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Homelessness Partnering Secretariat

Project Title:  “Homeless to Home: A Community Exchange”

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Abstract for Homeless2home: a Community Exchange

Project Description: Current models of knowledge transfer/exchange tend to disseminate promising practices to the community through reports, conferences and scientific journals. Although useful to some stakeholders, these models limit the participation of the homeless/formerly homeless community, service providers and policy makers. The purpose of this project was to create a more inclusive model of knowledge exchange that integrated ‘lived expertise’ with ‘expert knowledge’ to generate strategies for housing stability across the life course. Given the prevalence of episodic homelessness, understanding how to support housing stability from the perspective of ‘lived expertise,’ is critical to preventing returns to homelessness and transforming a house into a home.

Methodology: A participatory approach and life course framework were adopted to create a knowledge exchange developed by and for youth, middle-aged and older adults who have experienced homelessness. A working group, whose membership were homeless or formerly homeless, used concept mapping, logic modelling, and matrix analyses to generate a consensus vision, objectives, content and activities for the exchange. The exchange itself incorporated inclusive strategies such as: name tags and introductions stripped of affiliations; panels and sessions populated by a majority of people with lived expertise; ‘unsessions’ open to spontaneous nomination and facilitation; and art installations, performance art, film and web interface to encourage alternative ways to engage the issues. Session notes formed the basis of collective content analyses which was translated into a ‘homeless2home community action guide’ distributed to the local homelessness community.

Results: Homeless2home provided evidence of the capacity of people with lived expertise to identify key issues and develop comprehensive recommendations to ensure housing stability and inclusion across the life course. Examples of critical periods of risk identified by participants included: youth transitions from family/foster care to independent living; middle-aged adults’ experience of the simultaneous increase in income demand (driven by increased dependents) and decrease in income supply...
homeless2home

(through insecure employment and income assistance); and older adults exits from the labour force or transitions to different income assistance programs (e.g. from welfare to old age pensions) which intersect with poorer health (i.e. from years of homelessness and inadequate health care). Policy and program interventions were put forward to mediate these, and other, risks. Further, participants maintained that the ongoing inclusion of people with lived expertise in program/policy development, delivery and evaluation is crucial to realizing sustainable solutions to homelessness that move from triage to prevention and retention.
Executive Summary for Homeless to Home: 
A Community Exchange

Project Description

Current models of knowledge transfer/exchange tend to disseminate promising practices to the community through reports, conferences and scientific journals. Although useful to some stakeholders, the costs, content and format of these models limit the access and participation of the homeless and formerly homeless, service providers and policy makers.

The purpose of this project was to create a more inclusive model of knowledge transfer that integrates ‘lived expertise’ and ‘expert knowledge’ to produce and document promising housing and support practices for the homelessness community. The term ‘lived expertise’ was adopted to highlight that it is not simply the experience of homelessness but the expertise that arises from that experience which is a valuable alternative site of knowledge. Given the prevalence of episodic homelessness and the magnitude of ‘homeless effects,’ understanding how to support and stabilize individuals, especially in the early stages of being re-housed, is a critical step toward preventing returns to homelessness and transforming a house into a home. A life course framework was adopted to highlight the barriers and enablers that shape the experience of homelessness and housing across generations.

The project had four objectives: 1) to provide a forum for those who have experienced homelessness to share their experience and knowledge about the barriers and enablers to stable housing; 2) to forge alliances, share strategies and resources for knowledge mobilization across groups, organizations and governments that are committed to eradicating homelessness; 3) to identify, collate and disseminate promising practices for secure housing across the life course; and 4) to provide resources that will help stakeholders access and/or implement promising practices.

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1 McDonald, Donahue, Janes & Cleghorn. (2006) Homeless effects emerged as a central theme in the project team’s previous research with the formerly homeless. Homeless effects were considered to be persistent trauma, distress and poor health that were associated with the experience of homeless but that lingered after a person has obtained housing.
Methodology

The project adopted a participatory approach to realize a knowledge exchange that was developed by and for youth, middle-aged and older adults who have experienced homelessness. The knowledge exchange was championed by a group of formerly homeless older adults who had worked previously with the project coordinator.

Development activities took place over six months and engaged a working group of formerly homeless individuals, weekly, in the creation of content and formats for the exchange. The sessions used activities such as concept mapping, logic modelling, deliberative dialogue and matrix analyses to generate a consensus vision, objectives, content and activities for the exchange.

Implementation of the exchange incorporated several strategies and formats to encourage inclusive and solution-focused dialogue. For example, name tags and introductions were stripped of affiliations, and panels and sessions were populated by a majority of people with lived expertise to ensure the ‘horizontality’ of the exchange. Although the majority of sessions were facilitated by members of the working group, invited sessions by service providers and advocates gave others in the community an opportunity to set the agenda. Open space technology was adapted to realize several ‘unsessions’ which were nominated and facilitated by participants on the day of the exchange to further expand opportunities to inform the agenda. In addition, art installations by participants/groups with lived expertise, performance art, web interface, film and graffiti facilitated alternative responses to the issues.

Post-exchange analysis of the session notes was conducted by the working group using content analysis to identify the central themes and strategies that emerged from the exchange. The working group used these themes and strategies to create a summary that was translated into a ‘homeless2home community action guide’ for distribution to the local homelessness community. An evaluation of the exchange using an online survey

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2 Formerly homeless exchange participants received an honorarium, travel/transit expenses, as well as lunch and refreshments. Formerly homeless working group members received honoraria, travel, and meals each time they participated in a working session or other project activity.
captured participants’ experience of the exchange, as well as suggestions for the next steps of action.

**Results and Recommendations**

The post-exchange analysis focused on identifying challenges to and strategies for housing stability across the life course. A significant principle of a life course framework is the understanding that development occurs from birth to death, is subject to gains and losses, is multi-dimensional (biological, psychological and socio-cultural), and is comprised of multiple interdependent trajectories.

Participants noted that the transition of youth out of care to independent living is a time of extreme vulnerability where one system -- child welfare is receding without a complementary support to take its place. Participants also noted that the socio-cultural context of service delivery favours middle-aged adults and is often insensitive to the unique needs of youth (e.g. basic life skills support) and is disconnected from youth culture. For example, the ascendancy of peer pressure and norms make it even more difficult for youth to recover in housing conditions where they are clustered with other youth struggling with poor mental health and/or substance misuse.

Challenges to and strategies for housing stability and inclusion of middle-aged adults were linked to issues of family status and labour market attachment. Participants felt that the current trends toward contractual employment and constriction of blue collar opportunities led to more difficulty both in obtaining and maintaining employment for middle-aged adults. Further, more than a decade of erosions to income and unemployment assistance programs result in fewer options and deeper poverty for those outside the labour market. Participants flagged that middle-aged adults may simultaneously experience an increase in income demand (driven by increased dependents) and a decrease in income supply (through insecure employment and income assistance).

Participants stressed that older adults with histories of homelessness are at greater risk of hospitalization but because of limited access to contributory pensions and
greater reliance on income assistance they are vulnerable to disruptions in rental payments which may lead to eviction or institutionalization. Another challenge identified, as limiting formerly homeless older adult’s ability to sustain housing, was reliance on informal care (i.e. unpaid support by family and friends) rather than paid home care (e.g. personal support workers). This lack of support to informal care givers decreases an older adults ability to ‘age in place’ and therefore, leaves them vulnerable to literal or institutional homelessness. Institutional homelessness was understood by participants to be a forced move to a nursing home or other long term care setting and was flagged as a challenge that should be included in strategies to ensure housing stability and inclusion for older adults.

Participants identified how the challenges at each stage of the life course informed and intersected with another, as well as how timely interventions could mediate ‘accumulated disadvantage.’ For example, poor early relationships may lead to ongoing exclusion and isolation for youth, which erode the social capital available to them as they age into adulthood. Interventions suggested to mediate these deficits included peer outreach and life skill support (e.g. from monthly budgeting to strategies for effective parenting). However, in absence of such interventions limited education and training opportunities could translate into ongoing insecure employment which could lead to greater risk of job loss in middle-age. Interventions to mediate accumulated risk for housing instability included: long term and flexible support to training and education with subsidized child care that accommodates shift work and night classes, and accessible, accountable complaint processes to challenge social assistance policies and practices.

Participants’ suggested that histories of insecure employment and limited social capital may exacerbate the vulnerabilities introduced with transitions into older adulthood. For example, participants spoke of the turning point of becoming less ambulatory intersecting with fewer human and structural resources (e.g. low income leading to ongoing tenancy in social housing where very little in the way of accessibility accommodations exist). Interventions recommended by participants to reduce risk of eviction for older adults included policy reforms to ensure continuity of rental payments during hospital stays (e.g. amendments to social assistance policies, so that shelter allowances continue during hospitalization, changes to the Residential Tenancies Act and
the Ontario Rental Housing Tribunal to prevent evictions of hospitalized tenants) and to 
expand financial support for structural adaptations to their home environment.

Beyond age-specific interventions, participants put forward general 
recommendations for program and policy reform, as well as for improved inclusion of 
youth, middle-aged and older adults who are struggling with housing and income 
insecurity. Program recommendations focused on service delivery premised on: self-
determination, portability and partnership, and on the need to profoundly expand peer 
based programming which was seen as the ideal model of age sensitive service delivery. 
Peer programming was understood by participants to convey multiple benefits to multiple 
constituencies (e.g. peers themselves, their ‘clients,’ and to their agencies).

Policy recommendations focused on affordable decent housing, supports to being at home in one’s housing and community, and ways to mandate meaningful inclusion in policy development and evaluation. Strategies to enhance housing stability put forward by participants emphasized choice and the key recommendation championed was to significantly increase the number of available rent supplement/housing allowances. A secondary strategy put forward was to ensure that any new social housing includes units with mixed tenancy (i.e. market and subsidized rentals) to avoid ‘ghettoizing and warehousing’ people. Choice extended beyond location and types of tenancy to the provision of different housing support models across the continuum of independent to supportive housing. Participants, also, advocated for the removal of policies that drive people to qualify for housing and services by becoming literally homeless, to adopt a ‘hidden homelessness strategy’ (e.g. couch surfing by women to avoid losing their children to child welfare) or that systemically exclude people from housing (e.g. through abstinence or irrational age requirements).

More macro policy recommendations included demands that the federal government act on the United Nations’ dictate to adopt a National Housing Strategy and that federal money for housing stream directly to municipalities without the requirement of matched funding but with ‘sweatering’ to ensure that the funding is, in fact, spent on affordable rental housing. Participants, also, urged the government to
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acquire units in condominiums to take advantage of and ease the current ‘low-cycle of housing.’

While participants were absolutely clear that ‘housing first’ was a critical first step, they felt that long-term investment in people’s well-being and inclusion (within and outside of the labour market) was necessary to realizing sustainable housing and health outcomes. Finally, participants, as expected, called on governments (provincial but also federal through tax–based income support strategies) to raise income assistance rates and minimum wage so that people could transcend the deep poverty that makes housing instability inevitable.

Participants, also, called on governments to develop policy frameworks that mandate and create budget lines for the sustained involvement of people with lived expertise that go beyond consultation and committee work. Another policy intervention championed by participants was to create conditions for collaboration across jurisdictions. In particular, support strategies that promote independence and community integration were seen by participants as requiring cross-cutting policy interventions.

Further, participants made recommendations which transcend program and policy development. Strategies for inclusion put forward by participants focused on breaking down barriers and debunking myths around the ‘homeless person,’ operationalizing human rights to housing and taking ‘action on action.’ Participants spoke of the importance of challenging any policy, program or socio-cultural context that supports distinctions between ‘us’ or ‘them,’ or between ‘deserving’ and ‘undeserving poor.’ Anti-stigma campaigns that demonstrate the unique trajectories of individuals who have experienced homelessness and the multiple dimensions that constitute a ‘homeless/formerly homeless person’ were suggested by many participants. Also, integrating issues of housing, homelessness, home, belonging, agency, quality of life, and employment were seen as crucial to generating broad community good will and endorsement that ending homelessness is a common good.

Another inclusion strategy put forward was to operationalize the right to decent affordable housing. Participants called on the federal and provincial governments to formally endorse human rights to housing and to give it ‘teeth’ through Supreme and
Lower Court precedents. A more grassroots mechanism promoted by participants was to ‘take action on action’ to create organized resistance, effective mobilization and rekindle the social movements of the past. Central to this strategy was mass communication of the voice of lived expertise through media outlets, websites, ‘zines and newsletters, and more exchanges modelled after Homeless to Home (h2h).

In conclusion, h2h created a unique model of knowledge transfer and generated recommendations based on the real interface of policy and programs with the lives of people who have experienced homelessness and are transitioning toward home. The inclusion of people with lived expertise in every aspect of program/policy development, delivery and evaluation is crucial to realizing solutions to homelessness that are sustainable and move from triage to prevention and retention. Homeless2home provided robust evidence of the capacity of people with lived expertise to set the agenda and develop comprehensive, clear recommendations for action.
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Section 1 - Introduction

Project Description

Current models of knowledge transfer/exchange tend to focus on disseminating research findings to the community through traditional modalities such as reports, conferences and scientific journals. Although useful to some stakeholders, the costs, content and format of these models of knowledge exchange limit the access and participation of the homeless and formerly homeless, service providers and policy makers.

The purpose of this project was to create a knowledge transfer forum that integrates ‘lived expertise’ and ‘expert knowledge’ to produce and document promising housing and support practices for the homelessness community. The term ‘lived expertise’ was adopted to highlight that it is not simply the experience of homelessness but the expertise that arises from that experience which is a valuable alternative site of knowledge. This project sought to engage multiple forms of knowledge/expertise to generate housing and support strategies that promote stability, well-being and inclusion.

Given the prevalence of episodic homelessness and the magnitude of ‘homeless effects’\(^3\) understanding how to support and stabilize individuals, especially in the early stages of being re-housed, is a critical step toward preventing returns to homelessness and transforming a house into a home. A life course framework was adopted to highlight the barriers and enablers that shape the experience of homelessness and housing across generations.

The project had four objectives:

1. To provide a forum for those who have experienced homelessness to share their experience and knowledge about the barriers to the establishment of stable housing and the factors that foster stable housing;

\(^3\) McDonald, Donahue, Janes & Cleghorn. (2006) Homeless effects emerged as a central theme in the project team’s previous research with the formerly homeless. Homeless effects were considered to be persistent trauma, distress and poor health that were associated with the experience of homeless but that lingered after a person has obtained housing.
2. To forge alliances, share strategies and resources for knowledge mobilization across groups, organizations and governments that are committed to eradicating homelessness;

3. To identify, collate and disseminate promising practices for secure and stable housing for formerly homeless youth and adults across the life course; and

4. To provide resources that will help stakeholders access and/or implement promising practices.

The project adopted a participatory approach to realize a knowledge exchange that was developed by and for youth, middle-aged and older adults who had experienced homelessness⁴. The idea for this knowledge exchange was championed by a group of formerly homeless older adults who had worked previously with the project coordinator. The development phase of the project activities took place over six months and engaged a working group of six to eight formerly homeless individuals, weekly, in the creation of content and formats for the exchange. The sessions used activities such as concept mapping, logic modelling, deliberative dialogue and matrix analyses to generate a consensus vision, objectives, content and activities for the exchange.

The exchange incorporated several strategies and formats to encourage inclusive and solution-focused dialogue. Every effort was made to realize a ‘horizontal exchange’ of ideas and solutions. For example, name tags and introductions were stripped of affiliations and titles and panels were populated by a majority of people with lived expertise. Also, case composite sessions were facilitated by members of the working group. Invited sessions by service providers and advocates gave others in the community an opportunity to identify key areas for knowledge mobilization. Open space technology models were adapted to ‘unsessions’ where topics were nominated and facilitated by participants on the day of the exchange to further expand opportunities to inform the agenda. In addition to art installations by participants/groups with lived expertise, the

⁴ Formerly homeless exchange participants received an honorarium, travel/transit expenses, as well as lunch and refreshments. Formerly homeless working group members received honoraria, travel, and meals each time they participated in a working session or other project activity.
exchange employed arts-inspired methodologies such as gorilla and performance art, web casting, film and graffiti to capture alternative responses to the issues.

Notes from all sessions were collated subject to collective content analyses to identify central themes and well-endorsed strategies that emerged during the exchange. The working group analyzed the material during a series of six sessions (using logic modelling and concept mapping). The group then used their summary findings to create (and co-author) a ‘homeless2home community action guide’ to be distributed broadly in the homelessness community in hard and electronic formats. A parallel analysis of the exchange was conducted by a student intern working with the project team. The evaluation used a quantitative online survey (with some open ended questions) to capture participants experience of the exchange, as well as input on how to act on the strategies emerging from the exchange.

**Literature Review**

The project was informed by literature and praxis in four key areas: health and episodic homelessness, knowledge transfer, a life course framework and participatory approaches to research and resource development.

**Health and Episodic Homelessness**

The Homelessness Knowledge Development Program research domain which was the focus of the project’s knowledge dissemination activities is that of health. Health in the context of this project was understood within the frameworks of the social determinants of health and social inclusion of which housing and home are crucial factors.

A ‘housing first’ approach was central to the strategies and solutions exchanged and documented during the forum. However, given the prevalence of episodic homelessness and the magnitude of ‘homeless effects’ on health, understanding how to support and stabilize individuals in the early stages of being re-housed is critical to ending cycling through homelessness and precarious housing. The prevalence of episodic homelessness and magnitude of ‘homeless effects’ is well documented (Anucha, 2003;
McDonald, Dergal & Cleghorn; McDonald, Donahue, Janes and Cleghorn, 2006; Thompson, Pollio, Eyrich, Bradbury & North, 2004). As an example, without support to the persistent trauma and poor mental health that may be induced by homelessness the balance can easily be tipped in favour of another episode of homelessness (McDonald et al., 2006).

Further, when housing strategies are set in a context of realizing ‘home’ the solutions proposed broaden to cover how housing can act as a conduit for social inclusion. Issues such as belonging and acceptance move the dialogue beyond home as a static place to home as a dynamic process co-created by individuals, communities and systems (Veness, 1993). This exchange sought to shift the dialogue in this direction and expand both who participates in what Kellett and Moore (2003) refer to as ‘home-making’ and how housing can become a site for greater inclusion of formerly homeless youth, adults and older adults.

Knowledge Transfer

Health and social systems around the world are faced with the challenge of improving the quality of care and decreasing the risk of adverse events such as homelessness. Knowledge dissemination or transfer has emerged recently as a strategy to address these challenges but has been used infrequently in solving the problems of homelessness. While there is available research on interventions for maintaining stable housing and avoiding the state of homelessness, the knowledge-to practice gap is wide. The research about knowledge transfer is in the developmental stages so that the definitions vary widely and encompass such terms as knowledge dissemination, knowledge transfer, innovation diffusion and knowledge translation (Thompson, et al., 2006). There are at least fifteen different theories to guide knowledge dissemination and just about as many models for implementation, none of which have been shown to be more effective than others (Santesso & Tugwell, 2006).

This project was informed by the Canadian Institute for Health Research (CHIR) definition that defines knowledge translation as the “exchange, synthesis and ethically sound application of knowledge—within a complex system of interactions among
Researchers and users” (http://www.cihr-irsc.gc.ca/e/8505.html). Other principles that informed the project included that knowledge transfer can be more effective when there is an exchange between all stakeholders (Graham et al., 2006), when multiple interventions are used (Davis & Taylor-Vaisey, 1997), when the information is presented in accessible and visually appealing formats (Formoso & Magrini, 2006; Pagoto et al., 2007) and when information is provided in a collaborative and interdisciplinary context (Zwarenstein & Reeves, 2006).

Front line service providers and policy makers have little time and resources to devote to reading lengthy reports, which often seem disconnected from the realities of their work. Researchers often work in isolation and have to compete for scarce funding resources and lack opportunities to share their findings and/or future directions for their work. Finally, people who have experienced homelessness are often the subject of study (surveyed and interviewed) rather than active participants in the generation of knowledge for solutions to homelessness. Homeless to home (h2h) challenged these barriers by providing space and structures to support the inclusion of and action by all homelessness stakeholders. Finally, the project translated the promising practices emerging from the exchange into straightforward information to be placed in the hands of the end users – people who have experienced homelessness, service providers, and policy makers.

**Life Course Framework**

The project included three groups - the young, the middle-aged and older adults as the focus of our knowledge exchange because their housing and support needs differ over the life course and consequently, service and policy responses should accommodate those differences. The interventions required depend upon the individual’s point in the life course and the housing episode experienced. For example, the time-already-lived is long for the middle-aged and older adults and the time-left-to-live is shorter. As a result, where life course pathways have resulted in problematic housing outcomes like homelessness, policies and services tend to be remedial. In the case of younger persons, the time-left-to-live is long and the time-already-lived is short. Policies and services will therefore be more relevant if focused on the future and are preventative. What is more,
the experience of earlier generations who have experienced homelessness is very likely to be of value to younger generations and vice versa.

The stakeholders in the homelessness community, service sector and academia need to recognize that housing, unstable housing, threat of eviction, eviction, and ultimate homelessness and cycling in and out of different states are episodic in that these are statuses that individuals and families move in and out of over the course of a lifetime (McDonald et al., 2006). Looking at homelessness through a life course lens will bring together all the stakeholders into collaborative partnerships because they will no longer be able to focus on one small band of homelessness and their solutions will more closely resemble people’s lives.

**Participatory Approaches**

The project was based on a model of community exchange which values different forms of knowledge from diverse stakeholders and which emphasizes that dialogues and decision-making include those most impacted by the issue. Community exchanges that are inclusive of those who have direct experience and knowledge of an issue have become an emergent ‘best practice’ in international development (Appadurai, 2001).

Policy and funding frameworks mandate the involvement of those individuals most affected by the issue (Bryant, Raphael & Travers, 2007; Devon Dodd & Hebert Boyd, 2000), yet very little is known about the value of this involvement to the research or to end users, such as policy and program developers. The extant literature on participatory action research (PAR), empowerment evaluation, community-based participatory research and campus-community partnerships demonstrates that researchers and community organizers have extended the objectives and processes of engaging those with lived expertise in the research enterprise, but few have evaluated its outcomes. Further, the literature indicates that power and decision-making remains weighted toward academic partners (Boser, 2006; Flicker, 2008; Stoecker; 1999) and that the flow of knowledge moves primarily from the campus to the community (Morgan, 2001; Oliver; 1997). Although this project included a brief formative evaluation, future projects should
conduct more thorough evaluation of the value of inclusion/participatory approaches to participants, to research outputs and to policy and program development.

Although the epistemological and methodological debates surrounding PAR persist, most authors concede that it is increasingly entrenched in academic, funding, policy-making, and community systems (Minkler & Wallerstein, 2003; Titterton & Smart, 2008). Further, when communities help define the solutions that work for them, they are empowered to become partners in the change process, they ensure that tools and resources are relevant to the realities of their lives and they develop ‘buy in’ to the outputs which then fosters action and uptake (Muller & Mitlin, 2007). However, a fundamental challenge beyond realizing equitable partnerships between researchers and members of marginalized communities is the difficulty of sustaining those relationships and activities beyond the timeline of a project.

Participatory planning and decision-making models such as those pioneered in Porto Alegre, Brazil and replicated to some degree in the Canadian cities of Toronto and Guelph are promising models of sustaining civic engagement beyond project cycles (Maxwell, 2007). As Siemiatycki (2007) suggests, the City of Toronto Act affords opportunities to pilot more inclusive and participatory modes of governance. One model of civic engagement that offers sustained opportunities to impact policy and program development is that of neighbourhood councils. Maxwell (2007) describes neighbourhood councils as a formal mechanism to inclusively engage people in the decisions that affect them, as well as enhance social cohesion and citizenship. A key dimension of this form of engagement is that it has twin objectives of achieving breadth (in that it includes more and more people) and depth (in that the community of people has increasing knowledge and resources to act in decision-making processes). The structure of these councils lie on a continuum from very loose associations to more formalized groups with direct links to municipal government; some are even mandated and institutionalized through municipal charters. Maxwell (2007) contends that the support of local government is crucial and that the benefits are mutual: neighbourhood councils gain access and municipalities gain credibility. Another model of sustainable civic engagement is that of the U.K. INVOLVE project which provides ongoing funding and effective resources to promote and support active public involvement in public health and
social care research. For example, INVOLVE has funded several participatory projects engaging older adults in identifying issues and strategies relevant to enhanced health and social care. INVOLVE has also funded the development of various tools for engaging citizens in research and project evaluation including: *Good Practice in Active Public Involvement in Research* (INVOLVE, 2007).

**Section 2 - Methodology**

**Knowledge Exchange Development**

The working group participants were recruited in a number of ways. The strategy was to include participants from three age clusters: youth, middle-aged and older adults. The older adults were invited from a previous project (other members from the previous project were seconded to an older women abuse project concurrent with h2h). Youth and middle-aged adults were recruited from local advocacy and service organizations. No criteria other than age and experience of homelessness were used and groups/agencies were asked to make nominations. No formal interviewing process was conducted as the project team prefer either lottery or self-nomination and would only exclude someone if their participation was profoundly challenging for them or other members of the working group. Participants were also recruited for a project advisory committee that included people with lived expertise, as well as advocates, service providers and academics who provided ongoing guidance and input to the project activities. A meal was provided at each working session, and the participants also received an honorarium and transit tokens. Other individualized supports were provided on an ad hoc basis.

Recruitment for the exchange participants was developed by the working group and project team as outlined in the description of Sessions 5, 6, and 7 below. The recruitment was proportional and equitable and drew on the networks of the working group, project team (including advisory) and those of the key informants interviewed for early input into the format and content of the exchange.
Development Sessions

Session 1 focused on creating shared understandings of the project scope and deliverables, building group cohesion, and visioning key outcomes for the exchange, for individual working group members and for the group as a whole. Session 2 built on the visioning activities of the previous session and clustered key objectives using logic modelling. The group then engaged in ‘free listing’ (i.e. essentially a brainstorming activity that is targeted toward documenting as many ideas as possible without any constraints or structures) to identify the issues and dimensions embedded in homelessness, housing and home. The working group prioritized issues using a ‘dotmocracy’ exercise where participants ‘vote’ using colour-coded dots. Issues were examined for links and overlaps until saturation was achieved. Further, the group worked to resolve and reflect on the issues raised by the Project Advisory such as geographical boundaries of participation, inclusive horizontal processes that act to ‘flatten’ power differentials, outreach and invitation strategies, and how to engage lived expertise rather than experience (i.e. moving from sharing stories to sharing solutions).

Sessions 3 and 4 focused on capacity building within the group, logistics and generating a blueprint for the exchange. Communication guidelines were established to facilitate productive dialogue, a tour and commitment to the space at Hart House was achieved, consensus on using a case composite format for the group’s exchange sessions was attained and a flow chart was constructed to inform further program development for the exchange.

Sessions 5, 6 and 7 were focused on creating the case composites. The members worked in pairs to script composites relevant to their age cluster and to embed central issues identified during the free listing in Session 2. Further, discussion to determine an equitable approach to invitation and outreach led to a two-tiered strategy: each project team member (working group, advisory and staff) could nominate 2 ‘priority participants’ who would receive first tier invitations and then everyone would add names to a general list which was then subject to random selections through a lottery process. A matrix was developed to identify proportional representation from target groups (i.e. with a majority
proportion of people with lived expertise, and lesser proportions of service providers, advocates, policy makers, academics, and media).

During sessions 8 and 9 the case composites were finalized and the group turned to generating suggestions and formats for the opening and closing plenary, as well as consolidating the ‘art injections’ that infuse the exchange. A facilitation consultant was brought in to work with the group during session 10 which included generating strategies for group facilitation and then role plays to activate and refine those strategies. Session 11 brought many of the panel speakers together with the working group to generate questions for the opening facilitated discussion and to provide feedback on the contents and formats developed to date. The final development phase session 12 was focused on agenda building, volunteer logistics and group participation in opening and closing remarks.

**Knowledge Exchange Implementation**

As previously mentioned, the project was based on a model of community exchange which values different forms of knowledge from diverse stakeholders and which emphasizes that dialogues and decision-making include those most impacted by the issue. The h2h exchange extended the model by not only including those with lived expertise (in majority numbers) but creating opportunities for this group of participants to direct the agenda. Other methodologies used during the exchange included deliberative dialogue on central questions relevant to housing security and well-being in both the opening and closing plenary, and ‘un sessions’ which were not predetermined and opened up the agenda to participants’ spontaneous nominations. Participants also had opportunities to engage with various visual mediums (e.g. film, graffiti murals, and art installations), as well as exchange resources at a community hub set up to facilitate information sharing. Finally, all participants were invited to continue informal networking at the reception and premiere screening of Home Safe Calgary. All sessions were recorded by note takers.\(^5\)

\(^5\) Audio and visual recording were rejected by the working group on the basis that consent to record and recording itself would limit frank disclosure and discussion. Note taking was deemed to be less intrusive.
Post Exchange Analysis and Dissemination

All the notes from the exchange sessions were collated and presented back to the working group. During sessions 13 to 14, the group worked collectively using concept mapping and content analysis to identify central themes, promising practices and strategies for action emerging from the day’s dialogue. The group also developed a vision of how this analysis would be translated back to the homelessness community in a transparent, accessible and actionable format. Sessions 15 and 16 were spent co-writing the case summaries, challenges, and strategies according to age cluster, as well as brainstorming individual and community actions to realize those strategies. A ‘Homeless2home Community Action Guide’ will be printed and then distributed online and in print through the network of participants. A parallel analysis of the exchange itself was conducted by a student intern who used an online survey to evaluated how participants felt about the processes and content of the exchange, as well as poll participants for input on next steps. The response rates was 58% (N=44 of 76 potential respondents) of participants excluding working and advisory group members, which is a favourable proportion for online surveys (Hamilton, 2003).

Results of the Data Analysis of the Case Composite Sessions

Data collected during the case composite sessions6 (case summaries are included in Appendix C) was analyzed according to a life course framework which emphasizes what is unique to each age cluster (i.e. youth, middle-aged and older adults) and how these challenges can be addressed through promising strategies for housing stability and inclusion. The intersections between age clusters will be explored, in the conclusion and recommendations section of this report.

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6 Although data was collected during sessions other than the case composite sessions, only the case composite sessions were fully analyzed due to the project emphasis on a life course framework to housing and wellness outcomes.
Youth Sessions

A key challenge participants identified as impacting youth housing stability, well-being and inclusion was the adverse effects of locating youth housing in ‘ghettoized’ neighbourhoods. This practice clusters youth into geographies of disadvantage (e.g. youth struggling with poor mental health and/or problematic substance use) that are “vulnerable to exploitations by other members of the community and to oppressive tactics by police and other agents who monitor or manage youth behaviour.” For youth in recovery this poses significant challenges but the alternative of re-locating youth to outlying ‘safe’ neighbourhoods that have fewer triggers but even fewer resources is equally problematic.

Strategies that addressed this dilemma included creating more youth specific transitional housing with a broad menu of support options and locating services across the Greater Toronto Area (GTA) so that youth can remain in their communities, if they choose, and still access services. Another strategy endorsed by participants was developing a ‘community watch’ mechanism (could be a youth specific or a general community ombudsman) to protect individual rights and access to services and to ensure accountability for unjust treatment of youth.

Other strategies put forward to ensure individualized, respectful, and responsive housing/support options for youth included sensitivity training for staff so that they support the realistic goals of youth within a partnership that does not impose ‘cookie cutter’ rules. Further, continuity, and flexibility of support (e.g. eliminate the school attendance criteria to receive Ontario Works [OW]7; provide alternate options to individuals who are no longer youth once they finally get housing!) and eligibility (e.g. inconsistency in age limits for youth) were identified as crucial principles of service delivery.

Participants noted that the socio-cultural context of service delivery favours middle-aged adults and is often insensitive to the unique needs of youth (e.g. basic life skills support). For example, the ascendancy of peer pressure and norms make it even more difficult for youth to recover in housing conditions where they are clustered with other youth struggling with poor mental health and/or substance misuse. Another

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7 Ontario Works is a provincial income assistance program.
example is that agency-based supports are often ineffective in engaging youth who identify the streets as the site of culture and community. Participants strongly advocated for the creation of more peer-based programs, especially targeted to outreach and connecting with informal communities. Participants emphasized that other youth are better able to make connections and engage where the community ‘lives.’ Participants maintained that “youth connect on the street and therefore supports have to connect to the street!”

Another key challenge to youth inclusion and community integration are the zero-tolerance policies on youth substance use that were identified as “setting youth up for failure.” Strategies suggested focused on housing, shelters, and transitional housing providers adopting a harm reduction policy so that no youth is excluded from accessing safe and affordable housing. Also, participants recommended that housing providers pilot a ‘no eviction’ policy modeled after the Portland Hotel Society in Vancouver’s Downtown Eastside. Another pilot proposed, and again modelled after a program of the Portland Hotel Society: Insite (co-operated with Vancouver Coastal Health), is a ‘Safer Shoot’ site so that ‘using’ residents’ housing would not be jeopardized if they are caught with paraphernalia, and/or controlled substances within their units. Participants also suggested providing lockers to store equipment and substances within the Safe Shoot site and ensuring that sensitive security and trained medical staff are on-site. Further, the participants advocated that sites be located in neighbourhoods or apartment buildings where ‘users’ live. Another strategy endorsed my many was to develop a youth ‘mental wellness centre’ geared towards youth in crisis, recovering from crisis/overdoes, etc. that provides both temporary and ongoing support to connect youth with the services they want and to accompany them (if requested) as advocates to those services.

Lack of specialized programs and housing for LGBT (and other marginalized youth) was frequently raised as a key barrier to inclusion. Participants suggested a strategy of creating safe zones to support the well-being (especially self–esteem) and agency of LGBT youth including dedicated LGBT detox, mental health services and skills training. Another strategy put forward was that of a public education campaign delivered by youth and for youth to create a culture of respect for and engagement of difference.
The limited support for youth transitioning out of care and the systemic oppressions that drive youth away from child welfare agents and agencies was flagged by many participants. A number of strategies were put forward to address this critical transition including: increasing the maximum age for extended care from 21 to 24 and implementing transitional supports for youth exiting care (e.g. financial and other supports for continuing education and training).

**Middle-aged Adult Sessions**

Although not unique to the middle-aged cluster, challenges such as inadequate income, employment and housing supports, inaccessible information sources and lack of systems accountability were raised more often by participants in these sessions. It may be that working-aged individuals transitioning from homelessness to home require more comprehensive supports due to more complex needs and desires (i.e. youth and older adults are less likely to have child care needs). Strategies raised to counter the inadequacy of income support included raising income assistance (at least 40%) and minimum wage to levels in line with the Low-income Cut Off. Participants emphasized that this long overdue raise would “support Ontario’s poverty reduction targets and provide economic stimulus as lower income individuals spend out their disposable income.” The removal of the claw back of the National Child Benefit Supplement and punitive tax back rates for earned income, as well as the implementation of a ‘transition grace period’ prior to adjusting Rent-Geared-to-Income (RGI) levels were proposed as essential investments in middle-aged adults income and housing security. Participants also suggested strategies which would enhance employability including: investing in individualized long-term training and education supports so that people are able to successfully re-enter the labour force (e.g. remove the barriers to receiving welfare, as well as funding through the Ontario Student Assistance Program).

Difficulty in navigating complex social service systems was flagged by many participants as limiting people’s ability to access housing, and health and social supports. Participants indicated that information sources are not user friendly and do not adequately explain the range of services and entitlements available. Although service providers and
systems may construct youth and older adults as requiring assistance, middle-aged adults are presumed to be ‘capable of helping themselves,’ and consequently, may find themselves without the supports they require and are entitled to. Further, information seekers are asked to “tell their stories over and over again to qualify for support” and feel “under interrogation.” Strategies suggested by participants included: broadcasting information into the community and into people’s housing (i.e. using television, radio and mail), and training workers to relay information in a focused and easily digested way so that people are not overwhelmed by too much information. Alternatively, all supports and entitlements should be documented in various ways (e.g. brochures, web postings, and orally at community meetings/forums) so people do not get too little information and have to rely on a single worker’s discretion. Finally, participants championed that the best information is relayed by their peers and consequently, peer advocacy programs (with appropriate compensation for advocates) should be put in place to help people navigate service systems and be informed of all available entitlements.

Another challenge raised by participants was that there are few options for appeal when systems fail. Participants maintained that social service systems were exclusionary and words such as “policing,” “interrogation,” and “poor bashing” were used to describe people’s experience of service delivery. Further, participants cautioned that concentrating too much power in a single worker is dangerous. One strategy put forward is to develop an ‘arms length’ mechanism to register a complaint against workers that protects the claimant and offers transparent reporting on the processes of inquiry. Another strategy promoted was to support clients’ rights by extending the protections available to recipients of income assistance who experience housing discrimination to other areas covered by the Ontario Human Rights Code.

In response to the case composite where the central character was living without status, participants emphasized that there are not nearly enough ‘don’t ask don’t tell’ zones and that many people are afraid to come forward and are not even aware of the safe zones that do exist. Participants suggested that the City of Toronto formally adopt a ‘don’t ask, don’t tell’ (DADT) policy for all service and support portals, as outlined and advocated for by No one is illegal-Toronto coalition. A DADT policy, participants maintained, would ensure that ALL city residents, including people without full
immigration status, can access essential services (e.g. housing, health, education, social services, and emergency services) without fear of being detained or deported. Another strategy put forward to address the ‘knowledge gap’ is to raise awareness through print, web and other mediums of those sites where a DADT policy is in place and request that agencies adopting the policy clearly communicate it to clients. Further, participants advanced that an accountability framework needs to be imposed that addresses the gaps between policy statements and actual implementation (i.e. so that Sanctuary Zone policies are not violated).

Participant felt that the lack of penalties for employers who exploit workers without status (i.e. the worker typically bears the penalty-- deportation) creates a context where workers are powerless and employers have no standards for accountability. One strategy suggested was to raise awareness and enforce fines and/or other legal consequences (i.e. through Section 125 of the Immigration and Refugee Protection Act) to employers of non-status workers in ways that deter exploitation but do not unduly reduce options in the underground economy until a full and inclusive regularization program is in place.

Other participants noted the insufficient recognition of universal human rights to health care, education, food, legal remedies and shelter mentioning that Canada is a signatory to the United Nations’ Covenant on Economic, Social and Cultural Rights which explicitly states that humans, regardless of citizenship, have entitlements to basic economic, social and cultural rights. In response, participants advised that claimants use the Ontario Human Rights Code and the Charter to challenge refusal of services, support and housing to individuals without status. Participants also recommended that amnesty be mandatory in cases of criminal and civil violations so that women, who have been assaulted, abused or who are seeking child support, will come forward to pursue legal remedy.
Older Adults Case Sessions

Participants felt that withdrawal of the shelter allowance component of Ontario Disability Support Program\(^8\) (ODSP) while recipients were in the hospital was a critical risk factor for older adults. Aging, especially the accelerated aging that can result from years of substandard health care and trauma experienced while homeless, may lead to more episodes of hospitalization. Participants maintained that without continued payment of the shelter allowance hospitalized older adults face a high risk of eviction. Strategies put forward by participants to address this risk included: immediate amendment to income assistance legislation to ensure that shelter allowance is maintained, regardless of the duration of hospitalization, until the client (or advocate, case worker, substitute decision maker acting on the client’s behalf) indicates it is no longer required. Other strategies suggested by the participants included: adding questions regarding income, housing and other needs to hospital intake protocols; and ensuring updates during and at, as well as post, discharge. Participants strongly advocated for enhanced discharge planning that attends to details such as transportation, housing status, support needs and that includes follow-up, particularly during the early weeks post-hospitalization.

Exacerbating gaps in income assistance and in hospital protocols, participants noted, were the lack of support and advocacy available to older adults. Participants felt that intermittent access to hospital social workers was not enough and that patients required ongoing support to ensure their needs within and outside of the hospital were met. A strategy of peer advocates was suggested as an effective means to provide continuous support. It was also recommended that the peers be employed by an ‘arms length’ agency so that they could advocate without conflict for the patient.

Participants also commented on the lack of accountability by the Ontario Rental Housing Tribunal in preventing evictions of hospitalized tenants. Participants suggested strategies such as amendments to the Residential Tenancies Act that prohibit evictions to hospitalized tenants and directions/protocols that prompt hospital staff to inquire about housing status and to communicate (on patient advice) with the landlord who may be

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\(^8\) The Ontario Disability Support Program is an income assistance program for people who are unable to work due to physical, mental, intellectual or environmental challenges.
unaware of the tenant’s condition. Finally, participants advised that if a patient does lose their housing that there be immediate intervention to fast track the patient into new housing.

Another challenge relevant to older adults that was raised during the sessions was the support of informal caregivers. Participants highlighted the central role family and friends play in housing security, health and well-being. Lack of recognition for this crucial support including: limited respite care, support groups and financial support to the caregiver, as well as the scarcity of accommodations such as an extra bedroom for overnight stays, were identified as putting older adults at risk of eviction or institutionalization. A strategy put forward by participants was to formally recognize the significance of unpaid care giving in housing legislation (e.g. the Social Housing Reform Act and Municipal Social Housing policies), so that requests for (or retention of) larger units with second bedrooms are not rejected because of the ‘unpaid status’ of the caregiver. Also, participants felt that tenants, especially older tenants who may be less likely to ‘challenge the system,’ require support to advocate for their needs. Tenant reps were seen as too embedded in the status quo to provide such support and consequently, participants advocated for access to external (ideally peer) advocates.

Beyond the role of informal care in supporting ‘aging in place,’ many participants commented on the lack of accommodations to the built environment (e.g. ramps, elevated toilets, grab bars) available to older adults who required mobility supports and how the absence of such accommodations puts these tenants at considerable risk of homelessness/institutionalization. Although participants acknowledged that some accessible units were available, uptake was limited due to lack of knowledge about the units and to the difficulty posed by having to move to another unit. Participants also emphasized that institutions such as nursing homes were anything but home and that older adults facing long term care frequently see themselves as ‘homeless.’ Further, participants indicated that health and social care workers are more likely to suggest that an older adult cannot retain their community housing if they are in social housing or otherwise ‘marked’ as economically disadvantaged. This particular type of homelessness was flagged by participants as warranting further exploration.
Section 3 - Discussion

Relevance and Significance of the Project

Knowledge Transfer that Integrates Experiential Knowledge with Other Forms of Expertise

Homeless to home adopted a participatory approach to knowledge transfer that engaged a working group of formerly homeless youth, middle-aged and older adults to develop and deliver an inclusive knowledge exchange. Conventional models of knowledge transfer typically construct the formerly homeless as subjects whose narratives are transformed into aggregate data to be analyzed and disseminated. Contrary to these conventions, the formerly homeless participating in h2h were the ‘knowledge makers,’ who designed and led the production, transfer and mobilization of promising strategies to promote housing stability and inclusion.

The post-exchange evaluation (Appendix D) indicated that the exchange was inclusive and dynamic. For example, more than 90% of participants felt that there were opportunities for everyone to participate, that their voice was heard and that they would attend another similar exchange. Participants generated and endorsed the strategies put forward during the sessions (78% of participants felt that good solutions emerged from the day’s discussions) and many reported that they had acquired new knowledge (39% of participants indicated that they had discovered new resources).

Working group participants reported increased capacity in a number of areas including: conference planning, public speaking and group facilitation, enhanced knowledge of housing issues across life course and of the policy-systems that shape homelessness and housing. Capacity building during the project appears to have contributed to a number of personal gains for participants. Two of the youth working group participants were able to secure permanent housing and employment and pre-employment training during the course of the project. Another participant significantly expanded his role as a community educator through ongoing guest lecturing at local post secondary institutions. Other working group participants went on to take an active role in the Mental Health Commission’s ‘Research Demonstration Projects in Mental Health and Homelessness’ collaboration.
Finally, a participatory model of knowledge transfer, like h2h, tends to generate distinct yet complementary issues and solutions to that produced in other more ‘professionalized’ models of knowledge transfer. For example, peer journals tend to focus on housing attainment (not sequelae) and on measures of health and mental health status which tend to pathologize homelessness. Whereas participants of the exchange stressed the importance of establishing a ‘home,’ not just securing housing, which moves the dialogue beyond shelter to sanctuary. This shift from home to housing transformed the dialogue from deficits to models of housing and support that fostered participation, collaboration and inclusion through peer programming and relationship building.

Identification of Challenges to and Strategies for Housing Stability Across the Life Course

A significant principle of a life course framework is the understanding that development occurs from birth to death, is subject to gains and losses, is multi-dimensional (biological, psychological and socio-cultural), and is comprised of multiple interdependent trajectories (Settersten, 2003). Trajectories are punctuated by events, transitions and turning points (Elder & Pellerin, 1998; Settersten, 2003). An ‘event’ is usually conceptualized as an abrupt change such as being evicted, while a ‘transition’ is seen as a more gradual change such as moving from school to work, whereas a ‘turning point’ is a major change such as abandoning substance abuse to maintain housing. Another way of understanding these intersections is in terms of life chances that are mediated by cumulative events, transitions and turning points. Most scholars avoid deterministic models which suggest that cumulative disadvantage is irremediable (Elder & Pellerin, 1998; Frytak, Harley & Finch, 2006; Settersten, 2003) and prefer more complex frameworks that emphasize the role of human agency, as well as socio-cultural and historical context. Also, timely interventions during what Blaine (1999) refers to as social ‘critical periods,’ as well as ‘resilience promoting resources’ (e.g. multiple social roles and positive self-esteem) (Moen, 2003) can mediate disadvantage across life course. The following paragraphs present participants’ understandings of how these age-related trajectories intersect across the life course.
Participants stressed the significance of disruptions to transitions from the familial to independent living as a source of housing instability and exclusion. Participants also noted that the transition of youth out of care to independent living is a time of extreme vulnerability where one system: child welfare is receding without a complementary support to take its place. These disruptions were attributed to early histories of abuse, neglect or other adverse family contexts (or foster care) which impaired the development of basic life skills and educational or training trajectories. Further, poor early relationships were linked to ongoing exclusion and isolation. These difficult transitions were seen to by participants as limiting education and employment opportunities and creating risk for poor mental health and substance misuse. However, participants put forward program and policy interventions that could scaffold youth and mediate the effects of poor transitions. Primary, among the recommendations was that interventions be upstream and preventative. However, in the context of the case composite sessions the interventions are necessarily remedial. Participants suggested that outreach should be peer based to facilitate interaction with street youth culture, that life skills and other supports be available during transitions, that ‘no eviction’ policies be adopted (especially by providers of transitional housing for youth) and that housing models emphasize community and skill building such as the foyer housing pioneered in the UK (Lovatt & Whitehead, 2003). These interventions were identified as addressing losses in social capital and creating conditions of housing stability that would scaffold employment and education trajectories.

Events such as a job loss, pregnancy or sudden assumption of child care responsibilities were seen as critical junctures for middle-aged adults. Intersections exacerbating the effects of these events included: limited education and employment histories which lead to insecure contractual jobs and consequently, greater risk of job loss (and greater difficulty re-entering the labour market); and poor social support arising from histories of abuse and exclusion impairing parent skills (through mechanisms such as poor parental models and poor social capital). Participants also flagged that middle-aged adults will have accumulated histories with social service systems that are oppressive and exclusionary but intersecting histories of abuse and fear may act to suppress challenges to service delivery. Interventions to mediate these risks suggested by
participants included long term and flexible support to training and education with subsidized child care that accommodates shift work and night classes. Another policy intervention suggested was to extend human rights protections to social assistance recipients to government services; and to create a transparent, accessible and accountable complaint process to challenge OW and ODSP policies and practices.

Participants identified key events, transitions and turning points that may occur in the lives of older adults and introduce housing instability. For example, older adults are at greater risk of a sudden health crisis (event) that requires hospitalization. Intersecting histories of episodic employment, lack of contributory pensions or health benefits, and consequently, greater reliance on income assistance leads to greater risk of evictions due to cessation of the shelter allowance. Transitions toward the need for care giving and to old age pensions intersect with historical low-income and limited pensions options which together may lead to greater reliance on unrecognized and unsupported informal care (by family and friends). Finally, participants spoke of the turning point of becoming no longer ambulatory (or having only limited mobility) intersecting with social housing tenancies that permit very little in the way of accessibility accommodations. Interventions recommended by participants included immediate reform of OW and ODSP legislation to ensure the continued stream of shelter allowance for the duration of hospitalization, as well as changes to the Residential Tenancies Act and the Ontario Rental Housing Tribunal to prevent evictions of hospitalized tenants. Other interventions put forward were to advocate that housing providers formally acknowledge and support informal care giving (including allowing older adults to retain a second bedroom for a care giver) and to advocate that the Local Health Integration Networks provide funding to support the needs of informal care givers. Finally, participants advocated for expanded funding for structural adaptations available through ‘Home Adaptations for Seniors Independence’ (HASI) and ‘Residential Rehabilitation Assistance Program’ (RRAP) to prevent or delay institutional homelessness.
Collaborative Mobilization

Extensive outreach during project activities created a context for collaboration and mobilization. Key informants interviews with advocates, service providers, policy makers (at all three levels of government), political representatives, media and academics provided early input and networks for subsequent outreach. Members of the working group acted as ambassadors and animators in their communities creating awareness and ‘buy in’ for the project.

Outreach continued as the invitation list was constructed and partnerships were struck with the Cities Centre and Skyworks (as outlined in the paragraphs on linkages and partnerships with the homelessness community). The Cities Centre and Skyworks had built extensive networks of their own which were shared with the project team (h2h networks were, of course, made available to both Cities and Skyworks) increasing the scope of outreach for all three partners.

Further outreach ensued to community facilitators and panel members who brought their various networks to the collaboration. Innovative housing and support providers (e.g. Family Services Toronto and St. Clare’s Multifaith Housing), advocates (e.g Voices from the Street, Homeless Nation, the Mental Health Commission and the Wellesley Institute), and academics (Professors from the University of Toronto and Manitoba) collaborated on panels and sessions during the exchange. Also, web postings (e.g. on Homeless Nation, the NICE site, Charity Village, and the Homeless Hub) with information about the exchange and contact information for inclusion on the invitation list extended outreach beyond local networks. Also, a collaboration was struck with Hart House (the site of the exchange) led to the inclusion of many students in the exchange (i.e. as volunteers and participants) who reported back to their peers on learnings gleaned from the exchange.

On the day of the exchange multiple strategies were employed to encourage collaboration and alliances including: a community resource hub for the exchange of information, art injections that challenged participants to engage in different ways with
the issues, several sessions that focused on collaboration across service delivery and mobilization, sessions linking the participants and content of h2h to the Cities Centre’s Family Homelessness Symposium, and a closing plenary explicitly focused on collaborative mobilization.

A testimony to the effectiveness of these strategies was that more than three quarters of participants (78%) responding to the post-exchange evaluation reported making contacts that they would pursue after the exchange.

**Participatory Knowledge Dissemination**

Knowledge transfer did not end with the h2h exchange. While some knowledge transfer events document the key issues and recommendations emerging from the event in a report, this project extended dissemination in several other ways. Linkages with local media resulted in coverage of the exchange in the Toronto Star and on CFRB radio. The model and key findings of h2h were presented (and co-presented by a member of the project’s formerly homeless working group supported by a financial contribution from NICE) at the ‘Growing Home: Housing and Homelessness in Canada’ conference held in Calgary mid-February 2009. The co-ordinator and another member of the working group are invited speakers at York University’s Institute for Health Research April workshop titled: ‘Social Inclusion for Health and Well –Being.’ H2h will also be presented at the upcoming International Association of Gerontology and Geriatrics World Congress XIX: ‘Longevity, Health, and Wealth’ to be held in Paris in early July 2009.

However, the central dissemination activity is the creation of a community action guide which is co-constructed by the working group and project team. This initiative further extends the participatory element of the project from conception, development, data collection, data analysis to writing and ‘owning’ the findings from the exchange. The project dissemination tools were initially conceived of as two separate tools: 1) a

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9 Art infusions included: the work of Sketch: a non-profit arts organization that engages street involved and homeless youth; the work of Ron Craven a digital artist with lived expertise of homelessness; the work of “A day in the life” Stories and Photographs of Health and Homelessness; the work of the participants in the arts-informed research project: “Coming Together: Homeless Women, Housing and Social Support” and the performance art of Willy Easter who spent the day silently moving around the exchange wrapped in a sleeping bag.
A series of postcards utilizing the art created by the ‘In from the Streets’ working group and embossed with a call to action to support housing stability across life course and 2) a promising practices across life course booklet. However, the project working group felt a single tool which incorporates promising practices and a call to action and that was branded with the project visuals (rather than a previous project’s creation) would be more effective. Consequently, a ‘Homeless2home Community Action Guide’ was created to provide a distillation of the exchange with a focus on the central challenges and strategies emerging from the age-clustered case sessions. Each age cluster is accompanied by a list of actions for individuals and communities to take to ensure those strategies are realized. Images created by formerly homeless artists animate the text. The final section of the guide includes a call to collective action where all participants in the exchange, and others who are interested but did not attend, will have an opportunity to collaborate on a single resonant issue: the expansion of rent supplement/housing allowance programs, at a single point in time: on the anniversary of h2h November 6th 2009.

The community action guide serves several purposes including: providing an ‘echo’ of the ideas put forward that values the voice of lived expertise; providing resources and referrals that will assist individuals in retaining their housing and in realizing their fullest potential; providing a targeted action agenda for communities to adopt age-sensitive promising practices, and providing an opportunity to collectively act with a network of people concerned with moving beyond homelessness into housing and home as a right and reality for every Canadian.

Overall, the significance of homeless2home rests on three important innovations: 1) the generation of an inclusive participatory model of knowledge transfer that brings lived expertise to the fore and 2) the identification of the central challenges to individuals transitioning from homeless to housed to home across the life course, and 3) the development of promising strategies that best support housing stability, well-being and inclusion across the life course. Too often homelessness is annexed from housing and inclusion. Too often youth, middle-aged and older adults’ experiences of homelessness and housing are understood in isolation or without consideration of the differences, commonalities and intersections across age groups. This project sought to address those gaps by exploring the interface between the experience of homelessness, housing and
homeless2home

home in all its complexity and by integrating and illuminating how those experiences play out through different stages of life.

**Linkages and Partnerships**

Linkages have been made to more than 250 individuals, groups, agencies, government ministries, academic institutions and media outlets in the homelessness community through outreach and key informant interviews, as well as through the networks of the project advisory committee and the project partners (Appendix B).

More formal partnerships were established with the Cities Centre (previously the Centre for Urban and Community Studies), University of Toronto and with the Skyworks Foundation. The Cities Centre also received a dissemination grant from Homelessness Partnering Secretariat to design and deliver a symposium on ending family homelessness. The two projects worked together to leverage resources, create intersections (e.g. speakers and participant cross over between the two events) and shared outcomes. Both the National Initiative for the Care of the Elderly (NICE) and the Cities Centre partnered with Skyworks Foundation which is currently working on a four city documentary ‘Home Safe’ on Family Homelessness in collaboration with advocate Cathy Crowe. The documentary project adopts a community development approach to filmmaking by actively engaging families with experience of homelessness in the development and dissemination of the film. The first chapter premiered on the evening of the h2h exchange and closed the day’s activities, as well as provided a social space for networking. The partnering of these three events: h2h, Home Safe and the Family Homelessness Symposium benefited from common objectives, common space and cross pollination.

Other partnerships that emerged over the course of the project were with Hart House: a student centre at the University of Toronto and with the Mental Health Commission of Canada’s (MHCC) Toronto Site and Demonstration Project teams. The partnership with Hart House (where the exchange was located) allowed for enriched student participation. Also, Hart House hosted the art installations convened for the exchange during the week preceding the exchange and consequently, many more students were exposed to homeless2home. The partnership with the MHCC allowed the issues and
solutions raised during h2h to inform the proposal development for the Toronto site of the Research Demonstration Project in Mental Health and Homelessness. Homeless2home participants collaborated with the MHCC site coordinator and project team during several pre-proposal consultations. Members of the homeless2home working group and exchange participants anticipate continued participation in the MHCC project. However, activities, budget lines and ‘buy in’ for their inclusion have yet to be formally endorsed by the MHCC and Toronto project team. Nevertheless, this partnership may offer a mechanism for sustained engagement of h2h participants and for extending and scaling up the model of participatory inclusive knowledge production, transfer and mobilization initiated by h2h.

As the dissemination of the community action guide in May 2009 and the collective action planned for November 6th 2009 unfold, it is expected that the linkages to the homelessness community will continue to expand.

Section 4 - Conclusions and Recommendations

Recommendations for Programs and Policies

The following recommendations are based on the action agenda developed by h2h exchange participants and clustered according to content analysis by the working group and project team. At the end of the exchange participants collectively built an action agenda by writing down key recommendations to support housing stability and inclusion and dropping them into the sleeping bag used for the performance art. Also, more actions were put forward in response to questions on the online evaluation survey.

Program Recommendations

Program recommendations were focused on principles for service delivery and on the need to profoundly expand peer based programming.

Key principles for service delivery included that agencies provide a wide menu of supports that are: self-determined, portable, on demand (and not just Monday to Friday
to 5), individualized, and are provided in the context of developing relationships and partnership. Further, supports should be built on the strengths of the individual and be subject to periodical review to ensure that they remain responsive and flexible. Participants felt that these service principles are contingent on training and support to workers (ideally delivered by individuals who have lived expertise) that raise awareness of the residual effects of homelessness and the best strategies to mediate these effects. Client-centred housing and support is the best strategy to accommodate the unique needs of individuals across the life course and to build ‘resilience promoting’ resources that will transform trajectories of disadvantage to those of advantage.

Peer based programming was highly valued by participants for several reasons and in several contexts. Peers were thought to be more effective at outreach (especially to youth) and at other forms of support (e.g. coaching, life skills support and accessing referrals/resources). Peer programming also offered tangible benefits to the peers themselves (e.g. income, skills, as well as intrinsic rewards). Participants recommended that agencies extend peer programming to areas such as ‘training the trainer,’ mentorship programs that support individuals in navigating complex service systems and information, education and awareness initiatives that build on pre-existing informal/community networks. It was critical that these programs be adequately resourced and not just constructed as exclusively volunteer initiatives. Peer programming was understood by participants to convey multiple benefits to multiple constituencies (e.g. peers themselves, their ‘clients,’ and to program administrators who would and should evaluate the outcomes and effectiveness of peer based service delivery). Finally, peer based programming was seen as the ideal model of age sensitive service delivery—as clients would be age matched with peers.

**Policy Recommendations**

Policy recommendations made by participants focused on affordable decent housing, supports to being at home in one’s housing and community, creating mechanisms for collaboration across jurisdictions and ways to mandate meaningful inclusion in policy development and evaluation.
Strategies to expand and enhance housing options put forward by participants emphasized choice. Research has indicated that the degree of choice a person has in selecting their housing is positively associated with their satisfaction with that housing (Padgett, Gulcur, & Tsemberis, 2006; Fitzpatrick & Jones, 2005; Greenwood, Schaefer-McDaniel, Winkel, & Tsemberis, 2005). Higher satisfaction will impact whether housing is imbued with the meaning and value of ‘home’ which in turn is associated with greater housing stability. However, more than any single recommendation for action, participants championed the value and efficacy of expanding access to portable housing subsidies. A secondary strategy put forward was to ensure that any new social housing included units with mixed tenancy (i.e. market and subsidized rentals) to avoid ‘ghettoizing and warehousing’ people. Choice extended beyond location to providing different housing and support models across the continuum of independent to supportive housing. Another housing related strategy put forward was to remove any policies (e.g. in the Social Housing Reform Act and local social housing priority streams) that drive people to qualify for housing and services by becoming literally homeless or to adopt a ‘hidden homelessness strategy’ (e.g. such as couch surfing by women to avoid losing their children to Child Welfare). Also, participants advocated removing policies that systemically exclude people from housing such as abstinence and inconsistent and irrational age requirements.

More macro policy recommendations included demanding that the federal government act on the recommendations put forward by the United Nations to adopt a National Housing Strategy, that federal money for housing stream directly to municipalities without the requirement of matched funding but with ‘sweatering’ to ensure that the funding is, in fact, spent on affordable rental housing. Participants, also, urged the government to acquire units in condominiums thereby taking advantage of and easing the current ‘low-cycle of housing.’

Participants were absolutely clear that ‘housing first’ was a critical first step but that much more was needed for people to be at home in their housing and communities. Long-term investment in people’s well-being and inclusion (within and outside of the labour market) was advanced as necessary to realizing sustainable housing and health outcomes. Many participants felt that a foundation of wellness was critical to realizing
trajectories of advantage and urged governments to create funding for programs that enhance self-esteem, agency and well-being. A key focus was the creation of meaningful education and employment supports that include transitional income and benefit supports and significant start up funding. Participants felt that asset ceilings, claw backs of earned income, immediate adjustments to RGI levels, limited child care and employment support that offered universal training with only a few narrow options created precarious employment and precarious housing conditions. Finally, participants, as expected, called on governments (provincial but also federal through tax –based income support strategies) to raise income assistance rates and minimum wage so that people could transcend the deep poverty that makes housing instability inevitable.

Participants also called on governments to mandate that all policy frameworks outline and create budget lines for inclusive and sustained options for the input of people with lived expertise that go beyond consultation and committee work and extend to policy development and evaluation. These inclusion policies also require clear and transparent accountability frameworks so that participation is evaluated over multiple process indicators and outcomes. Participants also stressed that communications arising from policy development should include the voice of persons with lived expertise who are “too often silenced or co-opted.” Participants were savvy to the role of messaging and meaning-making in generating the political and public will for policy reform.

Another policy intervention championed by participants was to create conditions for collaboration across jurisdictions which foster a coordinated policy response to housing insecurity. In particular, support strategies that promote independence and community integration were seen by participants as requiring complex policy interventions that demand cross-cutting responses and budgeting. Collaboration was seen by many participants as a principle embedded in current policy rhetoric which lacked any real substance due to the lack of funding to nurture genuine partnerships. Finally, participants noted that lack of coordination was disconnected with the mobility of the labour force. For example, participants commented on the high rate of mobility of youth which requires that services are coordinated at a provincial level.
Inclusion Recommendations

These recommendations cross program and policy development and extend beyond to socio-cultural attitudes (whether part of tacit knowledge, community norms or media representations). Strategies for inclusion put forward by participants focused on breaking down barriers and debunking myths around the ‘homeless person,’ operationalizing human rights to housing and taking ‘action on action.’

Deconstructing the ‘otherness’ of homelessness was a critical step toward inclusion. Participants spoke of the importance of challenging any policy, program or socio-cultural context that supports distinctions between ‘us’ or ‘them,’ or between ‘deserving’ and ‘undeserving poor.’ Anti-stigma campaigns that focus on the unique trajectories of individuals who have experienced homelessness and the multiple dimensions that constitute a ‘homeless/formerly homeless person’ were suggested by many participants. Internalized stigma: “poverty consciousness” was identified as limiting community integration. Participants championed opportunities for ‘collective consciousness raising’ (e.g. in educational and cultural institutions, and in the arts and other mass mediums of communication) as critical to paradigm and personal shifts in understanding trajectories of disadvantage. Also, integrating issues of housing, homelessness, home, belonging, agency, quality of life, and employment were seen as crucial to generating broad community good will and endorsement that ending homelessness is a common good.

One mechanism to promote political and public support, suggested by many participants, was to operationalize the right to decent affordable housing. Participants called on the federal and provincial governments to formally endorse human rights to housing and to give it ‘teeth’ through Supreme and Lower Court precedents and clear interpretations of the entitlement to housing implicit in the Ontario Human Rights Code and Canadian Charter of Rights and Freedoms.

A more grassroots mechanism promoted by participants was to ‘take action on action’ to create organized resistance, effective mobilization and rekindle the social movements of the past. Central to this strategy was mass communication of the voice of
lived expertise through media outlets, websites, zines and newsletters, and more exchanges modelled after h2h.

In conclusion, h2h created a unique model of knowledge transfer and generated recommendations based on the real interface of policy and programs with the lives of people who have experienced homelessness and are transitioning toward home. The inclusion of people with lived expertise in every aspect of program/policy development, delivery and evaluation is crucial to realizing solutions to homelessness that are sustainable and move from triage to prevention and retention. Homeless2home provided clear evidence of the capacity of people with lived expertise to set the agenda and develop comprehensive, clear recommendations for action. Participants unanimously demonstrated that policies and programs can be co-constructed by multiple stakeholders but if they are not grounded in the lives and experiences of people who have lived without housing than they may fail to significantly support people as they transition from homelessness to home. Finally, participants challenged others to “find the courage to be catalysts of change rather than victims of their experience.”

**Areas for Future Research**

Overall the literature suggests that while there is some momentum in increasing the engagement of individuals with lived experience in research and project activities, it remains largely tokenistic. Future research should, as Fudge and colleagues (2007) note, document evidence-based engagement practices and processes and outcomes of Participatory Action Research (PAR) approaches so that the impact on participants, communities, knowledge production and policy and program development is fully evaluated. Although there is substantial literature on participatory or empowerment evaluation of various interventions (Fetterman, Kaftarian & Wandersman, 1996; Packham, 1998; Parry et al., 2001), very few investigate the impact of PAR *itself*. Research and identification of promising practices in inclusion research is also essential to replication in different contexts.

Participation by individuals with lived expertise necessitates innovations in compensation. Even though honoraria have historically not adversely impacted
participants’ income assistance, h2h participants have reported that housing and income administrators have begun to demand reporting. Also, the dispensation of honoraria promotes distinctions between paid project team member and unpaid (but minimally compensated) project members. Many h2h participants suggested that a project (and funder) support a pilot where participants receive equitable payment (i.e. through hourly wages or salaries) but that these monies would not be subject to earned income claw backs for the term of the project. Such a pilot would provide a context to evaluate the impact of accumulated income on transitions to the labour market and to quality of life, which may supply evidence of the scaffolds required to transcend poverty and exclusion. Another pilot proposed by participants was that of self-directed individual funding for support packages modelled after disability care packages available in the UK where recipients can choose how to spend their funding whether through private, public or informal care providers.

Another suggestion put forward by h2h participants is that researchers work with funders to include people with lived expertise (and evaluate the impact) in the development of research priorities, the review of proposals and the development of research proposals supported by consultants who would provide various expert technologies (e.g. research methodology by academics). If the research agenda continues to be set by academics, foundations and bureaucrats it may not reflect the needs of the homelessness community.

Finally, the challenge of sustainability and scope remains a central weakness of participatory initiatives, including this project. An ad hoc working group convened for project activities lacks structural ties outside the project cycle. Actions and strategies for mobilization are likewise limited by the project time lines and budgets which do not accommodate the time and monetary resources required to engaging and building relationships with policy-makers. As Roe and colleagues (1995) have suggested, knowledge mobilization should be explicitly included from the onset of the project so that legislative calendars and other key policy-making opportunities can be accommodated. El Kalache, Moriah and Tapper (2005) found that a common thread linking successful community-led initiatives was the presence of a strong organizational base supported by local agencies or municipalities. Future, research requires greater
funding and support to formalize and evaluate project groups that are constructed as
eighbourhood councils or civic panels with institutionalized ties to local government, so
that the knowledge produced is effectively transferred and mobilized.
Section 5 – Bibliography


Section 6 – Appendices

Appendix A  A Sample of Communication Materials: information sheet, event invitation, press release and newspaper article in the Toronto Star
What is homeless2home (h2h): H2h is a participatory community exchange utilizing the immense practical knowledge of people who have experienced homelessness. The “experts” at this exchange are individuals of all ages who know first hand what it is like to live without a home. The format and content of the exchange have been developed by a team of formerly homeless youth, younger and older adults. Exchange participants will include: people who have experienced homelessness, people who work with and for them, people who design the programs and policies, and people who do the research. The team will challenge participants to generate fresh ideas and commit to solutions to break the cycle of homelessness. The exchange will also include installations by local artists and arts-informed projects addressing homelessness. Participants will be invited to close the day by attending the reception and premiere of Home Safe Calgary: a documentary chronicling family homelessness.

Who will be there: Approximately 100 individuals from in and around the GTA will be invited to attend this free one day event: November 6th, at the University of Toronto. The exchange is for people who are committed to taking action so that “Housing First” becomes “home at last.”

What support is available for peer participants: Formerly homeless participants will receive a $50.00 honorarium, travel/transit expenses (prepaid return train or bus tickets for people outside of the Greater Toronto Area and local transit for those within the GTA), lunch and refreshments.

How to get further information or be added to our invitation list: If you are interested in attending the exchange please contact the project team at (Phone: 416-978-7323/5616; to ensure that your name is added to the invitation list.

Onsite registration on the day of the exchange will not be possible.

The h2h exchange is a project of the National Initiative for the Care of the Elderly (NICE), Institute of Life Course & Aging, University of Toronto. The project is funded by Homelessness Partnering Secretariat, Human Resources and Social Development Canada.
Press Release: November 4, 2008

Moving from “Housing First” to “Home at Last”

Finally, people who know what it’s like to live without a home will have a forum to use their “lived expertise” to build solutions to keep people housed.

“For the majority of people who we have interviewed in our research projects, homelessness is NOT a once in a life time experience,” says Julia Janes Director of Community Outreach and Projects at the Institute of Life Course & Aging University of Toronto. Julia maintains that “we have many reports that speak to the magnitude and context of homelessness in Canada. But we need to move from knowledge generation to knowledge exchange and mobilization. And, if we are not working along side of people who know first hand about homelessness than we are missing out on a valuable source of expertise.”

Homeless2home: A Community Exchange, to be held this Thursday November 6th, was designed and will be delivered by a team of formerly homeless youth, younger and older adults. The community exchange marks a step forward in recognizing and engaging people who have been homeless in generating solutions to break the cycle of homelessness. Robert Fitzgerald, a member of the project team, hopes that “homeless2home will created an agenda for further action and encourage others to use the strengths and “social capital” that have come out of experiences of homelessness to inspire action to end homelessness.”

As Robert, and everyone else connected with the homeless community, knows “we need a National Housing Strategy that begins with creating more affordable rental housing.” “However, as we work within a context of scarce housing options we need to ensure that the few who do find housing keep their housing. Our team believes that we need to think about supporting people in being at home in their housing and their communities. Only then, will we reduce the risk of cycling back and forth between inadequate housing to homelessness.”

Connie Harrison, another member of the project team, “knows what it is like to live without housing, live in housing but not what it’s like to feel at home.” She, and others fortunate enough to access the scarce supply of subsidized housing, “want more resources and opportunities that she can direct - not programs designed by people who assume they know what’s best for her.” On November 6th, Connie, Robert and other people who have lived without housing will tell service providers, policy makers and advocates exactly what it will take to support people in creating a home.
One of the delegates brought along a sleeping bag. He stretched it out and fell asleep whenever the proceedings bored him. Another lost his train of thought at the microphone, apologized, and said he might have to go back to his shelter for his medications. A third, clean after years of cocaine use, urged others to follow her example, but added proudly that her addiction had never impaired her sexual performance.

Hart House, the cultural nucleus of the University of Toronto, has hosted some odd events in its 89-year history. But even by its bohemian standards, last week's gathering of 120 homeless and formerly homeless people was extraordinary.

It was called Homeless2Home. That all-day session was organized by the Institute for Life Course and Aging at the university to tap into the knowledge of the "experts" on homelessness – people who have lived on the streets, battled addictions and mental illness, trudged from one emergency shelter to the next. Two rules prevailed: No labels and no judging.

The program was developed by a team of six formerly homeless people, guided by Julia Janes, the institute's director of community outreach. "We're looking for solutions today and we're going to move them out into the community," Janes promised.

Despite the imposing surroundings and their skepticism that anyone cared what they thought, the delegates contributed freely.

The day began with lessons from the street.

Ron Craven, who had been addicted to drugs and alcohol for 10 years before getting permanent housing, described how hard it was to adjust to life in an apartment. "At first, I hated it," he said. "It felt claustrophobic. I couldn't sleep for more than an hour at a time. Now I'm up to three or four hours."

People need help to stay housed, not just get housed, he said. The temptation to return to the streets can be overpowering.

Chris Bedwell, a young man who admitted he'd made some bad choices, began by expressing his gratitude to the outreach worker who had saved him. Without her, he said, he'd probably be dead.

But he'd been placed in a senior's residence. He hated the rules, the routines, the loneliness. "I'm lucky to have a place, but I don't know if I can last," he said.

Stacey Bowen, who admitted she had lied, cheated and connived to feed her crack addiction, said it is misguided to put people with substance-abuse problems in housing and hope it will work.

"I came so close, so many times, to losing my apartment," she recounted. "I needed someone to pay my rent (out of her welfare cheque) before I could use the money for drugs."
All three anecdotes challenged the notion that building affordable apartments – or subsidizing private ones – will break the cycle of homelessness.

For the next four hours the delegates broke into small groups to talk about the causes of homelessness: parental abuse, spousal violence, eviction, a workplace accident, mental illness, drug and alcohol dependence.

Their frank exchanges offered a glimpse into a world most Torontonians (even housing advocates) know little about. It is a place where social workers are resented and feared. It is a place where scamming the system is accepted; it is a matter of survival. It is a place where women fight desperately to hang onto their children. It is a place from which there often seems no escape.

At the end of the day, the delegates reconvened to pool their ideas. They ranged from rental assistance to anti-racism training for welfare caseworkers.

Now Janes and her six-member team will sift through all the suggestions and set priorities. Those will become the focus of a community action campaign.

It won’t be a typical lobbying blitz, with a statistic-laden research paper and a long list of recommendations. “We’ll probably use postcards,” Janes said.

It is too early to tell whether the unusual blend of academic inquiry and grassroots advocacy will produce policy changes. But the day was a success in its own right. Barriers toppled. Stereotypes were cast aside. People left Hart House feeling that their voices mattered.

*Carol Goar’s column appears Monday, Wednesday and Friday.*
Appendix B    Select List of Participating Organizations

Aboriginal Homelessness Services
Advocacy Centre for Tenants Ontario & Tenant Duty Counsel Program
Affordable Housing Office, Metro Hall
Alliance to End Homelessness (Ottawa)
Another Story Bookshop
Atkinson foundation
Barrie Housing Support Services
Barrie Housing Support Services c/o Simcoe Community Services
Canada Mortgage and Housing Corporation
Canadian Association of Gerontology
Carleton University Geography and Environmental Studies
Central Neighbourhood House Street Survivors
Centre for Social Innovation
Christie Heights Centre
City of Toronto Public Health
City of Toronto Drug Strategy Secretariat
Cities Centre University of Toronto
Colour of Poverty Campaign
Community Link North
Community Social Planning Council of Toronto
South Simcoe Community Information Centre
Daily Bread Food Bank
David Busby Centre Trinity Anglican Church,
Department of Occupational Science and Occupational Therapy University of Toronto
Ministry of Community and Social Services, Province of Ontario
Eden Community Homes
Eva's Initiatives
Family Services Toronto
Federation of Canadian Municipalities
Federation of Metro Tenants’ Associations
Gateway Men’s Shelter
George Cedric Metcalf Charitable Foundation
George Herman House
Georgian Triangle Housing Resource
Habitat for Humanity International
Faculty of Medicine, University of Toronto
Centre for Addiction and Mental Health
Home for Life
Homeless Emergency Link for People (H.E.L.P.)
Homes First Society Administration Office
Houselink Community Homes
Housing & Homelessness Supports & Initiatives Metro Hall
Housing and Homelessness Umbrella Group (HHUG)
Housing Help Centre of St Catharines & Thorold
Human Resources and Social Development Canada
Homelessnessnation
Homelessness Partnership Initiative
Institute of Life Course & Aging, University of Toronto
Outreach Communities – Ontario
Income Security Advocacy Centre 425
Interfaith Social Assistance Reform Coalition
Kitchener Downtown Community Health Centre
Legal Aid Ontario
Mainstay Housing
Ministry of Municipal Affairs and Housing
Na-Me-Res (Native Men’s Residence)
NOW magazine
Office of Fairness Commissioner, Province of Ontario
Older Women's Network (OWN)
Ontario Coalition for Social Justice
Ontario Disability Support Program (ODSP)
Ontario Federation of Indian Friendship Centres,
Ontario Institute for Studies in Education University of Toronto
Ontario Non-Profit Housing Association
Ontario Seniors' Secretaria
Ontario Works
Orillia Housing Resource Centre
Ottawa Alliance to End Homelessness
Parkdale Activity and Recreation Centre
Parkdale Community Health
Parkdale Community Legal Services
Faculty of Social Work University of Toronto
Scarborough Housing Help
School of Social Work Atkinson Faculty of Liberal and Professional Studies
Senate Committee on Social Affairs, Science and Technology
Simcoe County Alliance To End Homelessness
Sistering
Skyworks Foundation
Social Network Planning Network of Ontario
Social Planning Council Kingston & Area Room of One's Own and Peer Support
St. Clare's Multifaith Housing
St. Michael's Hospital Inner City Health Research Unit
St. Stephen's Community House
Street Haven
Street Health
Street Kids Survivors Inc
Supports to Encourage Low-income Families (SELF)
TD Economics
The Canadian Mental Health Association Toronto
The Dream Team
The Globe and Mail
The Marcus Garvey Centre for Leadership and Education
The Salvation Army Gateway
The Wellesley Institute MultiFaith Alliance to End Homelessness
Toronto Central LHINs
Toronto Christian Resource Centre
Toronto City Summit Alliance
Toronto Community Housing
Toronto Disaster Relief Committee
Toronto Enterprise Fund
Toronto Harm Reduction task force
Toronto Star
Touchstone Youth Centre
United Way of Greater Simcoe County
United Way Toronto
University of Ottawa Institute of Population Health
University of Manitoba
Voices from the Street
The Wellesley Institute
Wigwamen Incorporated
WoodGreen Pape Neighbourhood House
Woodgreen Wellness - Adult Day Program
YMCA Sprott House
YWCA Canada National Office
Appendix C  Case composites
Youth Case Session #1: Alahandara’s Story

The young woman stood at a crossroads: Down one path, she faced a seemingly endless road of struggle to face alone, and the alternative was all too clear! She would continue to feed an substance abuse issue with self-humiliation by the hands of the sick and immoral. She would simply fade away until nothing was left but a pitiful husk, a shell of a human being.

Years had passed since Alahandara could remember being thrown from her home and family. Money had been tight, and as the oldest of three siblings, the 16yr old was turned out without adequate ID, and into a world she could have never fathomed. As a devout Catholic, the young Hispanic teen turned to a priest who could counsel her on what to do and where to go. A list of shelters fell into her hands, and once again she was left to her own devices. The shelter system was a terrifying experience. Alahandara was miserable, her belongings had been stolen, and she never felt safe. Her ambition to find a cheap apartment and work quickly disintegrated as depression invaded her small reserve of hope. She was left waiting months until her new card would arrive in the mail, and thus the standstill.

Nearly 2 months later, an acquaintance invited her to stay in an abandoned building she had found. Alahandara accepted, and from there on, called the building home. It was dank, rotting, and terribly drafty. The lodging offered no electricity, no heat, and no plumbing. The building reeked of stale sweat, cigarettes, and liquor. As the weeks turned to days, and days slipped into months, a year passed by without hardly any notice. During her stay, there was no food to be found, no place to sleep without being trampled upon, party after party, and there had been no peace. No quiet! No escape! … Coping, if you could even call it that, led to a brief period of experimental drug use. A habit soon forced Alahandara to work on the streets to support herself, and her new dependencies. As time passed slowly by, Alahandara’s body had weakened, she hardly slept a wink, and if she ever could, credit could only be given to a quick fix.

Soon, nearly 2 years had passed after leaving the shelter system. Her Identification sat waiting for Alahandara to pick up, but now she didn’t feel as though she could return to work and a “normal” way of life. There was an addiction to feed; she was frail, sickly and battered. Some bruises can run far deeper than the flesh, and none nearly as painful as those inflicted by your own self. She felt defeated and that there was no hope in sight!

Eventually, an overdose led to hospitalization, and a one-way trip to a detox programme. During her stay, she met a woman who inspired her to try one last time at turning her life around, but all Alahandara’s body craved for was one more toke, or nothingness altogether. As miracle had it, she persevered.
Upon release, she faced that old crossroads. There was so much she faced. So many decisions she dreaded making. Alahandara was afraid! The only housing affordable to her was smack dab in the center of where all her troubles began. The poor are clustered together in hovels that breed discontent and despair. She was returning to her old world. People knew her face, knew her story, she couldn't bear to think of facing them. If she wanted out, did she have to abandon everything and everyone, isolate and be alone yet again?? What to do?

Youth Case Session #2: Daniel’s Story

21 years old, in the prime of his life, and utterly miserable. Sanity is a precious thing, but for a fellow who has been rejected, abused, and discriminated against, 21 yrs old isn’t young, it’s a lifetime of sorrow. From a young age, Daniel knew he was different from the other boys in school. He faced a problem rooted far deeper than his own insecurities. What do you do when your community casts you aside as an outsider? Where do you go? Who can you turn to? His small community left deep emotional wounds he couldn’t lick while on the battlefield, so he left for the big city. Convinced his sexual orientation would be overlooked amidst the throngs of 1000’s, Daniel moved to Toronto. “No small minded, small town boons there”, he convinced himself.

Now fast forward, if you may, to a small apartment shared with two other young men. Their home planted deep amongst a community of slums. Classy compared to nights of lying underneath the stars, huddled in piles of soggy sleeping bags amidst the city’s debris. But, as life would have it, you can’t run away from your problems. Day after day, Daniel degenerated into an emotional catastrophe. His only source of solace could be found strewn across his crumbling attempt at a new life, the bottle. Left unchecked, his poor mental health and low self-esteem led to a snowballing rage, only calmed when he was filled with enough liquid courage to feel as though he could protect himself. Although it became increasingly evident to the young man that he had a problem, Daniel couldn’t face A.A. Meetings. He felt threatened and uncomfortable with the other members. He felt that they didn’t understand him and that they never would. Soon Daniel stopped attending altogether.

An eviction notice forced Daniel to seek new housing, but he was unable to find landlords willing to accept him without any references. Daniel nearly went to his family for a contact number of a good reference, but he couldn’t, he wanted nothing to do with his traitorous brood, so Daniel sought a housing worker. Daniel’s worker was a narrow minded woman who would chastise him for his seemingly ‘lack of motivation’. She refused to take his inability to deal with the world or even himself into account. As far as she was concerned, the young man had no excuse; he had all the time in the world to find an apartment. (Not when every waking moment is haunted by prejudice, and personal unrest, he didn’t.) Daniel was quickly running out of time. He dreaded the streets even more than he despised his own sorry existence. Why couldn’t his worker be more supportive? Why were drop-in centers (who advertised themselves as “safe zones”) lacking safety as far as he was concerned? How was he supposed to deal with
the constant ridicule and abuse he received based on his sexual orientation? Where would he go now?? He detested the fact that housed, or not, he was verbally and physically tormented by ignorant people. Why must he now sleep outside and be treated like a criminal because he hadn’t a bed to call his own? It’s too much!!

Without self-esteem, who can build a life… a home…or a future? But who cares anyway? It’s not our problem, unless of course we live in a community. Aren’t we accountable to each other?
Younger/Middle Case Session # 1: Harvey’s Story

Harvey is in his late 40’s and spent the previous 10 years working as a semi-skilled labourer. He worked to drink but got up every day to go to his job. Harvey was what some people call a “functional alcoholic”. As a child, Harvey experienced sexual abuse by a man in his neighbourhood. He was young and didn’t understand what was happening to him so he told his mother. His mother told him to stay quiet about the abuse because she was afraid Harvey’s father would kill the man and then the family would be left without a father and without any money. Harvey’s mother and father drank a lot and fought a lot and paid little attention to Harvey. It seemed that everyone else ignored Harvey, too.

In fact, right from the beginning he was neglected. Story was that when he was a baby he was taken to the hospital with bruises and with signs that he was starving. He was dropped and had some kind of brain trauma that persisted over the years. No one at the hospital did anything about Harvey’s situation. No one at school or anywhere else noticed that Harvey was suffering abuse and neglect. Harvey was one of those children who fell through the cracks.

As an adult, Harvey drank to forget all of this pain from childhood. It worked most of the time but when it didn’t he thought very seriously about suicide. Finally, he realized the drinking wasn’t working much at all so he told his story to the police who charged the man from his neighbourhood who abused him. Memories rushed in to Harvey’s mind and he was in shock. Harvey was from a working class family where they didn’t talk openly about their troubles. If people knew about the abuse they avoided him or called him a “homo”. His life spun out of control. He was evicted and went from a shelter to detox and back again.

Harvey tried attending support groups but was asked to leave because he was too angry. He was given a grab bag of diagnoses including schizophrenia and post traumatic stress disorder and a lot of meds to go with them. Sobriety programs weren’t working for him and mental health programs required that he was sober in order for him to receive treatment.

Harvey had been with some women over the years but his pain would get the best of him and when he drank and got angry he took it out on them. He got lucky and married a woman who took him off the streets. However, the pain continued and so did the drinking and eventually he hurt her, too. She charged him. She went to the Crown with a list of things such as medications that she demanded be court mandated so that he could get the help he needed. He came back to her but kept drinking. Without the drinking there wasn’t much to fill the void. Since he left school in grade 8, his employment options were limited.
Things improved but none of the treatment programs helped. He needed something to do. He volunteered; he took a few courses and inched forward. He got a lawyer and got some criminal compensation for his abuse. He had a roof over his head but not much more. As it had been all his life, his housing was insecure and unsafe but leaving subsidized housing seemed impossible. He couldn’t afford it and he couldn’t afford to lose the health benefits of ODSP as he could not afford his meds. Even if he could find a job his worker might think he was no longer “disabled enough” and withdraw his benefits. The money provided by ODSP allowed him to just barely pay the rent and feed himself. He feels stuck but has learned to live in a system that lets him just barely survive.

Younger/Middle Case Session # 2: Marsha's Story

Marsha is a middle-aged, Native woman. Past horrible experiences have resulted in her seeing her Native community as corrupt and dangerous. She has four children: three who live primarily with their father and one boy with severe disabilities who lives with her. This boy's father is abusive and estranged. Marsha spends a tremendous amount of time and energy assembling a patchwork of services and supports to improve her son's quality of life. There is very little in the way of coordinated services for her son and a great deal of discrimination, shame and devaluing of a single mother with a severely disabled son. Marsha’s family is of no support to her or her son.

Marsha receives ODSP and some support for the care giving she provides to her son but she they still claw back her National Child Benefit Supplement. The money doesn't go far but she stretches it. Marsha lives in constant fear that the money will not stretch far enough and that child welfare will take her boy away from her. The workers insist that Marsha go to court to fight for child support from her son’s estranged father but the last time Marsha attempted to secure child support her estranged husband threatened her with violence. Marsha’s worker tells her that she thinks she can’t take care of her son and that he should go to a group home. Marsha is terrified of losing him and begins to “gift” the worker with art that she has inherited in an attempt to ensure that the worker will not take her son away.

Marsha feels helpless, hopeless, afraid and is constantly hyper vigilant to her surroundings. Marsha keeps a “bug bag” packed and available at all times just in case she has to quickly “bug out” of a situation. She has survived years of instability, insecurity and fighting the system. Many experiences with workers and agencies have left her suspicious and afraid of further agency involvement.

Marsha is sexually assaulted by a security guard at her housing unit. She immediately sees her doctor to find out if she caught anything and to get a morning after pill. She told the doctor what happened and he suggested she seek therapy. She told a friend what happened and they suggested that she call the police and get counselling from a wife assault agency. Marsha is not able to do any of the things that have been suggested to her as she is focused on getting out of her current housing unit so that she
does not have to face the guard who assaulted her. Counselling is a luxury that will have to wait.

Marsha is afraid to tell her worker about the assault because her worker is friends with the security guard and Marsha is afraid that her worker will not believe her. In fact, Marsha is sure that if she told her worker about the assault that her worker would silence her with another threat to have her son taken away. As for the police, she has seen how they “help” poor Native women and believes they will ignore her complaint or worse.

Marsha does the only thing that makes sense and moves out of her building. She would like to move somewhere where she could be invisible and where the streets and halls are a little bit safer. No luck. No affordable options. Marsha ends up in insecure housing and eventually a shelter. With no more options, Marsha voluntarily places her son in a group home. Her son is safe, but with him went her hope and her heart. She cycles in and out of insecure housing and shelters. When she feels safe enough she gets drunk to ease the pain of her past and the pain of losing her son. She cuts herself as a way of “purifying” herself from her “bad Native blood.”

Finally help comes in the form of an invitation to visit with a friend. Marsha finally has time to be “normal” and leave the crazy cycle of despair she has been living in. Now that she and her boy are safe she is able to access counselling – mainstream counselling, not Native – to make sense of all that has happened to her.

When she returns she channels her loss into fighting the systems that let her and so many others down. But there are other battles for her to fight – cancer, poor mental health, finding work or money to return to school so she can leave her inadequate public housing. Jobs, school and better housing are out of reach for Marsha now yet she works tirelessly as an activist until something opens up. She wonders why politicians and citizens will not commit to providing basic housing, food, health care and education for everyone as a basic entitlement of being human.

Younger/Middle Case Session # 3: Hermine’s Story

Hermine is in her late 20’s. She came from St. Vincent about 5 years ago and still does not have status. She has had 3 children from 3 different fathers. She thought that she might get married and get her status through a husband but each time she got pregnant they left her without child support and without status. They all know that she will put up and shut up because she is afraid they will reveal her illegal status and get her deported.

Hermine makes ends meet just barely by babysitting in the “underground economy”. The family she works for knows that she is illegal and outside of the protection of labour
laws. They pay her a very low wage and allow her few days off knowing that the threat of deportation will keep her coming back and silent. Her kids are in a private daycare and all her money goes to their care and to paying her rent. She is constantly moving from one over priced apartment or rooming house to another in an effort to find a school that will keep her kids. The schools want ID to enrol her kids. Though she is able to stall them for a little while, the administration eventually insists on ID. With no ID she has to pull the kids out and look for another school.

She lives in constant fear of deportation and stays under the radar and away from any supports or services that might help her. If she is deported, her Canadian born kids will stay in Canada – maybe even have to go live with their fathers. Hermine has been through a lot in her life including abuse in past relationships. She has experienced a lot of loss, fear and stress but nothing compares to the threat of losing her children.

The stress of moving from place to place and dragging her children from school to school is getting to her. She has dark bouts of depression. She feels like she can’t trust anyone and that everyone uses her illegal status to exploit her. Her children are suffering too. They have no stability, no consistent home or school and no sense of belonging anywhere.
Older Adult # 1: Robert’s Story

Yesterday, as I sat on a bench in Parkdale smoking a cigarette, a fellow sat on a bench beside me and asked for a smoke. I gave him one and told him my name. He thanked me and told me his name was Joe. Silence for a minute or two. When I looked back at Joe, I noticed he was trembling and crying. So I said, “Joe, what’s wrong? How can I help you?”

He replied that he was homeless again. I asked how this came to be and he told me. He said he had had an apartment for the past 5 years, it was subsidized, he is an ODSP recipient and he is 58 years old. He has cancer and there is no cure. When his cancer flared up, he was in the hospital for 3 months. He said he found out his rent payment had been stopped while he was in hospital, and his landlord told him he was evicted. The nurses at the hospital told him the only thing they could do for him was to send him to a nursing home. He said he’d rather die. They had no other options for him. When he left the hospital, he had no home to go to and no belongings. He knew he could go to a shelter but he said he would rather be on the street – he would never feel safe at there. So he said he’s back on a waiting list for housing. How long that would take, he didn’t know.

I found Joe’s situation very unfair, and if this happened to him, it must be happening to others. Hell, it could happen to me. I’m in the same position as Joe. I too live in subsidized housing, I too have incurable diseases that could cause me to be hospitalized. This opened up a whole new fear for me.

There has to be a change made to this part of the system so that these things don’t happen. I mean, look at Joe. Here is a man who is older, with an incurable disease, who through no fault of his own has become homeless again. His health situation can only worsen. Now because he is homeless, he can only get the personal allowance part of his income and he is suffering greatly.

It must have been terrible for Joe, being in the hospital for 3 months, knowing all the time he would be homeless upon release from the hospital. It was time for me to go. I said good-bye to Joe and wished him well. I felt really upset I could not help him. I went home; I thought of my own situation and wondered if this is how my own life would end.

Older Adult Case Session # 2: Elena’s Story

Elena is in her late 50s and has struggled for years with poor mental health. She has an obsessive compulsive disorder and bulimia which drive her to steal food or buy and binge on junk food. Her son used to live with her and supported healthier eating habits. When he moved out, Elena’s housing provider wanted to move her to a one bedroom apartment. This would mean that her son could not stay over and shop and
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cook for her any longer. Without his support she would risk jail or hospitalization. She approached the housing management to request that she retain the 2 bedroom because it was critical to her health and welfare. However, she was overcome by endless rules and regulations that would force her to give up her 2 bedroom apartment.

Luckily, Elena’s doctor and son intervened successfully (armed with legal documentation from the criminal courts outlining the extreme importance of her son’s presence in keeping Elena out of trouble with shoplifting). Elena was able to keep her larger apartment on the grounds of needing the extra room for her care giver. Having this support has enabled her to go out in the community and “give back” to others who are struggling to be healthy and stay housed.

Despite her son’s help, Elena’s health deteriorates and she gets so weak that she has to use a walker. During these times she feels trapped. The building she lives in has no ramps and only has grab bars in the designated 11th floor “disability” units. She has requested that the landlord install grab bars in her unit but they have told her that she has to request a disability unit on the 11th floor. She doesn’t want to move to another floor and the wait list for the units is long. She can stay put for now but as she ages, she worries that she won’t be able to live independently and will loose her housing.

Fear of loosing her housing has also kept her from getting the treatment she needs to get well. OHIP will pay for her to go to the U.S. to a special eating disorder hospital which has a 3-6 month program to help people get more control over their eating issues and feel healthier. It is a great program and Elena believes it would make a huge difference to her well-being. However, if she were living in a hospital for 3 to 6 months ODSP would cut back on her shelter allowance and without that her rent would be unpaid and she would be evicted.

Older Adult Case Session #3: John’s Story

John lives in Six Nations Brantford. He works on and off at low paying casual jobs that give him just enough money to rent a room in his auntie’s house. He has wanted to be a woman for as long as he remembers and believes that inside of his male body is a woman’s spirit. At the age of 63 he started going to a Toronto clinic to begin the process of making his body match his spirit. He has started to notice some changes in his body from the hormones he has been taking. To be considered for sexual reassignment surgery, John must dress and live with as a woman for 2 years. His auntie is okay with his changing body and women’s clothing, but her boyfriend hates it and is rude and sometimes abusive to John.

John looses his job and cannot find work because people don’t want to hire a native, let alone a native with some facial hair and small breasts. Afraid to live with his auntie and her boyfriend any longer, he resorts to living in his car. A friend suggests that John try to get ODSP, so he goes to a local doctor and explains his situation. The
doctor reluctantly agrees to fill out the paperwork. At the next visit, John shows up in a
dress and the doctor freaks out, but at least John has the paperwork for ODSP.

John decides to go to Toronto to be closer to the Gender Identity Clinic. During an
appointment at the clinic, John’s car is towed. A worker at the clinic suggests a few
shelters. Dressed as a woman, John decides to try a women’s shelter. The other
women are very uncomfortable having John at the shelter and some become angry and
abusive. John dresses in men’s clothes and tries a men’s shelter. Because of the
physical changes in his body from the hormones, some of the men become angry and
abusive and John has to leave.

The next day John goes back to the clinic and the worker finds him a place in a
rooming house. John is afraid to use the bathroom for fear that other tenants will see his
changing body and become angry and abusive towards him. At least he is finally
receiving ODSP which lets him scrape by and with the drug benefits, access better
quality hormones. He wants to find his own place so that he can have privacy, but it is
difficult to find something he can afford. Even when he does find a promising lead, he
has to make sure to dress like a man so that landlords will not discriminate against him.

John is hoping that he will qualify for sexual reassignment surgery soon as his
65th birthday looms around the corner. Once he turns 65 he will be transferred from
ODSP to the Canada Pension Plan, and he is concerned about accessing the hormones
he needs through CPP. The more expensive but safer hormones are probably not going
to be covered by the drug benefits offered through CPP, and he is worried about how he
will get them after he turns 65.
Appendix D     Program for the Exchange

Welcome to a day of animated discussion and action.
We hope to hear from as many voices as possible and work together to create and commit to actions that will keep people housed and support them in being “at home.”

If you need assistance during the day please locate a person wearing a black t-shirt with an imprint of homeless2home.

Please note that the dots and stars in the program correspond with the map of Hart House that is included in the folder.

Please respect that we are not recording (audio or visual) the day’s events and if you wish to do so you must seek consent from all the individuals involved. Note taking and flip charts will be used to capture ideas but they will not indicate names or affiliations. We hope to create a space for straight talk and active listening.

ACKNOWLEDGEMENTS

This exchange was developed and delivered by a group of smart, compassionate and committed people who also happen to know what it is like to live without a home. Many, many thanks to:

Robert Fitzgerald
Connie Harrison
Malia Robinson

Inge Preston
Marcia Jarman
Nat Tesfa

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And to our flexible, fantastic project team and supporters – thanks for embracing the chaos!

Mandi Hickman    Nina Carlton    Chris Bedwell    Kim Hinton
Dana Howse      Julia Janes      Stacey Bowen    Becky McFarlane
Michel Jones     Anthony Lombardo  Rae Bridgman    Gabriella Micallef
Andrea McPhail  Lynn McDonald    Desmond Cole    Michael Shapcott
Gly Prokos      Susan Murphy    Ron Craven       St. Christopher House
Lysena Bertoli  Lyn Rock         William Easter  - The Meeting Place
Naomi Wilson    Susan Gapka      Youth Artists from SKETCH
Brittany Persaud
Jacinta Cleary
Melissa Van Wert
Ali Kilbourne

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PROGRAM – NOVEMBER 6TH, 2008

9:00 – 9:30  REGISTRATION & BREAKFAST
Second floor Rotunda
& South Dining Hall
Welcome to the forum! Please help yourself to breakfast and check out the community resource station and graffiti mural. Please note that the Expenses and Reimbursement Table will be open until 11:15.

9:30 – 10:00  INTRODUCTION & OPENING REMARKS
Music Room

The Project Team: Inge Preston, Connie Harrison, Marcia Jarman, Malia Robinson, Robert Fitzgerald, Nat Tesfa and Julia Janes, will welcome participants and outline the day’s activities and objectives.

10:00 – 11:00  FACILITATED DISCUSSION
Music Room

Panel: Chris Bedwell, Stacey Bowen, Rae Bridgman, Desmond Cole, Ron Craven, Susan Gapka, Michael Shapcott, Kim Hinton and Gabriella Micallef
Facilitator: Lysena Bertoli

The panel will address:

- What works and what doesn’t work to keep people housed?
- What more is needed to feel at home in your housing and community?
- What is happening and NOT happening at all three levels of government?
- What is the big picture of homelessness and where are we going?

11:00 – 11:15  MORNING BREAK & REFRESHMENTS
South Dining Hall

Help yourself to some refreshments. Please feel free to check out the Community Resource Table and have a look at the art in the downstairs hallway next to the Porter’s Desk.
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11:15 – 12:25pm	 MORNING BREAKOUT SESSIONS

Committees Room

**Youth Case Session #1: Alahandara’s Story**

A formerly homeless youth will facilitate a dialogue using a case composite written and informed by her own experience/experience of people she knows. Issues to be discussed include: *substance use, loss of ID, lack of integration of services.*

**Facilitation:** Malia Robinson & Julie Maher

Board Room

**Middle Age Adults Case Session #1: Marsha’s Story**

Two formerly homeless middle age adults will facilitate a dialogue using a case composite written and informed by their own experiences/experiences of people they know. Issues to be discussed include: *alienation, abuse of power, leaving an abusive relationship.*

**Facilitation:** Connie Harrison & Marcia Jarman

Meeting Room

**Older Adults Case Session #1: Robert’s Story**

Two formerly homeless older adults will facilitate a dialogue using a case composite written and informed by their own experiences/experiences of people they know. Issues to be discussed include: *fear of losing benefits, getting older and getting evicted.*

**Facilitation:** Robert Fitzgerald & Inge Preston

North Dining Room

**Session: Building Collaborative Partnerships towards Successful Housing Models**

What does collaboration & partnership mean to you?

What does it look like in your agency, housing and/or community?

How do you promote diversity and inclusion within your housing/community?

What are the key factors in successful collaboration and partnership?

**Facilitation:** Kim Hinton & Gabriella Micallef
Music Room

Session: Innovations in Moving the Message

Participants are invited to discuss innovations in getting the message out and inspiring people to act! Speakers' Bureaus, Arts-informed advocacy, film, web mediums, painting, collage, participatory research & protest – what makes them work?

Facilitation: Linda Coltman, Becky McFarlane & Ester Nwanga of Voices from the Street

12:25 – 1:25pm  LUNCH & DETERMINATION OF UNSESSIONS
South Dining Hall

Please help yourself to the buffet. You are welcome to seating in any of the exchange rooms. Activities over the lunch break include:

- nominate a topic for an unsession in the afternoon
- the media presentations in the Music Room (courtesy of Homeless Nation and Ron Craven)
- the community resource station – share information with your peers!
- add a thought or image to the graffiti mural
- check out the art in the downstairs hallway

What are unsessions?

Unsessions are open sessions that will be determined by participants during the day of the exchange. They are intended to allow all participants an opportunity to contribute to the day’s agenda. Anyone who has a burning question or issue of interest that they would like to discuss (and hopefully co-facilitate) can nominate a topic for an unsession and see if there are enough interested participants to make it a go. If you would like to nominate an unsession or attend one please see the instructions below.

How can you nominate or participate in an unsession?

If you are interested in suggesting a topic for an unsession please ask for assistance at the community resource station in the rotunda. Individual(s) who nominate a topic will be asked to help facilitate the discussion.
If you are interested in **joining** an unsession please indicated your interest by adding a dot to the unsession you would like to attend (posted at the community resource station).

Topics that have the most dots will be selected.
Nominations will be collected up until 1:15pm.

Unsession topics & room locations will be announced at 1:25pm in the Music Room and will be posted at the community resource station.

**1:30 – 2:40pm  EARLY AFTERNOON BREAKOUT SESSIONS**

Committees Room

**Youth Case Session #2: Daniel’s Story**
A formerly homeless youth will facilitate a dialogue using a case composite written and informed by her own experiences/experiences of people she knows.
Issues to be discussed include: *moving to big city to escape small town, safety of drop-in centers, discrimination*

**Facilitation:** Malia Robinson & Julie Maher

Board Room

**Middle Age Adult Case Session #3: Hermine’s Story**
Two formerly homeless middle age adults will facilitate a dialogue using a case composite written and informed by their own experiences/experiences of people they know. Issues to be discussed include: *immigration status, underground economy, exploitation*

**Facilitation:** Connie Harrison & Marcia Jarman

Meeting Room

**Older Adults Case Session #2: Elena’s Story**
Two formerly homeless older adults will facilitate a dialogue using a case composite written and informed by their own experiences/experiences of people they know. Issues to be discussed include: *informal supports, public housing and the older person*
Facilitation: Robert Fitzgerald & Inge Preston

North Dining Room

Unsession #1
To Be Determined (TBD) – posted at the community resource table

Music Room

Unsession #2
TBD – posted a the community resource table

2:40 – 3:00pm       AFTERNOON BREAK
South Dining Hall

   Please help yourself to refreshments in the South Dining Hall. Visit the
community resource station, add something to the graffiti mural, and
check out the art if you haven’t already.

3:00 – 4:10pm       LATE AFTERNOON BREAKOUT SESSIONS

Committees Room

Session: How Residents/Tenants Can Make Recommendations to Improve
Shelters & Housing
This session is a linking event with our partners at the Cities Centre who are
hosting a symposium on ending family homelessness that is taking place on
Friday November 7th. The peers from the Diverse Family Homelessness Project
will work with participants to draft recommendations to improve shelters and
housing for women and families.
Facilitation: Peer Researchers from the Diverse Family Homelessness Project

Board Room

Middle Age Adult Case Session #2: Harvey’s Story
Two formerly homeless middle age adults will facilitate a dialogue using a case
composite written and informed by their own experiences/experiences of people
they know. Issues to be discussed include: lack of intervention at early age, supports for people struggling with both poor mental health and substance use

**Facilitation:** Connie Harrison & Marcia Jarman

Meeting Room

**Older Adults Case Session #3: John’s Story**

Two formerly homeless older adults will facilitate a dialogue using a case composite written and informed by their own experiences/experiences of people they know. Issues to be discussed include: service gaps for trans people, transition from ODSP to Pension Plans

**Facilitation:** Robert Fitzgerald & Inge Preston

North Dining Room

**Unsession #3**

To Be Determined (TBD) – posted at the community resource table

Music Room

**Unsession #4**

TBD – posted at the community resource table

4:10 – 4:45pm  **CLOSING DISCUSSION & REFLECTION**

The Project Team and other members of the sessions are invited to reflect on the day’s sessions:

- What are the key supports needed by youth, by middle aged adults and by older adults to end the cycle of homelessness?
- What is common, what is different & how do things connect across the life span?

**CALL TO ACTION**

What do you think needs to happen to end the cycle of homelessness?

On the index card provided in your folder please write down:

One concrete step that can be taken to address the cycle of homelessness
We will use your ideas to create an advocacy campaign.

Please drop the suggestion off with the volunteers on your way out.

Thank you very much for engaging in this important dialogue!
Appendix E   Evaluation Summary

Homeless 2 Home Participant Evaluation Survey Summary

Method

The survey was available on “Survey Monkey” and exchange participants were emailed the web link so they could complete the survey online. One participant completed the survey by telephone interview. 44 responses were collected which is 50% of the participants at the exchange (excluding project team and affiliates).

Survey participants identified themselves\(^{10}\) as:

- 45% lived experience or formerly homeless
- 0% currently homeless
- 36% service providers
- 36% advocacy and/or activists
- 14% policy person(s)
- 23% researchers

Overwhelmingly, the feedback from the survey was positive. Perhaps, the most powerful testimony to the impact of homeless2home on participants is that a full 90% reported that they would attend another exchange like h2h.

Why and How People Participated

More than 80% of the exchange participants attended the full day. Those who could not attend the full day said this was due to work and personal commitments. People attended the exchange for a variety of reasons including: the opportunity to share lived experience, the topic is related to their work and general interest and a desire to understand the issues of homelessness.

In terms of how representative the exchange participants were of people affected by homelessness, many participants said they would like to have seen more youth participation, including youth who have direct experience with the criminal justice system. Other groups that were felt to not have adequate representation included: single

\(^{10}\) Some people identified themselves as part of more than one category; therefore the numbers do not add up to 100%.
men, Aboriginal people, people with lived experience who also struggle with serious mental illness, representatives from housing groups and co-op’s, newcomers and immigrants, current substance users and politicians.

Access, Barriers and Participation

Eleven people (25% of respondents) reported difficulties accessing the event or encountered barriers once they were at the event. Of those who experienced difficulties the most common challenges were reported to be: that Hart House was difficult to find, that the space was difficult to move around in and that more signs directing people to rooms and washrooms would have been helpful. Some participants explained that barriers to participating in the day were that some people “hogged” the speaking time and did not allow for all voices to be heard. Some found the schedule for the day confusing and thought “better organization” by the h2h team would have been helpful. Overall, the majority of people felt that there were opportunities for everyone to participate and that their voice was heard and their concerns were addressed.

Case sessions

Approximately three quarters of the participants found the case sessions useful. Some participants commented that this part of the day was well organized and that hearing personal experiences was helpful in understanding homelessness.

A Selection of Quotes Regarding the Case Sessions:

“They gave actually life experiences and situations that happen and it was good to hear people’s responses and future solutions.”

“They case sessions were useful in understanding the unique situations that people found themselves in. It was helpful to figure out where things went wrong and how these situations could be solved.”

“The sessions were okay...I enjoyed them, but I found that not much was accomplished. We didn’t make that much progress.”

Unsessions

Most of the participants (90%) understood how to participate in the unsessions. The process of nominating and voting on topics was confusing for a small number of participants. Many people thought it was a good way to choose the topics and liked the
“democratic approach”. Participants provided constructive feedback about how to improve the unsessions in future.

A Selection Quotes Regarding the Unsessions:

“Should have been presented in the morning so people had more time to get ideas in.”

“Would have been better if more was organized before the day.”

“Success of unsessions is contingent on a very skilled, trained facilitator.”

“Voting options could have been posted more clearly or announced to get more voters.”

“Good idea, but the process wasn’t conducive to nominating/voting.”

“Would have been better if participants could have read something in the package about how to complete the voting and nominating.”

Quality of Recommendations

Many participants felt that too much time was spent on discussing the problems instead of creating solutions. The majority of the comments stated that we need to develop an action plan instead of focusing on the problems with services as people are tired of hearing about the problems repeatedly. Some suggested that it would have been helpful if all the ideas from each session could have been pulled together and presented at the end of the day. Many people were able to make new connections with people that they plan on keeping in contact with and learned about resources they were not aware existed before the exchange.

Quotes Regarding Recommendations:

“Too much time seemed to be spent on presenting the problems and not enough time was allowed for problem solving.”

“Some good strategies were put forth but it is always difficult to follow up and ensure things actually happen, there seemed to be quite a bit of disconnect and bureaucracy as barriers to cooperation.”
“I thought the comments were productive and well articulated. Nevertheless, a number of the same systemic issues which are highlighted in countless numbers of reports were reiterated.”

Suggestions for Effective Advocacy

- Focus on advocacy of increased minimum wage so people could afford housing
- Use formerly homeless participants to create a media campaign to raise awareness of the needs and issues homeless people face
- Posters
- Peaceful protests
- Meetings with politicians
- Practical advocacy
- Make links to current economy and homelessness, tell people that it is possible to end up homeless if you lose your job (it can happen to anyone)
- Get advocates more involved
- Stop focusing on building housing and opening shelters (they don’t solve the problem)
- Hold smaller meetings on a regular basis
- Support and become involved with the provincial/municipal efforts to coordinate housing and homelessness programs through community based service delivery
- Build places strictly for the homeless
- Go to political forums
- Fight for reform with Ontario Works and Streets to Homes (more effective)
- Advocate for housing that addresses the needs of people without homes
- Create strong alliances between service providers and those with lived experience so we can approach government together
- Continue researching and reporting

General feedback about the event

- More of these exchanges need to be done
- The day was interesting and informative
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- Extend from a 1 day exchange to a 2 or 3 day exchange
- More pre-event organizing was needed
- People needed to be reminded that we were working on an action plan
- Great idea to have voices of formerly homeless heard
Appendix F  Community Action Guide

Please see the attached pdf which is a sample spread of the homeless2home community action guide. The final will be available online and in print May 2009.