

**LOOKOUT  
EMERGENCY AID  
SOCIETY**

*SOLUTIONS TO HOMELESSNESS*

# Annual Report 2008





# Lookout Emergency Aid Society

## Program Reports 2007-2008

Karen O'Shannacery  
Executive Director  
June 22, 2008

### Report to the Board

The year ending March 31 has been one of growth and achievement – gaining new housing for people who are marginalized and homeless. Gaining new staff to share the work. Gaining financial security to fully operate shelter services on the North Shore. And seeing our sister agencies – other sheltering services – move to a model of service that Lookout has long practiced and has long advocated for! A momentous year at Lookout and for the sheltering community as a whole! When we look at the unrelenting desperation of the increased numbers of homeless and the losses of housing that exasperate the situation, as demonstrated by the 2008 Homeless Count, this year also gave hope that we may see the beginning of fundamental changes and a reduction of homelessness over the next few years. And we saw that by adding a few new key positions, we were better able to both meet the challenges of providing services and housing to the homeless, as well as better able to support the incredible Managers and staff that do the work necessary to achieve and sustain solutions to homelessness.

April 2007 started with much angst – concern over the Olympics and the impact that will have on the homeless. Concern that we would be forced to reduce the hours of operation on the North Shore, and unhappily seeing dedicated staff, who had sustained the shelter through month-by-month employment extensions, seek other employment, no longer able to commit in the face of such uncertainty. Further worry occurred when we heard that the North Shore Transitional Housing funding was at high risk, resulting in forming plans to fundamentally change the transitional housing program. We are grateful to BC Housing for the sustaining funding to keep the shelter open 24/7 and convert the cold wet weather beds to year-round services equal to regular shelter service. We are also very appreciative of Vancouver Coastal Health Authority – North Shore, for cost sharing the position of tenant support worker within the North Shore Transitional Housing. Both funders recognized the need for ongoing, sustaining support and this year committed funding to this end. The North Shore Shelter spent the full year hiring staff into regular positions, a challenge that faces all of Lookout in this time of economic boom. We celebrated the end to uncertainty! We now work on rebuilding the services and team. Funding also permitted the creation of a Manager's Assistant position on the North Shore to help stabilize and enhance services. Not only, at the end of the fiscal year, we heard great news from the City of North Vancouver. For the 2<sup>nd</sup> time they funded the position of Community Liaison Worker, meant to represent the North Shore Shelter in the community, working collaboratively with others. Last year this position was key to responding immediately to community concerns. Our funding application to operate the Burnaby Extreme Weather Shelter was also approved for two winter periods. Extreme weather this past winter set all records: far from the 'norm' of 10 days per winter, this year we opened an astounding **43** nights, providing **787** people (**16%** of whom were women) with accommodation, food and support. This would not have been possible if it was not for St. Francis de Sales Church and the extensive number of people who volunteered **239** shifts! We remain committed to create a local full service shelter co-located with supported housing working in collaboration with Burnaby Progressive Housing and are working with BC Housing in this regard.

Deepening the homelessness situation was the conversions, redevelopments and purchases of many of the Downtown Eastside single room accommodation (SRA) hotels – these hotels have been one of the primary reasons that BC has not had the numbers on the street as other cities in Canada or the USA. In the midst of the flood of sales, **Great News!** BC Housing purchased 12, expanded to 19, of the SRA hotels and through this, had a major protective impact on this low income community. With the intent to renovate and upgrade these hotels, BC Housing solicited non profits as operators. Lookout was successful in partnering for the 51-unit Walton Hotel and the 55-unit College Place (New Westminster). Along with the SRA purchases, BC Housing is building 1,000 – 1,200 new units of housing in Vancouver! We are excited to be the partner for the 129-unit development at First & Main! This joins the 24-unit Garfield in New Westminster which is also under development. Both these projects are expected to be in the ground by the end of the year and built to LEED Gold standard. The result is significant amount of time spent in the development of new projects. We are concerned however, with the access for these units; plans meant to facilitate applicants, may instead create barriers. We work to improve the process, and will participate in the evaluation.

Housing supply, along with the appropriate supports is the way to end homelessness – and although the federal government remains disengaged in this, we do give acknowledgment and commendation to the leadership of the provincial government in addressing homeless issues. We also want to recognize both the Cities of Vancouver and New Westminster for their support and leadership in creating solutions, without this municipal support, none of these projects would proceed.

The Board of Directors is also to be thanked and commended for approving a number of positions within the Society, despite not having dedicated funding for them. This created two critical positions for the Society, the Director of Operations (internal communications, Human Resources, IT, etc.) and Director of Resource Development (external communications, fundraising, volunteer program, etc.), Leonard Levy (DoO) and Karen Young (DoRD) have joined the team and, despite limited office area, both have had a tremendous impact already! As well, following from last year's goal of improving infrastructure, we have added a number of key assistants: Mary Campbell as my assistant (**YEAH!**), and the Manager Assistants Len Balmes (North Shore) and Lynn Conrad (Downtown Residential). One of our joyful, but difficult tasks is to ensure that all these positions are well integrated into the existing team, reassigning duties to maximum positive impact! We continue to work towards further deepening and strengthening the infrastructure of Lookout, to ensure future sustainability!

Within our service delivery, the conversion of the cold wet weather beds to year round service has allowed us to respond better to people needing shelter and food, increasing Lookout's shelter capacity by **26%**. As expected, turnaways decreased, but only by **15%**. **Shockingly, for every person requesting shelter (4,905), approx. one person was turned away (4,956)** further demonstrating the critical need for more housing. The profiles of shelter users also reflect the requirement for minimal-barrier, accessible housing and services designed and staffed to successfully house individuals coping with a variety of challenges. This expansion also created significant space pressures at both Yukon and the North Shore Shelters. We have requested another shelter be built in Vancouver outside of the Downtown Eastside, to migrate Yukon's 35 previously seasonal beds.

Goals for the upcoming year: upgrading various physical spaces to improve service: e.g. the dorms established as extreme weather/disaster resources are inadequate to fully meet needs of privacy, health and space. We are looking at improving reception areas to give more confidentiality to people in their interactions with staff, and also to improve the effectiveness of the spaces. Other building pressures continue: the need to upgrade the Sakura So, a revamp the Downtown Housing Centre and to address the also long overdue rental of the Cliff basement. With the creation of new positions, renovations to the Society offices are critical. Last years goals achieved! More housing. Sustaining funding. Improved infrastructure. Another vehicle for services. Kar King, a local autobody shop, has donated a van for our use! Thank you Kar King!

Other donors should also be recognized: Cadillac Fairview has partnered with us over the Downtown Shelter, committed to being part of the solution in their own backyard! Harper Grey LLP, through music, raised funds to further assist Lookout in helping others. The Soroptimist's of North & West Vancouver have, through their ongoing commitment of time and money, helped the North Shore Shelter become viable. Many people donate time and resources to Lookout, and without the significant efforts of these people, Lookout would simply not be able to provide the services, let alone at the level we are committed to. Increasingly, we must rely on donations of time and money, as costs increase and funding does not. Additionally, it is imperative for Lookout to be able to have discretionary funds to be used as best needed at the time – whether it is sending people back home to their families, providing work boots to someone robbed, participating in the purchase of land or building housing, or to use to provide furnishings in our housing – it is more critical than ever before.

Lastly, I want to acknowledge our staff – they continue to provide leadership in the provision of services to men and women who have few housing or support options, despite being stretched with our difficulty to fill positions. They are incredibly dedicated and skilled and are the reason that Lookout continues to be able to provide more services to the most vulnerable. My thanks to each and every one of them!

Lookout continues to be committed to providing solutions to homelessness and are pleased we are able to do more, with the additional resources given to us in recognition of our success!



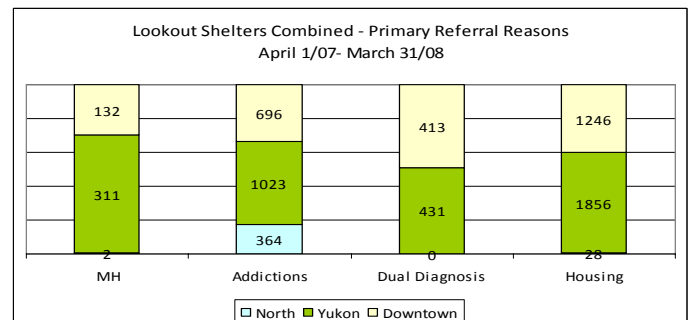
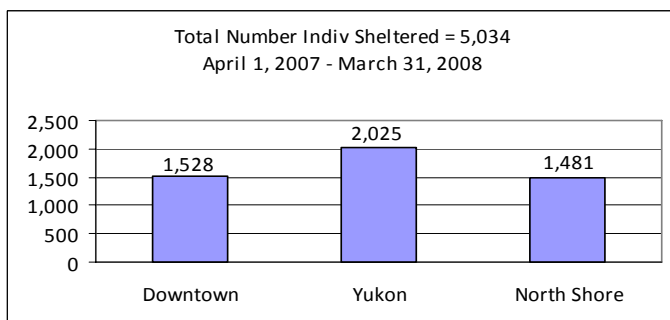
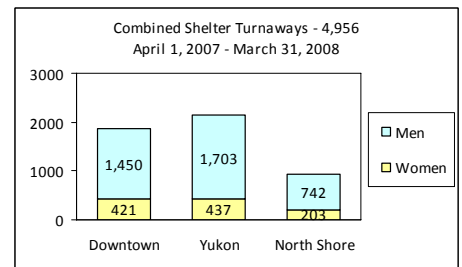
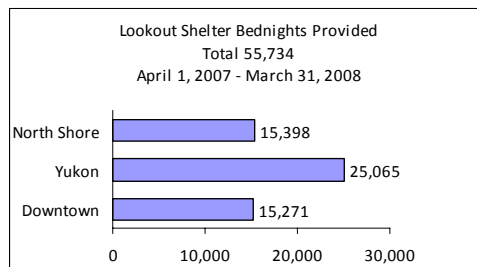
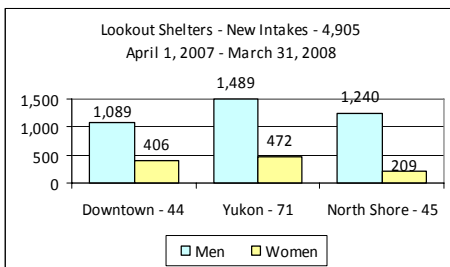
# Lookout Emergency Aid Society Emergency Shelter Programs 2007-2008

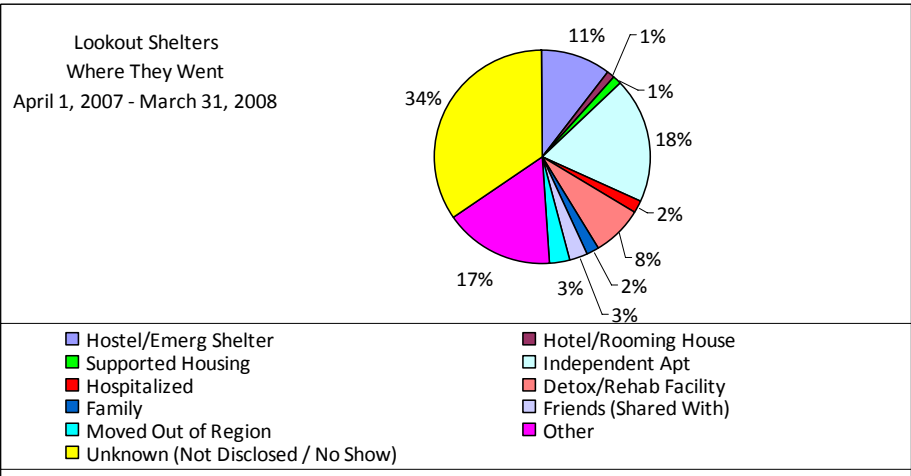
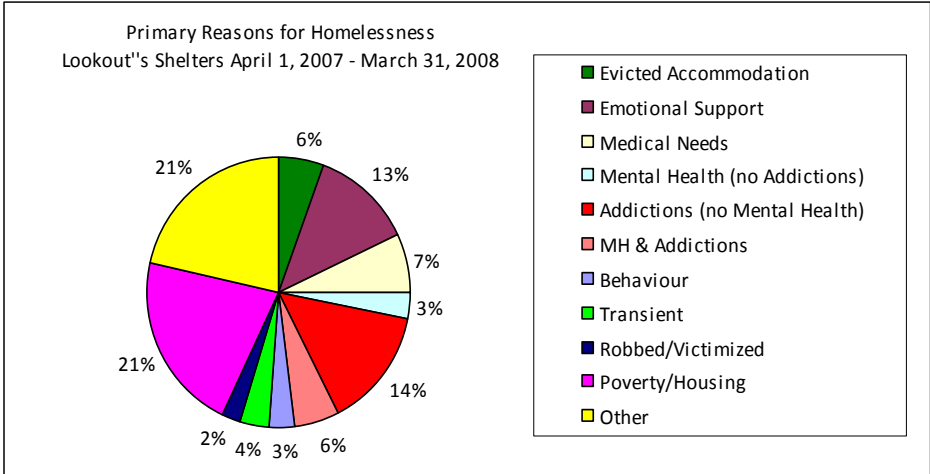
Lookout's emergency shelters continue to be in high demand especially for the 24-hour, minimal barrier services that we offer to those who cannot be housed elsewhere. This has again been demonstrated by the 2008 Homeless Count. Our three shelters are located in two municipalities (City of North Vancouver and Vancouver), & provide minimal barrier temporary accommodation (162 beds) with support to adult men and women who are destitute and have no housing alternatives. The North Shore Shelter expands by 20 sheltering spaces during extreme weather.

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 our buildings. 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/liason 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.

This was the first year the beds previously known as "Cold Wet Weather shelter beds" have stayed open year-round, thanks to increased funding from BC Housing and the provincial government. This resulted in a **27%** increase in available bednights and allowed us to provide **20%** more bednights (**55,734**). We ran an overall **3%** vacancy rate, which doesn't give us availability to respond on an emergency basis. Vacancies were because appropriate beds were not available (e.g. gender, etc.) We housed **5,034** individuals, up **18%** over last year. This included **4,905** new referrals (**3,818** men - **78%**) and (**1,087** women - **22%**.) Our turnaways however, remain at an unacceptable level, with **4,956** being turned away, reflecting that for every person we shelter, another is turned away. The good news was that number of turnaways decreased by **15%** and is the lowest in 3 years – significantly lower than the all-time high of **6,079** turnaways in 2004/05. Since this conversion of winter-only beds occurred within a number of shelters region-wide, our numbers demonstrate that even with a significant increase in the number of bednights being available, there remains the continuing need for more full-service shelter beds. The profiles of shelter users also reflect the requirement 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.



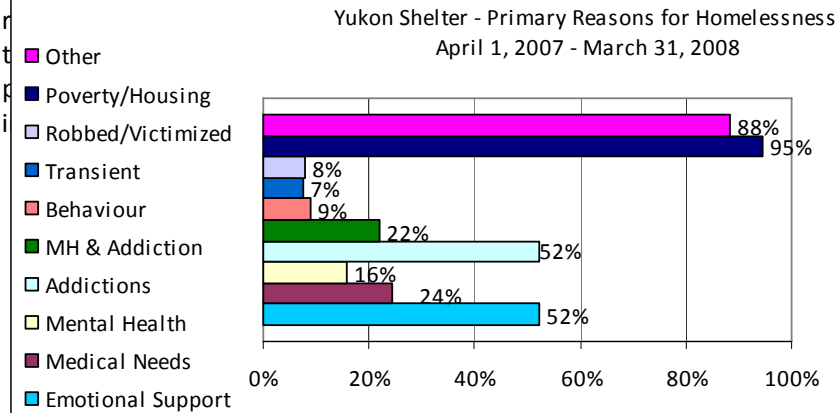


The following reports are submitted by the three different shelter sites.

### Yukon Emergency Shelter

Located on Yukon at 5<sup>th</sup> Avenue, Vancouver, the Yukon Shelter offers 71 shelter beds, including 26 in a dorm, previously used for the seasonal Cold Wet Weather beds.

With cold weather shelter beds permitted to stay open all year, the Yukon Shelter was able to provide **38.2%** more bednights (to **25,065** bednights,) and housed **2,025** people, up **36.7%** over last year. Of those, **1,961** were new admissions, comprised of **1,489 (76%)** men and **472 (24%)** women. The average length of stay was **12.7** days, **5.8%** longer than last year. Our turnaway

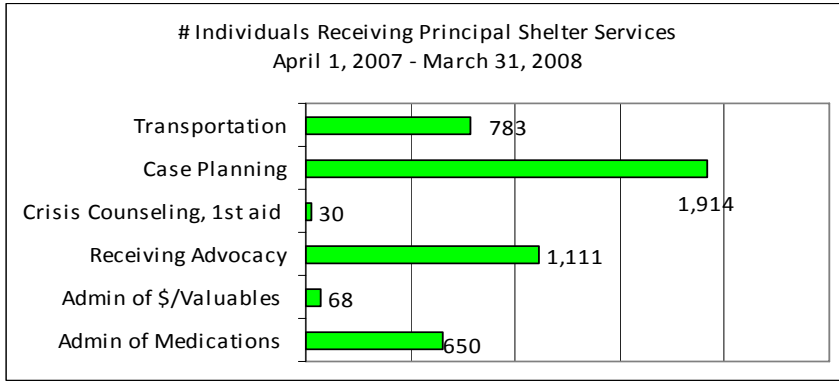


beds open year-round, we still turned away over **2,000**. There was a corresponding **35%** increase in new

Of all intakes this year, **40%** came from their own unsupported accommodation - not surprising as **95%** of all intakes list poverty and/or lack of affordable housing as the primary reason for being homeless. **52%** indicated that their addictions contributed to being unable to secure stable housing.

The most important service we provide at Yukon

Housing Centre is the assessment of needs and the case planning. **1,652** people were connected to one or more appropriate resources in the community, including **586** to addiction services, **342** to clinical services or medical treatment and **274** people to psych services and assessments. We provided **75,195** meals in 2007-2008, a dramatic increase over the **53,385** meals provided last year.



Enhanced relationships with other organizations (Ministry of Employment and Income Assistance and Urgent Response Team) have offered better stability and continuity in our clients' ability to access resources.

During this past year, **418 (21%)** of shelter residents moved successfully from the shelter into independent housing and **82 (4%)** went into shared accommodation/family. **154 people (8%)** went to detox or other recovery facility and **38 people (2%)** were hospitalized. **49** moved out of the region. A greater number

**(623 or 32%)** have chosen not to disclose, most likely because they prefer to remain anonymous about their situation.

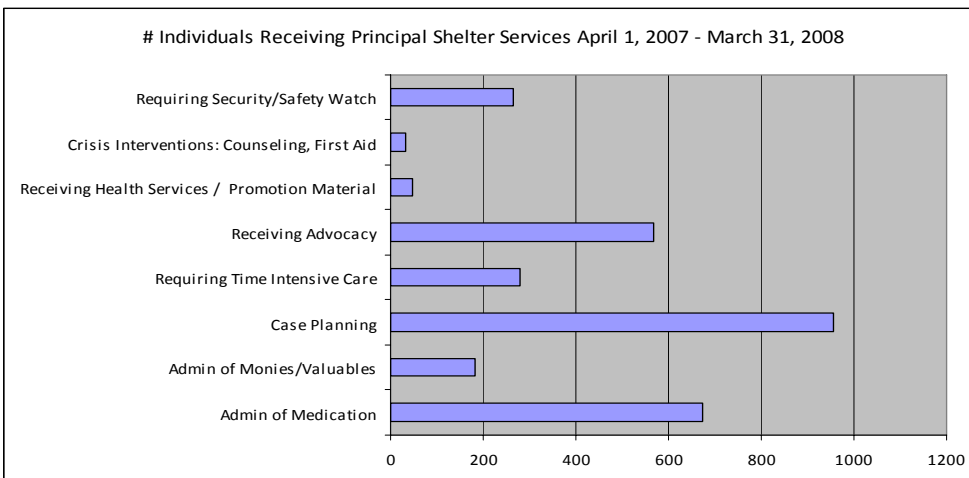
When surveyed, **92%** indicated that Lookout staff was a valuable support in their lives and **96%** said that the staff empower them to achieve their goals.

## Downtown Shelter

*This building offers 46 shelter spaces in the Downtown Eastside of Vancouver.*

This year we provided **15,271** bednights of service, serving **1,528** men and women (including **33** people who were carried over from the prior year.) Staff at the Downtown Shelter have done a superb job of coping with an onslaught of bedbugs and health issues in this community, working diligently to ensure we remain as "bug-free" as possible. These issues did impact the shelter at times, by the necessity, some rooms or beds were closed, resulting in a small loss of bednights (**41**) for the year.

We made a concerted effort throughout the year to keep stays shorter wherever possible and this resulted in fewer stays of a month or more. While some people stay longer, often while waiting for facility placements, we know others who could have been served for a shorter time will be turned away.



The need for longer stays reflects the continuing increase of people over **45** we serve. There is an increasing trend of older people, often with disabilities, who are on the streets. This year we served **503** people over age **45** compared to **443** five years ago, and **469** people on disability income versus **390** in 2003. Most noticeable is people referred with medical needs – **515** this year compared to **138** five years ago. We are grateful for the incredible assistance of the Public Health Nursing Team and Dr. Sue Burgess.

We saw an increase in the number of people from outside of Vancouver (**33%**), primarily from other Lower Mainland municipalities. Part of this may be those who came to us from other shelters, nearly doubling to **150** this year from **79** people last year. A prevalent issue for many out-of-downtown Vancouver shelters is the difficult access to Health services for homeless people, often necessitating the transfer of people to the downtown shelter in order to obtain needed services.

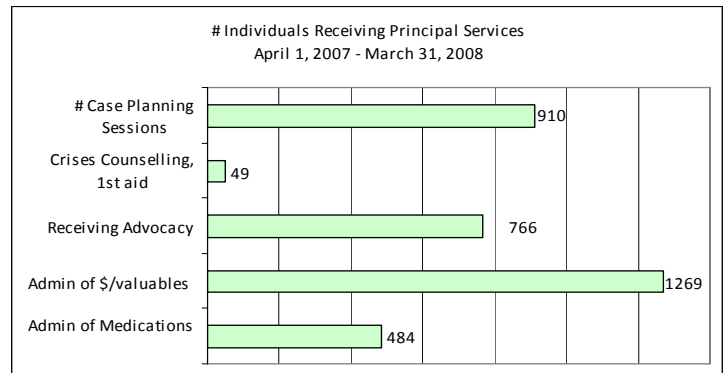
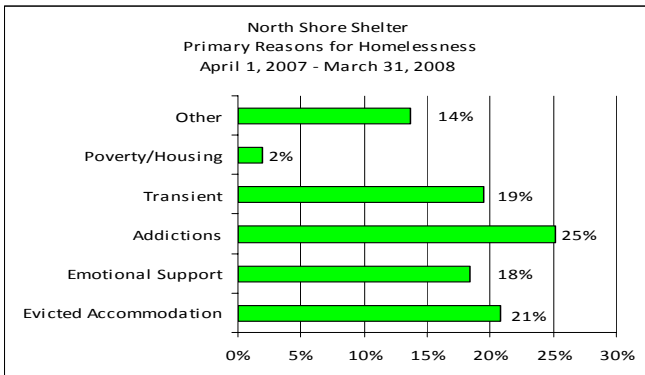
Last year we saw a sharp increase of people with addiction issues; this year numbers dropped to **696 (47%)**, similar to those of several years ago. Numbers of people dealing with dual-diagnosis issues also dropped to **28%**, but remain somewhat higher than 4 or 5 years ago.

Generally the Downtown Shelter spent the past year simply doing what it has always done well, serving those with few or no other options. This year we hope to continue to improve the effectiveness of our services, trying to reduce lengths of stay and enhance our ability to respond to those directly on the street, many of whom - despite the increase of many other agencies around us with outreach and advocacy services - remain either unconnected or unhoused.

## North Shore Shelter

*The Shelter provides the North Shore adult homeless men and women with 45 beds. In addition, as part of the local Extreme Weather Response, we also offer up to 15 "overflow" mats - with further capacity as needed through a satellite site at North Shore Neighbourhood House.*

This past year, the North Shore Shelter provided **15,398** bednights of service - this was a **24%** increase from last year's **12,407** bednights. **17%** more individuals used the shelter than the previous year (**1,481**), with **14%** being women. As per last year, this is less than Lookout's norm of **25%** women. We feel that this stat is not a reflection of lesser need, but believe that North Shore women may have greater access to local resources or that they may feel less comfortable in a mixed shelter setting. We experienced a **94%** overall occupancy rate, although it ranged monthly from a high in December of **101%** or July's low of **86%**. The lower overall occupancy rate may be directly related to our receipt of annual funding, permitting the Downstairs shelter (previously a seasonal Cold Wet Weather shelter) to operate on an annual basis. Access to these additional



**20** beds for a 7 month period meant we had **45** beds year-round; translating to a **5.5%** statistical drop in annual occupancy rates. A

further **416** persons were sheltered during the 31 nights of Extreme Weather Response - a 'no barrier shelter' within a shelter, specifically designed to permit access to shelter beds on winter's coldest nights to those who unable to access shelter programs. The EWR program saw a **29.3 %** increase in the number of people served from the previous year. EWR response nights increased by **8** nights - from **23** to **31**; the last of which occurred March 28<sup>th</sup>.

Our number of people turned away was **945**, of which **203 (21%)** were women. This number is down significantly (by **145** persons - **13.3%**) since last year. This decrease may be attributed to a variety of factors: the annualized funding of cold wet weather beds, the increased number of funded beds, a broader understanding of the need to house those with barriers, or the combined impact of all three.

While the vast majority of referrals come from the North Shore (**592** individuals or **41%**), the next largest source is from Vancouver (not the DTES), with **258** individuals or **18%** of those referred. Lookout shows a total of **107** North Shore residents were sheltered in our two Vancouver shelters - **35** in Downtown and **72** in Yukon.

**"I have been treated with nothing but dignity and respect. I feel blessed to have met you. Thank you so very, very much. You helped save my life." - Blair**

The vast majority of shelter users moved from the shelter into independent housing, with **332** people finding self-contained apartments. **19 (1%)** of the individuals were hospitalized for acute medical or acute psychiatric illness. **118 (8%)** went onto

addiction treatment resources in Vancouver. This is despite the **364** individuals who had addictions as their primary cause for homelessness. These numbers demonstrate the acute need for local addiction treatment services.

After years of funding uncertainty, the shelter program now has annualized funding through BC Housing – the provincial body in charge of shelter funding/management. As a result, shelter services have stabilized, and shelter staff positions, including a full time Manager's Assistant, are now regular and permanent. Community and staff morale has increased substantially.

With stable funding in place, programs are being developed and implemented. Regular programs now include: MPA Society providing Mental Health Advocacy services, Canadian Mental Health sending their Outreach Income Assistance worker, Vancouver Coastal Health providing foot care and various other health related clinics/resources, and AA/NA providing peer support groups, etc. This is an incredible achievement within a few short months. We are working towards providing more programs.

The City of North Vancouver has renewed its funding for a part-time Community Liaison Worker (CLW) who works closely with the community (including the 3 municipalities and local police community) in building relationships and raising awareness around homelessness – an invaluable resource for Lookout.

Thank you to all North Shore staff who have put in so many volunteer hours, personal commitment and endurance to ensure the success and continued operation of this essential service. We would have been unable to sustain the operation of the shelter without the significant contributions of donors and volunteers (over **3,458.75** hours.) We could not have done it without you!

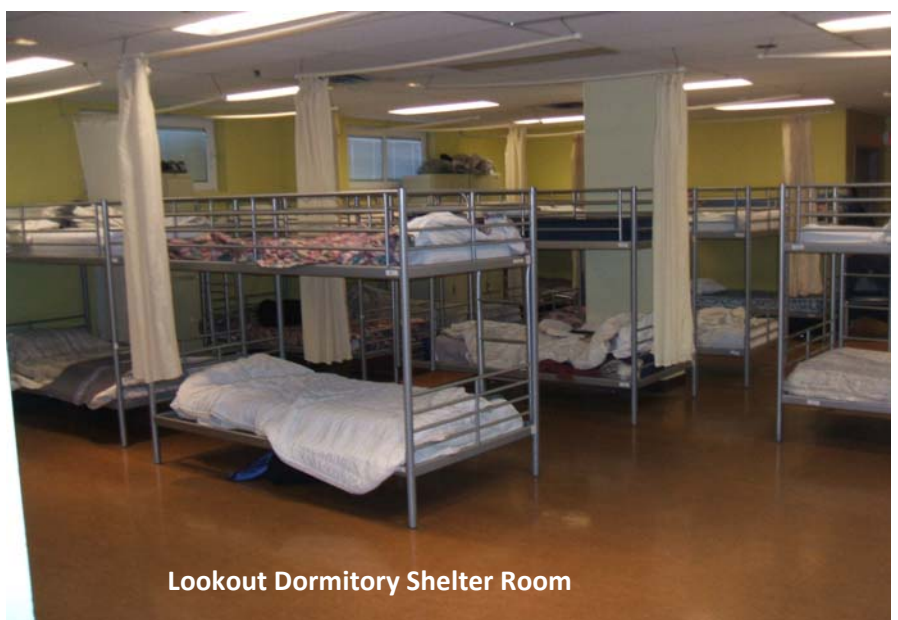
## Burnaby Extreme Weather Shelter

*This shelter is an extreme weather response shelter, meaning that it opens when health risks to the absolute homeless are high. It is the only shelter in Burnaby, and provides 30 sleeping spaces to adult homeless men and women.*

Our funding application to operate the Burnaby Extreme Weather Shelter was approved for two winter periods. We remain committed to create a local full service shelter co-located with supported housing working in collaboration with Burnaby Progressive Housing. Extreme weather this past winter set all records: far from the 'norm' of **10** days per winter; this year we were open an astounding **43** nights, providing **787** people (**16%** of whom were women) with accommodation, food and support. This would not have been possible if it was not for St. Francis de Sales Church and the extensive number of people who volunteered **239** shifts!



Lookout Emergency Shelter Room

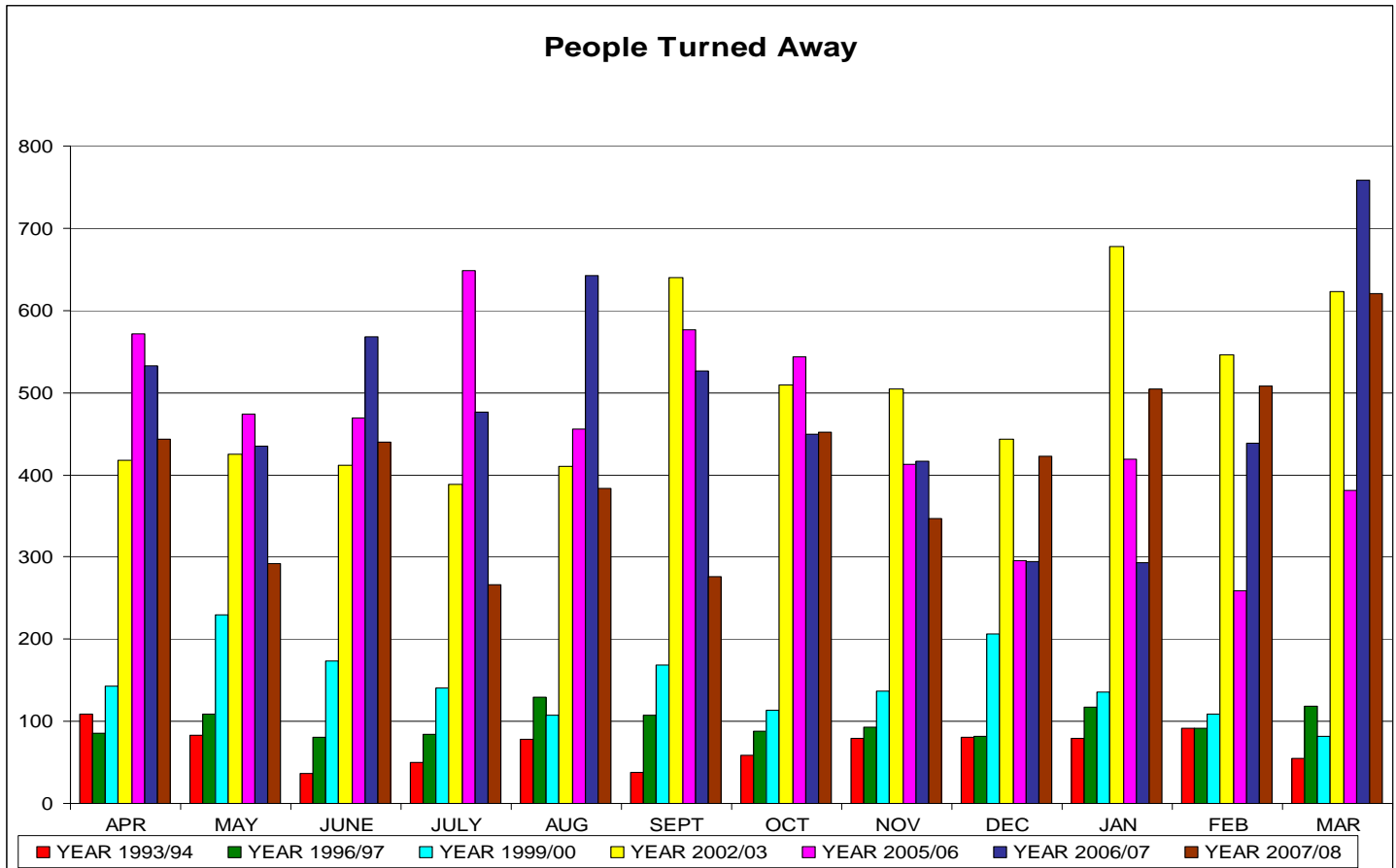


Lookout Dormitory Shelter Room

**Shelter Turnaway Experience by Fiscal Year (April 1 – March 31)**

MONTH	YEAR 1993/94	YEAR 1996/97	YEAR 1999/00	YEAR 2002/03	YEAR 2004/05	YEAR 2005/06	YEAR 2006/07	YEAR 2007/08
		Initiate add'l winter only shelter		Yukon permanent shelter opens		NS permanent shelter opens		
APR	109	86	143	418	627	572	532	443
MAY	83	109	230	425	772	474	435	292
JUNE	37	81	174	412	362	469	568	440
JULY	50	84	140	389	499	649	476	266
AUG	78	129	108	410	438	455	642	384
SEPT	38	107	168	640	737	577	526	276
OCT	59	88	114	509	640	544	449	452
NOV	79	93	137	504	338	413	417	347
DEC	81	82	206	443	299	295	294	423
JAN	79	117	136	678	362	419	293	504
FEB	92	92	109	546	416	259	439	508
MAR	55	118	82	623	566	381	758	621
<b>TOTAL</b>	<b>840</b>	<b>1,186</b>	<b>1,747</b>	<b>5,997</b>	<b>6,056</b>	<b>5,507</b>	<b>5,829</b>	<b>4,956</b>
<b>BED CAPACITY</b>	<b>15,330</b>	<b>24,022</b>	<b>23,495</b>	<b>34,988</b>	<b>37,730</b>	<b>32,503</b>	<b>46,686</b>	<b>57,643</b>

\*Areas in yellow reflect times when only one shelter was operating (Downtown Shelter)





# Lookout Emergency Aid Society Residential Programs 2007-2008

*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 Program provides 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. The program specifically targets 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!*

### What makes Transitional Housing work?

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

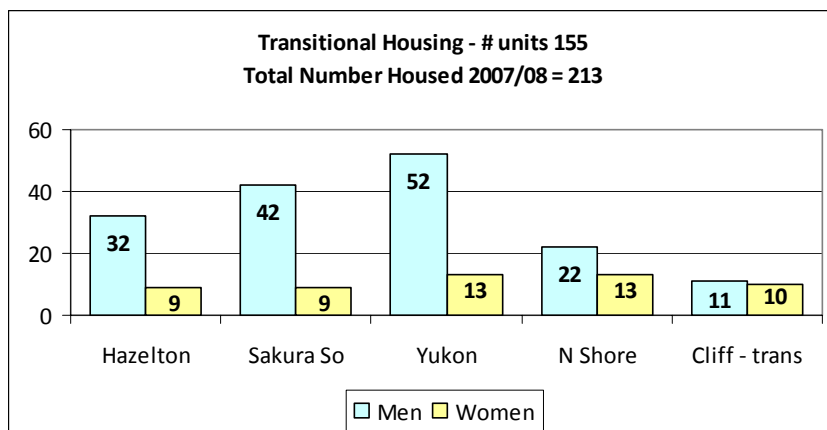
*Key initial issues people face: inability to manage their increasingly complicated medication regimes. Budgeting fixed low incomes to stretch to the end of each month. Have YOU ever tried to balance a fixed amount for an entire month?*

People applying for transitional housing are seeking assistance with a number of issues that cause chaos and an unsettled lifestyle.

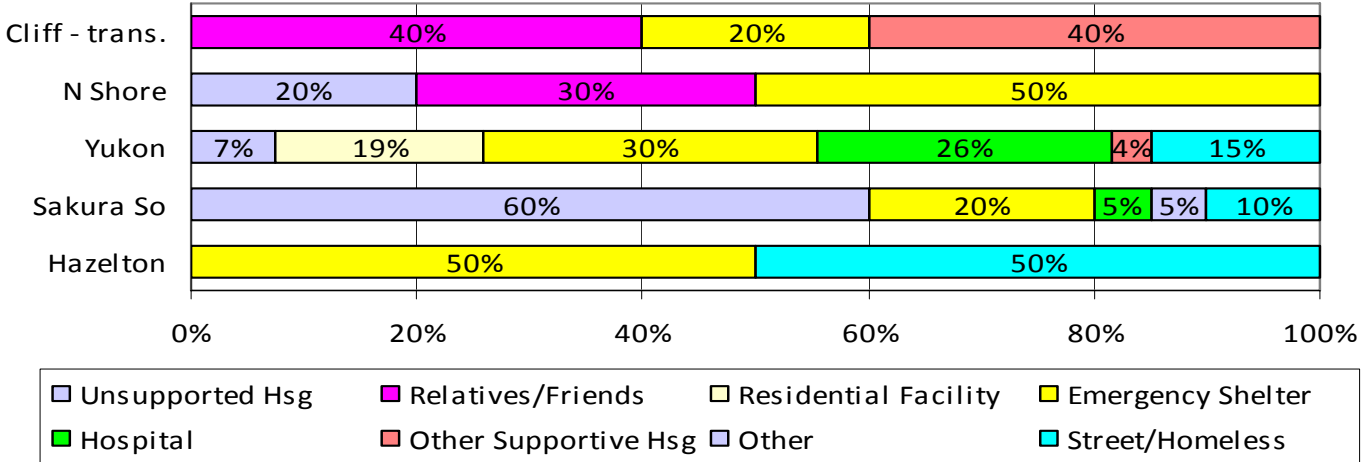
They identify issues that put them at risk of future homelessness, and work towards managing or overcoming these issues. For instance, challenging behaviour is a common issue: it can range from serious personal hygiene or room cleanliness issues (including collectors), or can be a threatening demeanor. The bottom line is that people cannot put others or the building(s) at risk. Many move in with little self-esteem and feeling hopeless. This does not encourage improved social or lifeskills, one of the main barriers against them successfully managing their 'monkeys'.

Lookout's Transitional Housing

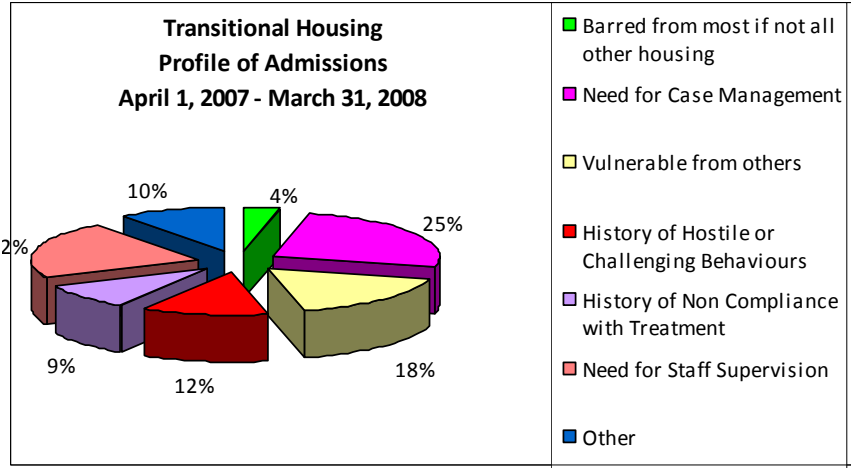
Cliff Block, New Westminster	16
North Shore Housing, North Vancouver	25
Yukon Housing, Vancouver	37
Sakura So Residence, Vancouver	38
Hazelton Residence ( <i>licensed</i> ) Vancouver	39
<b>TOTAL</b>	<b>155</b>



**Transitional Housing Accommodation Prior to Admission**

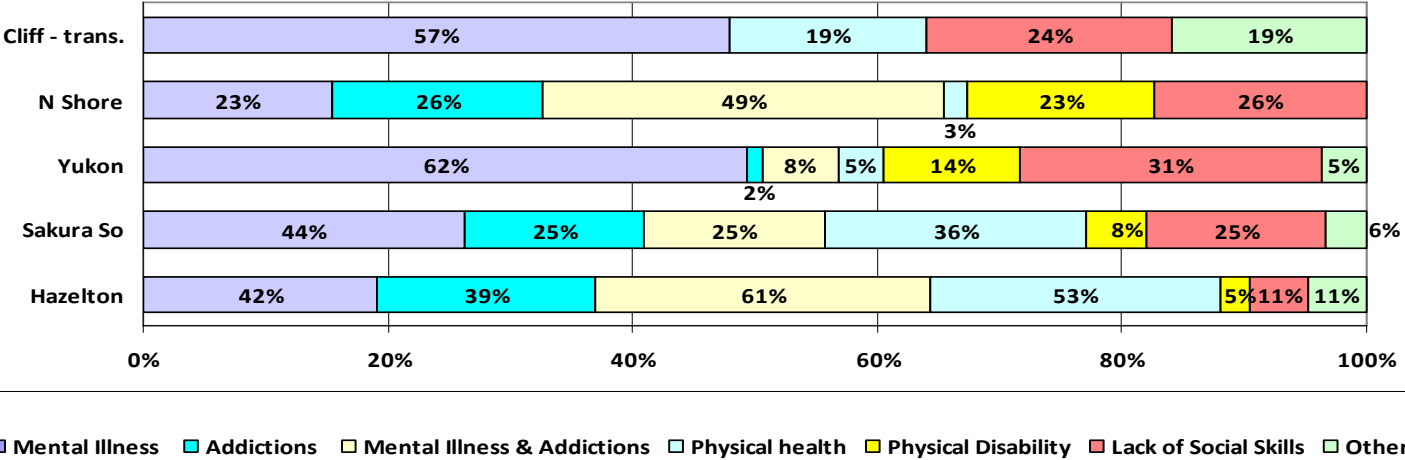


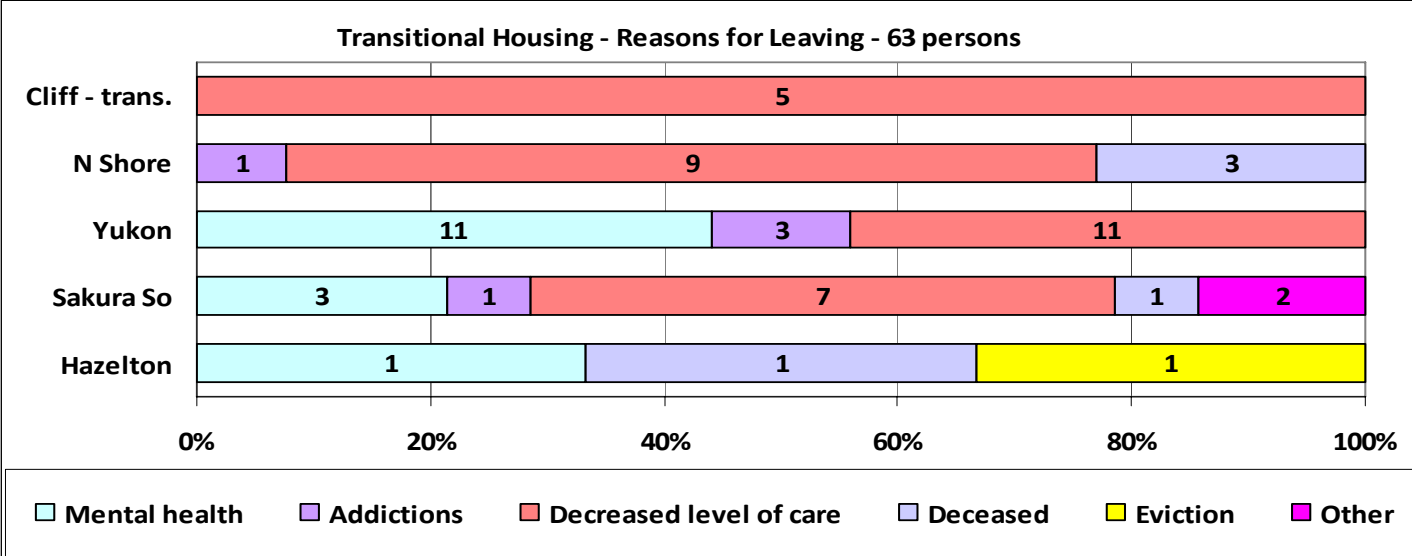
Each of the housing resources has their own tenant selection committee to best respond to local needs and to balance current tenants with new to ensure that the staffing resources are not overstretched. Residents frequently have overlapping challenges they are dealing with, as demonstrated by the following charts. Mental illness and addictions remain by far the major reason that people are repeatedly homeless, and needing support to change behaviours that put them at risk of future homelessness.



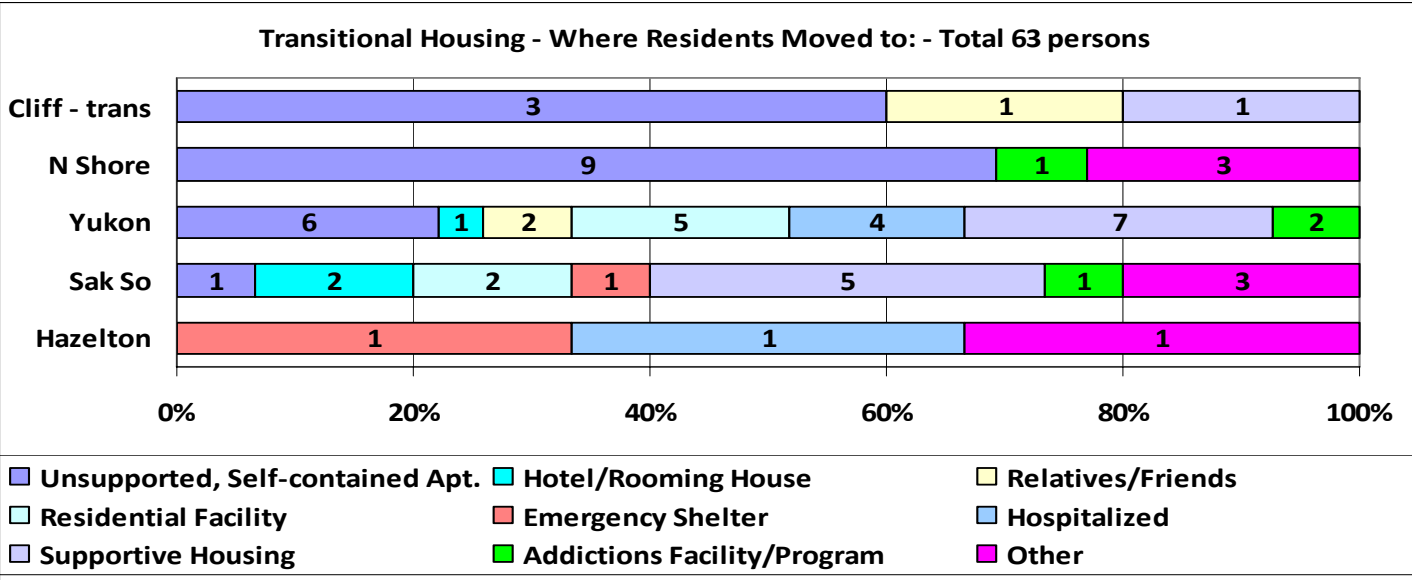
During their time within the transitional housing, residents work towards their own goals, with the assistance and support of Tenant Support Workers (TSW). The goals could be as simple as finding housing that is affordable and suitable to their lifestyle. Or it can be re-learning skills such as budgeting, nutrition, cooking skills, anger management, medication handling, problem-solving, shopping skills, etc. Some get involved in vocational training and volunteerism, others take educational courses. However, often they recognize that they need support to successfully maintain a stable living environment.

**Transitional Housing Resident Profile**





63 individuals left Lookout's transitional housing this year. The greatest barrier for people moving is the lack of affordable housing, particularly housing that is supported. However, 22 (35%) who left transitioned to independent housing, including 5% who moved to SRA's. This primarily is through a fast track system in place with BC Housing. Another 13 (20%) went to supported housing, while 7 (11%) went into care facilities as they needed permanent supports to cover an increased level of care and a further 5 (8%) were hospitalized. We were really pleased that 4 (6%) transitioned to rehab programs! 3 (5%) people moved in with family/friends. Of these placements, primary health needs were: 4 (6%) physical health, 15 (24%) mental health and 5 (8%) lived with addictions. 32 (51%) had a decreased need for support. 2 (3%) individuals went to other venues, and 2 left the area. Sadly, 5 (8%) individuals died during their tenancy. The deaths are difficult, we can only take solace from our satisfaction surveys which indicate that their life ended when they were more stable and happier than before.



Individual housing reports follow, by the staff/managers of the various housing.

## Hazelton Residence

*The 39-unit Hazelton 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 Hazelton 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. Five rooms are designated to folks who are living with HIV/AIDS.*

Although the Hazelton Residence is considered to be transitional housing, we recognize that many residents are doing as well as they can and are unlikely to move to more independence. Those who do leave often move due to the need for more care than the Hazelton can offer. Turnover, as usual, is low; in 2007-2008 we had only **2** new admissions and housed a total of **41** people. Sadly, **3** residents have passed away during the year, one early in 2008 and two at the end of March. We will miss Bob, Barry and John.

There was a fire on the third floor of the Hazelton Residence on New Years' Day causing significant fire and water damage to the south side of the building. Tenants were patient and endured the disruptions and repairs with good grace. Bedbugs, common in the Downtown Eastside, continue to be challenging. Thankfully, the Hazelton has remained relatively pest free this past year. Re-appearances of highly contagious diseases (norovirus and other easily spread bacteria/viruses) also continue and are concerning, especially to people with compromised immune systems. Strict protocols around cleaning common areas have enabled staff to halt the spread of disease almost "in its tracks".

The involvement of BCIT nursing practicum students has been a valuable addition to the programs this year. Their workshops on health information and health promotion are being well received and tenants have appreciated the fresh energy and perspective that they bring. Many thanks again go to Shirley Kolb, a talented artist who volunteers her time to work with residents and to Dr. Tammy Gracen, a podiatrist who comes in to provide invaluable foot care to residents. Also to MDS Metro Laboratory Services who comes regularly to hold blood work clinics ensuring that necessary blood work can be done. Shirley led the tenants in creating a masterpiece for the Cadillac Fairview fundraiser for the Downtown Shelter and Hazelton. That event was incredibly successful, and we were able to replace much furniture that was decrepit & subject to pests.

Although **5** rooms are designated for people living with HIV/AIDS, housing and services were provided for **17** individuals living with HIV/AIDS throughout the year and **12** remained at the end of March. Lookout's philosophy of harm reduction and client focused support recognizes that the residents are the experts on their own life. When they know that staff are not judging their life choices, residents are able to be honest in discussing issues and concerns with staff and make healthier choices.

Thanks goes to our resident volunteers who are doing much hard work, assisting cooks and maintenance staff. And, as always, we are grateful for the contribution of Dr. Sue Burgess and community nurses, Susan Giles and Evanna Brennan, and their team for all the assistance they provide and the excellent and compassionate care for our residents.

## 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 downtown and the North Shore mountains and is a cool place to relax on a hot night.*

As the program is transitional, **15 rooms (39%)** changed hands during the year. Residents moving in came from a variety of sources, the majority coming from unsupported SRA's and rooming houses. Most new residents (**55%**) came to Sakura So because of the level of vulnerability and risk they had been living with in their previous housing and their need for safer, supportive housing (**30%**). Those who left the program moved to a variety of options with the majority moving either to unsupported housing (**20%**) or to supported housing with more appropriate levels of support (**33%**). For those moving to other supported housing, a few moved to more supported housing, based on increased needs; most however, were able to move to housing with more independence and less support.

Only one Japanese resident (from when the building was owned by a Japanese Society) still lives in the building. Today the building and program are becoming well-known for providing safe and supported housing for transgendered people or for folks beginning their gender transition. The community is tolerant and accepting. Residents accept their neighbours as they present themselves to be and overall, there is a warm and friendly sense of community as all are accepted and welcomed.

*"People are like a big family here."*

Building maintenance issues continue to pose a challenge to the building and, as the building is roughly 100 years old, much needs doing. Lookout is awaiting a response for a RRAP grant applied through CHMC. In the meantime, staff do their best to keep the building clean and working. Bedbug infestations continue to be problematic and life skills training includes teaching residents methods of reducing the risk of infestation.

Thanks to funding from Vancouver Coastal Health we are able to have a part-time tenant support worker whose focus is building life skills among the residents to support them in growing towards independence. The community meal is the highlight of the week as generally more than half the residents come to help prepare and eat in community. Vancouver Coastal Health's new Integrated Clinical Housing Support Team has enabled residents to be more open about health issues, resulting in issues being dealt with pro-actively before they become emergencies.

Over the past year, we have seen two of our residents take part in the job training program at the HAVE Café downstairs. The café is a great resource for the neighbourhood and welcomes Lookout residents into the program, teaching them the skills to move forward into employment in restaurants. Overall, the program works very well and we are gratified by the response of the many individuals and groups who tour the building. Feedback from visitors always includes comments on the obvious sense of community and friendliness in the building, the safe environment that the building provides for folks who are often at high risk on the street, and the excellent work that the staff are doing, in spite of the challenges.

## 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.*

The transitional housing team provided housing to **65** individuals, of whom **52 (80%)** were male and **13 (20%)** were female. This translates to a turnover of a whopping **27** units this year alone! Intakes came largely from hospitals and emergency shelters (**55%**). We saw a dramatic increase over last year in the number of residents living with the challenge of mental illness (**62%**) and physical disabilities (**14%**), with lack of social skills (**31%**), addictions (**2%**) and dual diagnosis (**8%**) round out the profiles for Yukon tenants at the end of the year.

For those residents that moved out this year, an astonishing **45%** either moved on to independent living or another permanent residential housing facility. **26%** moved on to other permanent supportive housing centres that will continue to meet their needs. This is a great success for our residents and the program. This indicates that through the transitional

housing program, permanent housing needs were addressed, and for at least **71%** of the residents, the individual cycle of homelessness has been stopped. **6** people successfully moved into unsupportive independent housing, **5** people moved into a permanent residential facility, **7** moved into other long term supportive housing, while **6** people entered a hospital, Riverview or a rehabilitation facility.

Tenants meet with Tenant Support Workers upon intake and every 3 months to set goals and to review case plans. This is an opportunity for the tenants to touch base with the staff. However, staff is available at any time if tenants need support more frequently.

The biggest challenge in ending people's homelessness is giving people the skills needed to live independently. The ability to manage medications and finances is very important in successful transition into more independent living. This year **7** people were taught to manage budgets and finances, while **9** people were newly taught to manage their own medications. At any given time this year, there were **23** people working part time. Tenants hold positions in restaurants, retail, theatre, and at a beauty salon. On average **13** people volunteered in the community and **28** new people volunteered as part of our in house volunteering program. That's a total of **92%** of tenants contributing many hours inside the program. Another involvement is with the Tenant Advisory Committee which deals with items such as getting mailboxes and payphones, completing housing applications, and discussing income tax preparation.

According to our satisfaction survey, **92%** of residents feel more satisfied with their life and **85%** feel their physical and mental health has improved while living in transitional housing at Yukon.



Yukon Transitional Housing is supported by our tenant selection committee which is made up of community organizations (Midtown Mental Health, Community Transition Team and Lookout Outreach) lending their expertise and guidance. This creates accountability and allows for a broad spectrum of people accepted as tenants into the transitional program. Yukon also maintains close working relationships with many community agencies including: Vancouver Parks Board, Quest, VANOC, Carnegie, Coast Foundation, Raven Song, Midtown Mental Health, VCHA, Safe Ride, Kettle, Community Transition Team, La Boussole, Urgent Response Team, YWCA, and Mount Pleasant Community Centre. Recently, Yukon Housing Centre has become involved with the Mount Pleasant Social Transition Team which includes local businesses, two churches and city hall to discuss the changing face of Mount Pleasant and to address and discuss solutions around the growing homeless population in this area. Tenants also serve in an advisory role to Lookout's new housing project on First and Main Street by discussing the environmental sustainability, building and studio unit design, possible programs for within the building and participation in the building operations.

## Cliff Block, New Westminister

*The Cliff Block, a heritage building in New Westminister, 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.*

This year in the transitional housing at the Cliff Block, we housed **21** individuals, with **5** people moving in/out. We experienced a **100%** occupancy rate as we have since opening. At the Cliff, **48%** of the residents are women, much higher than the usual Lookout norm of **25%**. The majority of our tenants live with mental illness, often complicated by medical issues. Some are learning better ways to communicate with others.

In addition to the walk in clinics, a few GP's and dentists have been located who are open to working with our tenants and are willing to direct bill Blue Cross as necessary. Due to the hard work and commitment of staff many of the previously medical resistant tenants have 'hooked up' and are receiving consistent care.

A great success (dare it even be written, lest a hex be put upon it) in labour, time, and peace of mind is the acquisition of 'bedbug proof' covers for box springs and mattresses. It seems that these have proven effective as 'outbreaks' are small and quickly dealt with.

There is limited time, especially during the day shift, for the kind of one on one attention that staff would ideally give to tenants' daily life skills management. Many tenants can identify areas where they want to improve but lack the follow through skills and success recognition. Thankfully, the Cliff Block has enjoyed the benefit of working with Human Service practicum students from Douglas College. Because of this opportunity, staff have been able to devote adequate energy to targeted change with individual tenants that require multiple mini goals to accomplish (improved health via nutritional shopping and meal preparation, exercise, self care projects, etc.).

**"This place saved my life." - Paul F.**

The past year has seen attrition in the NWMH ACM team but happily, they are almost back to their full complement and are able to follow/support case plans as in the past. This team is integral to our work – supporting their clients to maximal independence and life satisfaction.

During the year there were **5** residents who transitioned from the Cliff Block, no longer needing our level of support. **3** moved into independent apartments, while **1** person has moved from the province to be with family. Another person transferred within the Cliff Block to permanent supported housing. We are so pleased to have had several past tenants visit periodically, all of them expressing gratitude to the Cliff program and staff. They take a lot of pride in the maintenance of their own independent living situations. One past tenant continues to attend the education classes twice a week.

The TSW's regularly working the 3 shifts have now been together for approximately 12 months. The team has good relations and can work "together" independently. This kind of pulling together focus takes time, diligent communication and an optimal blending of personalities, abilities, and 'tenant first' mentality. We are fortunate that this team process has been so positive making tenant support a cohesive and progressive work.

#### Challenges:

**Four (4)** of our tenants have been ready and actively waiting (6-12 months on BC Housing 'priority list') to transition. **7 to 8** tenants are on the wait list and are content with 'moving when their turn comes up.

*The Cliff Block Wait List has **19** new applicants since August 1, 2007. **6** individuals from the previous list have been housed at the Cliff – the others were either alternately housed or did not provide updated contact information and could not be found.*

There continues to be a need for homemakers with several of our tenants unable to maintain sufficient hygiene. In collaboration with TSW's, specific behavioural goals can be monitored & small improvements encouraged. (i.e. garbage put into garbage pail, clothing changed when dirty & put in hamper, showering/bathing). In spite of 'best efforts,' there are tenants for whom these services will always be essential.

## North Shore Housing, North Vancouver

*In April of 2005, we opened our North Shore Residence, 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 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.*

The demand for supported housing on the North Shore is apparent in our **100%** occupancy rate since opening and a waiting list nearing **200** applicants. Homelessness is no longer necessarily the consequence of single issues, such as mental health or addiction. Increasing numbers of people are finding themselves in that precarious socio-economic zone where daily attention

is needed to stave off impending economic consequences that can result in a loss of housing. Previously hard-working and conscientious individuals, after a string of unforeseen events, such as loss of employment, loss of relationship, family tragedy, long term illness or misdiagnosis, or a culmination of pressure, anxiety and feelings of hopelessness resulting from these seemingly uncontrollable events suddenly find themselves cut adrift and marginalized from the very communities they once were part. With few resources and the most basic social benefits equal at most to 55% of the poverty threshold income, this marginalization quickly becomes chronic, and the resultant stress and loss of direction overwhelming. This is particularly so when the local community does not recognize the needs of the poor or the needs of men and women who suffer from situational or systemic mental and physical barriers to housing.

Lookout's North Shore Residence is a two year transitional program which attempts to address core issues around the loss of housing while also supporting and attending to the ongoing resolution of mental, emotional, or physical impediments to well-being. The program specifically targets those North Shore residents having few, if any, current housing alternatives, unable to meet their own basic needs and not able or willing 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. Emphasis is placed on forming trusting relationships with the tenants and working with them toward their goals.

In the past year, tenants from the housing program volunteered over **800** hours towards the running and upkeep of the North Shore Housing Centre, working in the shelter laundry, clothing rooms, and kitchen, and in maintaining the upstairs tenancy itself or running social programs, such as movie nights and barbecues for the residents and helping to plan renovations to our common areas. Residents have 24 hour access to the lounge, common kitchen and internet services.

Funding limitations force us to find innovative ways to fulfill program mandates such as utilising partnerships such as practicum students from local colleges and volunteers from the community. We greatly value their contribution to the tenants' well-being.

Monthly tenant meetings give us direction and keep us informed of ongoing issues and problem areas that need addressing and also allows for more focused participation of tenants towards community building and problem solving.

Lookout's North Shore Transitional Housing is part of a network, within the North Vancouver and Greater Vancouver communities, of social service, health, and non-profit organisations. We continue to form and maintain trusting relationships within this network 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.

Currently, the North Shore Housing is home to **10** women and **15** men. Of these, while **17** are receiving Disability benefits from the Ministry, and one carries the designation of Person with Persistent Multiple Barriers, **5** receive Single Employable benefits. **11** residents are dealing with addiction issues, and **9** have diagnosed psychiatric issues. **17** have concurrent disorders. **1** of our tenants is dealing with physical conditions that chronically impact his/her well-being. **22** of our residents are on medication: **2** of these receive administration by the staff, the rest are under supervised self-administration.

Over the past year, **13** individuals have left our program and, as forecast in last year's report, **9** of these residents moved into their own unsupported housing in the community of their choice: North Vancouver, West Vancouver, and the West End of Vancouver. These placements were made possible in part through our relationship with BC Housing's Health Services Department, and are part of the continuum of care model currently in place among health service organizations to support individuals at risk. Another individual, in treatment as of the last report, followed through with Second Stage housing and then moved on into independent housing. We are saddened by the loss of **3** of our tenants who passed away during this past year.

***"From the day I moved in I felt better, safer; less anxious about life. Knowing there was someone here that is available as someone to trust, someone who really cares, and who can guide a person, is a wonderful thing." - Matt P.***

# LOOKOUT'S SECOND STAGE PERMANENT HOUSING

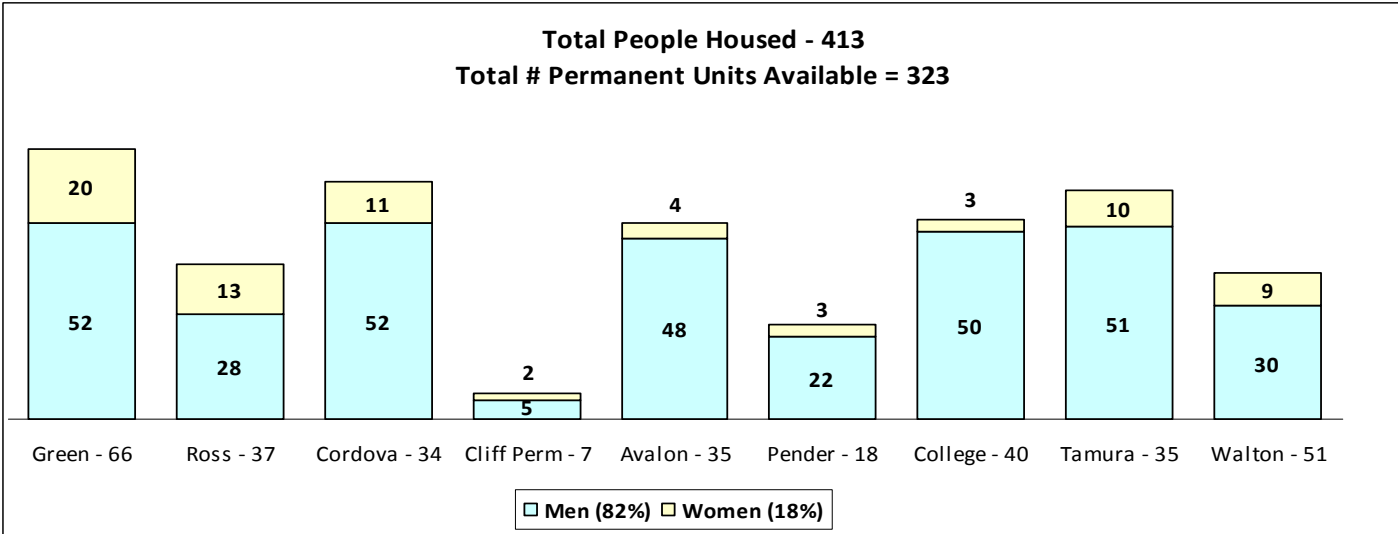
*Lookout offers permanent housing with some support for people with a history of homelessness and who no longer require assistance in day-to-day living, but who require support to maintain and flourish in their independence. Lookout has been providing this "third stage" housing since 1978, starting with 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 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.*

This year Lookout embarked on a totally different method for housing people facing housing challenges; we were pleased entered into an Agreements with BC Housing to provide property management services in two of the single room accommodation hotels, one in New Westminster (College Place), the other in the Downtown Eastside (Walton). Both these hotels require extensive renovations to fully meet health & safety standards and to improve the well-being of the residents. We entered into discussions to add a third hotel at the end of the fiscal year. The property management is an interim measure; after both hotels are renovated, it is the intent of BC Housing and Lookout to sign operating agreements, allowing us to expand the supports and activities available to the tenants. These hotels bring another **86** roominghouse units into Lookout's supported housing program, making **323** units available in our permanent supported housing stock! **213** of these units are single room accommodation, and include **122** units made available through partnerships with private owners, who make rooms available to Lookout clientele. In return Lookout places on-site Lookout staff for 7.25 hours per day, 7 days-a-week to provide support and assistance to the tenants thanks to funding by Vancouver Coastal Health, BC Housing and private donations. Please note: we have little information about the tenants of the new hotels, reports including them are limited to the number housed, turnover and residency by gender.

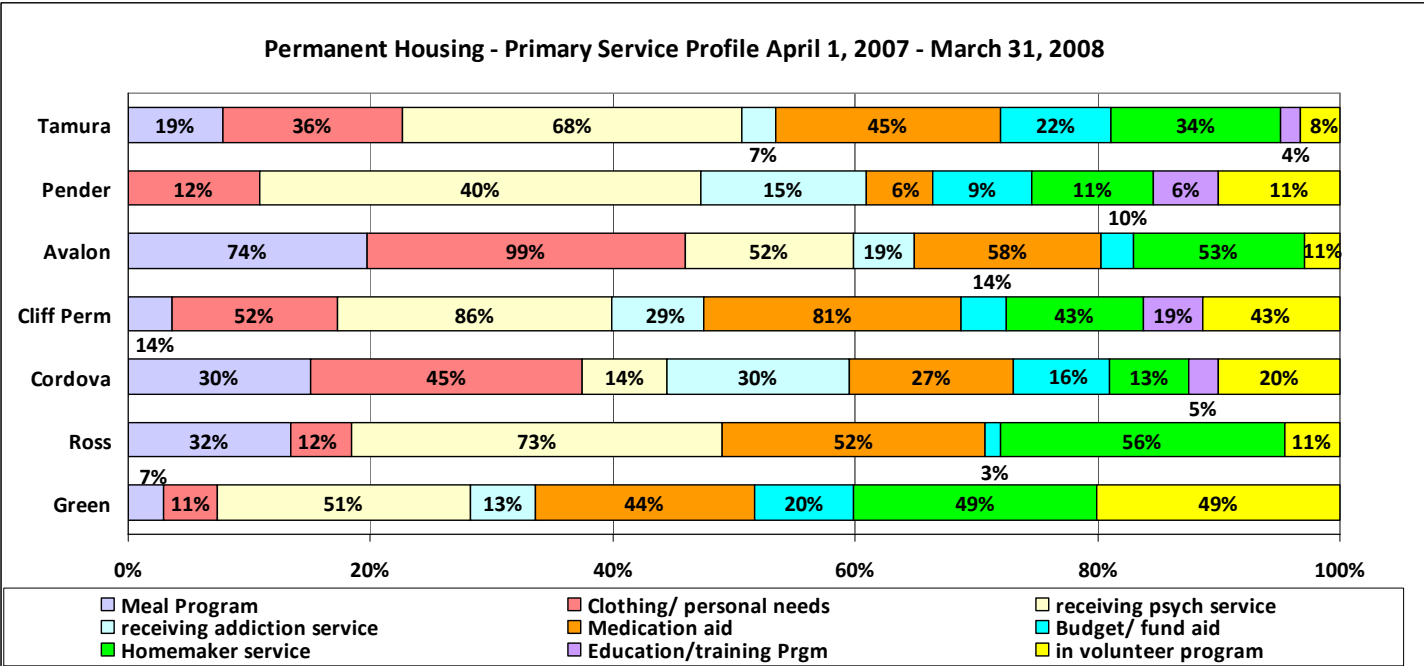
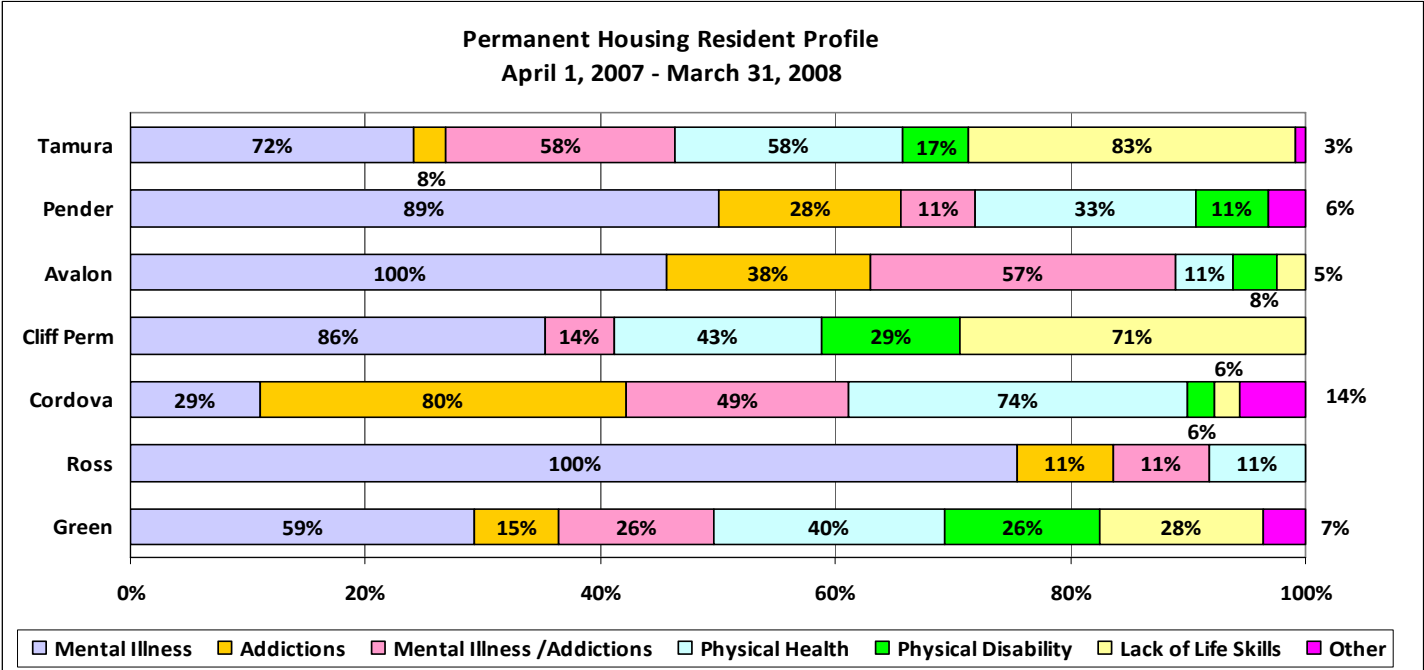
**Permanent Housing Waitlist  
1859!**

Despite the increase in housing units available, we have seen our waitlist increase just over **5%** over the past year (up from **1,596** in 2004/5 and **1,706** in 2005/06 and 1,769 in 2006/07) to **1,859** as greater numbers of people with challenges continue to find fewer and fewer housing options.



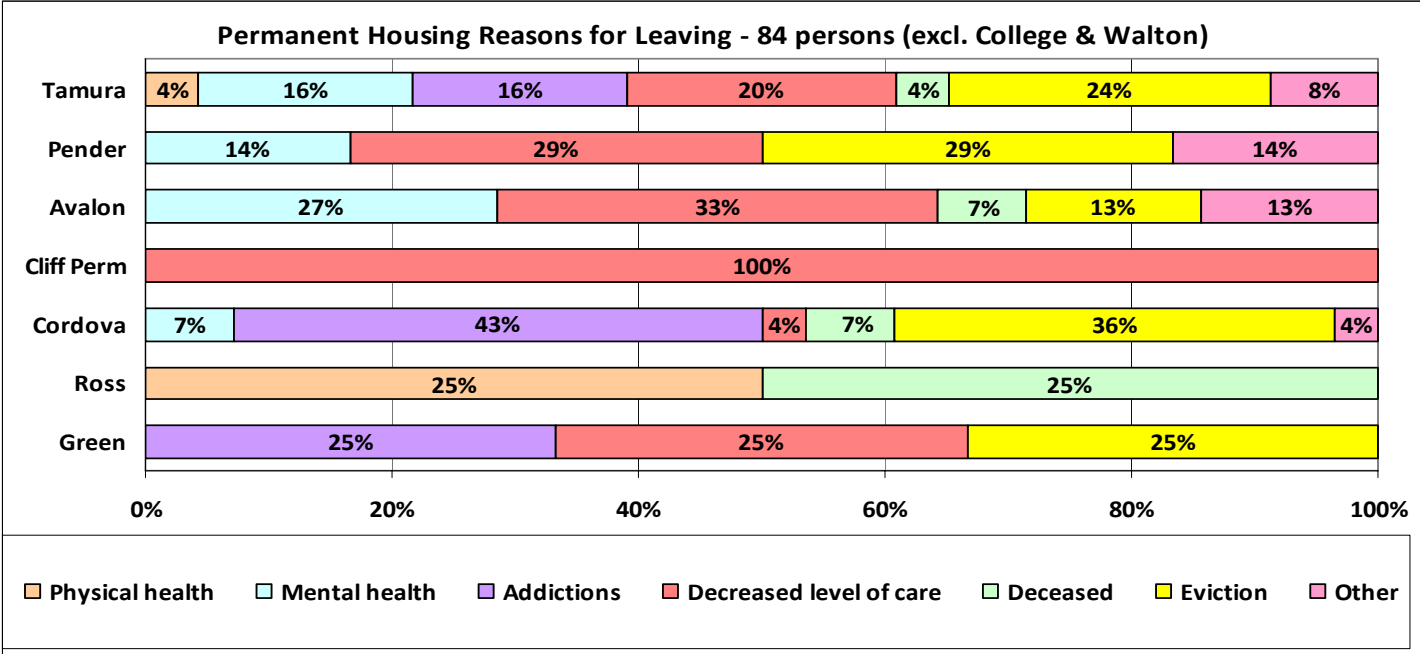
As last year, ever rising rental rates mean that affordable housing remains elusive for many, especially outside of the Downtown Eastside. Within the Downtown Eastside, having one's own bathroom and bedroom is usually a dream. Lookout's permanent housing provides highly sought after housing: particularly given our minimal barrier, supportive approach. Our tenant selection system is established to ensure that those who have the least housing options and are at high risk of homelessness are those who are housed.

The primary reasons people have so few housing options is that they live with a variety of challenges including mental illness, addictions, both mental illness and addictions, and a lack of life skills such as learning to say no, anger management, poor insight into basic hygiene skills or maintaining their housing (e.g. collectors). People with physical health and/or disabilities also are highly represented in the residents of our permanent housing.

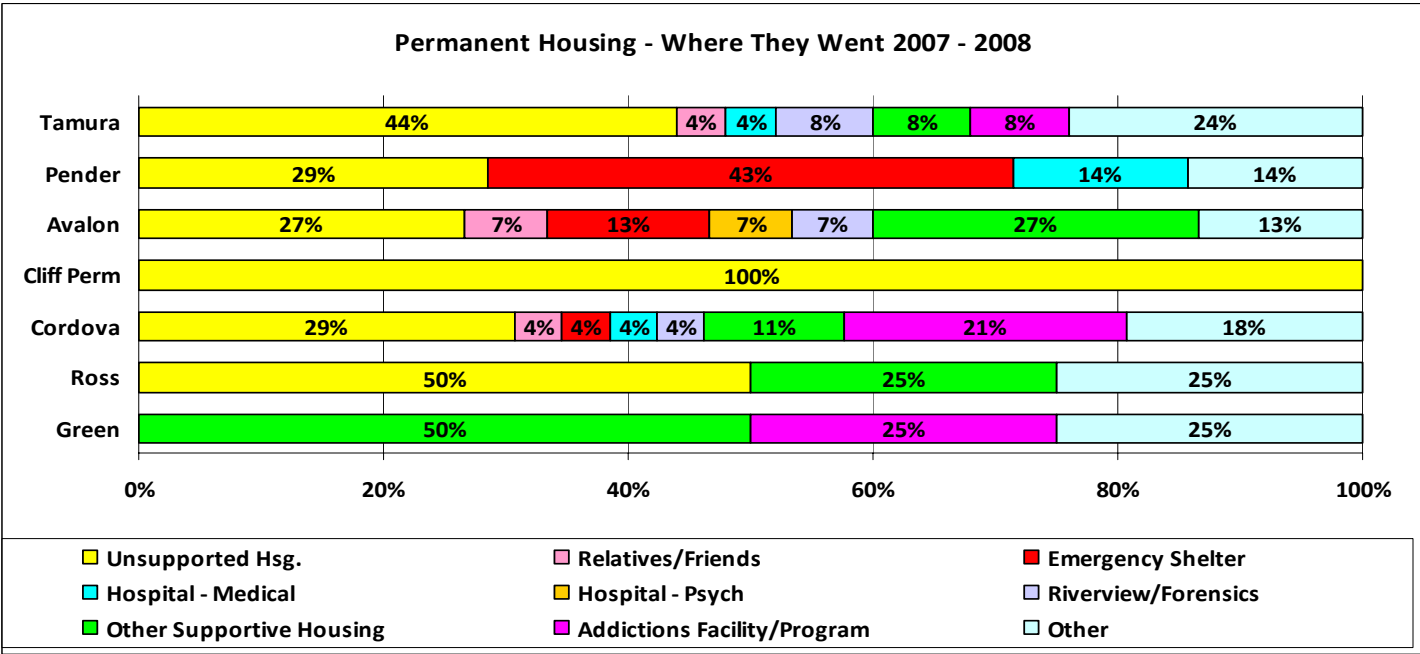


Turnover is generally low, but as you will see from the individual housing reports, people are successfully relocating to housing that best meets their needs, including moving between the various Lookout housing programs with their differing level of

support and interventions. Of the **84** who left (not including College Place and the Walton), **21 (25%)** were evicted because of safety issues. It takes a lot to get evicted from Lookout housing, and most evictions occurred in the partnership programs, reflecting a need to increase staff supports.



**100** individuals left our permanent housing during the year, including **16** who left from the two property managed hotels. All subsequent reports are based on the housing in which Lookout provides support and service. **84** people moved out of these units. Of these **84** individuals, **28 (33%)** went into unsupported housing, while **12 (14%)** moved to other supportive housing, usually within Lookout. **6 (7%)** ended up in shelters, mostly due to addiction issues. Many of our residents live with addictions, and **10** people (**12%**) were placed in treatment, significantly more than the **3** people who received treatment last year. **3 (4%)** went to stay with family/friends; while another **5 (6%)** were hospitalized for long stays within psychiatric hospitals. **5 (6%)** died during the year and **3 (4%)** were long-stay hospitalized for medical reasons. **15** people (**18%**) left the programs for other reasons.



***Both the Green and the Ross house people who have a history of homelessness and no housing options and 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 tenants.***

## **Jeffrey Ross Residence**

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

The Ross continues to be a quiet community, with many long-term residents, including some that have lived in the building since the opening in 1993. Vacancies are few; we had **4** people move in over the last year and housed a total of **41** people. Only **5** residents are under 45 years of age (**3** men and **2** women); four men are 65 or older and the remaining residents are 45 - 64. Aging-in-place issues continue to be the greatest challenge for the building residents and staff. The number of hospital stays increased again this year, from **11** stays last year to **16**, an indication of the frailer physical and mental health of some residents. **19 (52%)** of residents were assisted with medication. **21 (56%)** of the residents needed home support and cleaning services. A reflection of aging-in-place and frailer health is bedbug management – it is a huge amount of work to help residents keep bedbug free.

This year, the Ross has had the services of a new team, Vancouver Coastal Health's Integrated Clinical Housing Support Team. The intent of the team is to bring primary health care to people who would not normally access those services, particularly those at the Ross living with mental health issues. This team augments Lookout's staffing on an in-reach basis, providing a variety of services including a weekly nursing clinic, special purpose clinics, assistance with appointments and medical tests. Building trust relationships with the nurses has enabled residents to be more open about health issues, enabling those issues to be dealt with pro-actively rather than when the issues become emergencies. Huge thank you to this new Team!

With the assistance of an enthusiastic new resident volunteer, we started a weekly "Coffee Time" with coffee, goodies and conversation. Our wonderful volunteer also started a monthly community meal and catered the Clinical Support Team's special purpose clinics. Thanks to staff and our volunteer, Christine, for helping build community and for promoting social interactions and friendships among the residents!

Building maintenance continues to be a serious concern. The Ross only has four hours of maintenance funded each day. Tenants are unable to do small repairs in their suites due to lack of skills and are unable to call in a tradesperson to do the work due to cost. We especially want to thank Blue Shell Services and their workers for the excellent cleaning services that they provide to a number of building residents. The regular worker Nini has done an excellent job of building relationships with residents and they work with her willingly and cooperatively to keep their suites clean.

## **Jim Green Residence**

*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. The 67-unit Jim Green Residence is proud to bear the name of one of the Downtown Eastside's preeminent advocates for safe, secure, affordable and decent housing in the area.*

This year, the Jim Green Residence housed **72** individuals, with only **4** suites changing hands. **1,859** people are on the waitlist for units, a common list with the Jeffrey Ross Residence. With **90** new applicants this year and only **8** suites available between the Green and the Ross buildings, most applicants will never get in.

This has been another busy year at the Green. A focus has been the building of community and the development of the Tenant Board. With the assistance of a Langara College practicum student, the Tenant Board authored a portable Tenant Board Policies and Procedures Manual which has been offered generously to other Lookout sites. The Tenant Board has assumed a grassroots leadership role in the community, hosting numerous social and educational events – some open to other sites. The first annual Health Fair and BBQ was a huge success with Lookout residents from all over the Downtown Eastside attending along with the Jim Green folks. The fair was organized with much assistance and hard work by some of our many Stenberg College Practical Nursing practicum students. Presenters included DayTox, Buckshon Pharmacy, and BC Persons with Aids Society, Coast Mental Health, and the Portland Dental Clinic.

Another focus has been on promoting health and fitness for residents, with the planning and delivery of many health promotion workshops by practicum students from Stenberg College and from BCIT's nursing program. Popular workshops included Dealing with Depression, Home Cooking Skills, and Healthy Bodies. This is particularly helpful given that many of the residents of the Green live with disabilities, mental illness and/or addictions.

Life Skills programs have included an Interviewing Skills workshop and a three part series on Stress Management, Goal Setting and Relationships facilitated by practicum students from Rhodes College. Also popular was the six-week Apartment Living Skills program put on by Strathcona Mental Health Team Rehab Department that focused on budgeting, cleaning, de-cluttering, nutrition, and making one's house a home. Many participants were inspired to make significant positive changes in their living spaces as a result.

## Cliff Block Residence

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

Our tenants have told us they feel they are a part of the community. The transformational "let's watch a movie, have a nibble and perhaps a coffee" kind of thing, lead to conversations that make a difference and help to empower individuals. This approach is new for our tenants and so it takes a while for them to get used to this kind of relationship. Many of our tenants come from a place where they are told to be quiet and don't cause any problems or else you will lose this or lose that. When given the opportunity to just chat, our tenants regain a sense that they matter in the world.

This year we celebrated **one** of our **7** tenants moving out to independent housing! This permitted us to transfer one of our transitional housing residents into this permanent housing, much to the relief of the tenant! An issue is that there isn't housing available that is safe, affordable and supported. We are always **100%** full! **25%** of the tenants are women. All of our permanent tenants live with mental illness, often complicated by medical issues or disabilities. Thanks to partnerships, we've been able to offer tenants opportunities:

- *For the fourth year, the New Westminster School District's Transitional Community Adult-Based Education Service* has continued to provide educational services to Cliff Block residents who have shown an interest in working toward high school completion. This year **4** students have made steady progress on their various Math and English courses.
- *Dual Diagnosis Anonymous* continues to meet on Thursday evenings. Into their 4<sup>th</sup> year of meeting at the Cliff, the numbers of participants continues to grow and change.
- *Life Skills\Cooking Skills Group* meets on Sundays and teaches involved tenants the basics of preparing healthy meals. This program also offers individuals the opportunity to learn the skills necessary to purchase and prepare nutritious and affordable foods. Popular with residents, this program leads to improved nutrition, creative and healthy meals, safer cooking practices, better housekeeping routines, group participation skills and sociability.

Lookout continues to be very involved in the community a Homelessness Coalition, New Westminster Interagency Council, Community Development Society and other committees and groups surrounding homelessness and actively promote partnerships in the community. Initiatives and policy shifts in the United States and eliminating homelessness (through the provision of supportive housing).

We want to recognize the services of volunteers and the contribution they make, including our student practicum's and placements. We certainly could not do it without them! Major thanks also to the staff, their support and encouragement to the students, each other and the residents continues to be a keystone to our resident's success.

**From Lee, former Cliff resident who moved to independent housing . . .**  
**"I've moved to BC Housing, low rent for seniors! I love it, it's a bright bachelor suite with a wall of new windows that look South! It's quite a view. I can have my cat!!!!!"**

## HOUSING PARTNERSHIP PROGRAMS

## Avalon Residence Partnership

*The Avalon is a partnership formed in June 2004 under the Vancouver Agreement with the purpose of improving living conditions in SRA (Single Room Accommodation) hotels in Vancouver's Downtown Eastside. The pilot project demonstrates that with good management of hotels, incentives to upgrade and improve hotel premises, and support services for hotel residents, hotels will be safer and healthier and residents will achieve an improved quality of life. The success that Lookout has had in previous partnerships with privately-owned hotels has provided a model for supported hotels. The Avalon dedicates 35 hotel units to this partnership.*

This year the Lookout part of the Avalon has been home to a total of **52** individuals, with **14** new people moving in over the course of the year. Consistent with the past, the majority of new admissions are due to the applicant's need for support and case management. This year, **50%** of our new residents came from unsupported or substandard housing; the remainder came from shelters or hospitals, including Riverview. Most residents need support to meet their daily needs: **53%** require some level of home support or cleaning services, **74%** need access to a meal program, **99%** need assistance in getting personal needs met (for example, getting low cost or free clothing and personal hygiene items). These numbers tend to be consistent with previous years. As well, the physical and mental health of many of our residents is fragile, with **33** separate hospital admissions during the year.

This past year has seen the continuation of a trend towards a lower turnover as people settle in and feel safe and "at home." The number of residents leaving was **15**, compared to **20** last year. Those who left the program did so for a variety of reasons: long term admissions to Riverview, moving to more independent housing, or moving to own accommodation.

In our annual satisfaction survey, **80%** of the tenants expressed more satisfaction with their life since moving into the Lookout-sponsored Avalon units. **80%** of them felt safe in the building, **50%** expressed strongly feelings around their safety. **90%** reported feeling safer than elsewhere. **90%** reported that their personal health had improved since moving in, and **90%** also felt happier. When asked if there was one thing they could change at Lookout, **70%** identified they wanted longer staff hours. The satisfaction survey demonstrates that the tenants value the support they receive from staff and recognize that it contributes to their safety and stability, and improved quality of life. This confirms that the goals of the program are being well achieved!



We again thank the Angelicola family, the hotel's owners, for their support, assistance and prompt attention in providing supplies and maintenance. Many thanks to Mina Angelicola, to her sister, Felicia, and to Mina's husband, Sergio Baldacci, for the hotel is always clean and in good order, repairs are prompt, and hotel staff are willing to go the extra mile for the residents to ensure they are supported and comfortable. And we thank Ernie Rose and his dedicated crew of volunteers for their daily meal program, providing low-cost, tasty and healthy food to residents.

## Cordova's Residence Partnership

This first year of operation was a 'building' year as Cordova's Residence had been largely empty prior to the roof being replaced. It has been a time of settling in, getting to know residents better, and assisting them in improving their quality of life.

Staff has provided service to **63** people this past year, reflecting an extremely high turnover rate. **38** new residents moved into the Residence during the year, the majority of them male (**82%**). **58%** of our new admissions were homeless when they moved into Cordova's Residence, either coming from a shelter or from absolute homelessness. Most came with minimal, if any, possessions. Getting folks set up with clothing, bedding, and household goods to create a "home of their own" has been the start of relationship building between resident and staff.

Providing assistance with food and nutrition has also a great way to build relationship. Cordova's staff have been able to access food donations from the community and so provided some of the staples that residents need when they run out of

money – bread, noodles, vegetables, peanut butter. As well, thanks to donations from Quest and Herbal Life, we have been able to offer protein bars, soups, and beverages.

The majority of Cordova's Residence tenants are dealing with addiction issues, generally in conjunction with mental health or serious physical health issues, including HIV/AIDS. **14** residents accessed Detox services this year, and, very impressively, **11** residents (**39%**) made a commitment to recovery and elected to go into treatment or to a recovery program. The tenant support workers have provided gentle and consistent support in bringing residents to the place of desiring change in their life, and have assisted them put steps in place moving towards recovery. Several of our former residents have come back for a visit, and seeing how well they are doing now has helped to inspire others to also move towards change and recovery.

A year ago, Daisy Dong, for many years the owner of Cordova's Residence, passed away at the age of 105. We continue to honour her commitment, and the commitment of her family, particularly her daughter Gwen Boyle, for providing safe housing to the Downtown Eastside community. We are concerned that the family is feeling pressured to sell the property. Should the property sell, there would be uncertainty whether the new owner would be interested in continuing to house local residents or to continue working in partnership with Lookout. This would be a serious loss to Lookout, and the community, as the housing is critically needed to prevent further homelessness.

We again thank Martin Mannette, the leaseholder, for his support and willingness to go in new directions with Lookout. We honour his many years of commitment to the Downtown Eastside and its' residents.

## Pender Residence Partnership

*The Pender Residence, an 18-unit Downtown Eastside roominghouse, 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.*

This year Pender housed a total of **25** individuals and had a **39%** turnover rate, with **7** people moving in/out through the course of the year. Only **three (12%)** of Pender's tenants were female, which is **50%** lower than Lookout's usual norm. **28%** of the move outs were to independent housing, one person moved to a supported mental health residence to better meet his needs and one person moved to assisted living due to physical challenges. Of all the individuals housed this year, **89%** are coping with serious mental illness, while another **28%** live with addictions. Most, if not all of our tenants are vulnerable and have conditions that compromise their health. Outreach deals with any issues that arise when people are not following treatment plans and as a result tenant selection has moved toward dealing with individuals that appear to be stable in their treatment regimens and have some outside support system in order to foster more successful outcomes for the clients involved. Outreach continues to assist individuals. On a positive note **two** of the tenants are now working regularly and **one** of those has been able to attend an advanced training course to further his career.

Heidi, the liaison Outreach Worker, and the rest of the Outreach Team continue to do wonders to assist the tenants who have few options and are to be commended for the 'at the drop of a hat' service they offer. We thank them, and the owner of Pender, for continuing to partner with us!

## Tamura House Partnership

*The 110-unit Tamura House program has been a partnership with St. James Community Services Society since December 2006, where Lookout staff provide support and assistance to 35 residents of the heritage SRA roominghouse.*

Of course, the first two years of a new program brings with it many challenges. Bringing together **35** new residents who have not lived together before and into a building with approximately – existing tenants has its own set of problems - a community is not built overnight. As with any new program, the turnover is fairly large initially as the community begins to “gel” and residents begin feeling comfortable. During 2007-2008, there were **24** new residents at Tamura House - a total of **61** people housed during the year. New residents came from various locations with the largest group (**9**) from shelters and the next largest group (**6**) from inpatient psychiatric care. At times we had one or two residents in excess of the 35 rooms we had committed to, primarily due to availability of rooms at Tamura and the urgent need for others to access our program support.

St. James, too, during the year adjusted their staffing profiles to reflect changing demands on the building. That included moving tenants towards taking more responsibility for the safety and security of their home. Security in the building was increased, having security guards on evening and overnight shifts to ensure undesirable elements from the street did not get in the building and victimize vulnerable residents. Lookout and St James worked together to resolve difficulties that arose.

Lookout staff assist new residents in settling into the building, ensuring that basic needs are met and assessing what needs to be addressed in order to be successful in their housing. Supports could include assistance with medication or managing/budgeting their money, home support or cleaning services, referrals to psychiatric or medical care, and help in dealing with legal or immigration issues.

As the year progressed St. James realized that it was no longer able to continue on at Tamura House. Tamura House is a very old building and the cost of maintenance was exorbitant; repairs (particularly plumbing) were beyond the means of a non-profit society. In March 2008 BC Housing purchased the building and invited Lookout to take over its operation.

In the coming year, the challenges of operating Tamura House will be considerable due to the scope of maintenance and renovations needed. As well, Lookout will be looking at what sort of services and programs are needed to support the existing residents as well as new residents.

## BC HOUSING HOTEL PARTNERSHIP PROGRAMS

*In April 2007 the government of British Columbia announced its purchase of 12 Single Room Accommodation (SRA) hotels with the purpose to preserve affordable housing stock for low income people at a time of rapidly increasing property values. Announcements of a further purchase followed increasing the total number to 19. This provided the opportunity to repair and renovate the buildings to an acceptable standard so people could feel more safe and secure in their homes as well as providing supportive service to the tenants. One of several non-profit housing organizations selected to manage the properties, Lookout assumed responsibility for the 51-unit Walton Hotel (DTES) on December 1, 2007, and the 40-unit College Place (New Westminster) on January 11, 2008. Although outside the period covered by this report, Lookout also took on Tamura House (DTES) in April 2008.*

## Walton Hotel

Lookout took on the property management of the hotel in December and contracted the existing Manager to provide the day-to-day management services. This hotel is in exceedingly poor repair, with significant work required. We spent the four months in this reporting period, working with the Construction Manager hired by BC Housing to revitalize the building. The design team met repeatedly to address needs. Thanks to funding from BC Housing, a part time Tenant Support Worker is in place 3 days-per-week to assist tenants with either renovation issues, or general needs. Catherine, an extremely experienced and well-loved TSW, has taken on this task with excitement! Tenants were moved from the north to south side of the building to permit the renovations to occur while the building was tenanted. Tenants have provided feedback to the design, and have been, with one or two exceptions, incredible with all the changes. This is because they will gain a significantly improved home



...r, no new tenancies have occurred; the rooms are being kept  
...e occupied when Lookout took over. By the end of March, our  
...ated temporarily to make room for others. We are looking  
...d in their revitalized space!

## College Place

**“There’s already a different feeling amongst Walton tenants. It was scary here before with real security issues. Now, the bars have come off the office window. I think it’s starting to sink in that things are changing for the better.”**  
– Catherine, Walton  
Tenant Support Worker

Every citizen in New Westminister, regardless of their life experience, deserves a place to live that is safe, affordable and feels like home. During the summer of 2007 we heard that the College Place was for sale, and that likely it would be converted to condominiums. We requested BC Housing to purchase the hotel (or provide Lookout with a loan to do so), and we were gratified that BC Housing purchased the building. In January of 2008 BC Housing turned the College Place property management responsibilities over to our Society. Like the Walton, we contracted with the existing Manager to provide the day-to-day management services.

The College Place Hotel has **55** units of housing, and housed **53** people when we took on operations in January. After an extensive public process, we were successful in rezoning the hotel, so that we could provide a **15** bed shelter, to open on April 1<sup>st</sup>, 2008. Facing renovations that are not quite as extensive as the Walton, the hotel residents shifted rooms to facilitate both the renovations and the shelter. No new tenants are being accepted while we undergo the planning and renovation period. Since taking over, we have had **10** people move out.

We are very indebted to the tenants; they have been generous with their time, their home and their advocacy – coming to the public hearing to speak in support of the shelter moving into their home. So too, we are extremely appreciative of the City of New Westminister, their leadership has permitted a local solution to homelessness to be established.



# Lookout Emergency Aid Society

## Community Services Programs 2007-2008

### OUTREACH PROGRAMS

*Lookout's Outreach Programs cover intensive short-term (3 to 6 months) support, case management and planning services for chronically homeless people as they require additional intervention and support to successfully attain housing and maintain them within the community. Staff provide services through the Cliff Block in New Westminster, the LivingRoom Drop In & the Downtown Shelter within the Downtown Eastside. Outreach collaborates with other service/treatment providers in the community to improve the quality and stability of individuals' lives. This includes special support to clientele of hotels and rooming houses that provide accommodation to Lookout. We have been very successful in partnering with a few building owners/managers such as the Avalon Hotel and Cordova's Residence to provide on-site staffing where a block of rooms have been provided for Lookout clientele. Reports on these latter programs can be found under our Permanent Housing Program.*

The broad objective of Lookout's Outreach Program is, through minimal barrier services, to stabilize individuals in the community. In practical terms, this means: to get homeless individuals off the streets and out of shelters, to reduce the recidivism rates to shelters and get people into permanent accommodation; for others, preventing them from losing their housing. The narrower version would be serving the immediate needs of people who are homeless or at risk of homelessness where services are not available elsewhere: addressing needs such as health, mental health, medications, nutrition, clothing, hygiene issues, warmth, a bed and some food, developing a case plan and linking the individual with the appropriate community services. Where that service doesn't exist, Outreach tries to create the needed service.

All told, our Outreach teams served **1,616** unique individuals between four programs, two located in the Downtown Eastside, one in New Westminster and another on the North Shore. This year, sadly **93** individuals had confirmed their HIV status, **861** others may be infected but they themselves either don't know, or don't inform.

Overall, our staff provided **12,887** hours in direct service, and made **over 32,000** contacts (defined as sessions over 15 minutes duration) to connect people with required services. Each program responds to the unique needs of their clientele and area, and although services are similar, the programs are varied in how they spent their time. The following statistics are based on the cumulative data of all three programs to give an overall sense of pressures. Individual program data is reflected in the following chart.

	346	LivingRm	Cliff	NS		346	LivingRm	Cliff	NS
<b>Total Unique # People Served</b>	666	365	335	250	<b>Men</b>	73%	78%	71%	76%
<b>New/Reopened Files in Year</b>	792	259	286	215	<b>Women</b>	27%	22%	29%	24%
<b># HIV / AIDS infected</b>	55	20	7	11	<b># at risk of HIV / AIDS</b>	488	186	108	79
<b># Referrals/Contacts Made:</b>	<b>16,559</b>	<b>9,233</b>	<b>4,384</b>	<b>1,888</b>	<b>Total # Hours in direct service:</b>	<b>6,209</b>	<b>3,305</b>	<b>2,276</b>	<b>1,097</b>
<b>To:</b>					<b>Hours spent in:</b>				
Local MH Team	115	835	103	43	Housing Search	9%	9%	14%	13%
Other MH Teams	101	693	75	19	Service Search	4%	5%	9%	9%
Forensic Services	16	91	23	0	Lifeskills	8%	9%	4%	1%
Income Assistance	531	1,700	764	180	Liaison	13%	8%	11%	6%
Pension (OAP, CPP, Union, etc.)	111	123	72	7	Escort	15%	9%	9%	22%
Drug and Alcohol	456	1,250	702	177	Advocacy	4%	8%	3%	9%
Physical Handicap	38	251	73	8	Move	4%	3%	4%	2%
Mental Handicap	20	180	41	2	Counsel and direct	12%	19%	7%	7%
Involved Police	32	93	148	8	Crisis intervention	3%	6%	4%	1%
Care Facilities	28	73	34	5	Support	22%	13%	25%	21%
					Case planning	4%	6%	5%	5%
					Paper work	2%	5%	6%	5%

*Note: principal contacts only listed*

**Contacts:** 34% of contacts were with income assistance, and an additional 3% dealt with pensions. 28% of contacts were with addiction treatment resources. 22% were to connect people with mental health professionals and 7% addressed issues around physical or mental disabilities.

**Service Hours:** Not surprising given the above figures, Outreach staff spent 24% of their time escorting/liaisoning people with various services and they expressed frustration that it wasn't more time, but the access to required services wasn't there. They spent 16% of their time searching for services and housing. Another 12% of their time was spent counselling and directing people to the appropriate resources, and 24% supporting people in crisis. It is this support that allows us to develop the relationships with clients and service providers that become so critical in addressing their issues, or getting their agreement with plans.

*The following are the individual program reports, submitted by the various programs.*

## CLIFF BLOCK – OUTREACH

Our Outreach Program provides services that are well known among the homeless population, local service providers and the citizens. Outreach is there for the most vulnerable who are experiencing homelessness or are at risk of becoming homeless. There is a strong emphasis on early intervention strategies. By fostering a relationship that keys in on self-worth, respect, and understanding we encourage a positive working relationship. 25% of our time is spent forming these relationships to facilitate access and commitment. Educational opportunities and resources provide the groundwork for understanding the complexities of homelessness and when provided, can and will help the individual and the community work towards sustainable solutions. Calls for assistance continue to increase as people become familiar with us and what we do.

This year we were able to serve 335 unique individuals, up 27% from 265 last year. This is due to the increased staffing available as a result of augmented funding from BC Housing. The BC Housing Outreach was also funded for the entire fiscal year versus four months in 2006-2007. Despite this, we still found the needs of New Westminster's homeless population far exceeded our available resources.

Also notable is the 29% decrease in clients at risk of contracting HIV and the 29% increase in clients who are neither HIV+ or at risk of contracting it (when compared to total people served).

As the table shows, the number one task of the Outreach Workers has been to assist people access income assistance, closely followed by advocating for access to treatment either through addiction services or mental health. Access remains one of our major barriers, as often detox beds are not available when people are ready to make a change. We spent the majority of our time, not surprisingly, trying to find shelter and housing for many of the homeless, sending them usually to Vancouver because of the lack of resources in New Westminster.

## DOWNTOWN SHELTER – 346 OUTREACH

Working with individuals this past year has become somewhat harder for Outreach as resources have become increasingly more difficult to access or scarcer in face of higher demand on the streets. Other agencies' (and our own) supportive resources are simply and fully taken up; and often long, long waits ensue for applicants. However, with that said, our Outreach Team served a total of 666 unique individuals this year, spending 6,209 hours with 16,559 contacts made. The modest increase (114) in contacts actually reflects services to fewer unique individuals, increasing contacts-per-individual ratio from 21.2 to 24.8. Simply put, it is becoming harder for our clientele to achieve their goals. The team has increased its focus on services to people 'at risk' of HIV, now 73% of our people face such risk.

Compared to past years, while many aspects of the Outreach Team's work is unchanged, we have seen more things we need to do for people that do not readily fit into our services tracking model well. Many times, for instance, workers have been involved with problems involving several people in need of support for a common situation (such as a hotel or program affected by closure, bed-bugs or changes.) We spend many hours supporting several people – but not attributable to any directly. This reflects fewer hours of service statistically as only hours directly attributable to unique individuals are tracked. Coincidental with this is a dramatic increase (from 15% to 22%) of time spent in the 'support' category, which includes things

done to KEEP people housed when at risk. With many people, the team is succeeding in supporting the individual to 'do for themselves', with small but noticeable decreases in the time our workers actually spend in 'liaison', 'advocacy' and 'paperwork' of assisting with forms, etc. In light of increased challenges facing the people we serve, the Downtown Outreach is succeeding in being as effective as possible – but only changes in available resources will result in more than simply continuing on as we have.

## LIVINGROOM DROP-IN CENTRE – OUTREACH

The two person Outreach Team at the LivingRoom Drop-In work with individuals in poverty who have serious ongoing mental health issues or concurrent disorders (which may include mental illness plus addictions, and/or HIV and hepatitis.) Outreach delivers services including housing searches, advocacy, counseling and directing, case planning, life skills training, transportation to medical appointments and financial management to members of the LivingRoom seven days a week.

In 2007/08 Outreach assisted **365** unique individuals, an increase of **74%** to our previous year's caseload. Part of this was due to last year's staff shortage, but cannot be fully explained by this. Simply put, the team experienced sizeable client issue increases across several categories that proved to be particularly challenging. Outreach responded by providing **3,305** direct client service hours, which is a **16%** increase from the previous fiscal year.

Two alarming increases were in the areas of homelessness and addictions. The fiscal year 07/08 brought a 100% increase request for service from those who were absolutely homeless (**34** people per month). The previous year outreach averaged **17** people per month who were homeless. Placing individuals in housing proved to be more difficult this reporting period because vacancy rates in SRO's (hotels) were very low. The availability of affordable market rental units was virtually non-existent and the wait time on subsidized lists continues to grow.

The number of people presenting to outreach with addictions averaged **104** per month, an increase of **24%** from the previous year. Not surprisingly, the number of individuals with HIV also increased by **29%** (from an average of **7** individuals per month to **12** this year) and those with Hepatitis grew by **35%** (**32** per month in 06/07 to **43** per month in 07/08).

The complex range of challenges that our clientele face requires a multifaceted and creative approach to address their needs. One of the most successful strategies the outreach team employs is consistent liaison with various hotels and rooming houses. By developing trusting relationships with landlords Outreach ensures ongoing communication which then leads to better placement opportunities and sustainability for clients who would otherwise be homeless, couch surfing and shelter hopping. With better relationships with landlords and our assurance of continued support, we were able to house almost all those seeking housing. Addictions has been exceptionally challenging due to unrealistic wait times for detox services (7 to 14 days). As always outreach employs Lookout's harm reduction practices to assist substance users to maintain their health and assures they have access to services and supports that keep them out of hospital and lowers involvement in the justice system. Outreach's clientele were **285** men (**78%**) and **80** women (**22%**), similar to previous years.

This year saw the genesis of a referral program between the Kiwassa and Dockside Ministry of Employment and Income Assistance offices and the LivingRoom outreach team. Outreach assists clients referred by the Ministry who are on employable benefits but are unable to work due to mental health issues and helps them take the necessary steps to apply for 'Person's with Disabilities' income, affordable housing and services as required. Since this program was initiated, Outreach has had **15** referrals from the ministry, and assisted **7** people to apply for Person's with Disabilities and **10** with housing. This has extended Outreach's safety net to even more individuals who have fallen through the cracks who have no active support or services in the DTES.

During the months of January, February and March 2008, more Outreach staffing hours were available due to earlier absenteeism. Increased staffing meant we were able to enhance outreach's ability to ameliorate the circumstances that face clients on a daily basis and ultimately contribute to the client's well being. We also reduced costs to the taxpayer that ultimately snowball with unchecked health problems.

## NORTH SHORE – OUTREACH

It was a busy and challenging year for the North Shore Outreach program. Staffing, the identification and location of resources - including housing, fine tuning of procedures, formulating and building partnerships, developing relationships - both service partners and clientele, remained formidable tasks.

Several staffing transitions took place and identifying and hiring qualified staff was exacerbated by current province-wide personnel shortages. Having gained and lost several Outreach members, the team is again at a staffing deficit. Outreach duties have been eased with the addition of a dedicated Outreach Vehicle thanks to the cooperation of the Cliff Block Outreach team.

Over the course of the year, we have developed several Outreach partnerships with the Canadian Mental Health Association and the Salvation Army; each of whom serves a unique clientele. However as each team only has one worker on per day, the various teams rely on each other for support and expertise – broadening the continuum of services offered.

The North Shore Outreach team must contend with a grave lack of supportive services which creates barriers to service delivery. We spend large blocks of time ferrying Outreach clients to services located in other areas, predominantly Vancouver, and ultimately referring them to these teams. There are few if any subsidized/supported housing resources, few Alcohol & Drug treatment resources, no Detox services, or sufficient mental health services for North Shore Outreach clients to access locally. Outreach workers find themselves quickly overwhelmed with the needs of their Outreach service recipients.

Myths and misinformation about the true nature of the Outreach clients exists; the challenges faced by them and the service gaps they face are of serious concern to the Outreach staff. These create further barriers to service provision.

The Outreach team provided service to **226** unique individuals last fiscal year: **170** men and **56** women. Of these, **33** were not on government assistance of any kind, **177** experienced alcohol or drug addictions, **8** were physically handicapped and **41** self-reported to be HIV+ or Hepatitis C+. Approximately **1500** contacts were made and over **1000** service hours were spent with individuals throughout the year.

The North Shore Outreach team members actively participate in many community forums to both relay information on homelessness, dispel myths and to learn more about the needs and resources of the community we are serving.

The next fiscal year will be extremely busy due to the growing demand on our services by an exponentially expanding client population which has increased by **148%** since the last Homeless Count census.

## LIVINGROOM DROP-IN CENTRE

*The LivingRoom Drop-In offers people living with mental illness a variety of structured and unstructured programs that foster participation, build relationships, develop self confidence and improve self esteem. It provides a safe and secure environment in the Downtown Eastside, particularly for people with serious and persistent mental illness. Members may not be formally involved in the mental health system and may have few life skills, support connections, access to advocacy or socialization opportunities. It remains Lookout's only program with a restricted mandate to assist people.*

This has been the 15<sup>th</sup> year of operation of the LivingRoom. The program continues to evolve to accommodate the changing needs of its members and employs creative problem solving techniques to contend with budgetary constraints.



Open every day of the year (including Christmas) some of the primary goals of the LivingRoom are to improve the safety and well being of our members. In this, our nutritious food program is extremely important and very popular, **36,728** individual meals served this 12-month period. Food is prepared daily by staff during the week and by volunteers on the weekend. We are also able to include a multi-vitamin to boost people's health, thanks to the continuing support of Vancouver Coastal Health H.I.V. funding. High protein drinks are made available for those who are in particular need of a nutritional boost. Medication administration is an important component and is offered on-site to members whose life skills or life style is not conducive to taking medication as prescribed. The medication program allows members to lead more independent and stable lives, thereby staying out of hospitals and institutions. The members who meet at the LivingRoom are able to socialize with peers in a welcoming environment and either on their own or more often with assistance from staff, develop plans and pursue their goals in an environment that is unfettered by the dangers of everyday life in the Downtown Eastside.

In tradition with Maslow's hierarchy of needs, certain basic necessities such as food, clothing and shelter must be in place to reduce anxiety/stress and promote mental and physical health. Once this basic foundation is in place individuals discover they have the focus and energy to contemplate, pursue and access appropriate programs and services they would not have otherwise. The LivingRoom's nutritious meal program depends on food donations, which are thankfully received from Food Runners, U.B.C., the movie industry and volunteer groups like the "Greek Ladies" (as we affectionately call them). Every little bit helps. Other assistance comes from groups such as the "Art of Living", "Sri Baba", "Friends" and the "Jack Boyda Foundation" who prepare meals and provide entertainment at their own expense of time and money. This year we have had **198** individuals volunteer with the LivingRoom, contributing **4,794** hours of their time! This includes a minimum of **43** members volunteering! **80** individuals provide outside help, including the weekend food groups, preparing meals for **4,480** people! With all this help staff are able to accomplish more for the members, and this is why the LivingRoom is always receptive to volunteers!

The LivingRoom's membership has increased to approximately **2,274** individuals who made approximately **43,000** visits. This is **1,000** visits less (**2.3%**) than the prior year, which may reflect the reinforcement of mandate requirements (only mentally ill). The total number of advocacy contacts was **25,000**, with the primary areas shown in the table on the next page. Violent episodes (includes verbal abuse) on and off-site have decreased **26%**, we believe because of the increase of activities offered. Contacts are considered interactions over 15 minutes in duration. Contacts can include: crisis intervention, advocacy, medication administration and referrals to other resources. This type of support takes up a considerable amount of staff time especially in regards to mental health as the table shows.

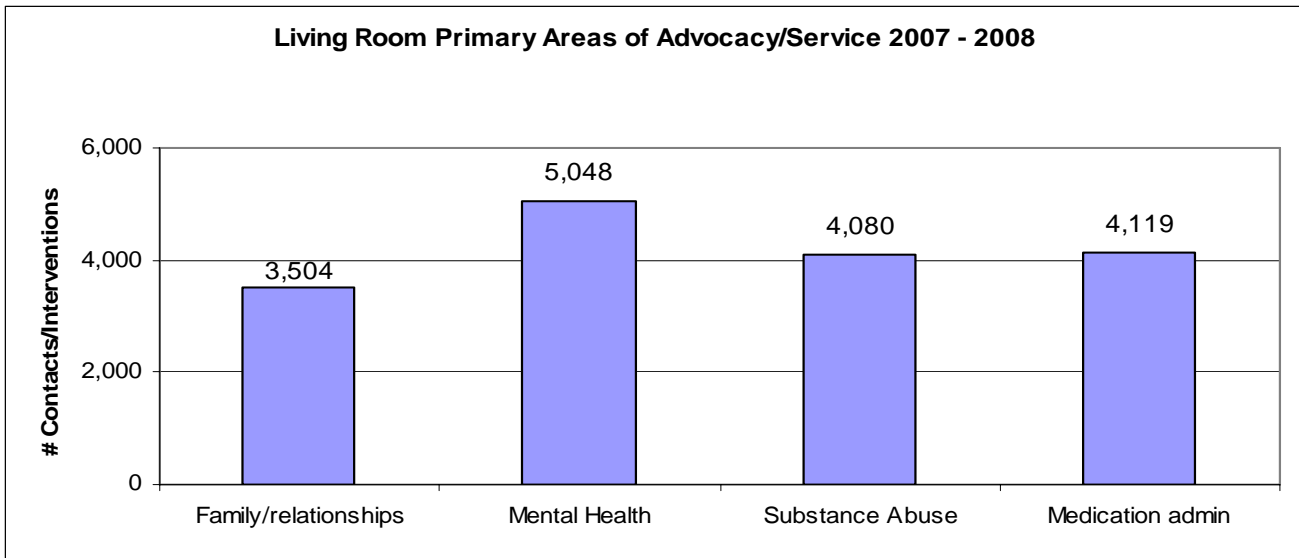
Staff also spent time advocating to assist members with legal, financial, medical and housing issues. Affordable housing continues to be the number one issue for our members, especially with appropriate supports. Frustratingly, it is becoming

even more difficult to find due to the increase in property values and the decline of affordable housing stock as it relates to the Downtown Eastside.

The LivingRoom strives to enrich social and life skills that enhance the ability of members to maintain a stable and independent living situation, thus improving their quality of life and 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 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. Our leisure, social and recreational activities have increased with over **13,000** participants, a **140%** increase, thanks to VCHA permitting last year's small budget surplus to carry-over to this year! These additional activities were implemented in the last quarter of the year, and included 25 extra outings, including special activities like paint ball and horseback riding. It was such a positive qualitative difference in our member's outlook, we are driven to try and continue these special outings.



Another outcome: we were able to offer a vocational program for a short trial: **9** out of **12** involved members gained



employment or were involved in employment training – excellent given the few opportunities that exist. All told, we offered life skill events **3,955** times during the year, and **523** leisure activities, both described below.

Activities	Sessions	Attendance	Activities	Sessions	Attendance	Activities	Sessions	Attendance
Basic Needs	338	36,731	Knitting	25	69	Show Offs	83	7,356
Meals	335	36,728	Exercise	29	71	Outings	95	684
Life Skills	3,955	4,338	Library	36	57	Model Club	45	179
Volunteer Program	190	260	Leisure	523	13,169	Gardening	2	9
Computer Club	3,500	3,463	Bingo	49	1,647	Special Events	18	1,256
PAC Meetings	10	78	Card Tourney	35	196	Car Wash	1	6
Happy Feet	15	75	Movie Nights	43	896	Tea Party	41	225
Hygiene	150	265	Arts & Crafts	79	460	Carnegie Music	32	255

\* PAC = Participant Advisory Committee

Each year the members are surveyed to get a statistical overview of how the LivingRoom is meeting their expectations and what changes they would like to see. The LivingRoom is pleased to report an **8%** increase in overall satisfaction from the previous year. **98%** of our members were satisfied or very satisfied with the services at the LivingRoom, the principle wish being for more programs, particularly outings such as bowling, camping and visits to museums. For most people these are normal events, but given our members live in poverty, the cost and distance prevent most from participating in such activities. LivingRoom staff will continue to provide creative programming within its budgetary constraints by working with our advisory committee, nurturing relationships with our volunteers, benefactors, and other agencies as well as encouraging new relationships to blossom.

## Accommodation Subsidy Program

*For the past 15 years (since 1993) the Accommodation Subsidy Program has been improving the housing prospects for people on low incomes who live with serious mental health challenges in the Downtown Eastside. The Program allows individuals with a persistent mental health history to receive a maximum of \$75.00 per month towards their shelter costs and can also be applied to upgrading their amenities with cable, telephone and cooking capability, etc. The program has an annual budget of \$18,000 for eligible individuals sponsored by various agencies such as MPA, Raincity (formerly Triage), Lookout, Strathcona Mental Health and ACT/Bridging.*

This subsidy program is administered by the LivingRoom Drop In/Activity Centre and continues to be of benefit to people who are struggling to cover basic living costs, especially considering the rise in housing expenses. The subsidy allows people to afford better living conditions and contributes positively to their overall mental health, adding stability in their lives.

A review was held this year of the eligibility criteria for this subsidy, especially reviewing whether individuals with a co-occurring disorder (addictions) should be able to access the fund. With feedback from agencies sponsoring recipients, it was agreed that such individuals should be able to access funds as it improves the quality of their housing. This year also, due to more subsidies becoming available from funds carried over from the prior years, two more agencies (VISU and First United Church) have been able to utilize temporarily available subsidies.

In April 2007 the Ministry of Employment and Income Assistance increased its shelter portion from \$325.00 to \$375.00 per month. With the \$50.00 MEIA shelter rate increase, vacancies resulted in the Program that took several months to fill. The fiscal savings (\$4,275) helped to offset the prior fiscal year over expenditure (\$2,450). At the 07/08 fiscal year end, **\$13,725** in subsidies were paid out for an average of **\$1,144** per month.

**37** individuals (**25** men and **11** women) received the monthly subsidy this year. Some people required assistance for only a few months, while others continue to need the service for much longer periods of time (sometimes years). **51%** of the recipients have been on the Program less than 2 years, **41%** from 2 to 5 years and **8%** from 5 to 10 years.

**17** people were carried over from the prior year, **20** were added (**11** of who remained on the program at year end). **13** people left or were removed from the program, mostly due to the Ministry of Employment and Income Assistance increase. People who moved into subsidized housing or lower rent units were the next highest group to leave the Program. At year end, **24** people were receiving an Accommodation Supplement.

The Program will continue into 2009 to assist mentally ill people who consider the DTES their preferred community to live to access healthier, safer living conditions.

## **Donations**

**April 1, 2007 to March 31, 2008**

**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.**

Allen G. Lougheed	John Breen	Robert L. Conconi Foundation
Allison Lauckner	John Cameron	Rodger C. Aiers
Ansari California Marketing	John Hall	Sands Hotel
Barrick Gold Corporation	John L. Vingham SR	St. David's United Church
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Coaster Co. of America	Laura-Leah	The Langara Foundation
Deep Cove Lions Club	Leon Judah Blackmore Foundation	The Parish of St. Christopher's
Deep Cove Stage Society	Lynn Valley United Church UCW	Thomas Pressello
Dolores Lauckner	Margaret Wilson	Transtar
Donald Roche	Metasoft Systems Inc.	University of B.C.
Frances Mastrandrea	Mills Printing and Stationery Co.	Van Ops MDS Nordion
Graham Lawrey	North Shore Unitarian Church	VanCity Savings Credit Union
GWIL Crane Service Division	North Vancouver Host Lions Club	Vancouver Foundation
Helen Chia Yee	Prudential Sussex Realty	Vancouver Pacific Lions Club
Intrawest	Remax Crest Realty (Westside)	WonderBucks Store Ltd.
John & Judy Taylor	Roman Catholic Archbishop of Vancouver	

## **VERY SPECIAL THANKS TO**

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Harper Grey LLP	Triumphs Fine Foods
Henry McCandless	Vancouver Food Bank – Food Runners
Ian Newsholme	Warren J.A. Mitchell
Invis Financial "Angels of the Night"	
James Pratt Consulting	

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

**Many thanks to our Volunteers who have shared their gifts of time, energy and talents  
during the past year.**