



# Community Plan 2011–2014

## Homelessness Partnering Strategy

### Annex B: Community Plan

Community:

Province or Territory:

Delivery Model:   
(For HPS Designated Communities Funds)

Date of CAB approval:      Day      Month      Year  
           

Date sent to Service Canada:      Day      Month      Year

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# 1. The Community Planning Process

## 1.1. Community Advisory Board (CAB)

### Purpose

The purpose of this section is to identify how representative your CAB is of the stakeholders in your community. You will also consider the strengths of your CAB and any challenges you may face.

Your CAB should be representative of your community, including representation from:

- The Province/Territory
- Municipality/Regional government
- Aboriginal sector
- Private sector
- Not-for-profit/charitable sector
- Your client groups (homeless and at-risk individuals, including youth and Aboriginal people where appropriate)
- Service providers

It could also include other representatives important in your community, for example:

- Academic/research/policy group

**Note:** The Reference Guide includes an example for completing this section.



- a. Before answering this question, complete **Table A** (Community Advisory Board Membership) in the Data Tables.

Is there any sector or organization you would like to include in the future to make the CAB more representative of your community? **Table A** (Community Advisory Board Membership) in the Data Tables will help you to identify which sectors are already represented on your CAB.

yes       no

If yes, please identify the sector or organization and describe how you will engage it.

- b. What are the strengths of your CAB?

Please note: In Moncton, we have a CAB, a small group that meets at most once a year to make recommendations on projects. We also have a Steering Committee, which is the body that ensures that the priorities identified in the Community Plan are met, that assesses progress and updates the community plan. This is a large group (approx. 25 members) that is very representative of the community.

# 1. The Community Planning Process

At least three current Steering Committee members have participated from the beginning. This provides continuity as well as a corporate memory of when and why decisions were made. These participants have an overview of the history of the Community Plan and the progress that has been made during the past decade that would not otherwise exist. Many, if not most of the organizations that serve the homeless or those at risk of homelessness in Greater Moncton are represented on the Steering Committee. This has worked very well in terms of sharing information and coordination of activities. Together, we agree on priorities, and cooperate to see that these priorities become reality.

Members of the CAB are neutral people; they are not directly involved in providing services to the homeless or those at risk, and thus have no vested interest in how the funds are spent. Their recommendations are made within the context of the community priorities, and based on the strength of the proposal.

- c. What challenges, if any, are faced by your CAB?

The Steering Committee continues to try to involve the three municipal councils (Moncton, Riverview, Dieppe) and although they do participate in our events such as community breakfasts, they are not involved in any on-going way in planning for community needs (although the City of Moncton agreed recently to assign a representative to the Committee). The three municipalities have yet to be convinced that they have a role to play in housing and homelessness, given that housing is a provincial jurisdiction in New Brunswick. We continue to seek involvement from the business community on an on-going basis, and have just added a representative from a second business organization.

## 1.2. Stakeholder Engagement

### Purpose

The challenges of homelessness are complex and are best addressed through strong support and cooperation between all levels of government, as well as the private and voluntary sectors.

The purpose of this section is to describe the support and cooperation within your community for your homelessness strategy. It is expected that you will demonstrate broad support, representing all key sectors in your community.

- a. Before answering this question, complete **Table B** (Partners and Their Involvement) in the Data Tables

How did you consult your community as you prepared this Community Plan? **Tables A** (Community Advisory Board Membership) and **B** (Partners and their Involvement) in the Data Tables may help you to identify who was involved in your

## 1. The Community Planning Process

community planning process. Please include information about the extent of your consultation.

Community priorities were reviewed at the regular monthly Steering Committee meeting in December. Since we had a priority in 2009-11 that was completely unmet, members agreed that this should now be our number one priority for 2011-14. (The priority is transitional/supportive housing for women.) Steering Committee members also agreed that the CDO has played an important role in terms of coordination, communication and raising awareness about homelessness, and that this work should continue. Steering Committee members authorized the management subcommittee, along with the CDO, to complete the documents, which were reviewed at the Steering Committee's January meeting and approved.

- b. Are there stakeholders or potential partners other than those listed in Table B (Partners and their Involvement) that are critical to your community's homelessness strategy?

yes       no

If yes, identify these stakeholders and describe the contribution they would make to your homelessness strategy.

If yes, how will you engage these stakeholders?

- c. How is your CAB working with the Aboriginal sector to identify and implement Aboriginal priorities? Please note: Each Community Advisory Board is responsible for allocating a level of funding for Aboriginal homelessness that is representative of the percentage of the Aboriginal population in that community. Where feasible and appropriate, Aboriginal groups working with people who are homeless should be considered as the preferred funding recipients to deliver culturally relevant services to homeless or at-risk Aboriginal people.

To date, we have not had an Aboriginal representative on the Steering Committee but are working with the NB Aboriginal Peoples' Council (an off-reserve group) to remedy this (for both the Steering Committee and the CAB).

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- d. Please answer this question only if your community receives funding from the HPS Aboriginal Homelessness Funding Stream and your CAB manages this funding; otherwise, enter n/a in the box below.

Please describe how your community will ensure Aboriginal Homelessness funding will primarily target projects from Aboriginal service providers to address the specific needs of the off-reserve homeless Aboriginal population. Your answer should include how you will ensure that the activities undertaken will respect Aboriginal identity and practices, to ensure services are integrated and culturally appropriate.

n/a

## 1.3. Other Related Strategies, Programs and Community Plans

### Purpose

It is important to take an integrated approach to addressing homelessness issues. In this section, you will demonstrate how your work on homelessness links to other strategies, programs and plans.

- a. In the table provided below, please identify federal, provincial or territorial strategies or programs (other than HPS) which fund activities in your community related to your homelessness strategy (please see the Reference Guide for examples). If you are not aware of any relevant strategies or programs in your community, please put n/a in the first box under “Name of federal, provincial or territorial broad-based community strategies or programs”.
- In the first column, please identify the strategy or program.
  - In the second column, briefly describe how it complements your homelessness strategy.
  - In the final column, please identify the primary focus of the strategy or program. From the drop-down menu in the final column, you can choose from Aboriginal, youth, children, seniors, women, people with disabilities, mental health, employment, crime prevention, and anti-drug.

Name of federal, provincial or territorial community strategies or programs	Briefly describe (max 250 characters)	Primary focus of strategy or program
Mental Health Commission of Canada At-home/Chez soi project (for people chronically homeless and/or precariously housed who have mental health issues)	Steering Committee members have worked closely with this project. We meet frequently with the coordinator; several Committee members serve on committees; the Clinical Director of Chez Soi is on the Ctte; members have referred clients to the program	Mental Health
Youth Employment Strategy	Several Steering Committee	Youth

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Name of federal, provincial or territorial community strategies or programs	Briefly describe (max 250 characters)	Primary focus of strategy or program
(HRSDC)	members have offered this program on a number of occasions.	
Opportunities Fund (HRSDC)	Some Steering Committee members have offered this program on a number of occasions.	People with Disabilities
New Horizon for Seniors	Some Steering Committee members have offered this program on a number of occasions.	Seniors
		Click to choose
		Click to choose
		Click to choose
		Click to choose
		Click to choose
		Click to choose

- b. In the table below, please identify any other plans developed by or in your community since April 1, 2007 to address issues related to homelessness. These plans may range from plans required by the Province or Territory to local plans intended to better integrate all the strategies undertaken in your community. If you are not aware of any other community plans related to homelessness in your community, please put n/a in the first box under “Title of plan”. In the column “What issue was the plan designed to address?” please choose from the drop-down menu. Your choices are: homelessness, affordable housing, poverty, or mental health.

Title of plan	What is the main issue the plan was designed to address?
NB Housing Strategy	Affordable Housing
Homelessness Framework (part of NB Housing Strategy)	Homelessness
NB Poverty Reduction Strategy	Poverty
NB Mental Health Strategy	Mental Health
	Please choose one
	Please choose one
	Please choose one

## 1. The Community Planning Process

Title of plan	What is the main issue the plan was designed to address?
<input type="checkbox"/>	Please choose one
<input type="checkbox"/>	Please choose one
<input type="checkbox"/>	Please choose one

## 2. Community Plan Assessment

### Purpose

The purpose of this section is to assess your progress in addressing the priorities in your 2007-2009 Community Plan (and any updates) under the three HPS Activity Areas, and to identify what led to your results.

**Note:** The Reference Guide includes an example for completing this section.

This section and your Community Plan Priorities (2007-2011) in the information package are colour-coded by activity area, in the same way as the Community Plan Priorities you submitted for 2007–2011.

- The Continuum of Housing and Supports priorities are coloured green.
- The Knowledge and Communication priorities are coloured orange.
- The Community Development priorities are coloured yellow.

**If you have no priorities in an activity area**, type “n/a” into the box under “Please describe your success ...” and proceed to the next activity area.

Use your information package:

- The *Community Plan Priorities (2007—2011)* lists the priorities you set for 2007—2011.
- The *HPS Projects and Priorities Report* identifies which priorities were implemented through projects in your community.
- The *HPS Investments and Results Report* identifies the results (outcomes) achieved by the HPS-funded projects in your community.

Before you begin this section, you must complete **Table C** (Assessing Community Plan Priorities 2007—2011) in the Data Tables. In this section, use this Table C to identify your level of success in implementing your priorities.

### a. Continuum of Housing and Supports Priorities

Please describe your success in implementing your Continuum of Housing and Supports priorities. Please make reference to your *HPS Investments and Results Report* to describe how you know that you have been successful.

During the 2007–09 period, progress was made to improve basic services. The city's main emergency shelter was able to replace 30 doors and windows with energy-efficient ones as well as make improvements to bathrooms. The purchase of a walk-in refrigerator and freezer made the Food Dépot Alimentaire's much more efficient

## 2. Community Plan Assessment

and effective. We are lucky to have this central warehouse, which collects and stores donations of food, and distributes it to 21 food banks and soup kitchens in the region. One result has been much less competition between the food banks and soup kitchens for scarce resources.

Another success has been the establishment of a specialized intake and referral system for homeless/at risk individuals who are addicted to substances. This system was developed and implemented by AIDS Moncton, which in 2008 received three-year funding (for the first time!) from the provincial department of health for a needle distribution service.

Moncton Youth Residences added two transitional beds for youth during this period. The John Howard Society built and is now operating a 10-unit transitional housing project for men. Both have been wonderful additions, especially given that Moncton tends to be the "drop-off point" for males leaving correctional institutions in this area. Other services have been improved, for example, the Findmyway website provides on-line information on programs and services for the homeless; the YouthQuest drop-in centre has been able to increase hours of operation and improve services available to homeless youth.

Our I&R report shows 48 new permanent beds and four new services added as of November 2010.

Please describe any challenges faced by your community in implementing your Continuum of Housing and Supports priorities and how you addressed them. (If your community did not face challenges, please enter n/a.)

n/a

b. Knowledge and Communication Priorities

## 2. Community Plan Assessment

Please describe your success in implementing your Knowledge and Communication priorities. Please make reference to your HPS Investments and Results Report to describe how you know that you have been successful.

A major success has been the contracting of a CDO who has assisted the Steering Committee and its agency members to better capture and report on tangible results that prevent and reduce homelessness. With her help, the Steering Committee has produced three annual Report Cards on Homelessness in Greater Moncton; quarterly newsletters since the fall of 2007, which are distributed to a long list of community partners and the general public; a website that is maintained on a regular basis. She has organized a number of events (e.g. community breakfasts, Affordable Housing Week events) that have raised the profile of the Steering Committee's work in the community and helped to lessen stigma surrounding homelessness.

Having a CDO enabled the Steering Committee to address the issue of rooming houses. Until April 1, 2010, New Brunswick was the only province in the country that did not provide any protection to people living in rooming houses (often the only housing option for those on social assistance). The Steering Committee worked closely with the Rentalsman's office, and lobbied the government to change the legislation (which it did effective April 1<sup>st</sup> of this year). The committee has since organized information sessions, two for landlords of rooming houses and another for tenants. This work would not have been possible without the help of the CDO.

Again, because of the assistance of the CDO, the Steering Committee was able to work very closely with the Chez Soi/At Home project. We met with the coordinator several times before the project began, and regularly afterward. Some Steering Committee members are on the Advisory Committee. Most members have referred clients to the project. This project has been very important in terms of the continuum of housing, providing shelter for the chronically homeless/ precariously housed population with mental health challenges.

## 2. Community Plan Assessment

Another priority was a feasibility study on safe, affordable housing for women. Part of this study, a needs assessment carried out in the fall of 2008, identified that there was a serious need for transitional/ supportive housing for women, including women with children in the Moncton area. This remains the Steering Committee's number one priority.

According to our I&R Report, HPS investment in knowledge building and communication has resulted in: 39 information sharing tools; 16 data collection tools; six local research projects/surveys; 42 information sessions; 31 staff training sessions or workshops attended; eight activities to improve service delivery (data to end march 2010).

Please describe any challenges faced by your community in implementing your Knowledge and Communications priorities and how you addressed them. (If your community did not face challenges, please enter n/a.)

n/a

### c. Community Development Priorities

Please describe your success in implementing your Community Development priorities. Please make reference to your HPS Investments and Results Report to describe how you know that you have been successful.

Funding was received by YouthQuest to increase the quality and sustainability of services currently offered to youth in Greater Moncton through staff training and development. The organization was able to offer training for both staff and volunteers. It was also able to form new partnerships with local agencies.

According to our I&R Report, 95 new partnerships were formed and 12 community development activities were held (to end march 2010).

## 2. Community Plan Assessment

Please describe any challenges faced by your community in implementing your Community Development priorities and how you addressed them. (If your community did not face challenges, please enter n/a.)

n/a

### 3. Good Practices

#### Purpose

The purpose of this section is to highlight HPS-funded projects implemented in your community since April 1, 2007 that have been particularly successful.

- a. Please describe the HPS-funded projects implemented in your community which you consider to be good practices in preventing and reducing homelessness (maximum of three, maximum length 1500 characters).

Please consult your HPS Projects and Priorities Report for a list of HPS-funded projects implemented in your community.

1. John Howard Society transitional housing for adult males:

- Getting all partners together during the planning stages so that everyone knows who is supportive of the project, who the other funding partners are, and you know who to expect support from at the onset.

- Getting the municipality on board early on to help manoeuvre through any zoning issues, to make sure the councillor for the ward you are building in is aware of your plans and progress to that they can field any questions/concerns/complaints from citizens (especially the neighbours).

- Keep communication open with neighbours. Make an initial visit to introduce yourself and provide a brief overview of the project goals. Develop a newsletter and e-mail out to neighbours to keep them up-to-date on progress. Respond immediately to any complaints without hostility and/or defensiveness.

- Bring the RCMP on board early to gain their support and trust, to tour the building, do risk assessment and meet with neighbours.

2. Moncton Youth Residences transitional housing for youth:

- Identify other like-minded agencies – locally, provincially and nationally. Connect with them at networking events, conference calls and skype to discuss their best practices and challenges.

### 3. Good Practices

• Build a group of advisors from the business community who can lend their connections when needed – for fundraising and leveraging government support.

• Involve the youth (target population) in the building plans and program development. Often they point to things we have not seen and are easily adjustable at an early stage.

• Go door-to-door in the neighbourhood to provide information on who we are, what we plan to do, and answer any other of their questions. Invite them to an open house during construction phase and grand openings.

• Make friends with the media and keep partners informed on the progress at each stage....and beyond.

3.

- b. The HP Secretariat is committed to learning about and sharing good practices across Canada and may wish to follow up to learn more about the successful HPS-funded projects in your community. For each of the good practices you have described, please indicate your preferences by filling in the appropriate fields in the table below.

Good Practice	May the HP Secretariat contact someone about the good practice described above?	If yes, please provide contact information in the space(s) below (name, organization, telephone, e-mail)	May the HP Secretariat share this good practice with others?
1.	Yes	Joanne Murray John Howard Society of Southeastern NB 506-854-3502 joanne@johnhowardsenb.com	Yes
2.	Yes	Cathy Manuel Moncton Youth Residences	Yes

3. Good Practices

Good Practice	May the HP Secretariat contact someone about the good practice described above?	If yes, please provide contact information in the space(s) below (name, organization, telephone, e-mail)	May the HP Secretariat share this good practice with others?
		Inc. 506-869-6333 cmanuel@myrinc.com	
3.	Click to Choose		Click to Choose

## 4. Current Situation

### 4.1. Demographic and Socio-economic Trends

#### Purpose

The purpose of this section is to identify the changes or trends you have seen in your community as a whole and in the homeless and at-risk populations within your community. This information should help you to identify any changes in the needs of the homeless and at-risk populations in your community.

**Note:** The Reference Guide includes an example for completing this section.



- a. Please identify any population, housing or income changes or trends in your community since 2007 and explain how these changes or trends have affected your community. Please refer to the Census and housing data included in your information package and any other recent environmental scan produced in your community.

Moncton continues to be the growth centre in NB. The population increased by 3.7% in 1996–2001, and 6.5% in 2001–06 (while every other CA/CMA except Fredericton experienced a decrease). In fact, Moncton was the only CMA in the Atlantic provinces whose growth rate (+6.5%) surpassed the national average (+5.4%). This trend continued between 2006 and today. The unemployment rate is also one of the lowest in the country. The result is that many people have been arriving in Moncton from the north of the province, Ontario and farther west, expecting to find employment. Their skills do not necessarily match demand, and they end up in minimum wage jobs or unemployed. In the last half of 2010, our local outreach program (which offers a drop-in) has seen numbers increase from an average of 250–300 drop-ins per month to over 500, severely limiting their ability to help those in need find employment, housing or even basic services such as food and clothing. Food banks were also seeing higher demand because of this trend.

The Mental Health Commission's At Home/Chez Soi program has addressed the needs of some chronically homeless individuals who

#### 4. Current Situation

have mental health issues, although the numbers actually housed have been less than expected. Long waiting lists for mental health and addictions services have remained a challenge for those who have been randomized to the "services as usual" group. As well, this project does not address the needs of women with children.

Work done by the Steering Committee to raise awareness about homelessness has spurred several private developers to invest in affordable housing. Since 2007, construction has included one 50-unit building for non-elderly singles that opened in 2010; two 28-unit buildings under construction in 2010, that include 14 affordable units each; and one 50-unit building for seniors (still under construction end 2010). Rent supplements provided by NB Housing make these units very affordable for people who otherwise might be living in a rooming house or a shelter.

In terms of income trends, 13.6% of the population continues to live in low income (before tax), according to Statistics Canada (2006 census). The gender breakdown is 12.2% of men and 14.8% of women. Minimum wage is scheduled to increase from \$8.25 in September of 2009 to \$10 in September of 2011, which is good, although even at this rate, those working for minimum wage will be earning much below the LICO.

- b. Before answering this question, complete **Table D.1** (Homeless and At-risk Populations) in the Data Tables.

How have the homeless and at-risk populations in your community changed since 2007?

Now that both emergency shelters are using HIFIS, we have more accurate information on how many people are using these shelters (although we are not getting data that tracks the movement of people between the shelters so do not know whether there is double-counting). The Chez Soi/At Home project has provided housing for some of the chronically homeless population (those with mental health issues) although those who fall into the "services as usual" group still have a lot of challenges (i.e. long waiting lists for addictions/mental health services). The increase in the number of affordable housing units has made a difference as has the John

## 4. Current Situation

Howard transitional housing for men project, the latter, in particular, for men leaving correctional institutions. Anecdotal information suggests that there are still many people sleeping rough, although the Steering Committee has never carried out a formal "count."

Another noticeable trend has been much greater proliferation/availability/illicit use of prescription drugs including drug use among young people. As noted above, improvements in services, coinciding with low unemployment rates in Greater Moncton, has meant an increase in people coming from other parts of the province and country who often, because of lack of skills, end up homeless or at risk. The income gap between rich and poor continues to increase.

### 4.2. Support Services

#### Purpose

The purpose of this section is to describe any changes needed to services in your community because of changes in the characteristics of the homeless and at-risk populations.

**Note:** The Reference Guide includes an example for completing this section.

- a. How have changes in the needs of the homeless and at-risk populations since April 1, 2007, affected the type of support services needed in your community?
- Support services have had to become more sophisticated to take care of people who are homeless or at-risk because of increased drug use and addictions, in particular to prescription drugs. Needs are more complex and inter-related so that services need to be more sophisticated. In Greater Moncton, anyone seeking addictions/mental health services is still facing long waiting lists.

### 4.3. Shelter and Housing

#### Purpose

The purpose of this section is to describe any changes needed in emergency shelter or transitional or supportive housing in your community because of changes in the homeless and at-risk populations in your community.

**Note:** The Reference Guide includes an example for completing this section.

- a. Before answering this question, complete **Table E** (Shelter Verification Form) and **Table F** (Residential Facilities for Homeless People) in the Data Tables.

## 4. Current Situation

How have changes in the needs of the homeless and at-risk populations since April 1, 2007, affected the need in your community for emergency shelter, transitional or supportive housing?

We have almost no transitional/supportive housing for women, especially those with children, in Greater Moncton (other than women fleeing domestic violence). Statistics from the provincial Addictions & Mental Health Services indicate that at any given point, they have a caseload of 1200 women using their services (detox, methadone program, mental health counselling) and an estimated 20% (240 women) are either homeless or precariously housed. This has a major impact on the ability of these women to successfully complete any given program. Many women, for example, go through detoxification but end up back in their rooming house, because of a lack of any more appropriate kinds of housing. It has been described in the community as a "set-up for failure." There is no long-term rehabilitation program in New Brunswick for women (although there is for men). The outreach drop-in centre has seen an increase in the numbers of women, especially those with young children, who have no appropriate housing and nowhere to go.

Services, particularly for addictions and mental health issues, are severely taxed and in general, unable to meet the needs of many people in a timely manner. The number of people addicted to opiates is on the increase, and the detox centre has a limited ability to offer services.

### 4.4. Collection of Emergency Shelter Data

#### Purpose

The purpose of this section is to identify:

- the current situation in your community regarding the collection and export of emergency shelter data;
- how your community will prepare to export shelter data.

The answers will help you to prepare to meet the National Homeless Information System requirements. Note: The Reference Guide includes details on the requirements for HPS reporting over the period 2011–2014.

## 4. Current Situation

As you answer the questions in this section, please start thinking about how you will use this data once collected. For example:

- You can use this data to do reliable analysis of admission trends, and profiles of the homeless population in your community (well-organized data coordination activities amongst service providers allow whole communities/provinces to collect similar information, defined in the same way).
- You can use this data to identify: the average length of shelter stays; the number of chronically homeless individuals; the progress you are making on implementing your priorities; and trends in the homeless populations in your community.
- You will be able to track movement of individuals between service providers.

The use of a common data collection tool (HIFIS or non-HIFIS data collection system) will provide you with accurate, reliable data that will assist in your reporting requirements for HPS.

When you send this information to the HP Secretariat, it will help us to:

- determine the scope of homelessness in Canada;
- demonstrate how the face of homelessness is changing;
- create policy that better responds to these changes, taking an evidence-based approach to policy options and decision-making.

**Note:** The Reference Guide includes an example for completing this section.



- a. Is shelter data compiled at the community level?

yes       no

If yes, by whom? Do they produce regular reports?

By the Steering Committee CDO, in our annual Report Card on Homelessness in Greater Moncton. We had the most complete information to date for the year 2009 (which appeared in our 3<sup>rd</sup> Report Card in 2010) because one of the shelters began using HIFIS in late 2008, and only had full-year information for the first time in 2009. We are not, however, receiving data from either of the two shelters that tracks movement of individuals between the two shelters (i.e. we are not able to identify duplication or double-counting). Our VAW shelter also uses HIFIS.

- b. Before answering this question, complete **Table D.2** (Data Sources for Homeless and At-risk Populations) in the Data Tables.

What actions will your community have to take to collect emergency shelter use data

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to share with the Homelessness Partnering Secretariat? What additional resources will you require? Please refer to **Table D.2** (Data Sources for Homeless and At-risk Populations) and **Table E** (Shelter Verification Form) in the Data Tables to help you assess your current situation.

In terms of the emergency shelters, we would like to explore with both shelters the HIFIS capability to identify double-counting so that we have a better understanding of actual numbers of unique individuals using emergency shelter at any point in time. At the same time, we know that there are individuals in the community who will not stay in the shelters and given available resources, we would like to find a way to get a better understanding of how many unique individuals fall into this category (i.e. sleeping rough). An official "count" has never been carried out in the community, and the time may be right to do one.

## 5. Issues

### Purpose

The purpose of this section is to:

- identify the most important issues related to homelessness in your community, and
- explain how your community contribution will support your efforts to address these issues.

This section will help you to identify your 2011–2014 Community Plan priorities.

- a. Please identify and describe the most important or pressing issues related to homelessness in your community.
  - Please consider the facilities, services and supports which the homeless and at-risk populations in your community need or will need in the next three years.
  - Please also consider any improvements needed in community coordination, partnership development and data management by your community.

You should identify only those issues that are of a high enough priority that you intend to address them in the next three years. The issues could either become a priority for funding through HPS or another source of funding. In section 6 (Priorities 2011-2014), you will have the opportunity to identify your priorities for HPS funding. In **Table G** (Community Contribution) in the Data Tables, you will identify your community contribution, which includes funding to address any of the issues you have identified.

(You can include a maximum of ten issues)

1. Transitional/supportive housing for homeless/precariously housed women and children. A needs assessment carried out with HPS funding in 2008 identified a serious need for more transitional/supportive housing for women in Greater Moncton. This was identified as a major priority in the 2009–11 HPS funding period, although no appropriate proposal was forthcoming. This remains the Steering Committee's #1 priority.

There is currently no such facility for women in the Greater Moncton. Many women, for example, go through detox, and then return to their rooming house or the streets because there is no place else for them to go. There is no long-term rehabilitation facility for women in New

Brunswick (although there is for men). As well, in a city with a population of 126,000, there are only six emergency beds for women, and these are at a shelter that houses mainly men. Many women, especially those who have experienced domestic violence in the past, are not comfortable staying there.

The outreach drop-in program has identified an increasing need for supportive shelter for women, including some with children. Addictions & Mental Health Services also report that 20% of their caseload of women at any given point are either homeless or precariously housed (240 women). This is something that obviously impacts their ability to successfully complete any given program (i.e., detox, methadone program etc).

2. **Community Development Officer** – There is a need for continued coordination of community consultation; community planning; needs assessment; and support to the Steering Committee. Having a CDO in the past three years has resulted in significant movement forward on the ability of agencies working with the homeless or those at risk to share information, to coordinate activities, to avoid duplication and to identify and address gaps in programs and services. The work of the CDO has been indispensable in terms of connecting Steering Committee members not only with other service providers but also with municipal and provincial representatives who share in our concern about helping the homeless or those at risk to make long-term sustainable changes in their lives. She participated in the provincial Homelessness Framework Working Group in 2009, and is currently participating on the provincial Homelessness Framework Operational Working Group.

3.

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- b. Before answering this question, complete **Table G** (Community Contribution) in the Data Tools.

How will the funds you receive from your other funders (your community contribution) add to your homelessness strategy?

The contribution from the community partners for the women's project will allow the project to move forward since it will be a big capital project and the HPS allocation for the Moncton region would not be sufficient to achieve the goals set in our Community Plan in respect to this housing project. As well, the community contribution will reflect community buy-in, community involvement from a number of players that is very important if the project is to move forward. The funds received from other funders will help us achieve our community priorities in a collaborative way, by creating opportunities for community partners to contribute to and participate in the achievement of mutual goals of reducing homelessness in the Greater Moncton region. It will provide an outlet for philanthropists in the Greater Moncton region who are interested in investing in the betterment of women. It will provide the sponsor who will be chosen to manage this project with a platform to involve the community in helping women. It will broaden the GMHSC's network of people who have shared goals of positively impacting housing and homelessness in the GMA.

## 6. Priorities (2011–2014)

### Purpose

The purpose of this section is to:

- identify your priorities for 2011–2014;
- indicate how you plan to distribute your HPS allocation to achieve these priorities; explain how you will ensure that the organizations which implement projects are aware of the outcomes you have identified.

**Note:** The Reference Guide includes an example for completing this section.



- a. Please copy and paste each Priority from Section P-1 in your Community Plan Annex C: Priorities (2011—2014) (maximum of ten) into the table below. Then enter the percentage of your community's total HPS Designated Communities funding allocation you plan to use for each priority. Please complete the column on Aboriginal Homelessness funding only if your community receives Aboriginal Homelessness funding and your CAB is responsible for managing these funds. When you have completed all priorities, please add these numbers up; the total percentage should equal 100%.

Priority Number	Priority from P-1	Percent of Designated Communities Funding	Percent of Aboriginal Homelessness Funding
1	Transitional/supportive housing for homeless/precariously housed women including women with children.	82%	%
2	Community Development Officer	18%	%
3		%	%
4		%	%
5		%	%
6		%	%
7		%	%
8		%	%
9		%	%
10		%	%
Total percentage of Designated Community allocation and Aboriginal Homeless funding (if applicable): (this must equal 100%)		100%	%

## 6. Priorities (2011-2014)

- b. In your Community Plan Annex C: Priorities (2011—2014) you identified at least one outcome indicator or *Coordination and Data Management* activity for each priority (section P-5 to P-7). How will you communicate these indicators and outcomes to project sponsors?

For the transitional/supportive housing for women priority, there is a good possibility that the project sponsor is already on the Steering Committee, since most agencies that deal with the homeless or those at risk in Greater Moncton are. Indicators and outcomes will be communicated at regular monthly meetings as well as on-going communication between the project sponsor(s), the Service Canada representative and the CDO.

In terms of the CDO project, the CDO will be an active member of the Steering Committee. Thus, communication of indicators and outcomes is an on-going process.

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# Community Plan 2011-2014

## Homelessness Partnering Strategy

### Annex A: Data Tables

**Note:** Please refer to the Reference Guide for support to complete and use these tables

**Community:**

Moncton

**Province / Territory:**

04 - New Brunswick



**Table A – Community Advisory Board Membership**

Table A will help you to answer the following Community Plan questions:

- 1.1. a Community Advisory Board (CAB)
- 1.2. a Stakeholder Engagement

A	B	C	D	E
Community Advisory Board				
NAME	TITLE / ORGANIZATION	SECTOR	E-MAIL ADDRESS	TELEPHONE NUMBER
Debby Warren	AIDS Moncton Inc.	Service provider/not-for-profit	<a href="mailto:sidaidsm@nb.aibn.com">sidaidsm@nb.aibn.com</a>	506-859-9616
Johanne Petitpas	At Home/Chez Soi	Client group	<a href="mailto:joanne.petitpas@gmail.com">joanne.petitpas@gmail.com</a>	506-204-4482
Barry Moore	Atlantic People's Housing (AVIDE)	Private sector	<a href="mailto:barry.moore@avide.ca">barry.moore@avide.ca</a>	506-858-6397
Nadine Lipton	Blanket Drive/Greater Moncton Chamber of Commerce	Not-for-profit/private sector/client group	<a href="mailto:nadinelipton@hotmail.com">nadinelipton@hotmail.com</a>	506-387-6100
Cynthia Black	BUILT Network Moncton Inc.	Service provider/not-for-profit	<a href="mailto:moncton@builtnetwork.ca">moncton@builtnetwork.ca</a>	506-383-8337
Kevin Silliker	City of Moncton	Municipal government	<a href="mailto:Kevin.Silliker@moncton.ca">Kevin.Silliker@moncton.ca</a>	506-853-3333
Caroline Arseneault	CMHC	Federal government	<a href="mailto:cmarsena@cmhc-schl.gc.ca">cmarsena@cmhc-schl.gc.ca</a>	506-851-7725
Normand Blais	Codiac Regional RCMP	Municipal government	<a href="mailto:normand.blais@rcmp-grc.gc.ca">normand.blais@rcmp-grc.gc.ca</a>	506-857-2428
Mike Dawson	Community Chaplaincy for Ex-Offenders	Service provider/not-for-profit	<a href="mailto:communitychaplaincy@rogers.com">communitychaplaincy@rogers.com</a>	506-851-6384
Anne Poirier Basques	Downtown Moncton Centreville Inc.	Private sector	<a href="mailto:abasque@downtownmoncton.com">abasque@downtownmoncton.com</a>	506-857-4077
Wendy Lirette	Elizabeth Frye Society of NB	Service provider/not-for-profit	<a href="mailto:efrynb@nb.aibn.com">efrynb@nb.aibn.com</a>	506-855-7781
Joanne Murray	John Howard Society of Southeastern NB Inc.	Service provider/not-for-profit	<a href="mailto:joanne@johnhowardsenb.com">joanne@johnhowardsenb.com</a>	506-854-3502
Irina Raduly	Multicultural Association of Greater Moncton (MAGMA)	Service provider/not-for-profit	<a href="mailto:irina@magma-amgm.org">irina@magma-amgm.org</a>	506-858-9659 x2
Déo Cuma	Maison Nazareth Inc./House of Nazareth Inc.	Service provider/not-for-profit	<a href="mailto:maison-nazareth@nb.aibn.com">maison-nazareth@nb.aibn.com</a>	506-858-5702
Séan Tobin	Mobile One Community Services Inc.	Service provider/not-for-profit	<a href="mailto:mobile1@nbnet.nb.ca">mobile1@nbnet.nb.ca</a>	506-850-2564
Cathy Manuel	Moncton Youth Residences Inc.	Service provider/not-for-profit	<a href="mailto:cmanuel@myrinc.com">cmanuel@myrinc.com</a>	506-869-6333
Anne Arseneault el Harras	NB Social Development	Provincial government	<a href="mailto:anne.arseneaultelharras@gnb.ca">anne.arseneaultelharras@gnb.ca</a>	506-856-2997
Laura Selig	New Life Mission Inc.	Service provider/not-for-profit	<a href="mailto:director@nb.aibn.com">director@nb.aibn.com</a>	506-859-4277
Dr. Sue Crouse	Salvus Clinic	Service provider/not-for-profit	<a href="mailto:salvus@rogers.com">salvus@rogers.com</a>	506-384-7283
Mireille Roy	Service Canada	Federal government	<a href="mailto:mireille.roy@servicecanada.gc.ca">mireille.roy@servicecanada.gc.ca</a>	506-533-5882
Natasha Burkett	The Salvation Army	Service provider/not-for-profit	<a href="mailto:natasha_Burkett@can.salvationarmy.org">natasha_Burkett@can.salvationarmy.org</a>	506-857-2803
Angelique Reddy	YMCA of Greater Moncton	Service provider/not-for-profit	<a href="mailto:angelique.reddy@nb.aibn.com">angelique.reddy@nb.aibn.com</a>	506-857-0606
Jewell Mitchell	YWCA Moncton	Service provider/not-for-profit	<a href="mailto:ywcamctn@nbnet.nb.ca">ywcamctn@nbnet.nb.ca</a>	506-855-4349



Name of Partners	Involvement (Check at least one of the four columns)				Type of Partnership (Check at least one of the two columns)	
	Community Advisory Board Member	Community Planning	Data Collection	Other	Formal Partnership	Informal Partnership
United Way of Southeast NB		X				X
Volunteer Centre of Southeast NB		X				X
YMCA of Greater Moncton	X	X				X
YWCA Moncton	X	X				X
▼▼ PRIVATE SECTOR ▼▼						
Greater Moncton Chamber of Commerce	X	X				X
Downtown Moncton Centreville Inc.	X	X				X
▼▼ CHARITABLE/OTHER SECTORS ▼▼						
Mental Health Commission of Canada		X	X			X
Moncton Area Council of Churches		X				X
Common Front for Social Justice		X				X
Crandall University (formerly Atlantic Baptist University)		X				X
Université de Moncton		X				X

**Table C – Assessing Community Plan Priorities (2007-2011)**

Table C will help you to answer the following Community Plan questions:

- 2.a Continuum of Housing and Supports Priorities
- 2.b Knowledge and Communication Priorities
- 2.c Community Development Priorities

A Reference Number	B Priority	C Progress Made in Addressing Priority
1	Greater Moncton has a variety of organizations and agencies that provide support and services for the homeless and those at risk, although many individuals are often challenged in knowing how to navigate the system. There is a need to strengthen community linkages and to provide more easily accessible information on services available including addictions treatments programs, counselling, literacy and employment programs as well as community and government services.	Priority fully met
2	Demand for basic services for the homeless and those at-risk in the Greater Moncton area (e.g. meals, staff to serve meals, shelter spaces) has been steadily increasing over the past few years. Agencies are increasingly challenged to provide such services. There is a need to provide continued support for basic services, including finding ways to pool resources, to improve infrastructure and to better coordinate activities.	Priority fully met
3	There are very few emergency shelter options in <b>Greater Moncton</b> designed to meet the needs of women and children except for those fleeing abusive situations. There is also a need for more longer-term residential options for these populations that are safe and affordable.	Priority fully met
4	Adult males in Greater Moncton, especially those exiting the correctional system, are challenged to find accommodations that are adequate and affordable, and that are supported by significant support services. There is a need to increase the number of adult males moving from the streets and dependence on government programs to more adequate transitional housing while increasing their self-sufficiency through in-house support programs.	Priority addressed beyond expectations
5	In Greater Moncton, there are youth who are homeless or at-risk of being homeless. There is a need to increase the quality of the services and programs offered to these individuals. There is also a need for professional development for staff and outreach workers working with these individuals as well as a need to enhance the sustainability of the Transition Housing Program for youth.	Priority fully met
6	Homeless people or those at-risk in Greater Moncton often have mental health and/or substance use problems, and many face extended wait times for services. For example, there is currently a long waiting list to access the Methadone Maintenance program. There is a need to provide injection drug users (IDU) with increased access to emergency and transitional programs through a central entry point as well as to help them stay safe from infectious diseases while they move from a life of crisis to one of independence.	Priority fully met
7	There are very few emergency shelter options in Greater Moncton designed to meet the needs of women and children except for those fleeing abusive situations. There is also a need for more longer-term residential options for these populations that are safe and affordable.	Priority partially met
8	In Greater Moncton, there are youth who are homeless or at-risk of being homeless. There is a need to increase the quality of the services and programs offered to these individuals. There is also a need for professional development for staff and outreach workers working with these individuals as well as a need to enhance the sustainability of the Transition Housing Program for youth.	Priority fully met
9	There is a need to increase knowledge and information about homelessness in the Greater Moncton area and, in particular, to raise awareness of policy issues that impact homelessness among the general population. Increasing awareness of homelessness among the general population is critical if solutions are to be found.	Priority addressed beyond expectations
10	There is no fully-functional coordinated and integrated data collection system among Greater Moncton shelters and food and other service providers. Some shelters have received the HIFIS system, and are in process of learning it.	Priority fully met

**Table D.1 – Homeless and At-Risk Populations**

Table D.1 will help you to answer the following Community Plan question:

- 4.1. b Demographic and Socio-Economic Trends

Use Table D.2 to describe the sources you used for the data in this table.

	A	B	C	D
<b>Populations</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>
	<b>Number of individuals</b>	<b>Number of individuals</b>	<b>Number of individuals</b>	<b>Number of individuals</b>
<b>HOMELESS POPULATION</b> ▼▼				
<b>1 Living on the Street</b>				
<b>2 Living in Emergency Shelters</b>	725	756	990	2010 data not received yet
<b>3 Living in Transitional Housing</b>	173	173	175	185
<b>TOTAL HOMELESS POPULATION</b> (Rows 1 to 3)	898	929	1,165	
<b>AT-RISK POPULATION</b> ▼▼				
<b>4 At Imminent Risk of Eviction or Living in Unaffordable or Unacceptable Housing</b>	10,088	10,088	10,088	10,088

**Table D.2 – Data Sources for Homeless and At-Risk Populations**

Table D.2 will help you to answer the following Community Plan question:

- 4.4. b Collection of Emergency Shelter Data

This table explains the data sources used to complete Table D.1.

Populations	Data source(s)/Methodological comments (Table D.1)
<b>Homeless Population</b>	
<b>1 Living on the Street</b>	data n/a
<b>2 Living in Emergency Shelters</b>	Figures are from <i>Experiencing Homelessness: Second and Third Report Cards on Homelessness in Greater Moncton</i> . Data comes from House of Nazareth annual reports and HIFIS. The Harvest House Outreach centre (where people sleep on mats on the floor) only started using HIFIS in 2008, and had full-year data for the first time for the year 2009. The figure shown for 2009 is thus 756 (House of Nazareth) plus 234 (Harvest House) for total of 990 people living in emergency shelters. Note that this does not necessarily represent an increase in shelter use; rather, it reflects better record keeping. VAW shelter (Crossroads) data is not included here.
<b>3 Living in Transitional Housing</b>	Transitional housing includes: 1) Crossroads for Women Second Stage Housing (6 units in 2009); 2) Moncton Youth Residences (6 beds, increased to 8 in 2009); 3) MacDonald Independent Living Centre (34 units); Moncton Community Residences (127 units). These units are usually full (with waiting lists) so total is based on # of units. Information on number of beds/units comes from personal communication with the agencies. Increase shown in 2009 reflects two additional beds at MYR. Increase in 2010 reflects 10 units John Howard Society.
<b>At-Risk Population</b>	
<b>4 At Imminent Risk of Eviction or Living in Unaffordable or Unacceptable Housing</b>	Statistics Canada census 2006, number of families with income less than \$20,000, 2,095 families @ 2.5 = 5,238 individuals; Persons not in families earning less than \$15,000, 4,850. (TOTAL 10,088 people) Low-income cut-offs (after tax) for 2007 for a family of three living in Greater Moncton was \$23,011; for one person living in Greater Moncton, \$15,184 (Low Income Cut-offs for 2007 and Low Income Measures for 2006. Statistics Canada, Catalogue no. 75F0002M – No. 004, 2006/2007). Statistics Canada census 2006 shows 13.6% of people lived in low income (before tax); the breakdown was 12.2% male; 14.8% female. Other indicators: • number of people on waiting list(s) for social housing, 640 at end december 2009; • Number of people receiving social assistance in Greater Moncton, 4,170 (end december 2009); • number of people using food banks, 18,517 in March 2010. (HungerCount 2010)

**Table E – Shelter Verification Form**

Table E will help you to answer the following Community Plan questions:

- 4.3. a Shelter and Housing
- 4.4. b Collection of Emergency Shelter Data

Designated Community: Moncton, NB	Shelter 1	Shelter 2	Shelter 3	Shelter 4	Shelter 5	Shelter 6
Closed	FALSE	FALSE	FALSE	FALSE	FALSE	
Umbrella Organization	Harvest House Ministries		John Howard Society of SE NB	Alternative Residences Alternatives Inc.	Alternative Residences Alternatives Inc.	
Service Provider Name	Harvest House	Maison de Nazareth Inc./House of Nazareth Inc.	John Howard Society of SE NB	ARA Inc.	ARA Inc.	
Gender Served	Both	Both	adult male	Both	Both	
Target Clientele	General	General	single adult male	Mental health	Mental health	
Service Provider Type	Emergency	Emergency	Transition	Transition	Crisis intervention	
City	Moncton	Moncton	Moncton	Moncton	Moncton	
Regular Beds		30	10	8	5	
Mats on the floor	20	0	0	0	0	
Method of Data Collection	HIFIS	HIFIS				
HIFIS Version	3.7.2131	3.7.2131				
Address	PO Box 1774, 182 High Street	14 rue Clark	15 Flanders Court	257 Lutz St	257 Lutz St	
Postal Code	E1C 9X6	E1C 2V7	E1C 0K6	E1C 5G4	E1C 5G4	
Website	www.harvesthouseministries.org/	www.maison-nazareth.org/	www.johnhowardse.nb.com			
Contact Person	Michelle Cormier	Déo Cuma	Joanne Murray	Jacinte Dufour	Jacinte Dufour	
Email Address	michelle.harvesthouse@gmail.com	maison-nazareth@nb.aibn.com	joanne@johnhowardsenb.com	idufour@rogers.com	idufour@rogers.com	
Phone Number	5068550626	5068585702	506-854-3502	506-854-7229 x2	506-854-7229 x2	
Extension		130305001				

**Table F – Residential Facilities for Homeless People**

Table F will help you to answer the following Community Plan question:

- 4.3. a Shelter and Housing

Residential Facilities	2007		2010		Change 2007-2010			
	Number of Beds	Number of Units	Number of Beds	Number of Units	Gains		Losses	
					Number of Beds	Number of Units	Number of Beds	Number of Units
Emergency shelters	30		30		0		0	
Transitional housing facilities	6	167	8	177	2	10	0	0
Supportive housing facilities	61	28	61	28	0	0	0	0

