the street (e.g. the homeless being taken advantage of by others for criminal activity.)
  - Use of crystal meth
- An increase in clients with mental health concerns
- Working homeless
- Seeing "middle-class" individuals who have become disabled and have added complications around qualifying for services such as income assistance
- More clients with complex needs
- Discovering a significant "hidden" population seriously disabled by Foetal Alcohol Spectrum Disorder (FASD)

Respondents also noted:

- Lack of appropriate housing including the lack of housing for clients with addiction issues, especially women in abusive situations who use drugs;
- Shelters filling up sooner
- Hospital discharge with nowhere to go and no income
- An increase in clients

To meet the changes in clients' needs, organizations have increased numbers of staff and training as well as extending hours. This is feasible only if there are funds available. One organization created a kit to advise the homeless on what is available for them. Another has offered services to younger clients hoping for an earlier intervention, and has extended their services to more concurrent disorder clients as per Fraser Health/Ministry of Health policy.

### **Gaps in Services**

Respondents identified the top five gaps as:

- Emergency shelters
- Supported housing
- Addiction services
- Outreach services
- Independent housing

Gaps were also recorded in:

- Mental health services
- Income assistance
- Drop-in centres
- Transition houses
- Employment insurance
- Employment
- Evening access to services
- In home support
- Street nurses
- Housing for those waiting to go into treatment who must leave an unsafe situation
- Services for those with FASD

**Services in other jurisdictions to which New Westminster service agencies refer clients**

Surrey:	Vancouver
▪ Hyland House	▪ Lookout Shelter
▪ Front Room Drop-In	▪ Triage Shelter
▪ Sheena's Place	▪ Vi Fineday Family Shelter
▪ Scottsdale House	▪ Belkin House
▪ Surrey Metis Society	▪ She'way
▪ Newton Advocacy Group	▪ Union Gospel Mission
▪ Options Multicultural Services	▪ Catholic Charities
	▪ Vancouver Rape Relief
Langley Family Services	▪ Tenants Rights Action Coalition
Burnaby Family Life Institute	▪ UBC Counselling
Withdrawal management services in Burnaby Vancouver and Chilliwack	▪ Wilson Heights United Church Advocacy Centre
Abbotsford Community Services	
Lookout Shelter, North Vancouver	Legal Services Society
Aboriginal Education Centre	BC Housing registry
BC Coalition for People with Disabilities	Detox & addictions services
	Aboriginal healing and sweat lodges

**Comments**

- Women seeking shelter but not necessarily fleeing abuse must go to Surrey or Vancouver.
- Those who are homeless but have with pets must go to Surrey or Vancouver. Also, couples who want to stay together
- People who need medical attention but who do not have ID or a Care Card and are not on IA must go to clinics in Surrey or Vancouver.
- We often refer outreach clients to services in other jurisdictions for things such as free medical services, emergency shelter, showers laundry, etc.
- There is a lack of appropriate affordable housing for older adults in the Lower Mainland and also appropriate emergency shelters. Older adults fleeing abuse do not fit well into the current structure of transition houses.

## Glossary

1. **Absolute Homeless** – Those who have no home of their own. These include the sheltered homeless staying in emergency shelters, transition houses or youth safe houses, and those who sleep “rough” in places such as in parkades, on the beach, in squats and in doorways.
2. **At-Risk Youth** – Youth who are most at risk of failing to make a healthy transition to adulthood.
3. **Census Metropolitan Area (CMA)** - Formed by one or more adjacent municipalities centred on a large urban area. The census population count of a CMA is at least 100,000. The area is further divided into census tracts. New Westminster is in the Vancouver CMA.
4. **Cold/Wet Weather Beds** – Emergency shelter capacity opened only during winter and/or extreme weather. These temporary beds or mats are part of the Lower Mainland Cold/Wet Weather Strategy, a partnership among service providers, community agencies, health boards, and provincial and municipal governments to increase capacity.
5. **Continuum of Housing and Support** – A framework setting out the essential components needed to address homelessness. It is divided into three categories: the Housing Continuum, Adequate Income and Support Services.
6. **Concurrent Disorders** – (Also called Multiple Diagnosis or Dual-Diagnosis) Concurrent disorders refer to the “*combination* of mental/emotional/psychiatric problems with the abuse of alcohol and/or other psychoactive drugs” Health Canada,
7. **Core Housing Need** – A household is said to be in core housing need if its housing falls below at least one of the adequacy, suitability, or affordability standards and it would have to spend 30% or more of its before-tax income to pay the median rent of alternative local housing that is acceptable (meets all three standards).
  - **Adequate dwellings** are those reported by their residents as not requiring any major repairs.
  - **Suitable dwellings** have enough bedrooms for the size and make-up of resident households, according to National Occupancy Standard (NOS) requirements.
  - **Affordable dwellings** cost less than 30% of total before-tax household income.
8. **Core Need Income Thresholds (CNITS)** – The maximum income for eligibility to be a Rent Geared to Income (RGI) tenant. This maximum is based on the cost of housing in the local community such that the tenant cannot obtain rental housing in good condition meeting Occupancy Standards without paying more than 30% of income.
9. **Detox** – Detoxification units where individuals undergo managed withdrawal from alcohol or drugs.

10. **Drop-In Centres** – Offer homeless individuals the chance to come in off the street, have a shower, perhaps a meal, wash clothes, gain counselling and referral to other services and socialize.
11. **Emergency Shelters** – Provide accommodation to the homeless for up to 30 days. Residents may be accommodated in beds in dormitory rooms, or in single or shared rooms. Some shelters are able to accommodate families. Included as emergency shelters are youth safe houses and government funded SRO beds. Services vary depending on the shelter. Some shelters have no or minimum barriers. Others have restrictions. Many only take clients who are on Income Assistance and referred from the appropriate government ministry.
12. **Extreme Weather Beds** - Operate on nights when conditions are deemed severe enough to present a substantial threat to the life or health of homeless persons, usually when the temperature is at or below –4 or –5 degrees Celsius or there is significant snow accumulation. These added beds are funded by the Cold/Wet Weather Strategy, a regional partnership among service providers, community agencies, health authorities, and provincial and municipal governments to provide increased capacity in inclement weather.
13. **Government Transfer Income** – Refers to income such as federal income supports (e.g. CPP, OAS, Employment Insurance, veteran’s pensions), as well as the provincial income supports (e.g. Income Assistance, SAFER, Worker’s Compensation).
14. **Highest need tracts** - Those 10% of all census tracts (neighbourhoods) in a Census Metropolitan Area with the highest incidence of core housing need.
15. **Housing First** – An approach to addressing homelessness based on the premise that homeless individuals and families can better address the reasons for their homelessness from a position of stable housing. In housing first, homeless individuals are moved directly, and as quickly as possible, into permanent housing, either from the street or from an emergency shelter, and are linked to services to help maintain them in this housing.
16. **Household Maintainer** – Statistics Canada uses this term to refer to the person in the household, 15 years or older, who pays the rent, the mortgage, the taxes, etc.
17. **INALH** – Stands for: Canadian households in Core Need Housing and spending at least half of their income on shelter. It is a tabulation produced by Statistics Canada from census data. It is generally regarded that households included in this tabulation are at risk of homelessness.
18. **INALHM** – The modified INALH tabulation, undertaken for the GVRD. INALHM data includes Aboriginal households not living on reserves, households that are not included in INALH data.
19. **Independent Housing** – Permanent, affordable housing for individuals who are able to live without support services provided in conjunction with housing.

20. **LICO's – Low Income Cut-offs** - Developed by Statistics Canada to identify income levels at which families or unattached individuals spend 20% more than average on food, shelter and clothing. Updated yearly by changes in the consumer price index.

Since its initial publication, Statistics Canada has consistently emphasized that the LICOs are not measures of poverty. Rather, LICOs reflect a consistent and well-defined methodology that identifies those who are substantially worse-off than average.

21. **Minimum barrier** – Access to flexible, non-judgemental service based on need, without restrictions to lifestyle, conditions (e.g. intoxicated), eligibility, or number of times receiving the service, in a building that is accessible to everyone regardless of physical condition while acknowledging that the acuteness of health needs, behaviour or level of intoxication may limit the ability of the provider to give service.
22. **Needle Exchange Program** – A service that provides free, clean needles, needle cleaning supplies and condoms to intravenous drugs users and sex trade workers.
23. **Occupancy Standards** – The standards for a tenant's household size relative to the number of bedrooms in a unit. According to the National Occupancy Standard enough bedrooms means one bedroom for each cohabitating adult couple; unattached household member 18 years of age and over; same-sex pair of children under age 18; and additional boy or girl in the family, unless there are two opposite sex siblings under 5 years of age, in which case they are expected to share a bedroom. A household of one individual can occupy a bachelor unit.
24. **Outreach** – A service focussed on finding homeless individuals and establishing rapport with the goal of engaging them in a service(s) they need.
25. **Regional Homelessness Plan** – A plan developed in 2001 by a steering committee made up of service providers, provincial agencies and municipal representatives throughout the GVRD, to address both the needs of the homeless and those at risk of homelessness in the region. It was updated in 2003, and called *3 Ways to Home*. It is available on the GVRD website.
26. **Relative Homeless/At risk of homelessness** - Those households that are at risk of homelessness because their housing does not meet health and safety standards, does not provide security of tenure or personal safety, and/or is not affordable.
27. **Rent Banks** – A preventative service offering financial assistance to tenants to cover rent arrears resulting from short-term crises such as sudden loss of income, or an unexpected illness that otherwise might result in eviction.
28. **RGI Tenant** – RGI stands for Rent Geared to Income. An RGI tenant has an income that is at or below the Core Need Income Threshold and for whom BC Housing has approved a rent subsidy.
29. **SAFER** – Shelter Aid for Elderly Renters – A provincial rent assistance program administered by BC Housing offering cash assistance towards rent to low-income seniors who live in market housing and pay more than 30% of their income for

shelter.

30. **Sheltered Homeless** – Those homeless who live in emergency shelters, in transition houses for women and children fleeing abuse, or in youth safe houses.
31. **Sofa-surfing** - Sleeping at the home of friends or family, on a temporary or transitory basis. Such individuals have no fixed address and are considered homeless. (Also known as Couch Surfing)
32. **Street Homeless** – Those homeless who live “rough” in parkades, doorways, parks, vehicles, on the beach, under overpasses and bridges, etc.
33. **Supported Housing** – Affordable, independent accommodation combined with services, sometimes in a purpose-built building or in scattered-site units, that help tenants maintain stability in their lives, that bridges the gap between institutionalized care and independent living, and that offers the opportunity for individuals to stabilize their situation enough to move into independent housing in the community. Services include supports such as meals, skill training, assistance with housekeeping, crisis response, and counselling.
34. **Supported Independent Living Program** – (SILP) – A partnership between the provincial Ministry of Health and provincial health authorities to enable individuals with a serious and persistent mental illness to live independently in affordable, self-contained, market rental housing with the assistance of outreach services.
35. **Transition Houses** – Emergency accommodation for women and their children who are fleeing violent abuse. The maximum stay is 30 days.
36. **Transitional Housing** (also called second stage housing) – Time-limited housing obtained after leaving emergency shelter, transition house or an institution and before a person is ready to move into independent housing. Transitional housing is usually accompanied by support services.
37. **Youth Safe Houses** – Temporary shelter for youth aged 13-18 who require safe accommodation to escape the street, the sex or drug trade or abuse. The length of stay varies from a few days to six months. Youth safe houses are funded by the Ministry of Children and Family Development and are operated by community agencies.

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## Graphs

FIGURE 1: NUMBER OF PEOPLE COUNTED IN THE 2005 AND 2002 HOMELESS COUNTS, NEW WESTMINSTER	6
FIGURE 2: GENDER OF HOMELESS, NEW WESTMINSTER, 2005 HOMELESS COUNT	8
FIGURE 3: PERCENTAGE OF MALES AND FEMALES IN THE HOMELESS POPULATIONS OF NEW WESTMINSTER, GVR, AND THE TRI-CITIES, 2005 HOMELESS COUNT	9
FIGURE 4: AGE OF HOMELESS, NEW WESTMINSTER, 2005 HOMELESS COUNT	9
FIGURE 5: PERCENTAGE OF HOMELESS IN EACH AGE GROUP, NEW WESTMINSTER AND GVR, 2005 HOMELESS COUNT	10
FIGURE 6: LENGTH OF TIME HOMELESS, NEW WESTMINSTER, 2005 HOMELESS COUNT	11
FIGURE 7: LENGTH OF HOMELESSNESS, BY PERCENTAGE, NEW WESTMINSTER, GVR, BURNABY AND THE TRI-CITIES, 2005 HOMELESS COUNT	11
FIGURE 8: REASONS FOR HOMELESSNESS, NEW WESTMINSTER, 2005 HOMELESS COUNT	12
FIGURE 9: SOURCES OF INCOME, NEW WESTMINSTER, 2005 HOMELESS COUNT	13
FIGURE 10: SOURCES OF INCOME BY PERCENTAGE, NEW WESTMINSTER, GVR AND BURNABY, 2005 HOMELESS COUNT	13
FIGURE 11: WHERE STREET HOMELESS STAYED THE NIGHT BEFORE, NEW WESTMINSTER, 2005 HOMELESS COUNT	14
FIGURE 12: NUMBER STATING HEALTH CONDITIONS, NEW WESTMINSTER, 2005 HOMELESS COUNT	15
FIGURE 13: HEALTH CONDITIONS BY PERCENTAGE, NEW WESTMINSTER, GVR, BURNABY, 2005 HOMELESS COUNT	16
FIGURE 14: PERCENTAGE OF INALHM HOUSEHOLDS IN NEW WESTMINSTER, GVR, AND BURNABY RELATIVE TO ALL HOUSEHOLDS, 2001	26
FIGURE 15: AVERAGE ANNUAL INCOME OF INALHM HOUSEHOLDS, NEW WESTMINSTER, GVR, AND BURNABY, 2001	27
FIGURE 16: AVERAGE AND MEDIAN INCOMES IN NEW WESTMINSTER COMPARED WITH AVERAGE INCOMES OF INALHM RENTER AND OWNER HOUSEHOLDS, 2001	28
FIGURE 17: PERCENTAGE OF RENTER AND OWNER INALHM HOUSEHOLDS IN EACH INCOME CATEGORY, NEW WESTMINSTER, 2001	28
FIGURE 18: AVERAGE MONTHLY SHELTER COSTS OF INALHM HOUSEHOLDS, NEW WESTMINSTER, GVR, BURNABY, 2001	29
FIGURE 19: AGE OF PRIMARY MAINTAINERS IN INALHM HOUSEHOLDS IN NEW WESTMINSTER, 2001	31
FIGURE 20: PERCENTAGE EMPLOYED, UNEMPLOYED AND NOT IN LABOUR FORCE, NEW WESTMINSTER, GVR AND BURNABY, 2001	32
FIGURE 21: AVERAGE INCOMES PER YEAR, NEW WESTMINSTER AND BC	51
FIGURE 22: MEDIAN INCOMES, NEW WESTMINSTER AND BC, 2000	52
FIGURE 23: AVERAGE INCOMES BY FAMILY STRUCTURE, NEW WESTMINSTER AND BC, 2000	53
FIGURE 24: TOTAL BC BASIC INCOME ASSISTANCE AND EI BENEFICIARIES BY AGE GROUP, NEW WESTMINSTER AND BC, SEPTEMBER 2005	54
FIGURE 25: PERCENTAGE OF NEW WESTMINSTER POPULATION BY AGE RECEIVING BC BENEFITS*, 2001 AND 2004	54
FIGURE 26: POVERTY RATES BY GENDER, NEW WESTMINSTER, GVRD, BC, 2001	56

## Tables

TABLE 1: DIFFERENCE BETWEEN 2002 AND 2005 HOMELESS COUNTS IN NEW WESTMINSTER AND THE GVR	7
TABLE 2: LAST PERMANENT HOME OF THE SHELTERED AND STREET HOMELESS, NEW WESTMINSTER, 2005 HOMELESS COUNT	7
TABLE 3: ENUMERATION LOCATIONS OF THOSE WHO STATED A LAST PERMANENT HOME IN NEW WESTMINSTER, 2005 HOMELESS COUNT	8
TABLE 4: PERCENTAGE CHANGE IN NUMBER OF INALHM HOUSEHOLDS BETWEEN 1996 AND 2001, NEW WESTMINSTER, GVRD, BURNABY	26
TABLE 5: LEVEL OF EDUCATION OF PRIMARY MAINTAINER IN INALHM HOUSEHOLDS, NEW WESTMINSTER, GVRD, BURNABY, 2001	31
TABLE 6 TRANSITION HOUSING IN NEW WESTMINSTER	38
TABLE 7: SUPPORTED HOUSING FACILITIES IN NEW WESTMINSTER	41
TABLE 8: VACANCY RATES IN NEW WESTMINSTER, 2001 - 2005	46
TABLE 9: AVERAGE RENTS IN NEW WESTMINSTER BY UNIT SIZE, 2001-2005	46
TABLE 10: SOURCE OF INCOME, NEW WESTMINSTER AND BC, 2000	53
TABLE 11: POVERTY RATES BY AGE GROUP, 2001	55
TABLE 12: POVERTY RATES BY AT-RISK POPULATION, NEW WESTMINSTER, GVRD, BC, 2001	56
TABLE 13: CORE NEED INCOME THRESHOLDS FOR NEW WESTMINSTER	57
TABLE 14: RENTAL AFFORDABILITY BY UNIT TYPE, NEW WESTMINSTER	58
TABLE 15: PERCENTAGE OF NEW WESTMINSTER RESIDENTS EMPLOYED, UNEMPLOYED, OR NOT IN THE LABOUR FORCE, 2001	58
TABLE 16: EMPLOYMENT INSURANCE BENEFICIARIES, NEW WESTMINSTER, 2001 AND 2004	59
TABLE 17: PROPOSED PHASE 1 SHELTER BED ADDITIONS FOR THE INNER MUNICIPALITIES OF NEW WESTMINSTER, BURNABY AND RICHMOND, 2006- 2010, GREATER VANCOUVER SHELTER STRATEGY	<b>ERROR! BOOKMARK NOT DEFINED.</b>
TABLE 18: RENTAL AFFORDABILITY BY UNIT TYPE, NEW WESTMINSTER	<b>ERROR! BOOKMARK NOT DEFINED.</b>