

Lookout Emergency Aid Society

Providing solutions to homelessness



Annual Report

35th

June 2006

Lookout Emergency Aid Society Program Reports

April 1, 2005 – March 31, 2006

Karen O'Shannacery
Executive Director

June 26, 2006

Report to the Board

Thirty-five years of providing solutions to homelessness.... It is humbling yet a rewarding service that Lookout provides, and I personally am in awe of staff who are dedicated to providing the non judgmental, flexible service that has been our hallmark, and the reason for Lookout's success. Our service has been recognized by our colleagues, by the housing and service community, by our funders, and by those people who rely upon us for service and has put Lookout in the forefront of service delivery to the homeless. They now have special names for the model of services we provide and fought to maintain over the years. "*Client-Centred*" means that the service is driven by the needs of the person, a fundamental philosophy throughout our Society. "*Housing First*" describes moving people directly from the street or shelter into permanent housing, with any services needed/wanted, following. Lookout is proud that through offering our minimal barrier, permanent housing, we've been able to see the majority of people successfully transition to more stability, and a happier and healthier life. Sadly, while this is recognized as a 'best practice' solution to homelessness, we see the funding for the essential support attached to the housing being eroded. Rising energy, staff and supply costs have outstripped the funding, making us ever more reliant on astute money management and our very welcomed, sustaining donations. In this, we thank our donors for their very active support: not just providing much needed cash and in-kind donations (clothing, furnishings, time) but also through sharing their expertise – the North Shore Shelter is an exemplary case in point: Soroptimist funding helped complete the furnishing of the building, a member did the interior designing and the club, plus spouses & friends continue to volunteer time, bring in donations and fundraise, all to ensure the shelter remains a place offering opportunities for change & open 24/7.

Thirty-five years ago we operated nights-only from the Patricia Hotel; within a single hotel room we had two beds, two rollaway cots and a large closet. We had an outreach team combing the streets and alleys looking for people who needed shelter. In the early years Lookout didn't seek to expand – our goal, as today, is to end homelessness – do ourselves out of a job. We spent time assisting other agencies establish or expand their services, and now in turn benefit from others partnering with us, making our services a truly collaborative effort. Lookout now offers **516** beds, **68%** of which are transitional/permanent housing, a drop-in centre and an outreach team of 10 and span 3 municipalities. The 164 shelter beds, including 45 cold weather seasonal beds, are foremost when most think of Lookout. Yet we are proud to state that shelters comprise of **32%** of our beds: proud because shelters are an essential band-aid in a responsive caring community, are still the principal first touch, the bridge to permanent solutions. However they are not the solution – permanent housing is the solution, with appropriate supports– and our statistics prove it! We opened in 1971 because people were dying of exposure in the streets. Today, the numbers of absolute homeless have increased significantly; the **March 2005 Homeless Count saw an overall doubling of the homeless in three years, with most of this increase being the street homeless population, which has more than tripled over the past three years. There were almost 800 more street homeless counted in 2005 than in 2002. The challenge is that the demographics of the homeless is changing, the working poor are fully 20% of our shelter users, and still rising. The lack of affordable housing for them to move to is at a critical stage. Our transitional housing residents are similarly tested: once they get their feet back under them, where do they go?** Many apply for our permanent housing, but are ineligible as our housing is for people who have no alternatives. A conundrum: because they are all homeless. And nominal numbers of affordable housing are being built with the abandonment of a housing supply program by both senior levels of government... More homes are needed, not the slicing & dicing what exists differently.

Everyone who works at Lookout is continuing the dedication to do better for the homeless; to find the way to solutions. Working to improve and strengthen our services, to be even more responsive, more connected to employment & skill training services to offer additional opportunities for people. We have many volunteers who contribute to service delivery, without them we couldn't function. I am proud to be part of the team so caring and determined: despite all of the challenges, despite the uncertainty of funding for day services for the North Shore Shelter, despite the frustrations of trying to fabricate case plans in a void, the staff are incredibly effective at what they do, and achieve the work in good humour, despite the trials. The majority of shelter users don't come back to the shelters, the majority of housing residents do flourish in the housing, and because of the awesome collaboration with other resources (housing, treatment, rehab, finance... the list goes on), we are finding that with a little bit of help, understanding, problem-solving and time, the majority of our clientele find themselves no longer homeless.

This is something to celebrate in a major way, here in our 35th year.

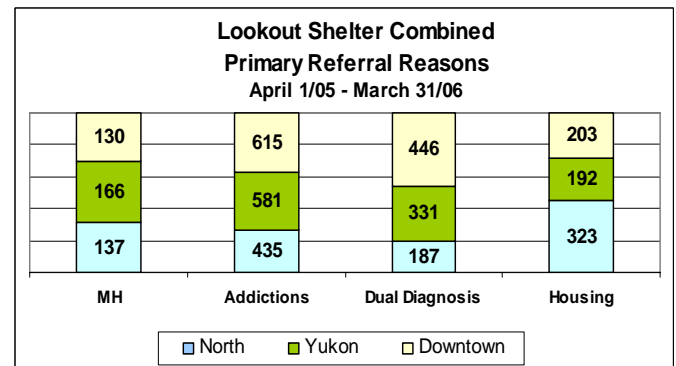
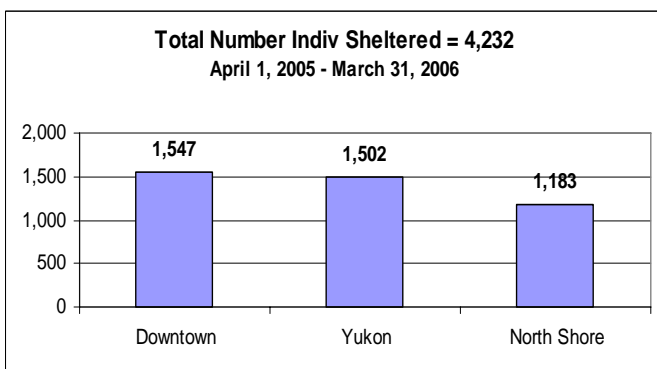
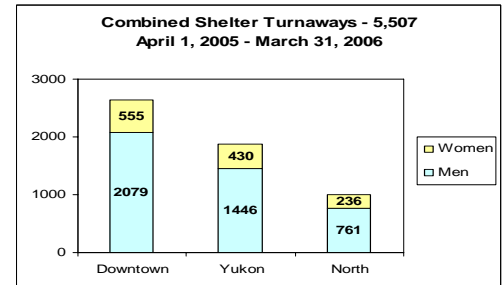
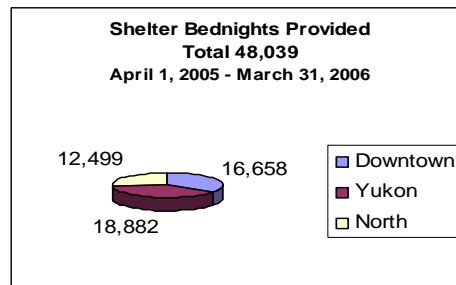
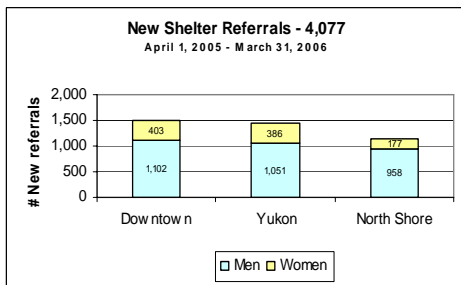
LOOKOUT'S EMERGENCY SHELTER PROGRAMS 2005 2006

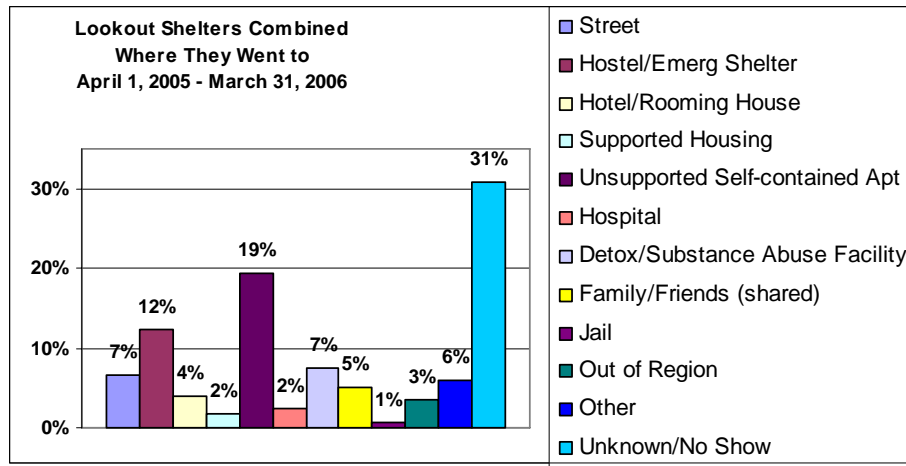
Lookout's emergency shelters continue to be in high demand especially for the 24-hour, minimal barrier services that we offer to those who cannot be housed elsewhere. Our three shelters located in two municipalities (City of North Vancouver and Vancouver), provide minimal barrier temporary accommodation (107 beds) with support to adult men and women who are destitute and have no housing alternatives. Two of the three shelters (Yukon and North Shore Shelters) expand bed capacity during the winter months.

In addition to shelter, residents are provided three meals per day, snacks which address nutritional deficits, laundry, access to clothing, showers, hygiene supplies and a free phone and computer. A minimum of two staff are on duty at all times to meet the health and safety needs of all within the building. Non judgmental, caring staff work with each individual, giving support and addressing issues of housing, finances, treatment (e.g. mental, physical, addiction), etc., through crisis counselling, case planning and referral/liaison services. Lookout's intent is to provide shelter in the individual's home community, integrating with local services and to help people regain stability in their lives.

Our shelters housed 4,232 individuals, including new referrals of 4,077 men and women this past year, providing 48,039 bednights. Overall turnaways remain at an unacceptable level, with 5,507 being turned away. This is down from last year (6,082) which we attribute to our expanded shelter capacity. These numbers are not just a reflection of general shelter need, but also of the need for minimal-barrier, accessible housing and services designed and staffed to successfully house individuals coping with a variety of challenges.

The health risk to shelterless people is immense: they develop a lower immune system, eat poorly, have a higher frequency of contracting infectious diseases and respiratory ailments and are at higher risk of turning to alcohol and drugs. The long term effect of homelessness is a reduced life expectancy and a heavy user of health delivery services. The result is not only devastating to the individual, but the cost on the health care system is significant.





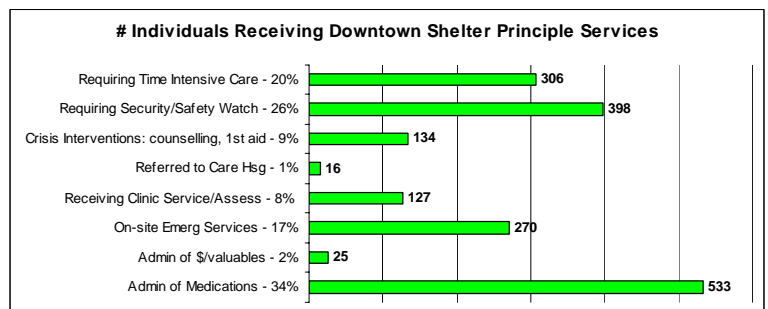
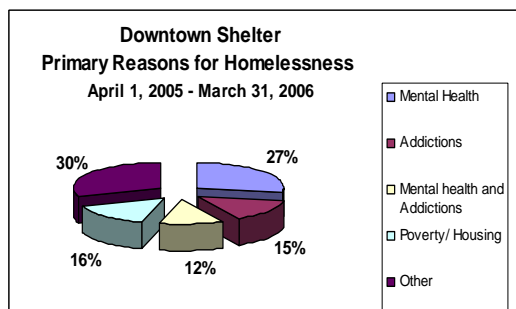
Downtown Shelter

This year we provided **6% MORE** bednights (**16,658**) than compared to five years ago (**15,700**), but due to much longer stays (average **10.7** days vs. **6.7** five years ago), we actually served **400 FEWER** people. This **26%** decline of the numbers of people we have served is a serious concern to us, especially as we recorded **2,634** turned away (note: many times we are not able to record who or how many at one time we are turning away) compared to **1,433** just 5 years ago. We see greater difficulty for people to find housing, greater numbers who are homeless and seeking accommodation, and we see the elevated levels of need in shelter users.

As our shelter does not work in isolation from the other shelters, in this community (of other agencies) or where Lookout has been able to expand, we are both appreciative of the extra capacity that have come into being over the past five years, and are acutely aware that despite that expansion, we are still seeing increased numbers of people actually on the street. People in crisis for accommodation can still find us as we intend to be – a safety net when all else fails. A changing trend to note is that nearly twice as many (**13% vs. 7.7% five years ago**) are coming to us after residing with friends or family, and **66% vs. 58%** are referred by some other involved agency or resource. Those who are able to access our beds through other agencies or advocates, or even just call and arrange a bed by phone are gaining our help ahead of those who may have the same or greater need but who may not have the privilege of a phone or service.

This trend is demonstrated through our statistics: we were able to shelter people walking in off the street only **34%** (or 519 people) vs. **42%** (or 842 people) five years ago. More significantly, for those who are actually living on the street, we have fallen from serving **29% (556 people 5 years ago)** to only **14% (207 people last year)**. *This is less than half the number we used to take in directly off the street at a time when we know there are far more people who are absolutely homeless.* Regrettably, in turning 1,200 more people away per year, those without even the resources to call us, or who may be living rough on the street are the likeliest to lose out when our beds are minimally available.

We are not choosing to serve those off the street any less – but our work this past year has not been ‘homelessness as usual’. As a key element in Vancouver’s social ‘Safety Net’, we are seeing not only the increased numbers of people who need a place to stay, but higher levels of needs that people are facing. These higher levels are evident in the profile of referral reasons of people needing accommodation here.



One factor of our services that has also significantly increased is our support to our region’s hospitals. Five years ago, **14% or 279** of our referrals came from hospitals, with this now growing to **21% or 317** people. Significantly, only **49** people had been ‘inpatients’ of the hospitals before coming to us this past year, where **5** years ago **145** of those **279** people had been inpatients. That we are getting so many referrals from the hospitals of those who were not ‘inpatients’ might be indicative that we still need to find community solutions to alleviate the demand often discussed in the media of over-strained Hospital emergency rooms. In terms of need, the factor of ‘medical

Lookout's Emergency Shelter Programs 2005/06

'need' has greatly increased in the profile of those we serve, being 890 individuals with medical issues vs. 581 in 1999-2000. We strongly advocate the development and support of community responses to health needs, such as the Downtown health Clinic, the Public Health Nurses (who visit and assist us 365 days of the year!) and were profoundly disappointed with the loss of the roving 'Health Van'. The team of nurses coming daily to assist us are serving 29% of the people staying here, far above the numbers we used to see get service only by going to clinics five years ago.

Five years ago we were able to see twice as many people get into detox or recovery programs as we did this past year (**108**) vs. 54 in 1999-2000). This decline is not for want of attention: the access system has been overhauled and changed with 'Access One' – but again, in the face of all good intent to serve, there is simply a lack of capacity to meet the needs people have for A&D treatment. We also saw twice as many people move from the shelter into supported housing (**105 vs. 52**), and again, while in the past five years there has been some welcome additions in the field of supported and transitional housing which is very critical to assist many of our clientele to move toward independent living, the needs continue to outstrip the capacity to meet.

Finally, while we often don't know where people who just leave end up (that's now 39% of people leaving us), five years ago we saw only 28 individuals (1.5 %) leave us that we knew went from us to stay on the street. This past year, we knew 102 people, 7 percent of the people leaving our shelter, went to stay on the street.

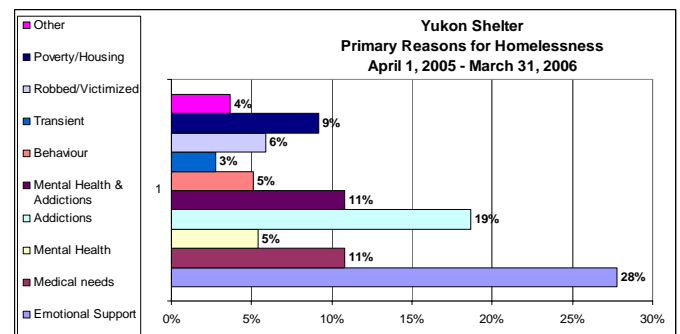
Yukon Emergency Shelter

Yukon provided **18,882** bednights to **1,502** individuals at **95%** occupancy. The vacancy rate is caused by gender mix or special needs issues. At times, unusual in these days, we run without a referral! This is a positive comment on the development of more shelters elsewhere. There is a difference between the season (cold wet weather) shelter and the year-round; the **37** year-round beds housed **835** individuals staying an average of **15.1** days a **23%** increase over last years 11.6 days. The Cold/Wet Weather shelter opened mid-October through March with **35** beds, thanks to increased funding from BC Housing. In the Cold Wet Weather dorm we housed a total of **602** individuals who stayed in the shelter for an average of **10.3** days, up **17%** from 8.6 days last year.

Despite the expansion of shelter beds, we still turned away **1876** people in search of beds: down significantly from the **3,484** turnaways recorded last year. This indicates the continuing lack of resources especially outside of the Downtown Eastside available to people who otherwise may not utilize the shelter system. Many shelter users refuse to use the resources in the Downtown Eastside (where the majority of the resources are located) for fear they would be at higher risk in that area. Some have indicated that they would rather sleep in the park or in an alley than go to the Downtown Eastside.

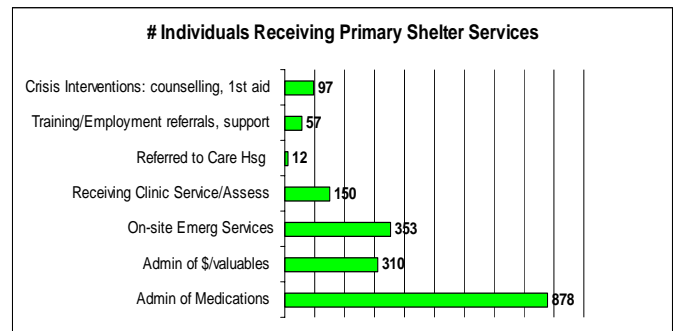
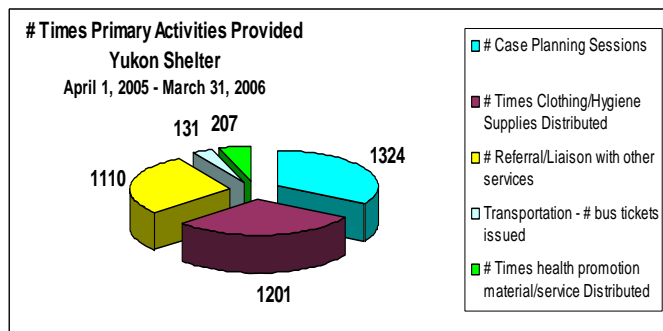
While on the surface this speaks to the need for greater numbers of minimal barrier shelter beds, increasingly the issue is the lack of affordable housing with appropriate supports. Lengths of stay are increasing as they struggle to match income to rent. Although residents still report mental health and addiction issues as primary reasons for referral, we are seeing increasing numbers of working poor who primarily are faced with poverty and housing issues. Almost **24%** of new residents arrived at the shelter with no source of income which becomes confounded by the wait times to receive income assistance. As a result, working jointly with the Ministry of Employment and Income Assistance (MEIA), a new program is being piloted where the application process for initial applicants is completed at the shelter. This enables a 'fast-tracking' of shelter users to the MEIA system. An evaluation of the effectiveness will be conducted this year to see if the lengths of stay reduce.

For the working poor, their stays remain long as it sometimes take months to save up both the damage and first month's rent, therefore leaving fewer beds available for those still living on the streets. If more appropriate housing was available, it would allow many of our shelter users to leave the shelter system behind, never to be seen again – a definite success in the sheltering community!



Lookout's Emergency Shelter Programs 2005/06

Assessment of needs and case planning are both critical to successfully providing solutions to homelessness. In this, **1324** case planning sessions occurred, and **1110** referrals were made to other services to facilitate access, including **290** individuals (**19%**) being connected to mental health services. This ability to assess needs, case plan and provide the linkages to services, contributes to a low return rate to the shelter.



In addition to the activities above, we provide 3 meals per day, plus snacks. Last year we served **56,646** meals, we do not count snacks. We are able to meet special dietary needs of the residents, such as those with diabetes, allergies, compromised immune systems, or simply to meet religious or cultural needs.

This year we have seen improvements in the area of addictions counseling. Through a closer working relationship with Raven Song, we now offer weekly appointments in-house with an addictions counselor and residents have greater support when they go to Raven Song. Although improving slightly, it is still extremely difficult to arrange in-house mental health assessments and follow-ups, meaning we must send residents to Downtown shelters to receive appropriate mental health services.

Access to required medications continues to be a struggle as the only option remains the Downtown Health Clinic for free medication. Many of our residents are fearful of returning to the Downtown Eastside where they feel very vulnerable and at risk. Despite this, we end up referring many to that area in order to access the psychiatric and medical services. Another challenging area is transportation. As Yukon is not located in the primary resource area of Downtown, our residents often require bus fare to be able to attend their appointments. As we can only provide bus tickets when we receive them through donations, and these are restricted to financial or medical appointments only, we continue to rely heavily on SafeRide to transport our residents to and from important appointments.

We thank our wonderful volunteers; they work as a team with staff to meet the needs of our clientele and keep our Centre a welcoming place to receive service. Our staff continues to provide exemplary service, as our annual satisfaction survey reported. Kudos' to the staff! Yukon receives significant in-kind support and would like to thank all of our donors. Through them we are able to provide residents with such basics as clothing, blankets, linens/pillows, personal hygiene supplies (shampoo, conditioners, soap, razors, etc.), furnishings for the service as well as residents to use setting up new housing, equipment (e.g. used computers), office supplies and bus tickets. We are also supplied with free needles, condoms, crack pipes and other health promotion items. We receive a rent subsidy for a resident from a UBC student body. The Dental Association supplies toothbrushes and toothpaste. Hotels, Quest & Food Runners donate tonnage of food stuffs.

North Shore Shelter

This will be our first full year of operating in our brand new housing development; our Shelter opened on January 07th 2005 while the Transitional Housing, co-located with the shelter, opened mid April 2005.

The Shelter provides the North Shore adult homeless men and women with 25 beds and expands by 20 Cold Wet Weather beds during the winter-months. In addition, as part of the local Extreme Weather Response, we also offer up to 15 "overflow" mats - with additional capacity through a satellite site at North Shore Neighbourhood House.

This first year of operation in our new building has been one of celebration, but also of significant and on-going challenge. The uncertainty of funding for day time shelter services and the lack of day funding from June 30 to Oct 15, 2005 resulted in the shelter being closed between the hours of 8 a.m. and 8 p.m. There are no alternate day services on the North Shore and despite closely working with the service community, most notably Harvest Project, St. Johns Church, North Shore Crisis Services Society and the Salvation Army, these men and women had no choice but to 'hang out' on the local streets, or travel to Lookout's Vancouver resources. Joining the ranks of the existing bidders, some shelter residents undoubtedly spent their days 'trolling' the alleys searching bottles or recyclables which could be sold for food and other basic needs. Our neighbours, who have been genuinely warm and accepting, found this increased street presence unacceptable thus undermining the good relations built over the last five years. We are working continually to secure sustaining day funding, assisted by our neighbours and the rest of the service community.

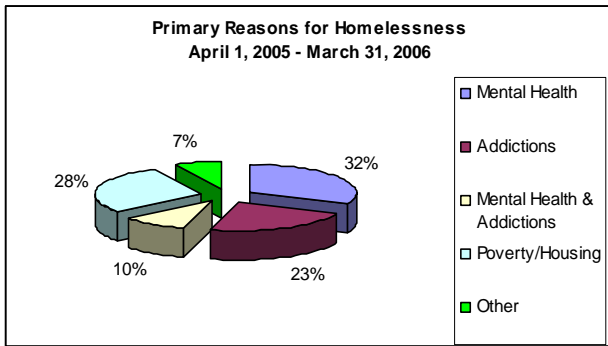
**Lookout's Emergency Shelter Programs
2005/06**

We are also working with the neighbours to identify issues and common strategies to address the concerns of this community. In this, the City of North Vancouver has provided funding for a part-time community liaison worker whose primary task is to identify issues and rebuild good relations with our neighbours. While we at Lookout recognize homelessness is on the increase in all communities in the GVRD, the North Shore is only becoming aware of their local issues. Lookout is proud to be part of the North Shore Homeless Task Force which spearheads the local plan to addressing homelessness.

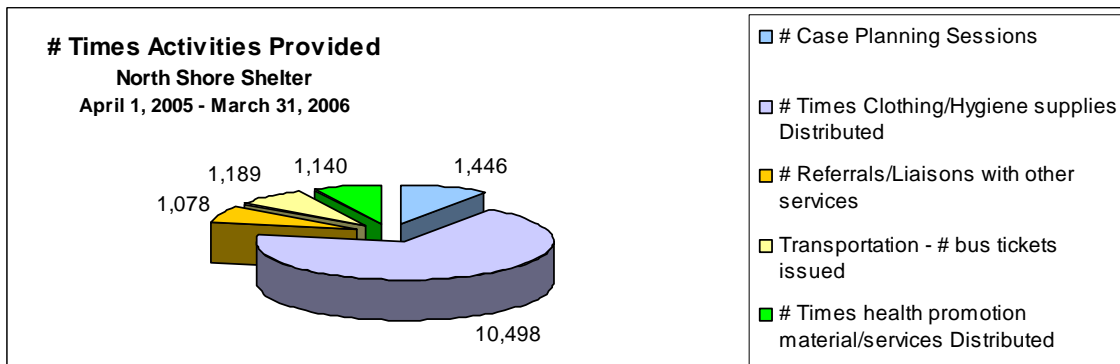
Despite the funding uncertainties, the North Shore Shelter's occupancy remained high (**98% average**) and housed **1,183 individuals**, of which 1,135 were new to the shelter and 48 carried over from the past year. We provided **12, 499** bednights of quality services.

People are service restricted or barred if they put others at risk or are so disruptive that others cannot receive appropriate service. **63** such individuals were turned away last year, many of whom camp outdoors. This has created angst & conflict in the community in how to address the issues of poverty, public toileting, addictions, etc. It impacts the public, municipal staff, RCMP, businesses, etc. Much blame for this visible aspect of the absolute homeless is directed at the shelter as it is seen by some, to be the cause of homeless people coming to the North Shore. We know that this is not true because of reports completed by the health authority, or the homeless counts. It is hoped that working with the Task Force, the local service providers, the municipalities, the RCMP and the community that a coordinated and humane response will be developed to address this unacceptable situation.

People camping out are willing to come in during times of extreme cold, usually when combined with dampness and a wind-chill factor. For the second year, key agencies on the North Shore collaborated to run a local Extreme Weather Response (EWR) as part of a regional safety plan. The EWR is a partnership between North Shore Crisis Service Society (NSCSS), Harvest Project, ourselves and the City of North Vancouver's North Shore Neighbourhood House. The EWR is called daily based on weather conditions by the co-coordinators (Maureen Gabriel of NSCSS & myself). It was called on 14 separate occasions from November through February and housed an average of 5 people per night for a total of 71 bed nights. Excluding the EWR, of the **1,183** persons housed, **783** were newly taken into the regular shelter, of whom **174 (22%) were women**. In the CWW dorm style bunk room, **352** new referrals were taken in, all but 3 of which were women. (Note: For their comfort & safety, the CWW women were housed by adding additional beds to the regular shelter). 48 individuals carried over from the prior year.

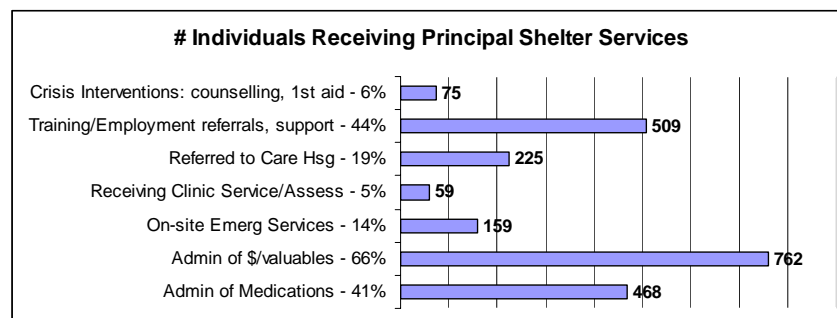


The primary reason for people coming to the shelter was mental illness, followed by addictions and those with both health issues. **186** individuals (**16%**) were evicted from the prior accommodation, many for inability to pay rent. These numbers reflect the need for minimal-barrier, accessible housing and services designed and staffed to successfully house individuals coping with a variety of challenges.



Lookout's Emergency Shelter Programs **2005/06**

The greatest needs for those using the North Shore Shelter remain addiction services, financial aid and affordable housing. 25% reported no source of income and 23% reported working. Many required a bed, packed lunch, bus tickets, showers and laundry services to support their work goals and to try to save funds to pay for their first and last months' rent while working for a nominal wage. Housing and appropriate community resources are very difficult to locate on the North Shore and no residential addiction treatment facilities exist. Outpatient services are stretched to the limit with lengthy waitlists. The supportive housing that exists has long waitlists. We find ourselves referring to other communities in order to meet needs. This created our biggest crisis: a number of individuals with funds could not find affordable local housing. We permitted them lengthy stays to save, search, apply, etc. but they were unsuccessful, yet refusing to move 'off-shore'. Their expectation was they could stay as long as they needed local housing; we had to repeatedly reinforce that the shelter was for the destitute, and that while we supported them finding local accommodation, if they needed to temporarily leave the North Shore to Vancouver, Burnaby, New Westminster or elsewhere, that they would need to do so. Unfortunately, numbers of people found unsuitable housing, either sharing accommodation with strangers to make the housing affordable, or moving into housing that was inappropriate. The result was that 25% of shelter residents returned within three months, a very high return rate. However, the majority were unable to afford market rate accommodation, especially on the North Shore.



We continue to develop partnerships and work closely with members of the North Shore Community, meeting regularly with the North Shore Task Force, health and social service agencies, community and faith groups, etc. We have not held our one year anniversary party to thank all of our partners and volunteers; the following groups have shown exemplary support to this project: the Soroptimist of North & West Vancouver, North Vancouver Kiwanis Foundation, the Rotary Clubs of the North Shore, Blankets Canada, Quilters Guild, We also would like to especially thank the crew at the North Shore Salvation Army, and the continued support from the Harvest Project. Additionally this year, we have had the support of the Har El Congregation as well as St David's united church that have been providing a monthly meal for shelter residents. Further, Maureen Gabriel greatly assisted with the Extreme Weather Programme as did many volunteers from within the community while Dan Meakes from St John's has initiated some highly successful back-to-work programmes with shelter residents. Each of these individuals/agencies profoundly assisted in the provision of basic services whether it was food for people to eat during the finishing of the building, or through assessments and referrals to specialized services. We thank you all, for without you we would not have been able to do it!

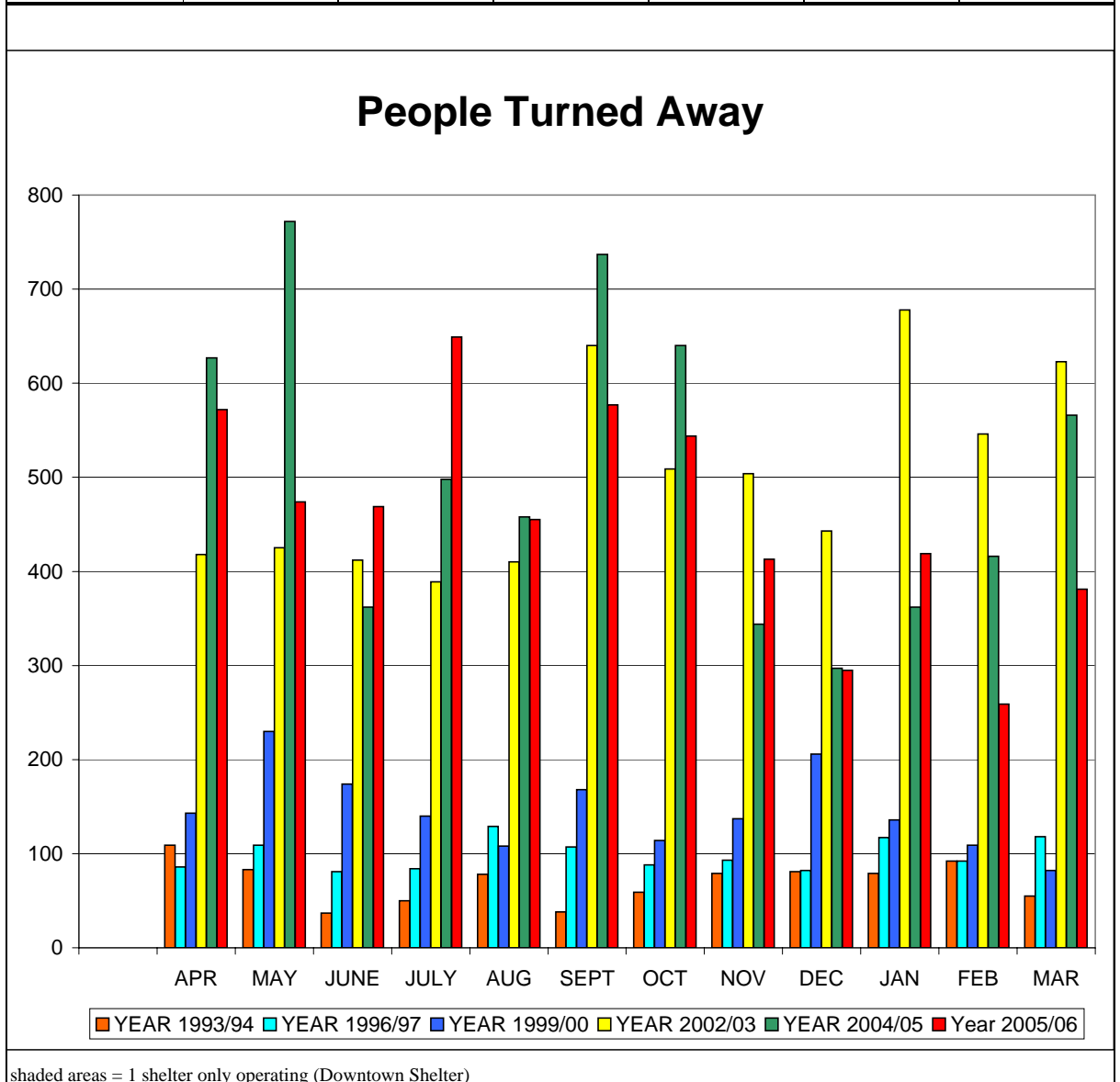
Our operating funding has been a major influence on all of us who work and live at the shelter. We were extremely hopeful that we would have funding at the end of March to provide 24/7 services until the next Cold Weather season was upon us. Although the will seems to be there, we are now on our second monthly extension to provide daytime resources for the disenfranchised and homeless members of this community. Throughout these ups and downs, the residents, and especially the staff, dealt with all the stress with aplomb, dignity and professionalism.

Thank You to all North Shore staff, past and present, who have put in so many volunteer hours, personal commitment and endured so much to ensure the success and continued operation of this project; it certainly has been a test of our mettle.

LOOKOUT EMERGENCY AID SOCIETY SHELTER TURNAWAY EXPERIENCE

By Fiscal Year (April 1 - March 31)

MONTH	YEAR	YEAR	YEAR	YEAR	YEAR	YEAR
	1993/94	1996/97	1999/00	2002/03	2004/05	2005/06
		initiate add'l winter only shelter		Yukon permanent shelter opens		NS permanent shelter opens
APR	109	86	143	418	627	572
MAY	83	109	230	425	772	474
JUNE	37	81	174	412	362	469
JULY	50	84	140	389	498	649
AUG	78	129	108	410	458	455
SEPT	38	107	168	640	737	577
OCT	59	88	114	509	640	544
NOV	79	93	137	504	344	413
DEC	81	82	206	443	297	295
JAN	79	117	136	678	362	419
FEB	92	92	109	546	416	259
MAR	55	118	82	623	566	381
TOTAL	840	1,186	1,747	5,997	6,079	5,507
BED CAPACITY	15,330	24,022	23,495	34,988	37,730	49,323



LOOKOUT'S RESIDENTIAL PROGRAMS 2005 - 2006

Lookout provides a range of housing to adults, from highly supported transitional housing to independent housing with supports. Our goal is to assist tenants in achieving their highest possible level of independence and self-sufficiency. Most of our folks live with disabilities, often multiple disabilities. Residents have the opportunity to move within the range of housing services as their needs and abilities change. All of Lookout's housing is dedicated to local residents in the community in which the housing is located.

TRANSITIONAL HOUSING PROGRAM

Lookout's Transitional Housing Programs provide longer-term (e.g. up to 2-3 years) for chronically homeless individuals who require higher levels of assistance over a sustaining period to bring a greater level of stability to their lives. These programs specifically target those having few, if any, housing alternatives – unable to meet their own basic needs and not able/ willing to access communal living options. Staff provide support, direction and assistance to tenants, enabling them to develop the skills they need to increase their health and stability, and to work towards greater independence. Transitional housing bridges people into permanent housing solutions which meet the needs of the individual. Waitlists are long, and finding places for people to move to is an issue: there is not enough housing, particularly with appropriate supports, that is affordable for people to move into!

Lookout's Transitional Housing

Hazleton Residence (licensed) Vancouver	39
Sakura So Residence, Vancouver	38
Yukon Residence, Vancouver	37
Cliff Block, New Westminister	16
North Shore Housing, North Vancouver	25
TOTAL	155

Hazleton Residence

The 39-unit Hazleton Residence, located on the second and third floors above the Downtown Shelter, provides the highest level of support amongst the residential programs. Residents have their own secure room but share washrooms; most choose to take their meals in the downstairs dining room.

The mandate of the Hazleton Residence is to provide housing for adults who call the Downtown Eastside their home community, who have few, if any, other housing options, who have histories of homelessness, and who require 24 hour supervision and some assistance with daily living.

The Hazleton's mandate has been to provide transitional housing, assisting residents to develop life skills so that they can move on to more independent housing; but for many with complex needs, the level of support provided at the Hazleton is necessary for them to maintain life in the community. However, each year a few residents are able to make the move to a more independent living situation, usually within the Lookout continuum of housing. This year of the 44 individuals housed 5 individuals moved on, 3 to other Lookout supported housing, and 2 into unsupported housing. And conversely, as residents of Lookout's more independent programs such as the Green and Ross begin to find that they cannot manage due to health or vulnerability reasons, we are able to welcome them in or back to the Hazleton. They do well with regular meals, access to a daily nursing clinic and outreach physician visits, as well as increased staff support and a control on building visitors. Unfortunately, due to the limited turnover at the Hazleton, few new residents are able to move in and referrals to the residence may wait in inappropriate housing for months for an available room.

We offer heartfelt thanks to Dr. Burgess and Susan Giles and Evanna Brennan as well as the rest of the team of Community Health nurses for their help and availability and compassionate care for our residents.

This year, residents have been very inconvenienced by fairly extensive renovations in the building, with new flooring and upgrading of washrooms. Unfortunately noise, dust, and temporary closure of some washrooms has made this past fall and spring very difficult for folks and we honour them for the patience they have demonstrated. We will celebrate with them the completion of these renovations!

Lookout's Residential Programs Transitional Housing 2005/06

The Hazelton shares office space with the Activity Program. Although this program primarily serves the Downtown Housing Centre (Hazelton Residence and Downtown Emergency Shelter), as space permits, men and women come from other Lookout downtown programs and residences, particularly from the Living Room Drop-In Centre.

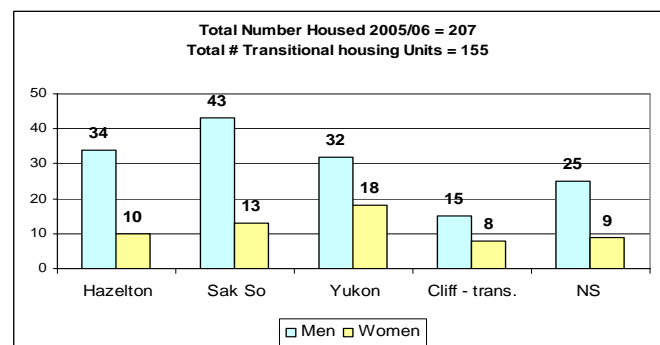
Activities may be recreational, such as hikes (all outdoor activities include some walking or hiking), swimming, bowling or visits to parks, or they may be educational such as a visit to a museum, conservatory or bird sanctuary. Special events and attractions including the auto show, Science World, or the annual *favourite* – the Abbotsford Air Show, are greatly enjoyed. When the weather is poor, a first run movie is a special treat. Activities can also be “useful” such as group shopping trips to stores outside the Downtown Eastside where clothing, groceries, and household needs cost less and can be purchased in more economical quantities. The activity workers and volunteers also run in-house activities such as bingo and movies.

Although funding remains relatively static, as in previous years, the cost of recreational opportunities, events and attractions has increased and discounts available to non-profits or people with disabilities have decreased or have been eliminated. Lookout's aging van, combined with rapidly increasing fuel costs has greatly reduced our opportunities to take residents on trips outside of the city. An additional challenge is our inability to provide activities that mobility impaired residents can access as our van is not wheelchair accessible. Our van is nearing the end of its' useful life and fundraising for a new van is on-going and will continue this coming year.

What makes Transitional Housing Work?

It starts the moment a tenant moves in: developing a plan, identifying goals, and working towards independence!

Key initial issues people face: inability to manage their increasingly complicated medication regimes. Budgeting fixed low incomes to stretch to the end of each month. Have YOU ever tried to balance a fixed amount for an entire month?



Sakura So Residence

The Sakura So Residence is a 38 unit heritage rooming house purchased in 2001 as transitional housing for adults, thanks to a grant from the federal government's homeless Initiative (Supporting Community Partnerships Initiative). Like all of Lookout's programs, the Sakura So is for adults who have histories of homelessness and who need support to develop the skills needed to be successful in maintaining permanent housing. These housing units, located above retail stores, have cooking facilities and the washrooms are shared. Nine of the 38 units are double rooms. There is an elevator, making the building a good option for some of the many residents of the Downtown Eastside who, due to health issues, have difficulties managing the flights of stairs so common in most rooming houses and SRO's. The building also boasts a roof patio, offering a superb view of the downtown and North Shore mountains and a cool place to relax on a hot night.

This year at the Sakura, we housed **56** individuals, with **19** people moving out. We had a **96%** occupancy rate. Vacancies were due to rotating minor renovations. Eighteen individuals moved in through the year, primarily from other supported housing.

Many visitors to the building comment on the obvious sense of community that exists in the building, beginning with the number of folks socializing in the lounge and the friendly greeting that all visitors receive upon entering the building.

This year, thanks to a grant from the Vancouver Coastal Health Authority, we have been able to augment the staffing in the building by adding a lifeskills worker three days a week. This has enabled the staff to work more closely with residents to develop life skills such as cooking and shopping skills, improving hygiene, learning housekeeping skills and in assisting residents to connect with area resources and opportunities. A storage room close to the tenant office has been converted into a community kitchen. Community meals are prepared and often the smell of soup cooking permeates the building. Two

Lookout's Residential Programs Transitional Housing 2005/06

meals per week, usually one breakfast and one dinner meal, for a total of 104 sessions, were offered. Approximately 86 % of the tenants participate in these meal sessions. And not only are people being fed and learning cooking skills, but the opportunity to chat with each other builds social skills and friendships. The life skills worker takes residents shopping for food and clothing, increasing their ability to meet their daily needs and supports and encourages residents to ensure that their health needs are met.

Yukon Transitional Housing

Yukon Housing has 37 self-contained housing units located above a 24 hour emergency shelter. As with the Hazelton, this co-existence allows the shelter's overnight staff to provide emergency back up for the tenants when the Tenant Support Workers are off duty.

While residency is up to two years, exceptions can be made after re-evaluation of the resident's case plan indicates further support and assistance is still required to make people successful in transitioning to permanent housing. Yukon has had great success working with the residents to set goals in a case plan, assess and review progress and then set new goals striving to achieve a greater level of independence.

Yukon provided housing to **50** individuals, including **13** people who moved in over the year. **28%** of the people living in the transitional housing are women. The vast majority of tenants are between the ages of 25 – 34, a younger population than in our Downtown housing. The majority who moved live with challenges such as mental illness (**60%**) followed by addictions and need strengthening lifeskills.

Transitional housing residents meet with TSWs regularly to review goals. Many residents require assistance with budgeting and medication management when they first move in, and through working with the staff, move to where they can now manage their own medications, in fact 25 (**68%**) are now self managing, an approx. **46%** increase over last year. In addition **32** people are managing their own finances at this time. Decent affordable housing is the goal for almost 100% of our residents, and many of the tenants express major frustration as housing renting for \$ 325 is extremely rare, especially located outside of the Downtown Eastside. Applications for subsidized housing, especially with non profits and BC Housing are submitted soon after arrival, but all have lengthy waitlists. It meant that some individuals stayed longer until they could move on to more independent locations.

Many of our residents feel a greater sense of participation and cooperative living. They have reformed and strengthened the Advisory Committee (TAC) to provide tenants with information, opportunities to participate, to learn new skills, to provide mediation and ombudsman services, to start and run social and recreational activities and lastly, to work to create a sense of community. For instance, they hosted a Solstice party and achieved **31** out of **37** participating!

The volunteer program continues to successfully offer opportunities for tenants to learn valuable job skills and responsibilities. **19** tenant volunteers assist in a wide variety of areas including kitchen, maintenance, clothing room, homemaking, gardening and recycling as well as in the tenant lounge and library. This improves the volunteers' self-esteem, and prepares for employment, training or educational pursuits. We appreciate the efforts of both our in-house and community volunteers without whom, we could not offer the wide variety of services and activities available to our residents. Our tenant volunteers contributed **1,898** hours to Yukon.

Yukon Housing Centre maintains a close working relationship with many community agencies including: Raven Song, Midtown Mental Health, VCHA, Safe Ride, Buckshon Pharmacy, MHR, Community Transition Team, Coast Foundation, Kettle, Access One, THEO, Gastown Vocational Services, La Boussole etc. Some are involved on our Resident Selection Committee which interviews and selects tenants for the housing. This committee also serves as an advisory committee to Yukon. We have recently become involved with the Vancouver Public Library (VPL) - Mount Pleasant Branch which is establishing a number of new programs for Yukon Housing Centre. This includes residents receiving library cards and our in-house 'library' being augmented by the VPL. The addition of library personnel will enable us to engage tenant volunteers to help sort and organize the books, as well as an opportunity for all the residents to ask questions or give suggestions as to what else they would like to see added to the libraries.

Cliff Block, New Westminster

The Cliff Block, a heritage building in New Westminster, has 16 units of transitional housing co-located with 7 units of supportive permanent housing and an Outreach Program. As most tenants live with disabilities, often multiple disabilities, residents have the opportunity to move within the range of services as their needs and abilities change.

We have continued to work very hard this year building relationships with the larger community and believe we are now a respected and accepted service provider in New Westminster. We have had many locals inquire as to what the Cliff Block is all about and when we tell them about ourselves and our unique way of accomplishing things they are noticeably impressed with the service we provide. Last year the words **“innovative and creative”** were used to describe the Cliff Block. This year we feel the words **“strength and stability”** best describe what is transpiring. Our tenants are gaining strength and knowledge in their personal journey toward self sufficiency, wellness and stability. Our mission in the community continues to be a challenging one. Homelessness continues to be in the forefront in New Westminster and it would appear that we are no closer to eliminating this problem now than we were when we first arrived in New Westminster 5 years ago. In fact, the homeless population has increased exponentially over the last 5 years. Poverty and the lack of safe, affordable housing are the primary causes of homelessness. Contributing to the minimal progress towards eliminating homelessness is the gap in public education. It is our responsibility to help educate individuals so they can better understand some of the issues and reasons for homelessness: inadequate job skills, lack of affordable housing, mental illness and substance misuse. More than ever before we need the larger community to come together and work in unison towards solutions. It is only in this way that we can take on this daunting challenge and expect some positive results.

Providing supportive services to people has been proven effective in achieving residential stability, improving mental health and reducing the costs of homelessness to the community. At the Cliff we demonstrate this as many of our tenants can move directly from homelessness to independent housing given appropriate supports and the availability of affordable housing. However, the transition from homelessness to housing is a critical time that needs intensive support and attention.

Most of our tenants live with disabilities, often multiple disabilities. Our goal is to assist our tenants in achieving their highest possible level of independence and self-sufficiency. Residents have the opportunity to move within the range of services as their needs and abilities change. A consistent, caring, personal relationship is required to engage people who have been homeless. Post tenancy outreach and the introduction of services at the residents pace are key to encouraging people into treatment (if needed) and case management services.

This year we have made efforts to follow some prospective residents through their recovery from hospitalization to an interim facility, and then onto Cliff Block. We liaise with New West Mental Health and staff at other facilities to track progress and determine whether a prospective tenant will be successful at Cliff Block, and the optimal timeline for transition to our program. This appears to be an effective method of ensuring residents are prepared for the level of independence offered at Cliff Block, affording them an increased chance of success.

North Shore Housing, North Vancouver

In April of 2005, Lookout Emergency Aid Society officially opened its North Shore Residence. 25 previously homeless and marginalized individuals who had faced multiple barriers to secure housing, moved into the Transitional Housing program. For the first time, these individuals were able to call a clean, brand new, fully equipped apartment their home. As we celebrate our first anniversary, Lookout North Shore has firmly established a safe, supportive and caring environment providing perhaps one of the most high-profile solutions to homelessness on the North Shore. In an area known for its high cost of living, with little or no access to affordable resources and an often flat-out non recognition or denial of the needs of the poor or those suffering from situational or systemic mental and physical barriers to housing, Lookout is simultaneously shining a light on a largely unaddressed local situation, and providing a partial solution: both exposing a wound and attending to it.

Lookout's North Shore Residence is a two year transitional housing program providing 25 units of housing for chronically homeless North Shore residents who require higher levels of assistance over a sustaining period to bring a greater level of stability to their lives. The program specifically targets those having few, if any, housing alternatives, unable to meet their own basic needs and not able to access communal living options. Support workers provide direction and assistance to tenants, enabling them to develop the skills they need to increase their health and stability, and to work towards greater independence. The aim of supported transitional housing is to bridge people into permanent housing

***Lookout's Residential Programs
Transitional Housing 2005/06***

solutions that meet the needs of the individual. The bridge that we provide is comprised of consciousness raising, skill development, barrier identification and problem solving, social integration, and the healing effects of a tenant-centred, non-judgmental, and caring environment. Tenant selection is an example of the close collaboration and partnership that occurs between Lookout and the local service community; in this case through dedicated volunteers from a variety of agencies. We would like to thank the following agencies for permitting staff to continue their ongoing contributions to the success of this housing: Harvest Project, Ministry of Employment & Income Assistance, Community Psychiatric Services, Community Liaison, Vancouver Coastal Health and our Lookout representative from Outreach.

This first year has been one of establishing the program and settling into the new building. We have housed **34** individuals, of which **9** individuals have left the program. Currently, the North Shore Residence is home to **9** women and **16** men. Of these **25**, **13** are receiving Disability Two benefits from the Ministry with another **3** in process. Approximately **50%** deal with addiction issues (**12** residents) while just over **50%** (**14** residents) have diagnosed psychiatric issues. **5** of our tenants are dealing with chronic physical or behavioural conditions arising from accidental injury. **13** are "Dual-Diagnosed": dealing with concurrent disorders. **15** of our residents are on medication treatment: **7** of these administered by the staff, the rest are on supervised self-administration.

"This place saved me from being homeless; Lookout was the only program that would take me under my circumstances (running from violence). It has helped me stabilize my mental health."

In this initial year of our program, much groundwork has been laid in establishing a network within the North Vancouver community of social service, health, and other non-profit organisations. One of the most important has been Community Psychiatric Services (CPS) whose worker provides on-site mental health services as well as in-office treatment. Currently, **8** of our residents have a worker with CPS who assists them with psychiatric and A & D counselling, occupational therapy, attending medical appointments and liaising with Lions Gate Hospital psychiatric services. A mental health worker has also instituted a series of educational workshops concerning concurrent disorders that will be available to both tenants and shelter residents beginning the end of April 2006.

Lack of appropriate funding of the North Shore Shelter indirectly negatively impacted the housing service. For instance, during the two-month reduction of operating hours of the shelter last year, (and the months of uncertainty leading up to this period), many of our residents felt the loss of connection and support offered by the presence of a fully staffed 24-hour shelter. There was a sense of abandonment and isolation, a loss of a broader community that exists as an integral component of their current housing situation. This was evidenced by an increase in drug-related activity within the building by those residents dealing with addiction issues, and a decrease in the general feeling of well-being amongst others who saw this lack of security and resultant activity as threatening and who rely on consistency and routine as part of a mental health program.

Monthly tenant meetings give us direction and keep us informed of ongoing issues and problem areas that need addressing. These meetings are also a source of ideas that make this program more useful to its participants. Some of our future plans include expanding access to the resident lounge and kitchen facilities, the regular holding of community dinners and meal preparation workshops, movie nights and barbeques, and the aforementioned educational workshops hosted by CPS. We continue to consolidate our relationship with BC Housing to ensure access, for those registered, to at least one form of affordable housing when each resident is ready to move on.

Affordable housing solutions are sadly lacking on the North Shore and our broader mandate includes advocating within the local business and political community for more options for those who call the North Shore home, yet find themselves unable to gain, or afford, acceptance. We continue to form and maintain trusting relationships with the North Vancouver community and those under our care providing, wherever possible, the guidance, support, and non-judgemental perspective necessary to foster growth and stability in their lives and provide the bridge to community integration and a more independent life.

"I think the program is great, my needs are taken care of, the suites are beautiful, the staff are wonderful, it's in a good location."

LOOKOUT'S SECOND STAGE PERMANENT HOUSING

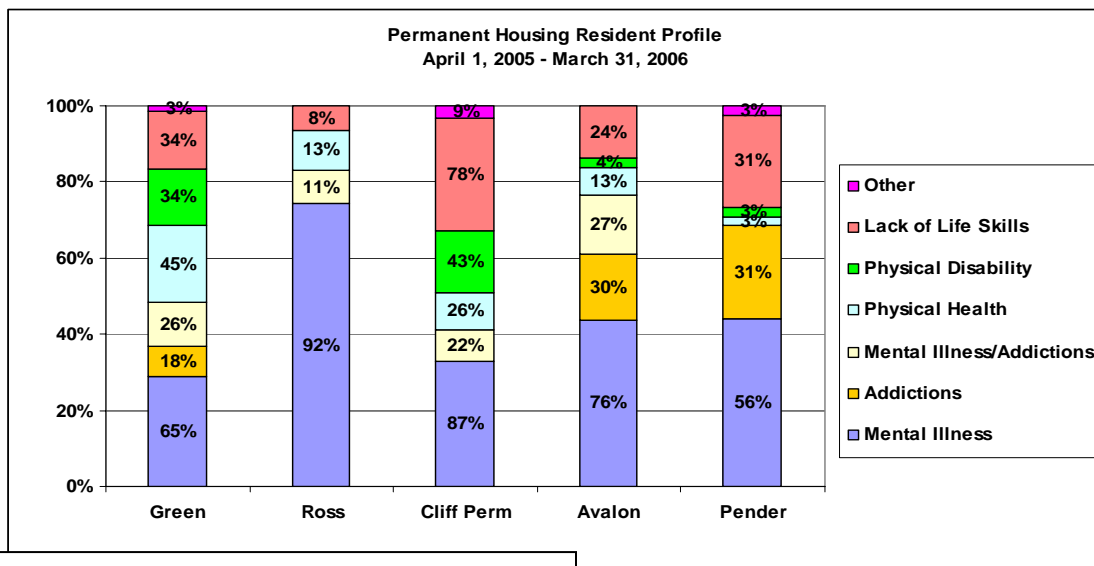
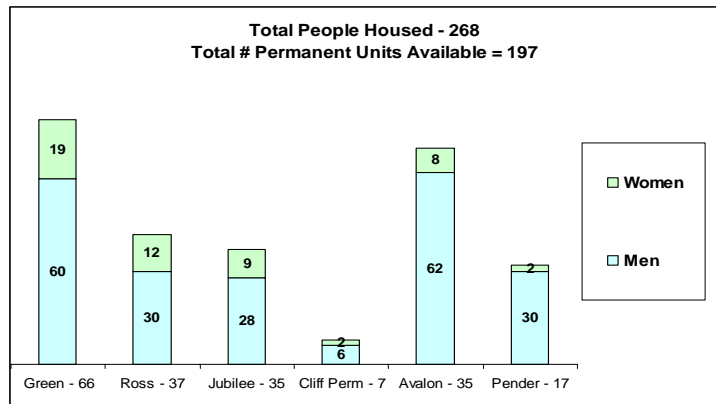
April 1, 2005 – March 31, 2006

Lookout offers permanent housing with some support for people with a history of homelessness and who no longer require assistance in day-to-day living, but who may require support to maintain and flourish in their independence. Lookout has been providing this “third stage” housing since 1978, starting with roominghouses in the Downtown Eastside, and expanding in 1993 to also offer self-contained housing. All of Lookout’s housing is rent-geared-to-income or set at the income assistance level. BC Housing generously provides the subsidy for all our self-contained permanent housing to ensure that men and women with no housing alternatives can have a home they are proud of. When and where needed, support staff provide assistance and work with residents to develop life skills and link to necessary community services to help residents enjoy successful healthy lives.

Our housing also honours individuals who have contributed greatly to the resolution of homelessness. The Jim Green Residence is proud to bear the name of one of the Downtown Eastside’s preeminent advocates for safe, secure, and decent housing in the area. The 37 Unit Jeffrey Ross honours a past beloved Lookout shelter manager. Jeffrey was an incredible advocate for people and no matter what, had time and support for everyone.

We have seen our waitlist increase just over 6% over the past year (up from 1284 in 2003/4, and 1,596 in 2004/5) as greater numbers of people with challenges have fewer housing options. Increasing economic rents mean that housing outside of the Downtown Eastside remains elusive for many. Within the Downtown Eastside, having one’s own bathroom and bedroom is usually a dream. Lookout’s permanent housing provides highly sought after housing: particularly given our minimal barrier, supportive approach.

**Permanent Housing Waitlist
1706!**



Note: Jubilee not reported as program ended

*Lookout's Residential Programs
Permanent Housing 2005/06*

Jeffrey Ross & Jim Green Residence

Both the Green and the Ross, housing projects for people who have a history of homelessness and no housing options, offer permanent housing in one bedroom apartments for singles or couples. While there are many similarities to the Residences, they each have a different priority for their residents.

The Jeffrey Ross focuses on housing people with disabilities who do not need care facilities.

It is a quiet and stable community as most residents are both over 45 years old and live with a disability. Turnover in the building is extremely low, **occupancy remains at 100%**, and those who do move usually leave for reasons of declining health and are much missed. This year has been a sad one for the building as three very long-term residents passed away. We will miss Jackie, Medhat and Patty. This is indicative that the residents face aging-in-place issues and increasingly are coping with poor health. Their need for support increases each year, a service need that has not been fully addressed. **4** individuals moved in to fill vacancies. Three of the four came from other Lookout housing including two from transitional housing and one from a hotel partnership program. The fourth new resident came with support from the Living Room Drop In Outreach. A number of the residents are over 65 years old, and wish to remain in their homes maintaining their independence in a community where friendships amongst residents span ten years or longer. A highlight at the Ross is the annual summer BBQ in the beautiful courtyard – a tradition which began in 1998 to mark the fifth anniversary of the building.

The Jim Green is unique in that there is no age barrier, but the major focus is on people who have a chronic history of homelessness. The Green also includes a 2-bedroom emergency back up unit to house families or women in crisis when other local resources are unable to shelter them.

This year we have housed **79** individuals (**24% women**), with **13** new residents moving in. This year has seen a slightly higher turnover rate than previous years, primarily due to the number of residents who have moved to other Lookout housing programs where their support, nutritional, and health needs can be better met. Often when residents have failing health, they are less able to control access to their apartment and they are preyed on by people from the street. When the visitors of these residents become too problematic, we are able to negotiate with the resident and offer them an “eviction” to a Lookout program where their needs will be better met. Almost all accept the offer of different housing and recognize the advantages of having housing that will allow them the opportunity to focus on and improve their health. Several Green residents have moved to the more highly staffed Hazelton program this year in just those circumstances.

With service cutbacks, it continues to be difficult to access home support services for residents who, due to health issues, have difficulty managing to keep their apartment in good order. Staff work with residents to increase life skills but poor health, combined with skill deficits, impacts resident's ability to maintain cleanliness. We need to find ways to encourage greater motivation amongst the tenants, and foster their pride in maintaining good housekeeping. In addition, with the infestation of bedbugs affecting Vancouver as a whole and especially here in the Downtown Eastside, residents also need extra support in keeping their place clean to reduce the risk of being plagued by bedbugs. However, we are pleased with the services provided by the workers from Blue Shell Services, whose workers are able to provide cost effective cleaning services for those residents who do not need personal care from a home support agency.

Maintaining building safety, while still a daily challenge, has been less difficult this past year with the closing of both problematic SRO hotels a block away. The street is safer than in previous years although drug selling and drug use in the neighbourhood continues to create risk for our residents. While we are concerned about the additional homelessness caused by the closure of these two hotels, we have advocated for the hotels to be renovated and reopened as affordable housing that is desirable.

This coming summer we look forward to celebrating our 10th anniversary. The plans are for a big BBQ party in the courtyard for all to enjoy.

Lookout's Residential Programs
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Cliff Block Residence

In addition to 16 units of transitional housing, the heritage Cliff Block has 7 units of permanent housing for local New Westminster residents. As with other programs, the staff works closely with each resident to strengthen their skills and abilities and setting goals and plans to achieve their highest possible level of independence and self-sufficiency.

This year we housed **8** individuals in the permanent Cliff housing. One person put others at risk and was evicted, although we worked with the person to find alternate arrangements.

Many residents of Cliff Block have difficulty budgeting money. One result is a poor diet consisting of sub-standard foods. In an effort to improve the overall health of residents, we have accessed Better Meals, who supply fresh-frozen meals to the building weekly at a reasonable price for residents. In addition to the evening cooking skills program, some **23%** of residents have taken the opportunity to have one-on-one time with staff to shop for and prepare healthy, cost-effective meals. Menus, recipes, and budget are discussed with residents.

While Cliff Block has seen many successes this past year, we continue to struggle with a lack of home support and a lack of housing options. We have several residents who are physically and/or cognitively unable to maintain their own living space, and who do not receive funding for home support. The encroachment of bed bugs has made this service gap loom large as Tenant Support Workers have been forced to drop their regular duties to clean rooms and do laundry.

This is our fifth year of involvement with **Raising the Roof** a National Homeless Awareness Campaign which raises funds and awareness in the fight against homelessness in Canada. Under the umbrella of Raising the Roof (Toque Tuesday) takes place annually on the first Tuesday in February where volunteers and celebrities sell signature toques to raise funds for homelessness agencies in their communities. The Cliff Block is looking forward to an ongoing affiliation with this worthy cause.

HOUSING PARTNERSHIP PROGRAMS

Jubilee Rooms Partnership

Lookout staff has spent this past year winding down the partnership between the Jubilee Rooms and Lookout. Lookout tenant support workers have been able to place most residents (**21**) of our Jubilee program into other supported housing situations. Each downtown Lookout housing program took tenants whose needs best matched their mandate; other residents were placed with other agencies or in community housing with some outreach support. Two individuals were hospitalized. One person had to be shifted to our Downtown Shelter. Only a few residents (**10**) elected to remain at Jubilee Rooms. They will be supported by our Outreach teams as needed.

Several years ago we had been introduced to the manager of Cordova's Residence and told that he was the "*best manager in the Downtown Eastside*". Unfortunately the building had a severe roof leak with a lot of water damage in the building. Since then, Cordova's Residence has been fortunate to receive a CMHC grant to repair the roof and when we resumed dialogue with them this year, the repairs were just being completed and interior renovations were starting. We are really pleased that we have formed a partnership that started at the end of the fiscal year.

We have been moving in new residents and now have half of the hotel on our program. As the hotel is 34 rooms, we will be supporting all building residents eventually.

We look forward to building this new partnership and program and are glad of the opportunity to work with Martin Mannette, the manager and lessee of the hotel.

*Lookout's Residential Programs
Permanent Housing 2005/06*

Avalon Residence Partnership

The Avalon Hotel Pilot Project is a partnership formed under the Vancouver Agreement to improve living conditions in single room accommodation in Vancouver's Downtown Eastside. The intent is to demonstrate that with the combination of good management, incentives to upgrade and improve hotel premises and support services for residents, hotels will be safer and healthier, and residents will achieve an improved quality of life. Lookout's success in previous partnerships with privately-owned hotels provided a model for supported hotels. We entered this partnership in June 2004.

In our second year of operating within the Avalon, we have housed **70** individuals (**8% women**), including **34** people who moved in, principally during the early part of the year. Residents are volunteering, both in the building and out in the community. Occupancy averaged **100%**, with some vacancies in June (**91% occupancy**) while in March we served **37** individuals (**106% occupancy**) as part of the partnership, based on the needs of people in the hotel.

Our referrals continue to come from hospitals and mental health resources such as the Strathcona Mental Health Team, the ACT/Bridging team, and Riverview Hospital. As well, we have celebrated that a number of our residents have had the opportunity to move on to more independent or more age or gender appropriate housing. Our residents are accessing more support services, such as home support services, and are connecting to good medical and psychiatric care. An increasing number of residents are now on our medication administration program (**18 individuals**) and are regularly and consistently following through with taking medications, leading to better physical and mental health. We are seeing less or shorter hospitalizations for folks on the program as interventions can take place in the early stages of a crisis and as residents' access regular medical care.

Later in the year we welcomed hotel owner Mina Angelicola back into active involvement in the day-to-day operation of the hotel as she has taken over from her daughter and son-in-law, Ron and Tina Konkin, who have been managing the hotel for the past few years. We thank all members of the Angelicola family for their support for our program and their compassion and commitment to providing safe and affordable housing for residents of the Downtown Eastside. However, a small number of hotels are operated by owners and managers who are ethical, compassionate, flexible and willing to provide safe and affordable housing to Downtown Eastside residents. These owners are dedicated to this! Thank you!

Pender Residence Partnership

The Pender Residence, a Downtown Eastside rooming house, continues to be a successful housing resource for people staying in the shelters. It is an example of how Lookout and a private landlord can work in partnership to house the homeless. Lookout's Outreach staff support tenants at the Pender Residence as they seek more appropriate long term housing options, help develop treatment plans for those struggling with addiction, assist individuals with eligibility requirements for all income security programs, explore vocational options, and counsel and direct tenants as required. The Outreach team is called upon for crisis intervention and preventative problem-solving at Pender Residence, driven by a desire to resolve tenant issues and maintain a stable living environment.

32 individuals were housed at Pender this year, with **15** people moving in through the course of the year. **56%** are individuals coping with serious mental illness, while another **31%** live with addictions. **31%** are people who need to build basic lifeskills in order to successfully move to more independent housing. **26%** receive psychiatric services, while only **7%** receive addiction counseling. Despite **54%** of our contacts being spent linking Pender residents with appropriate supportive resources (e.g. rehab, health, education, skill training), **21** or **78%** moved into housing where they can get the greater level of support they require.

LOOKOUT'S OUTREACH PROGRAMS 2005 - 2006

Lookout's Outreach Programs cover intensive short-term (3 to 6 months) support, case management and planning services for chronically homeless people who require additional intervention and support to successfully attain housing and maintain themselves within the community. Once individuals become more stable, our team bridges them into other services. However, in recognition that such services are offered in few areas and have waitlists, our Outreach Team's have the ability to take a few individuals for ongoing case management services. Services are provided in two different municipalities: New Westminster through the Cliff Block, and in the Downtown Eastside, Vancouver through the Living Room Drop-In and the Downtown Shelter. Our teams collaborate with service/treatment providers in these communities to improve the quality and stability of individuals' lives. Outreach staff also provide special support to hotels and rooming houses that provide accommodation to Lookout clientele who are able to live more independently than within our Supportive Housing Programs. While Outreach Workers work in the community, we have been very successful in partnering with a few building owners/managers such as the Jubilee Rooms and Avalon Hotels to provide on-site staffing where a block of rooms have been provided for Lookout clientele. These services, while funded under Outreach Programs, are reported under our Residential Program Report.

Our Downtown Shelter and LivingRoom Outreach Program both receive funding from the Downtown Eastside HIV/AIDS Strategy. These HIV workers are integrated into general Outreach community services out of respect for the privacy of our clientele. For purposes of simplicity, we have combined all our Outreach data together.

DOWNTOWN SHELTER OUTREACH

This past year the 346 Outreach Team served **651** unique individuals, **67** more people than last year), and has seen some changes in the pattern and profile of our services. This was despite some staff service issues: we are very glad William has returned healthy from a time off to battle illness, bringing back his patient service with a sense of humor which so many people had missed. Of these individuals, we served **64 (10%)** who have confirmed HIV diagnosis, and another **333** who have been identified at-risk of HIV. This is **61%** of our caseload! **34%** of the confirmed HIV caseload is women, who comprise **29%** of our at-risk population. Women are approximately **26%** of our overall caseload, thus HIV/at-risk women are served in a higher proportion. We shall be looking at the implications of this over the coming months.

Housing remains difficult to secure for many people we serve, and while we have certain efficiencies that help us, we have declined in the time spent assisting people with finding housing and services partly through the difficulty of access. There is a noticeable drop in time spent with respect to case planning, particularly seeing fewer Downtown shelter clientele. The Outreach team remains a great help to the shelter, but the joint work the Shelter Case Workers and Outreach Workers have carried out has resulted in the Outreach giving more focus to people with HIV or At Risk of HIV (time spent case planning with this group modestly increased), and fewer shelter clientele. We have some increase in time spent assisting people to move though, time we felt well spent when we have seen people secure accommodation that is superior to DTES SRO's

With our strong focus on HIV and At Risk, compared to last year, there has been a doubling of time spent on crisis intervention for this group of individuals. A lot of crises are being solved with a single brief contact, or in that moment, quick assistance is given to facilitate support through the appropriate means. However, the team does feel we need to develop within our clientele better life-skills for responding under crisis or pressure. Correspondingly, we are concerned with the numbers of people already 'at risk' for whom we need to be a ready response or assist in accessing crisis services.

There are increasing numbers of street entrenched/trapped people – through the staff's outreach, **28%** of the people seen are from the streets. The Outreach team's ability to affect some services to those who are clearly service-resistant drug users should not go unrecognized. We may also note the decline (nearly by half) in people hospitalized continues to show Outreach clientele need hospital less than in the shelters (**8 persons compared to 47 shelter users**). As well there's a notable increase (**4%**) in the number of people simply housed appropriately, and a decline of **2.4%** in the ratio of 'unplanned discharges'. The whole team does deserve credit it a very tightening squeeze situation for housing of being resourceful and tenacious in seeing people housed, living healthier and improving their life situations.

LIVINGROOM DROP-IN CENTRE - OUTREACH

The LivingRoom continued on again this year with our two-member Outreach Team. Their focus is on the seriously mentally ill, including those living with or at risk of HIV/AIDS. We continue to hope that we will be able to expand the LivingRoom's Outreach Team and the excellent work they do by adding some expertise from the addictions field. Many of our members are dealing with co-occurring disorders, most commonly mental illness and addictions. While all LivingRoom staff assist members with housing searches, medical appointments, financial appointments and many other tasks, the ability of the Outreach workers to spend more one-to-one time with the members and to go out into the community to directly support the members is the key to their success. While one of the Outreach workers is funded through Mental Health and the other through the Downtown Eastside AIDS Strategy, they work closely together and share the case load, enabling them to provide an unbiased, seamless support service which preserves privacy.

This year the Outreach Team at the LivingRoom provided service to **253 unique individuals**, and had an average monthly caseload of 150 individuals. Because of our 7-day-week service, at times both outreach workers will have contact with and assist the same individual. Of the 150, they provided support to **93** different (unique) Drop In members on average, each month (**61% men, 39% women**). Responsive to the need presented by the individual, the type of support varies for each, as well as the number of contacts they as all have different requirements. A contact is any interaction between an Outreach worker and a member that lasts for at least 15 minutes. This year the LivingRoom Drop In Outreach had **8,886 service contacts** for a total of **3,011 hours of direct service**. You can see the breakdown in the charts below.

Besides the advocacy and support services they provide, a major focus for the Outreach Team is addressing the needs of people that are deemed "at risk". Many members not currently H.I.V positive fall into the category of being "at risk" given their living environment and their lifestyles. This year **19 (8%) of our caseload** were confirmed as being H.I.V. positive and **171 (68%)** were deemed to be at risk of HIV. **64 (25%)** had hepatitis. Responding to this need, the Outreach Team provided lifeskills training, needle exchange services and overall support in any way possible in order to help the members lead a safe, healthier and happier life.

Not all of what our outreach workers do involves the members directly. One of the less glamorous things but no less important, is the work they do with the household furnishings donated to Lookout. These donations are invaluable assets in helping the members make a home where they live. Not only is this resource used by Lookout clientele but also by other agencies such as Triage, ACT/Bridging and their clientele. It also provides the opportunity to get the members involved, by helping with the sorting and moving, which can have a profound positive effect on their mental health.

In the upcoming year the Outreach Team will continue to provide a key link between the Drop In members and the outside world.

CLIFF BLOCK OUTREACH – New Westminster

Cliff Block Outreach assisted **200** unique individuals over the course of the 12 month period, with a monthly case load averaged **66** individuals of which **26%** were women. Each month we brought on an average of 12 new cases and reactivated approximately 3 previously seen individuals. As in other Lookout programs, the lack of local affordable housing and shelter was the critical issues faced. We placed a total of **70** individuals in shelters throughout the lower mainland, and provided ongoing support to an average of **26** individuals each and every month. Support includes providing a listening ear, but more importantly, helping them problem-solve around their situations. While we are pleased with the number of persons we have been able to serve, our statistics are also revealing a number of areas that concern us.

The number of individuals on our case load that identify as consumers of mental health services is hovering around **30%**, however, only **11%** of these individuals are being seen by the New Westminster Mental Health Team. The rest are either non-compliant or are being treated by a general practitioner.

Approximately **50%** of our caseload admits to problematic drug use, this figure is up from **33%** last year. About half of these individuals now identify methamphetamines as their drug of choice. While we first noticed a shift towards methamphetamine use within New Westminster's homeless population about 2 years ago, the trend seems to have peaked and now remains steady at about **25%** of our outreach caseload.

Physical health issues are also a major concern: the reporting of Hepatitis C and HIV infections is up this year. In the 2004/05 year **4%** of our caseload reported they are Hepatitis C positive, while **2%** were reporting they are HIV positive. This year **15%** of our caseload is disclosing they are Hepatitis C positive while **4.5%** acknowledge an HIV infection. These numbers, while small, indicate a trend that needs to be watched and prevention programs put in place.

The following information shows how many people were served through our Outreach Teams at our Downtown Shelter, the LivingRoom Drop In and the Cliff Block. It shows the types of issues our clientele identified and the hours staff spent in various activities assisting them.

	346	LivingRm	Cliff		346	LivingRm	Cliff
Total Unique # People Served	651	253	200		men	74%	74%
					women	26%	26%
# HIV / AIDS infected	64	19	5	# at risk of HIV / AIDS	333	171	131
# Referrals/Contacts Made:	15,060	8,886	2,793	Total # Hours in direct service:	6,678	3,011	1,485
To:				Hours spent in:			
Local MH Team	84	352	167	Housing Search	8%	9%	12%
Other MH Teams	86	507	77	Service Search	5%	4%	6%
Forensic Services	14	39	13	Lifeskills	10%	13%	3%
Income Assistance	317	657	468	Liaison	16%	7%	9%
Pension (OAP, CPP, Union, etc)	67	23	65	Escort	13%	7%	12%
Drug and Alcohol	300	495	389	Advocacy	5%	12%	5%
Physical Handicap	45	76	78	Move	5%	2%	5%
Mental Handicap	22	32	30	Counsel and direct	12%	21%	4%
Involved Police	64	80	40	Crisis intervention	3%	5%	3%
Care Facilities	32	33	188	Support	13%	10%	34%
				Case planning	4%	6%	5%
				Paper work	6%	4%	incl above
<i>Note: principal contacts only listed</i>							

LOOKOUT'S COMMUNITY SERVICE PROGRAMS 2005 2006

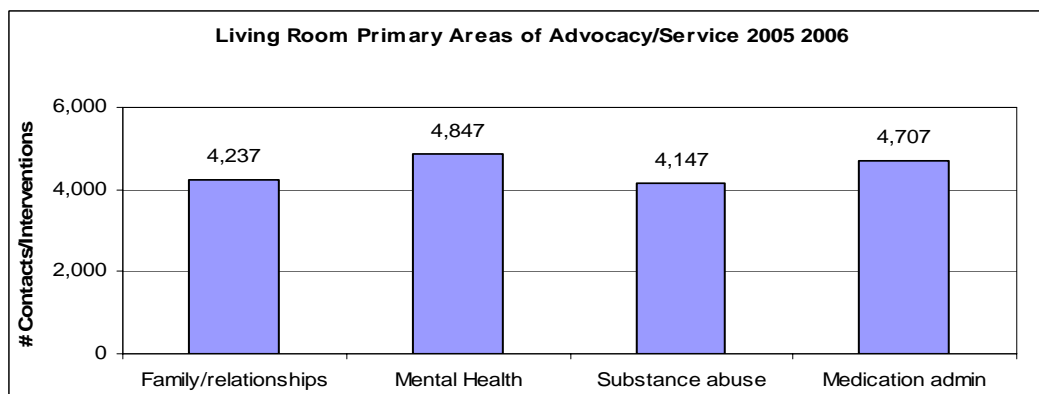
LIVINGROOM DROP-IN CENTRE

The LivingRoom Drop In Centre, located in the Downtown Eastside of Vancouver, is Lookout's only program that has a restricted mandate: it is 100% a mental health program and was established because the mentally ill are proportionately at higher risk of homelessness. Established in 1992, the LivingRoom continues to develop, adapting to fiscal restrictions and the many needs of its members. Open 365 days a year, the main priority of the LivingRoom is to provide a safe, secure environment, offering a wide range of structured and unstructured programs and to encourage participation of members, particularly those who are not already involved with the formal mental health system. Much more than a place to socialize, in many cases the LivingRoom is the only place where some of its members feel safe.

One of the changes that occurred at the beginning of last year was a change in the hours that we are open. Still a 7 days-a-week operation our hours are now 10:00 a.m. – 8:00 p.m. Monday to Friday, and 10:00 a.m. – 6:00 p.m. on the weekends, with some variation for special events. The new hours have worked very well as it allows us to have an extra staff available to do some outings during the day time and gives a consistent opening time which the members have voiced their appreciation of.

Beyond having a safe place to go, actually before anybody can really do anything, their basic needs have to be met. Our member's basic needs are, pretty much the same as everybody else's; food, clothing and shelter. The meal program continues to be a huge success through the assistance of food providers such as Food Runners, U.B.C., the movie industry and volunteer groups like the "Greek Ladies" (as we affectionately call them). With this food, the LivingRoom serves a nutritious meal usually consisting of soup, salad and sandwiches Mon - Fri with a more deluxe meal each Wednesday. Members also receive a multi-vitamin with their meal through our H.I.V. funding. While it may not seem like a lot, every little bit helps. Other assistance comes from groups such as the "Art of Living", "Sri Baba", "Friends" and the Jack Boyda Foundation who come in and prepare meals at their own expense of both time and money. Without this outside help the staff would never be able to accomplish what they do and as such we are always looking for volunteers from the community to help with the meals.

Our membership of over 2,000 members made more than 44,000 visits to the Drop In Centre. During those visits staff assisted members through more than 25,000 contacts, providing crisis intervention, a variety of advocacy, referrals to other more appropriate resources and medication administration. The medication program is one of the LivingRoom's most unique services which assists members with taking their medication, allowing them to lead more independent and stable lives, thereby staying out of hospitals and other institutions. Advocacy and referrals for members takes up a lot of staff time especially in regards to mental health and addictions.



Besides the primary areas listed above the staff also spent a fair amount of time advocating as needed to assist members in regards to legal, financial, medical and housing issues.

But there is more to the LivingRoom than trying to meet members' basic needs and advocacy. Another goal of the LivingRoom is to teach social and life skills, enhancing the ability of members to maintain a stable and independent living situation, improving their quality of life, thereby helping to prevent homelessness. This is achieved through a variety of structured and unstructured activities.

Fortunately with the help of outside volunteers such as Henke (helps with computers) and Tibor (music nights), the Strathcona Mental Health Team (rehab staff), the Carnegie Outreach Team, Lookout's Activity Worker and the tremendous efforts by the LivingRoom's staff and dedicated volunteers, we are able to provide a wide variety of activities for the members which are listed the chart below.

Activities	# of Sessions	# of Attendances	Activities	# of Sessions	# of Attendances	Activities	# of Sessions	# of Attendances
Basic Needs			Leisure	364	6,851			
Meals	328	37,090	<i>Bingo</i>	42	1,372	<i>Model Club</i>	34	191
Life Skills	2,582	4,233	<i>Card Tourney</i>	10	64	<i>Gardening</i>	5	17
<i>Volunteer Program</i>	303	541	<i>Movie Nights</i>	35	540	<i>Bowling</i>	1	7
<i>Computer Club</i>	2,126	2,723	<i>Arts & Crafts</i>	38	224	<i>Special Events</i>	8	463
<i>Aerobics</i>	90	690	<i>Show Offs</i>	114	2,726	<i>Picnic</i>	1	48
<i>Parlour Program</i>	23	80	<i>Tibor Night</i>	11	174	<i>Tea</i>	8	47
<i>PAC Meetings</i>	1	8	<i>Dances</i>	8	654	<i>Chess Club</i>	2	7
<i>Community Empowerment</i>	12	38	<i>Outings</i>	34	218	<i>Raving Beauties</i>	1	4
<i>Happy Feet</i>	27	153	<i>Carnegie Music</i>	12	95			

This coming year will again continue to provide us with challenges which we hope we'll be able to meet by continuing to nurture the relationships with our volunteers, benefactors, and other agencies as well as developing new relationships to help meet the needs of our members.

ACCOMMODATION SUBSIDY PROGRAM

The Accommodation Subsidy Program was initiated in 1993 to improve the housing prospects for people living with serious mental health challenges in the Downtown Eastside.

Administered by the LivingRoom, once again this program proved to be a great benefit, allowing those that receive it to afford better living conditions within the community. This contributes to their mental health and their stability. The program allows individuals with a persistent mental health history to receive up to a maximum of **\$75** for actual shelter costs or costs associated with upgraded amenities such as cable, cooking capability etc...

The program dispenses approximately **\$18,000** a year to a variety of individuals sponsored by various agencies such as MPA, Triage, Lookout, Strathcona Mental Health Team and ACT.

This year **39** people were assisted, **28** men and **11** women, some for only a few months and some for the entire year. At the fiscal year (March 31) there were **27** people receiving subsidies for an average total of \$ 1,745 per month. A total of **\$18,840** in subsidies was paid out through the year. Some of the recipients have received the subsidy since its inception. Hopefully the subsidy program will continue for years to come as it allows people with a persistent mental illness to afford better living conditions within the community and as some of those on the list move on by getting into subsidized housing it allows us to assist others.

THANKS

Donations

April 1, 2005 to March 31, 2006

Unfortunately we do not have the room to list all of our cash & in-kind donors. Without their support we would not be able to offer the supplies, services and enhancements that have a profound benefit to our clientele. We would like to express special appreciation to the following.

- ☺ Andrew Mahon Foundation ☺ Anthony & Susan Yurkovich ☺ B.C. Regiment Cadet Corp. ☺ Barry Komar ☺ Beaumont Studios ☺ Bill & Risa Levine
- ☺ Blankets of Canada ☺ Buckshon Pharmacy Ltd. ☺ Carol Kalmacoff
- ☺ Chalet Interiors ☺ CIBC – Employees
- ☺ Da Vinci City Productions Inc. ☺ Dianne Brownlee ☺ Directbuy of Vancouver ☺ Eng's Washing Machine ☺ Eric Bancroft
- ☺ Fatima Da Ponte ☺ GSA Publishing Group ☺ Gunda & Wayne Stewart
- ☺ GWIL – Crane Service Division ☺ Helen Chia Yee ☺ Highlands United Church ☺ James Pratt Consulting ☺ Jim Flannery ☺ Jim Statton & Associates
- ☺ John Breen ☺ John Hall ☺ Judith Tait ☺ Judy Taylor
- ☺ Karen Ireland ☺ Kathryn Neilson ☺ Laureate Mu Beta Sigma PHI
- ☺ Lila Motamedi ☺ LTC Pharmacy ☺ Mackay LLP
- ☺ Margaret Wilson ☺ Margitta's Florist (Lonsdale Quay)
- ☺ Michael Wan ☺ Mt. Seymour United Church ☺ North Shore Community Foundation ☺ North Shore Unitarian Church ☺ North Vancouver Lions Club
- ☺ Peter N. Rowe ☺ P & O Ports Canada ☺ Sherry Steele ☺ Shinder Saran
- ☺ St. Clement's Anglican Church ☺ St. David's United Church
- ☺ Star of Fortune Gaming Management ☺ Starbucks Coffee ☺ Sundance Guest Ranch ☺ Sussex Realty ☺ Tom Tait ☺ Vancouver Pacific Lions Club
- ☺ West Vancouver Presbyterian Church

VERY SPECIAL THANKS TO

- ☺ Best Western Sands Hotel (Davie St) ☺ Charles Curtis ☺ Coast Plaza Hotel & Suites (Denman St) ☺ Comfort Inn & Suites of North Vancouver ☺ Freybe Factory Outlet ☺ Harry A & Rose Getz Foundation ☺ Henry McCandless
- ☺ Invis Financial "Angels of The Night " ☺ Ken McNaughton ☺ North Shore Lawn Bowling Club ☺ Mark's Work Wearhouse ☺ Providence Health Care
- ☺ Robert B. McGill ☺ Sheila Newsholme ☺ Sidhu Brothers Import & Export
- ☺ Soroptimist International of North and West Vancouver
- ☺ The Illahie Foundation ☺ Vancouver Food Bank – Food Runners
- ☺ Warren J.A. Mitchell

AND THE HUNDREDS OF INDIVIDUALS WHO DROPPED OFF SLEEPING BAGS, BLANKETS AND WARM WINTER CLOTHING!