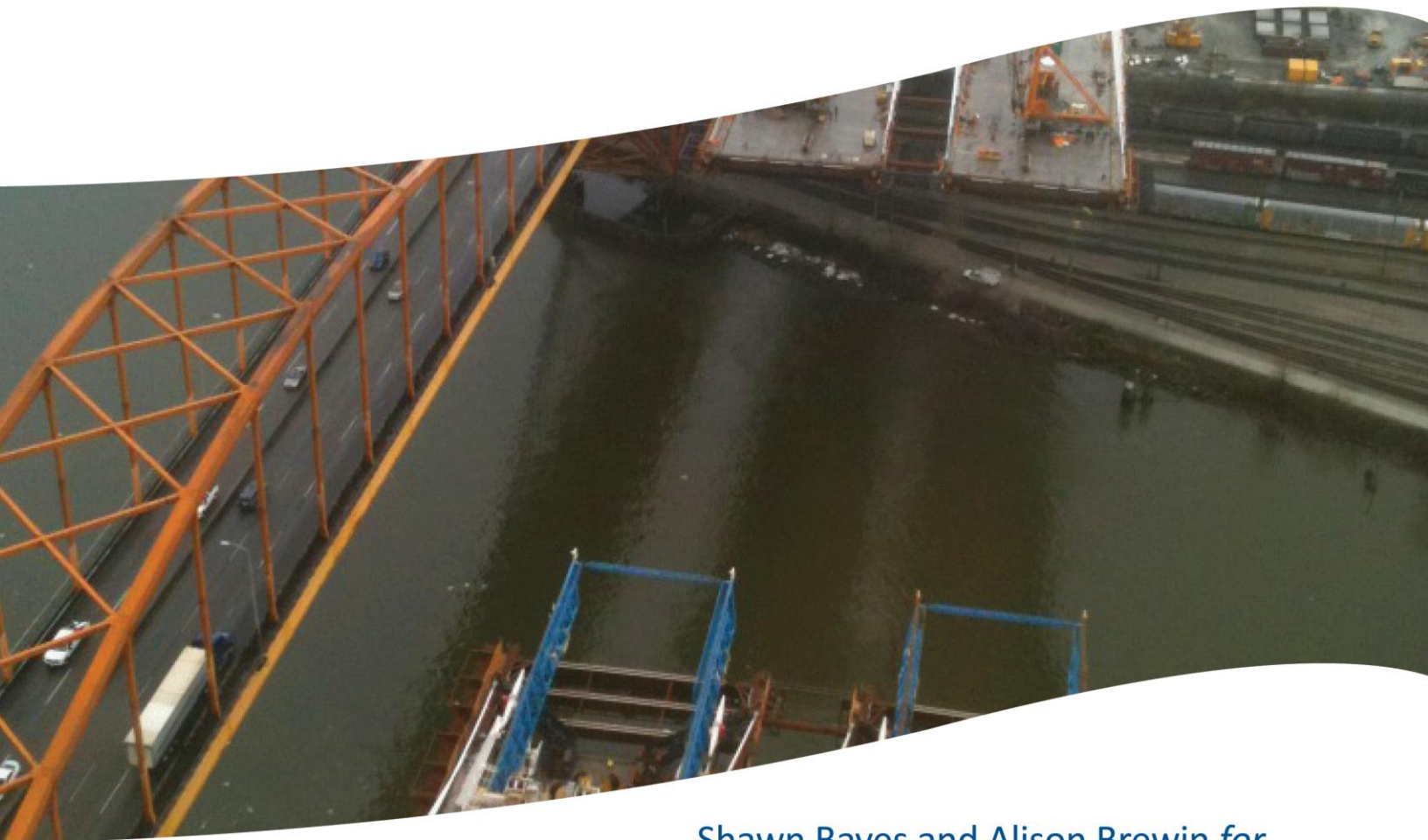


Bridging the Divide: Building Safe Shelters for Women and Families in BC

March 2012



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EXECUTIVE SUMMARY

Across BC, homeless women, both alone and with children, have varying access to women-only beds. BC Housing, the funder for all shelters, with some joint funding from others, has created scoring criteria used in Requests for Proposal for shelters that place greater value on co-ed settings, particularly those that don't have designated women-only space. As a result, undesignated co-ed space is becoming all that's available in many areas. Increasingly, it is not just women-only shelters that are being lost and limited, but also designated women-only space within co-ed shelters.

Homeless women often report choosing to stay in violent relationships, trade sex or personal services for a place to stay, or remain on the streets rather than enter a shelter where they fear for their safety and the safety of their few possessions. Without government regulations or industry-wide standards to provide for women's safety in emergency shelters, there is little hope of offering these women changes that will address their fears, reduce risks, and provide the service they need to move towards better lives. This report grapples with the question of women's safety, in its full sense, and attempts to provide concrete pragmatic solutions.

The Elizabeth Fry Society of Greater Vancouver (EFry) provides gender-responsive support services for marginalized women in the Lower Mainland and operates three shelters, one for women-only and two for women and their children. Women in those shelters repeatedly report concerns for their safety in co-ed shelters. EFry was further educated on the issue when over the course of six months, ending in early 2010, it undertook contracted work for BC Housing. The report published as a result of that work, *Bridging the Gap: Shelter Case Management in B.C.* provides a proposed case management tool, staff training, and minimum reporting standards related to safety. The preparation of the report required EFry to meet with shelter providers around the province and provided an opportunity to expand EFry's understanding of the challenges shelter providers and women face, and the need for minimum standards, in the absence of any, to address the enhancement of safety for women in shelters.

To further explore the issue, EFry, with sponsor support from Vancity Credit Union and BC Housing, convened a collaborative one-day symposium at Vancouver's Wosk Centre for Dialogue on November 15, 2011. Representatives were invited from every aspect of shelter design and operation to discuss *Effective Shelter Design to Promote the Safety of Women and Families*. The Symposium drew together shelter operators, city planners, architects, researchers, and members of government and the non-for-

profit sector representing clients and specific marginalized groups to consider architectural design considerations, alternatives to emergency shelters and safety self-assessment. This report explores those discussions from the starting place of gender, homelessness and safety and then moves to discuss effective design options, operational policies and procedures, and staff training. It attempts to take the pragmatic position that as long as emergency shelters are required, and as long as women-only space is unavailable for all who seek it, we need to explore, incorporate and evaluate all the tools available to keep women safe and make them feel secure.

Following the structure and dialogue of the Symposium, the report provides the background to women's homelessness, explores issues that are barriers to success, and finally offers a tool developed by EFry as a concrete means for organizational response to the needs of vulnerable women and their families.

Dialogues delving into some of the policy questions explored in Section 5 such as the use of cameras and the relationships between Transition Houses and shelters can continue to break down existing barriers to creative collaborations. In addition, the experience of racialized, immigrant and refugee women needs further study and exploration, particularly the impact cultural and religious assumptions have on racialized women who are homeless or fleeing violence. The hidden homeless are some of our most vulnerable residents, and women - particularly racialized and immigrant women - are a large part of that group.

The Symposium was intended to begin a conversation and encourage participants to engage in ongoing discussion. This report incorporates both Symposium and further participant discussions towards engaging others in responding to the safety of homeless women. It discusses the tensions that exists between women's shelters and Transition Houses; women-only shelters and co-ed shelters; rural and urban settings; culture, colonialism and racism; the context of location in safety, and issues related to designing and providing service delivery for safe space. Safe space for women is taken to include the provision of service that meets the needs of women.

Specific areas of focus are:

- Designing new spaces and re-designing existing space;
- The creative use of flexible and temporary spaces;
- Development of operational policies and procedures;
- Staff training and human resources considerations, and
- Program and facility evaluation.

Recommendations include:

Government

- Develop an inter-governmental working committee, comprised of provincial, municipal and BC Housing representatives, to focus on women's safety, homeless families and the creation of best practices in shelters. This would include contract language, integration in the BC Housing Frameworks, a gender responsive framework and a protocol for homeless BC families when there is no shelter or a viable transition house option available. This is crucial in meeting the Human Rights Act and the Charter of Rights and Freedoms' obligations to protect women.
- Develop clear indicators for success in gender responsive programs and services, and incorporate those in Requests for Proposal (RFP) for shelter operation, construction, and service contracts.
- Support the collaborative development of shelter best practices, inclusive of gender-responsive policy development and practice by organizations.
- Consider all possible alternatives for homeless women prior to every release of an RFP in rural communities, including such options as mobile homes, scattered housing or other low-cost options, rather than assume separate space for women is cost-prohibitive.

Shelter Providers

- Building relationships and effective referral systems between existing support services for women.
- Educating and training staff in counselling and gender responsive approaches and core issues affecting women.
- Ensuring policy and procedures to address claims of violence, intimidation or sexual harassment.
- Creating designated separate women-only spaces including sleeping areas, washrooms, lounge, eating areas and program or counseling space.
- Defining separate sleeping accommodations for women in co-ed settings as having a door so women control their physical sleeping space.
- Having female-only staff complete bed checks on women.

- Ensuring washrooms are in either women-only or highly visible areas, have a door that locks and can only be opened with a staff controlled key or a similar measure.
- Use organizational gender responsive assessments, such as the one included in this report, as a guide for building gender responsive service and to assess safety limitations and modifications required.
- Implement gender-responsive staff training, program evaluation and monitoring systems.

Architects and Developers

- Build a policy checklist for clients to identify their gender responsive program needs.
- Capture and share technical design success in meeting safety needs of women.

1. INTRODUCTION

A survey listing BC Housing emergency shelters and their bed capacity shows that only 17 per cent of all shelter beds in BC are designated for women, yet 30 percent of the visible homeless are women. And that number is growing. The interaction of poverty, violence, and lack of affordable housing is a gendered experience – meaning women are affected in a way that is different to how men experience it. The 30 per cent does not include the high number of women who are part of what researchers call the ‘at risk of homelessness’ and ‘invisible homeless.’ Violence, the threat of violence, and protecting their children from violence are central realities for women struggling with precarious housing. The idea that a woman may find a co-ed shelter less safe than either the streets or the violence of an abusive partner is one society ought to consider unacceptable.

In BC, the discussion of gender in relation to shelter provision is seen by some as less than legitimate. The needs of women are considered to be virtually the same as vulnerable or physically feeble males in a shelter; therefore, their needs centre solely on the safety and security of their person. Such a perspective ignores that women are not weak men. To help them deal with their homelessness, women need more than

“Providing women in co-ed shelters safe and effective service? There is a body of over 15 years of work regarding best practices for women that can be drawn upon yet is not often discussed.

For example, Shelter Net BC’s 2005 report ‘Best Practices for Shelter Providers in BC’ and the Federal Government’s 2009 report I Built my House of Hope Best Practices to safely House Abused and Homeless Women.”

Shawn Bayes, EFry Executive Director, at the Symposium

just physical safety. Indeed, the importance of gender is well recognized in the world of international development which works for the improvement of quality of life in those countries with a low level of material well-being as a valid and impactful focal point for any community, economic or social development work. The goal of this report and the Symposium it flows from is to bridge some of the more polemical conversations that occur and build practical tools for ensuring women’s safety. As a long-time shelter

provider, the Elizabeth Fry Society of Greater Vancouver (EFry) developed the *Symposium on Effective Shelter Design to Promote the Safety of Women and Families* (the Symposium) and this report to focus on identifying those tools and meaningful

solutions to increase women’s safety throughout the BC and build community vision around it.

As long as emergency shelters are required and as long as women-only space is unavailable for all who seek it, all the tools available to us to keep women safe and make them feel safe, ought to be employed.

Tools include:

- Designing new spaces;
- Re-designing existing space;
- Creative use of flexible and temporary spaces;
- Operational policies and procedures; and
- Staff training and human resources.

Following the structure and dialogue of the Symposium, the report provides the background to women’s homelessness, explores the issues that act as barriers to success, and outlines the concrete tools for consideration which EFry offers to anyone engaged in supporting BC’s most vulnerable women and their families.

PROMOTING SAFETY & RESPONSIVENESS

In December 2008, Dawn Bergman burned to death when her makeshift encampment on Davie Street in Vancouver caught fire. Despite police encouraging her to access co-ed shelters in the Downtown Eastside (DTES), she refused because she did not feel safe in those shelters. The news of sexual assaults at a DTES co-ed shelter in 2011 made even more British Columbians aware of the issues at stake.

Organizational Human Resources Best Practices

- Two managers in candidate interviews to ensure biases are tested
- Mandatory Criminal Record Checks
- Short observation shift for short-listed candidates to ensure their fit and comfort
- Staff training in:
Relational Skill Building
Crisis Intervention
Case Management
Acceptance of people as they present “where they are at”
- A Grievance Procedure for staff and clients
- Annual Performance Reviews
- Balance the gender of staff
- Awake 24/7 staff
- Staff peer mentoring model
- A team approach to meet the needs of

EFry has a long history - as do many Elizabeth Fry Societies across the country – of providing safe shelter and support to women, families and children at risk of involvement, involved in or affected by the justice system. Providing a wide range of services and programs across the Lower Mainland, EFry runs six women-only shelters and housing programs, including three transitional shelter programs. Dawn Bergman's death sparked the organization to focus its attention on the issue of women's safety in other shelters in the province.

Shelter providers in BC are hardworking organizations. Whether their history stems from faith-based philanthropy or political analysis, providing for the needs of the homeless involves a passionate commitment for shelters. EFry seeks to support and enhance that vital work by exploring and sharing best practices. The 2010 report on case management, *Bridging the Gap: Shelter Case Management*, is an example of the kind of practical tools EFry is building. In the case of gender and safety in shelters, throwing a blanket up between men and women simply isn't enough as has been demonstrated by one co-ed shelter.

EFRY'S GOAL FOR THE SYMPOSIUM

EFry holds a firm commitment to the provision of women-only and shelters that accept children as the safest way to support women struggling with homelessness and inadequate housing. EFry recognizes co-ed shelters can have a place; however, it believes that questions regarding design, function, and implementation are required to ensure they meet the women's needs. Whether a woman chooses a co-ed shelter herself or - more commonly in BC – goes because there is no other option available to her, keeping women safe from violence and sexual exploitation must be a priority for all shelter providers. As discussed later in this report, transition houses may be a resource for some women. For others, access to this option is significantly limited because the majority of transition houses only provide services to women fleeing violence and who do not have addictions or unstabilized mental illness or behavioural issues, because of concerns around impacts to children and other women in the residence.

THE SYMPOSIUM

The Symposium held on November 15th, 2011 was designed to bring together experts in the fields of shelter design, shelter operation, social planning and women's services. The program included presentations from experts which focused on various aspects of shelter provision from women's needs to physical design and organizational readiness. Appendix 1 provides an overview of the Agenda. Registrants represented a wide range of organizations and institutions including:

- Women's organizations and services;
- Municipal planning departments across the Lower Mainland;
- Housing and shelter designers and architects;
- Project management companies; and
- EFry members and staff.

During the Symposium registrants identified a strong need for continued discussion. Further discussion by designers, developers and architects together to explore design options and considerations beyond this report would be valuable. It would allow for technical discussions that identify innovative opportunities for existing shelters trying to balance flexibility and safety resulting in improvements for women and children.

Issues related to Privacy versus Protection are explored including the use of cameras. The relationship and differences between transition houses and shelters are discussed. There are potential alliances that could foster solutions for homeless women and children in rural communities and other alternatives for exploration.

The idea of focusing planning from a place-based perspective was raised at the Symposium with limited time for exploration, as was the challenge of 'Not in My Back Yard'(or NIMBY). These two discussions dovetail into an important theme raised by Dr. Christine Walsh and Carla Alexander about the importance of the location of shelters to women's sense of safety. We explore the importance of location and place-based analysis in more depth in Section 4 of this report.

The aging population and feminization of poverty will ensure the growth in senior women seeking shelter and safe housing. The specific needs of senior women in BC were raised at the Symposium, but without an opportunity to discuss them more fully. Design and operational needs of this group warrant special attention.

2. POVERTY, GENDER AND WOMEN'S SAFETY. WHAT IS THE ISSUE?

Poverty continues to climb in Canada, particularly here in BC.¹ The number of women in prison also continues to grow. In one year, from December 31, 2010 to 2011, the number of women imprisoned grew by 20 per cent – and there is a further predicted steep increase coming as a result of the passing of further legislation. Incarceration frequently triggers a lifetime struggle with homelessness. Moreover, research suggests that 40 per cent of individuals released from prison have no place to go and become homeless. Aboriginal populations are growing at a faster pace than non-Aboriginals in Canada, and the impact of racism and colonialism continues to result in over-representation of Aboriginal people among prisoners and shelter users around the province. Public policy on welfare rates, affordable housing and social programming in BC and Canada suggests little relief in sight.

Despite common themes in their life experiences, women in BC who access shelters² are not a homogeneous group of individuals. However, poverty is unquestionably their shared experience, one that is a growing reality for women in Canada. Recent studies show women are the fastest growing demographic among the homeless (Walsh et al. 2008). The 2004 census indicates 2.4 million women lived in poverty compared to 1.9 million men. These numbers have grown since then. BC has maintained its status as the province with the worst poverty

Women and Shelters

"Yeah, I'm scared of being mugged I'm scared of being raped because I've been raped before. I only go out during the day I never go out at night. Never—it's too dangerous."

Bev, Vancouver

Quoted in Christine Walsh and Carla Alexander's presentation at the Symposium

¹ 12% of British Columbians live in poverty – the highest poverty rate in Canada. Iglia Ivanova, The Cost of Poverty in BC (SPARC BC and CCPA. 2011)

² A note on the term 'shelter' and Transition Houses: Throughout this report the term shelter is used to mean emergency shelters for those struggling with homelessness and substandard housing. It does not refer to Transition Houses that are specifically designed to provide safe space for women escaping the violence of their intimate partner. Transition Houses provide a specific service and tend to have strict rules about access. Shelters tend to be low barrier spaces designed to provide short-term beds for sleeping as an alternative to the street. The distinctions are discussed further in Section 2.

rate in Canada for the past seven years, and there is no comprehensive plan to address it.³

There are a number of criticisms of the ways in which homeless people in Canada are identified and counted. An example in the most recent homeless count in the Lower Mainland is that for the first time individuals in drug treatment were not counted, even though BC cancels social assistance for individuals in treatment, resulting in the person's inability to maintain their housing. Despite these kinds of criticisms, current numbers identify one-third of the homeless population in Vancouver as women.⁴ The most recent homeless count in March 2011 illustrates one of the key issues in effectively addressing women's needs – the lack of gendered data. The final report, released at the end of February 2011, provided limited data regarding women and families, without providing a breakdown as to the proportion that are Aboriginal or youth, nor the regions in which they live, other than to note the majority of unsheltered women were found in Vancouver and Surrey. More detailed information in this area could substantively impact decision-making on the types of homeless shelter or housing needed, and the location for affordable housing development or shelters, particularly given shelters for families are relatively rare.

Taking the province as a whole when assessing the reasons for and nature of homelessness is a challenge as well, given the huge differences between communities in BC. For example, being poor in Vancouver's Downtown Eastside means access to more services than other areas may have, but there is also greater proximity to populations with complex health and safety issues. In rural communities there may not be a shelter, or any programs for housing support at all, and the lack of anonymity can make personal challenges hard to address. While the realities of the Downtown Eastside can and often do emerge on smaller scales elsewhere, poverty, homelessness and even violence are different outside the Lower Mainland. Those differences demand different solutions, ones that acknowledge the unique opportunities and challenges smaller and rural communities have in addressing homelessness.

³ There are a number of resources on poverty rates in BC, but most up to date and link to others is First Call BC Child Poverty Report Card 2011. Accessed December 27th, 2011 at <http://www.firstcallbc.org/pdfs/economicquality/3-reportcard2011.pdf>

⁴ Homelessness in Metro Vancouver: A Comparative Community Profile. Greater Vancouver Regional Steering Committee on Homelessness, 2010.

For the most part, men and women share the reasons for - and the impact of – poverty, and the links of poverty to homelessness are well established. Regardless of gender or Aboriginal heritage, physical disabilities or mental health challenges are all hugely over-represented among those experiencing poverty. Substance abuse, whether a symptom or cause of homelessness, is ever present. In addition, the justice system is a key player in the lives of most men and women seeking the services of emergency shelters, whether as a result of past charges and convictions, or the police presence in the streets.

(Walsh and Alexander presentation)
Quotes from women shelter users

"I remember a chain and a lock around the fridge. Well, only so that we wouldn't eat. He said that it was expensive, we were 11 kids. You see, we were hungry."

Anonymous, Montreal

"...I was 12 years old and I was gang raped in one foster home, but I lived through it." (Carol, Calgary)

"...When I was a child they used to slap our heads like this. I thought they were counting us in French. When I got a little older I thought, I realized that they were calling us "pigs, pigs, pigs"... "Couchon, Couchon, Couchon..."

(Sue, Residential School survivor, Calgary)

As much as those shared experiences of poverty and homelessness affect women, the experience of poverty is also shaped by violence in the home, the continued economic and social impact of child-bearing and child care, as well as sexual harassment and sexual exploitation of various kinds. Women make up the majority of those living in poverty in Canada, and continued inequities in society contribute to keeping that statistic on the rise.

Women's experience of violence means many homeless women suffer from undiagnosed head injuries. They have complex relationships with men for protection and economic or drug dependency. The fact that women can 'choose' to trade sex for anything – money, shelter, food – means that some do, whether to protect their children,

keep their home, or crash somewhere away from street-engaged homelessness. This and the efforts women with children will go to limit public attention to avoid child apprehension, means they are not effectively captured in the statistics on homelessness. And added to the impact of the criminal justice system, many low income women are struggling with family law and child apprehension systems as well.

It is often in the context of their relationships that women define their own self-identity. The perception of others shapes women's ideas of themselves and their

world. This is an important aspect when considering the design of shelter housing for women. The considerations for women can all too often be reduced to safety, security and safe places. However there is more than that. One of the most important aspects of safety extends to ensuring emotional and cultural safety, and the most important tool for safety in a facility that exists is the quality of relationships - relationships among staff, between women and staff, and among the women themselves. Therefore, meeting women's relational needs through policies and physical space that allow for healthy and safe connections is a first step in making a facility safe for women and their children.

British Columbian programs and services, and our public policy model of service delivery, have been based on numbers for the past two decades. Funding schemes are tied to how many individuals access services. Indicators of program success are in the numbers and there is an assumption that if people don't ask for something, it does not need to be provided. If small numbers of women seek out shelters, Canadian systems assume they don't need them, or that shelters should be designed around the needs of men.

Substantive equality – the kind of equality our Charter of Rights envisions – says that in making decisions, policy and law-makers need to consider historical disadvantage and account for it. To do anything less perpetuates that historical disadvantage. The fact that there may be extra costs associated with meeting the needs of our most vulnerable neighbors is not the point – it is in the meeting of those needs that we all benefit. A shelter that keeps women safe from sexualized violence and harassment is better for everyone, whether male, female or child.

SHELTER PROVISION: CONTEXT, CONFLICTS AND COLLABORATIONS

When examining the issues of women's safety in shelters, a series of threads emerges that weave through and complicate the seeking of solutions. The differences between emergency shelters and transition houses, the questions around women's privacy versus their need for protection from violence, and the great diversity of need from one community to another in the province and other issues can act as barriers to building and implementing solutions.

However one analyzes the prism of statistics and demographics about women, the reality is that a woman's concept of the ideal shelter depends a great deal on her immediate need more than her personal characteristics "...there are a number of

issues consistent and unified through multiple categories of diversity” (p.45 Walsh). That diversity of need and want - along with diversity of race, class, sexual orientation/identity, involvement in sex work and experience of violence – means that no one way of providing safe and nurturing shelter for the women needing it is the only way. In fact, issues that many find complex act as barriers for action by allowing those with power to side step the hard issues. Instead, these discussions can be seen as opportunities for meeting the diverse needs and interests of women as they are.

PRIVACY VS. PROTECTION

The urge to protect women has conflicted with the rights of women as individuals deserving the dignity of privacy in multiple cultures and traditions over time. The impact of women’s inequality has been felt most strongly in the ‘private’ realm of family where limiting women to the biological role of child-bearer restricts their economic and social freedom. As a result, calls to the state to intervene and protect women from the violence and control of family structures are considered by most a valid part of the movement for women’s equality. For women, Big Brother is not always a problem.

Having said that, western concepts of human rights hang on an individualistic framework that says each person has the right to freedom of movement, privacy and dignity. As such, women are active in their own destiny. They are not helpless and innocent victims – they are free agents, at least in theory – when they aren’t criminalized. The question of whether or not to interfere with women’s privacy if it ensures their protection is an easy one to answer for some people, but not for everyone.

It is more than a philosophical question. Many women have experienced violence and therefore have been watched, stalked and monitored or have internalized fear of it. Invasions into their privacy can trigger trauma and distress. More commonly, women have internalized the experience and the erosion of an expectation of safety. Women who have been involved with the criminal justice or social services system have also experienced invasions into their privacy by those in authority. Therefore, women may feel protected by outside intervention and close scrutiny. Indeed, having become habituated to surveillance some women do not feel safe without it, which is another form of institutionalization. Organizations need to consider the paradigm of assisting individuals and perpetuating their institutionalization. Assisting individuals to move

outside their institutionalization requires a high level of support and encouragement as they adjust to a new equilibrium and develop a sense of safety outside “the box,” much like a caged bird. Organizations must also decide on the dynamic tension between the tri-party relationship of the assumption of control for the protection of the individual; the ability of the individual to place him or herself in situations of risk with freewill or apparent freewill; and the empowerment of the individual to exercise informed decision-making in their freewill. When applied to women, these questions are embedded with an additional level of complexity related to cultural values and current and historical imbalances of economic and social power.

“No matter what an organization’s position on using cameras, nothing can be substituted for direct staff supervision; and some areas of a shelter are clearly not appropriate for cameras such as sleeping and washroom areas. Others cannot be adequately monitored by electronic technology, such as recreation areas where individuals are in close proximity and therefore should involve dynamic supervision.

“Given the relational nature of women and their particular issues of safety and security, technology can never replace the importance of staff on the floor interacting and participating in program activities. For instance, if a staff-duty office is created, it should not be used as a break room for staff or a place to watch residents from a distance, nor should it be positioned so as to encourage such activity. In order to know what is going on and to ensure effective supervision in potential high-risk situations such as environments where individuals are actively under the influence of substances it is important that staff are present during the daily routine activities of the shelter.”

Shawn Bayes on electronic surveillance systems

Shelter operators therefore need to consider whether there are architectural design features that can allow for privacy in a safe way, features that can allow staff to supervise more effectively and consider their threshold of risk tolerance both for their clients and staff. If shelter providers provide different kinds of shelters such as temporary heat shelters or full service shelters there may also be differing levels of privacy, risk and risk tolerance that are acceptable to the shelter provider. The assumption of risk also needs to be considered with the general or special liability coverage the provider carries.

Risk mitigation includes considering the collection of information about clients. Collecting information carries with it responsibilities for its protection and use. BC Housing requires shelter users to consent to the collection of information that is entered into their database. Similarly clients have the right to consent to the collect of data that shelters might collect and determine what they will or will not disclose.

An informed consent form can demonstrate that organizations met this requirement and disclose any coercion such as denial of shelter access if not provided or lack thereof.

Having considered these issues, the program philosophy and subsequent design of case management processes and staff of interventions will be impacted.

TRANSITION HOUSES, EMERGENCY SHELTERS AND HOUSING

The development of transition houses⁵ in BC has its roots in the feminist movement of the 1970s. Over the years, transition houses have placed themselves increasingly in professionalized, less grassroots hands with the focus of the service being to protect women and children from domestic violence. Prior to the feminist movement, domestic violence was very much considered by society and the state as a private problem.

Shelters, on the other hand, are part of the even longer history of faith-based and philanthropic efforts to ease the burden of men's unemployment – mostly growing out of the Depression and the mobility of single men looking for work. Many BC shelter providers can trace their roots to – or continue to be – a Christian religious group of some kind. The rise of unemployment insurance and welfare systems shifted much of that challenge onto society and the state. The subsequent rise of more conservative politics has shifted those burdens back onto the shoulders of philanthropic organizations who are now struggling to meet them.

The move of the administration of transition house funding from direct Ministry of Social Development management to BC Housing blurs the distinction between shelters and transition houses and puts both in the policy framework of part of the housing continuum. Transition Houses have a different mandate and different roles and goals.

The majority of Transition Houses, as evidenced in the 2009 Consolidated Report of the Review of Women's Transition Housing and Supports Program by BC Housing, are

⁵ In this paper 'transition houses' mean shelters designed as a haven for women and their children fleeing abuse by their spouse or intimate partner.

not minimum barrier, and most shelters are designed to be just that.⁶ The 2009 report identified that BC Transition Houses struggled to respond to the needs of women with substance abuse and mental health issues. It reports over 1030 women were turned away because their mental health or addiction issues was identified as the primary concern and therefore outside the agencies' mandates. A further 1485 women fleeing violence were turned away because their additions and mental health needs could not be met. Moreover, the vast majority hold to a maximum 30-day stay for women, with rare exceptions, which is substantively shorter than the average stay of women moving into housing in a homeless shelter.

There is also a significant difference in the amount of information women are asked to provide about themselves. Low barrier shelters are designed to ask few questions and most maintain a willingness to accept people regardless of drug or alcohol consumption, mental illness or their behaviour. It should also be noted that virtually no Transition House accept transgendered women.

The need for both cannot be denied given the numbers who access both kinds of services, and the needs of families fleeing violence are unique. However, for many service providers supporting low-income, street and criminal-justice system engaged women, there is a class divide that has built up between the two kinds of organizations.

Given all we know about women struggling with homelessness, the benefits of the transition house environment can't be underestimated – located anonymously in neighborhoods throughout the province, with home-like environments, extensive programming to support legal issues, second stage housing, child care support and counseling, these programs are client-centred and comparatively well-resourced.

For women who meet their higher threshold for functioning, supported transitional, safe housing located in safe, healthy communities is exactly what they want and need.

There is a delicate balance therefore in the relationship between the two. Both transition houses and shelters struggle for funding. Falling as they do now under the same funder, the uniqueness of each and the populations they serve with differing although some overlap of issues, has created a degree of question for some as to

⁶ BC Housing identifies minimum barrier as an emergency shelter that has few requirements for entry and generally accepts individuals who have mental illness or are under the influence of drugs or alcohol.

whether one could not do both. However, there is a difference in approach from a case management and community integration perspective. Transition houses seek to carve out safety through anonymity and the protection it provides. Their clients have reason to hide and therefore access community service with caution. Community linkages for shelter clients do not have similar limitations. Shelter clients can also draw attentions to the locations through their multiple barriers and behaviour. Homeless individuals rely upon public information and highly visible locations that are easy to access to find shelters because they have no phones or access to other basic services. The principles of location and how they are situated in communities are the antithesis of each other.

WOMEN-ONLY VERSUS CO-ED

Many organizations maintain a strong commitment to women-only space when it comes to shelter and emergency housing. The most common argument opposing that is not about what might be safest, but about what is affordable and sustainable. There is also an argument that suggests that women-only space is no safer and that violence and conflict occurs amongst women so there is no benefit to having women-only space. And finally, there are those that say there are plenty of transition houses, and women don't seem to use homeless shelters so why make them central to planning? Those debates have effectively distracted attention from finding practical solutions to gender-based violence.

Points shelter providers can consider to effectively focus on the gender needs of women in shelter design include:

- Co-ed shelters exist and women are experiencing a lack of safety so solutions are necessary;
- Women want places to go with their male partners, and there is a real lack of space for couples and families needing shelter;
- Cost is a consideration, but creative low-cost solutions emerge when the problem is understood;
- True equality often means an expenditure of resources on a particularly vulnerable group to change the direction of historical disadvantage; and

- Women are not homogenous and have varying needs be it culture, context such as sex workers seeking respite from men in women-only space, or needs related to the diversity of women and their needs. Accommodation of those differences is part of meeting basic human rights.

Quotes from women

"As a single Muslim woman, where could I go? I can't enter the co-ed shelter."

Formerly homeless woman, Surrey

"Mixing of men and women is not allowed."

South Asian woman, women-only shelter, New West

DISTINCTIONS IN RURAL AND URBAN CONTEXTS

Rural communities face specific challenges in identifying, supporting and resourcing homeless individuals and families. Individuals may live in the surrounding rural or forested areas, making them less visible. The number of people living in rural communities is therefore not easily identified and homeless counts as a rule have not been conducted in rural areas.

In some communities, there are no shelter beds at all for women. All that exists are a handful for men or a transition house for women and children fleeing abuse.⁷ As is discussed in the section on Transition Houses on page 19, some transition houses will accept women not fleeing violence, or with addictions or active mental health issues. There is a question of differing mandates. In larger urban areas like Victoria and Vancouver's Lower Mainland, homeless people have more shelter options simply due to the greater focus on providing these that a larger population creates, or media focus and concentration of social services and absolute homeless like in Vancouver's Downtown Eastside.

⁷ Sean Condon, "Homelessness Crisis Grows in BC North." *The Tyee* March 16th, 2009. Also see David Bruce, *Homelessness in Rural and Small Town Canada*. Chapter 5, [International Perspectives on Rural Homelessness](#), eds. P Milbourne and P. Cloke. (Routledge: 2006) available for online viewing through books.google.ca

The tension between Transition Houses, for women and children fleeing violence versus shelters for homeless women and children has been discussed. Not discussed however, is what happens when Transitions Houses don't accept homeless women and children and there is no shelter that accepts children. Within the Lower Mainland Richmond, North Vancouver, and Langley do not have shelters that accept children. Families must find their way to other communities with shelters which are operating virtually at maximum capacity. In Abbotsford or Squamish which also have no shelters that accept children, reaching the Lower Mainland is much harder. More rural areas, that similarly provide shelters for men and women but make no provision for children to accompany their parent are Chetwynd; Courtney; Duncan; Fort Nelson; Penticton; Smithers and Vernon.

In these communities women face stark choices about staying in unsafe environments, placing their children in care, or convincing a Ministry for Children and Families social worker to go to her or his supervisor to receive emergency short term authorization to for the family to stay in a hotel. If a family is lucky enough for such approval, they face Ministry scrutiny of their parenting and have to find their way out of homelessness quickly or face their children being apprehended into care.

CULTURE, COLONIALISM AND RACISM

Aboriginal women are overrepresented in prisons and on the street. While only 4.4 per cent of the BC population is Aboriginal, Aboriginal women account for over a quarter of women imprisoned in BC. Aboriginal people are also significantly over-represented in the homeless population of Metro Vancouver. The 2011 results of the Metro Vancouver Homeless Count found that a quarter of homeless people were Aboriginal. The results did not provide a gender breakdown; however, the 2008 Homeless Count found that half of homeless women were Aboriginal.

In a 2011 report, *Feeling Home: Culturally Responsive Approaches to Aboriginal Homelessness* authors Katie McCallum and David Isaac advised that Aboriginal people make up two-thirds of Prince George's homeless while only 11 percent of the general population are Aboriginal. Whatever the lens, Aboriginal people are significantly over-represented in indicators of lower academic achievement, addiction and substance misuse, mental illness, criminal justice involvement or any of the other indicators indicative of individuals who have experienced trauma, discrimination or systemic oppression. McCallum's and Isaac's report also provides found Aboriginal people did not feel comfortable and accepted in shelters and made recommendations.

Beyond recommending established scholarship on culturally responsive approaches to serving Aboriginal and Indigenous persons it offered a number of recommendations for service provision transformation. McCallum and Isaac identified actions helpful for non-Aboriginal providers to provide respectful, culturally safe service. The recommendations included:

- Asking people “where are you from?” as a basic first greeting;
- Shelters having a living room like setting in which clients can socialize and make friends;
- Using laughter and other comforts to make the shelter more welcoming;
- Allowing for cultural practices within the shelter;
- Providing cross cultural training for all shelter employees;
- Engaging clients in developing and providing services geared towards Aboriginal people.

On the issue of women’s safety, the impact of colonialism and racism has been to force women to choose between the safety of an Aboriginal community, or the safety of women-only spaces which are often created and operated by white women. Given the over-representation of Aboriginal people in shelters, designers and operators need to recognize shelters as part of a continuum of care and healing, not only as a continuum of housing. Wrap-around services are part of fixing the damage colonialism has wrought on relations between genders in Aboriginal communities.

Immigrant and refugee women face unique challenges and barriers to meeting their need for shelter and safety. Like Aboriginals, immigrant women are often forced to decide between the comfort of their own linguistic and cultural community and the safety of mainstream services. Many immigrant women are more isolated from English language training than men and thus lack even some of the basic connections to community programs and services that language training provides. There may also be religious or other expectations that restrict their ability to access emergency housing.

Shelters are meant to welcome all that come to their door. Considerations for cultural, linguistic and religious safety, and identifying how racism impacts women’s lives are important for shelter safety and design. This is particularly true when considering shelter locations.

THE POSITION OF NEIGHBOURHOOD – SAFETY IN PLACE AND LOCATION

A debate that is somewhat unique to BC centres on the strengths and weaknesses of investing in shelters in urban centres, particularly the Downtown Eastside. All shelter operators struggle with the issue of Not-In-My-Backyard. Placing shelters in industrial areas or in neighbourhoods like the Downtown Eastside can lessen community opposition, however it does not respond to the issue. Building shelters in areas separate from other community dwellers and services draws people to those areas and reduces opportunities for case management and community integration which is a core purpose of shelters. Location is also instrumental in what women and shelter providers say about shelter locations. Vancouver's Raincity Housing reports their emergency heat shelter for women on the Broadway corridor, with its high traffic and busy business community, is used by higher numbers of women compared to other centrally-located shelters including the Downtown Eastside which they interpret as women travelling to shelters where they feel safe.

Two practical tools for moving beyond the debate of Not-in-My-Backyard include:

1. Pivot's recent publication *Yes in My Backyard: Welcoming Inclusion, upholding Human Rights* provides excellent examples from Vancouver organizations such as the Union Gospel Mission and Raincity Housing about how to create positive relationships in residential neighbourhoods.
2. ALIVE (Aboriginal Life in Vancouver Enhancement Society)⁸ advocates for place-based strategies. As a grass roots organization, it uses place-based strategies to focus on the residents of a geographic community, rather than trying to build large economies of scale. This approach creates recognition of Aboriginal populations in the Lower Mainland communities where they live and develops the supports they need to remain there rather than aggregating their needs to develop one response hub in the area of greatest need – the Downtown Eastside – and then drawing people away from their communities to receive service. The approach emphasizes community stability and integration and doesn't erase their smaller numbers into a larger aggregate.

⁸ ALIVE "is an Aboriginal organization that embraces place-based strategies that understand the holistic nature of the neighborhood. Characteristics of place-based strategies include collaboration, building on existing resources and networks, inclusiveness philosophies and practices and holistic planning and action development. The inter-connectedness core of our philosophy is very consistent to the traditional values of indigenous communities around the world." Accessed January 18th, 2012 at www.aboriginalvoice.com.

3. DESIGNING SAFE SPACE

As Dr. Christine Walsh states, “...the spatiality of...shelters has direct implications for whether or not they (women) will seek these support services (Walsh et al. 2010 p. 38). In other words, if the space is not set up in a way that takes into account women’s safety concerns, women will not use those services. What are the considerations that must go into creating safe space for women? And even more importantly, what can we do to create spaces that build a homeless woman’s sense of safety? If we agree that women struggling with homelessness have a right to basic dignity and security, how can shelters contribute well to that dignity and security?

Ensuring appropriate privacy and assurance of visual barriers from others, particularly men in a co-ed setting, are particularly important for women. Consideration needs to be given to everything from bedroom window coverings, and the prohibition of male staff from entering a women’s room alone. For example, bedroom windows that face courtyards or other areas that are visible to others should be obscured with glazing that allows light into the room but blocks visual access from the outside.

In working with women engaged in the justice system, EFry has learned a great deal about the spatial needs of women who use shelter services in the Lower Mainland. For example, simple things can contribute to women’s sense of personal safety, such as seating that does not require them to have their backs to doors and entrances, or the use of name tags or other identification so they can label their bed and space to rebuild a sense of identity. Some other issues to consider are below.

LIGHTING AND COLOUR

Many street involved individuals struggle with methamphetamine and heroin addictions which over time damage their eyes and interfere with their ability to differentiate intensities of light. Consequently, women with these addictions perceive less light than non-drug users of the same age.

Shelters need to be consistently well lit but not so bright as to be blinding. When light levels vary, women can struggle with the impact of glare. For instance, when using a stairwell that is poorly lit compared to its landing, women can falter because their eyes cannot adjust to see the steps or that they have reached the landing. Similarly, large amounts of natural light can impair vision indoors because these women’s eyes

can't adjust well. This can happen when large windows face the sun or when there are very bright artificial light sources, such as those typically found in meal and lounge areas. As these women's eyes may have a more difficult time recovering from glare than others their age, any blinding effects are long lasting.

Providing appropriate light also contributes to better communication between people in a shelter. Poor lighting can interfere with women's ability to read the facial clues of a staff member or fellow resident. As well, providing women with the ability to adjust and control lighting can assist them both in functioning better and feeling like they have more control over their space, something research has suggested reduces interpersonal conflict.

Like seniors, longtime drug users also have a decreased ability to distinguish between different colours and intensities of colours, resulting in things like mismatched clothing, applying too much make-up, or challenges reading colourful signage. Poor colour discrimination also affects perceptions of environments. Because softer colours and colours of similar intensities are very difficult for the eye to discriminate, rooms and facilities decorated in pastels will appear very dull and sometimes gray. The same is true of space that is highly detailed such as wallpaper or painted with fine line graphics that can appear attractive to eyes that can differentiate, but is visually confusing or indistinguishable to those with low vision. High contrast, long wavelength colours such as reds, yellows, and oranges are more visible than short wavelength colours like violet, indigo and blue. Red or dark neutrals against a light background and yellow or white against a dark background can assist with poor colour differentiation while greens/blues/purples or pastel shades can be hard to tell apart. Contrasting colors also can aid women in distinguishing objects in the environment.

VISUAL CUES

Women learning to navigate a shelter, particularly larger shelters that are not designed to replicate a home-like setting, can struggle to remember where things are. Long term users of illicit drugs such as MDMA can suffer cognitive deficits including memory loss. Design features such as direct and obvious travel paths, and key locations for clocks and calendars can help people to remember the layout and orient themselves in the space. Design features can also provide a 'way finding process' to facilitate a sense of competency and make using the space easier such as artwork, colour and signage to give clues.

Women not only have special considerations related to their gender, such as the need for more washrooms and personal grooming space, they also have more health issues than homeless men. The BC government, 2001 report, *The Relationship between Homelessness and the Health, Social Services and Criminal Justice Systems: A Review of the Literature*, provides an overview of the increased prevalence of mental illness, and clearly documents homeless women's substantive increased prevalence of mental health issues compared to homeless men. Similarly, studies published in the *Canadian Medical Association Journal* (Spitta, Kevin, Craib, et al, 2002) regarding the prevalence of show HIV incidence rates among female injection drug users in Vancouver are about 40 per cent higher than those of male injection drug users. The same researchers published in the same journal in 2003, reported that Aboriginal intravenous drug users converted to HIV status at twice the rate of non-Aboriginal intravenous drug users.

A report prepared for the Vancouver Coastal Health Region by the Community Health And Safety Evaluation (CHASE) Project (2005) on the Downtown Eastside found several gender based differences in service use, with women consistently more likely than men to report the use of nursing care (37 per cent versus 27 per cent), physician care (84 per cent versus 71 per cent), outreach workers (27 per cent versus 19 per cent), ambulance pick-ups (30 per cent versus 23 per cent), ER admissions (42 per cent versus 37 per cent), hospital admissions (25 per cent versus 21 per cent), and pharmacies (82 per cent versus 72 per cent).

Results that identify gender differences regarding health issues other than mental health amongst men and women are significantly sparser for outside the Downtown Eastside. However, International and North American studies similarly finding including Grove (1991) in "Higher Rates of Physical Symptoms among Homeless Women do not Appear to be a Reporting Bias" published in *the Journal of Health and Social Behaviour*. Addiction also impacts men and women differently. As the *Harvard Mental Health Newsletter* of 2010 advises, while more men than women become addicted to drugs, women face tougher challenges. They tend to progress more quickly from using an addictive substance to dependence (a phenomenon known as telescoping). They also develop medical or social consequences of addiction faster than men, often find it harder to quit using addictive substances, and are more susceptible to relapse. These gender differences not only affect treatment but the case management and environmental design of shelters for women.

Telescoping refers to the concentration of drugs in the tissues of women because of their lower body weights and smaller organs. The larger organs and body weight of men dissipates drugs more resulting in less effect on their organs and tissues. Consequently, drugs not only affect sight and cognition of women more than men, but their health as well. And while different drugs, and the substances they are “cut with” can affect different parts of the body, the common use of cocaine, heroin, and methamphetamine amongst homeless women can be anticipated to effect their heart, lungs and joints. Tasks such as climbing stairs or getting into or out of a tub can be as difficult as they would be for seniors.

The shelter environment may also have indirect, but nevertheless powerful, effects on behaviour. As mentioned earlier, colours more commonly found in institutions, such as pastels, are not advised because of the increased likelihood that women will have vision complications from drug use. They can also impact behaviour because women may associate them with previous experience in institutions like hospitals, locked facilities and prisons that typically use pastels. For similar reasons, institutional furniture can also cue residents to differing behavioural expectations than traditional normative behaviour. Institutional furniture that is not easily moved or destroyed can imply expectations of behaviour problems.

GENDER DIFFERENCES IN PATHWAYS TO HOMELESSNESS

Men and women have differing pathways into homelessness. Tessler, Rosenheck, and Gamache report in the 2001 *Journal of Social Distress and the Homeless* that in a study of homeless men and women the top five reasons women give for becoming homeless are mental health problems, followed by interpersonal conflict, alcohol or drug problems, someone no longer able or willing to help, and loss of a job. Men in contrast report loss of a job, discharge from an institution, mental health problems, and alcohol or drug problems, and eviction. Case management approaches for men and women therefore differ. A male shelter would focus case management on men finding a job to address their primary reason for homelessness, while for women the case management would focus on addressing their mental health problems. Similarly, the next emphasis by likelihood of occurrence is release from an institution such as a prison for men versus for women it is the breakdown of relationships. Again the approach would differ.

Moreover, the BC Provincial Health Services Authority in, *Taking a Second Look: Analyzing Health Inequities in British Columbia with a Sex, Gender and Diversity Lens*

(2009) found women in the lowest 25 percent of income households suffer poorer health outcomes. The self-reported prevalence of heart disease for low income women was over three times that of women in the highest 25 percentile of income households. Men in a similar comparison from low income households report over two times the prevalence compared to men in the highest quartile. Thus low income women are affected more than low income men. The report also found similar gender findings related to self-perceived health and overnight hospital stays, as well as being at higher risk for homelessness and food insecurity.

KEY PRINCIPLES IN DESIGNING NEW SHELTERS

Gwyn Symmons of CitySpaces Consulting, a design firm with expertise in this area, discussed the first five key principles their practice identified for land and social planning at the Symposium with an eye to designing shelters for women's safety and alluded to the seventh in this list regarding new build or retrofitting. The sixth principle, speaks to the experiences clients have often had in their lives with institutions something that the presentation of Dr. Christine Walsh and Carla Alexander reiterated. Consideration is given to the challenges of providing an environment that minimizes the impact of that experience and the subsequent emotions that can be raised for clients is discussed.

1. SAFE ACCESS

Whether it is in the lighting, location, or the design of entrances, how women access shelters is essential. The presence of staff at the front door to register all who enter and leave the shelter is seen as absolutely necessary. Women advised they feel safer when they and others are observed and acknowledged. In both the research conducted by Walsh and Alexander, and in the experience of CitySpaces, further elements of safe entryways include:

- Multiple entrances for differing uses such as for those accessing the emergency services versus longer term residents;
- Locked doors that require someone to buzz the individuals into the facility;
- Wide and spacious entranceways to ensure no outdoor lineup; and
- Extensive outside lighting to ensure no external 'entrapment spaces.'

Rock Bay, the new Victoria Cool Aid Society facility in Victoria, used architectural design to provide for safety. There are three separate entrances each serving a separate function, one each for clients in long term housing, clients using the emergency shelters, and staff and vendors. The doorway for the emergency shelter is a wide, 24-hour awake staffed entrance with carefully planned lighting for all the public areas outside the building. In addition, the design incorporates the use of windows and specially placed staff areas to ensure staff members have clear sight lines into areas like the parking lot.

For their Sandy Merriman House women-only shelter, Cool Aid retrofitted a heritage house. Limited by the building and by-laws governing heritage homes, Cool Aid accommodated the existing building entrance through the use of staff procedures. The entry way is staffed, well lit, all entrants are visually reviewed prior to entry, and the door is managed via an electronic lock that requires staff action to release it so people can enter. In each case consideration to the integration and inclusion of space was made not only for safety but also keeping people connected to their environment.

2. SAFE SHARED SPACE

In considering common areas in a co-ed shelter, two key elements are sightlines and space. In other words, can the resident see staff members or others anywhere in the common area and vice versa? Entrapment areas can be designed out of a new building, but renovating or temporarily using existing space can create challenges.

Recognizing that areas outside sight lines are dangerous for women contradicts their need for and respect of privacy. These two opposing principles reflect the very apex of gender issues: individual rights to privacy and freedom versus the need for systemic protection of those vulnerable to exploitation. However, in considering designs, avoiding the creation of small and unseen spaces that are not controlled by the women themselves is key to ensuring women are safe in shared space.

Many women express a feeling of safety when they know cameras are on in spaces cut off from the physical presence of staff. It is a controversial question as this safety can be illusory for a variety of reasons – non-profits struggle to manage the technology, monitoring screens takes time and can replace interactions, but most importantly women might rely on cameras to manage conflicts.

In women-only spaces, the need for open sight lines is still relevant to safety issues; therefore, it needs to be considered in the design of any space. The decision to use cameras or not is one that needs to be a part of organizational policy and protocols. The key is to design a space that ensures shared space is open to view, and that all residents understand their own rights and responsibilities.

3. SAFE SLEEPING AREAS

Safe sleeping areas for women means either control over their own lock if the space is private, or in public sleeping areas having women staff members, open sightlines, and flexible spaces for privacy. Many women express a strong need for privacy – a locked door they control, with a private bedroom and even a private bathroom – to feel safe. But some women want the open public space as they want to be sure someone can see them and their stuff at all times.

In a focus group with residents of Powell Place, this diversity of need was described as part of the healing process.⁹ When women are still active on the streets, or wanting to come and go, communal space to crash can be preferable – the truly low-barrier environment with flexible bedding like mats. But, as the women in the group explained, when trying to distance oneself from alcohol or street activities like sex work, more privacy is a key to healing and moving forward. For women seeking emergency shelter for the first time, privacy and a locked door are very important.

4. PRIVACY

The role of privacy in women's lives is not as clear as it is for men. The human dignity of respecting a person's privacy is countered for women by the reality that much of the violence they experience is in private spaces. Protecting women or regulating their lives is a constant tension for those providing support to vulnerable populations.

In the design of co-ed spaces, this tension can be addressed in a variety of ways, but must begin with the service provider considering policy questions such as the use of

⁹ As research for a report commissioned by BC Housing entitled "Housing and Services for Women in Vancouver's DTES" by Alison Brewin and City Spaces, August 2011.

cameras, division of spaces for women-only and the need and desire for flexibility in space usage.

For example, Cool Aid's Rock Bay shelter includes separate women-only space as well as accommodation for families. All the doors are on a fob system so staff can move freely through the facility. The fobs residents control have coding restriction and only allow them access into permissible spaces based on gender and living area assignment. Sleeping rooms have access to their own shower and storage spaces.

Rock Bay uses monitoring cameras as a safety tool, a decision which was discussed at some length at the Symposium. Cool Aid described the residents' interest in having them, and that they use them not so much for surveillance, but more to establish what has happened if there is a conflict between residents, with police, or with staff.

5. MATCHING OPERATIONAL DESIGN/MANAGEMENT

Physical design is only successful if matched by operational and programming designs. If a facility is set up with a camera system, but the organization has no policy governing their monitoring and use, the cameras may not have any safety value for women in the shelter. In addition, an organization's capacity to maintain a computerized fob system - which requires the maintenance of hardware, human and software technical resources – should be determined prior to utilizing this tool.

Sandy Merriman House, for example, chose not to use windows for providing effective sightlines for two reasons, one physical – the limitations resulting from the choice to renovate an existing building – and one operational – the purpose of the program was to create a home-like environment with no institutional feel. They also hired and trained women to do the renovations and re-fits, an extension of their mandate to support women in transition.

6. AVOIDING INSTITUTIONAL ENVIRONMENTS

The challenge of providing a home-like environment is one most shelter-providers are familiar with. Six concerns that can particularly influence the environment design of space and impact how homelike the space can appear are:

1. Bed bugs;
2. Constant wear and wear and team from active use;

3. Using space not designed initially to house people;
4. Regulatory requirements for public spaces;
5. Staff needs for administration; and
6. Safety concerns.

Managing the aforementioned six concerns can impact not only the functional design of space, but also the way those using it experience it. Individuals with previous experience with the criminal justice system and Aboriginal Residential Schools can be particularly impacted by environments and procedures that even appear institutional. The emotional and spiritual value of home-like environments can't be understated. The colors chosen for walls, the style of the furniture, the lighting and presence of accessible common space to do something other than watch TV all contribute to comfortable feelings and respectful spaces.

7. REFIT VS. NEW BUILD

The decision to either refit an existing building to create a shelter, or build a brand new facility is impacted by:

- Funding potential;
- The need of those to be served;
- Neighbourhood/community location;
- Existing building availability;
- Local bylaws; and
- The organization's potential landholdings, other tangible assets, and its intangible assets like the ability to undertake the activities related to developing the building

A central part of the decision-making is financial. The cost of a new build is often substantially higher than a refit. At the Symposium, architect and property developer Michael Geller estimated the cost of social housing can be as much as \$450,000 dollars per unit depending on the land costs, and design considerations. Estimates vary, but a review of BC Housing press releases from February 2011 regarding Alder Gardens in Surrey, being developed for 12.5 million for 36 supportive housing apartments, and Anderson Gardens, being developed for 7.45 million for 33 supportive seniors' apartments, provide some information regarding the scope of

costs. Alder Gardens averaged \$347,000 an apartment and Anderson Gardens will be developed for \$227,000 a unit.

While it doesn't specifically relate to for shelters, the above information provides context for the costs involved in the construction of residential options beyond the costs of service delivery such as staffing etc. In August 2006, the BC Ministry of Health, Mental Health and Addictions Branch, asked the Centre for Applied Research in Mental Health and Addiction (CARMHA) at Simon Fraser University to provide up-to-date information with regard to the scope of homelessness in BC. Their report, *Housing and Supports for Adults with Severe Addictions and/or Mental Illness* published in 2008, found that focusing solely on the absolutely homeless which equates essentially to adults with severe addictions and/or mental illness for their non-housing service costs amounted to \$55,000 per year (approximately \$644.3 million annually) and provision of adequate housing and supports was estimated to reduce the cost to \$37,000 per year per individual. The overall cost avoidance was estimated at about \$211 million per year.

The capital and service numbers provide information to consider the costs of solutions and address arguments that small numbers of homeless women are prohibitively expensive to provide gender-specific services. The next section explores six potential solutions.

4. MOVING THE AGENDA - HOUSING AND SHELTER OPTIONS

For all homeless women, but particularly those in rural areas, cost-effective alternatives can provide solutions to the small number of women needing emergency shelter.

The need for housing and shelters continues to grow for women and their families. In BC, social assistance cases for families has increased 50 per cent in the past five years, from January 1, 2007 to December 21, 2011, as shown in *BC Employment and Assistance Breakdown* tables published on the Ministry of Social Development's website. The number of single people on social assistance is also on the rise. While the percentages organized by Health Regions vary, the province as a whole has seen an increase of almost 38 per cent during this period. It's significantly higher in the Vancouver Coastal Health Region.

MINISTRY OF SOCIAL DEVELOPMENT CASES, MONTH OF JANUARY 2007-2011

By Health Region	Interior	Fraser	Van Coastal	Van Island	Northern	BC
2007	20,081	25,020	27,733	19,105	6,684	98,623
2008	21,218	25,755	30,307	20,369	7,165	104,814
2009	23,387	27,338	34,377	22,874	7,806	115,782
2010	26,382	29,319	40,090	27,358	9,155	132,304
2011	26,749	30,226	42,181	27,531	9,042	135,729
Increase in 5 Years	33.2%	20.8%	52.1%	44.1%	44.3%	37.6%

The need for housing and shelter beds for women and their families, based upon the increased number of Ministry of Social Development case files open year over year, is growing. Indeed, broken down by single parent households, the same data shows that the number of families on social assistance has grown in BC by 29% over the past five years while our population has only grown by 6%. Increasing numbers of families are moving onto social assistance. And the purchasing power of individuals and families continues to erode. Since the last 2007 BC social assistance increase, the Consumer Price Index (CPI) has risen year over year. A Statistics Canada historical table of CPI increases indicates the erosion of purchasing power as 7.5 per cent and

that does not take into account the unique circumstances of the BC Lower Mainland housing market.

Not unexpectedly therefore, the February 29, 2012 final report on the 2011 Metro Vancouver Homeless Count found that the primary reason women cited for homelessness was low income and high rents. This is in direct contrast to a decade ago, in 2002, when family breakdown was reported as the primary cause. It can be anticipated that the numbers of families moving to social assistance will only continue to rise. The issue raised on page 23 regarding the few shelters that accept families will therefore place increasing numbers of mothers (since most children remain in the care of their mothers) with dire choices and likely consequences.

MORE PERMANENT SOCIAL HOUSING NEEDED

The lack of affordable housing links to the number of individuals who are displaced into homelessness. In a September 2010 report, *Unpacking the Housing Numbers. How Much New Social Housing is BC Building?*, Seth Klein and Lorraine Copas found that in the previous five years, BC, with the federal government, increased social housing by 280 units in contrast to the mid-1970s-to-early-1990s when the government created between 1000 and 1500 units yearly. Klein and Copas go on to say that BC has the worst record of affordable housing in the country, with a third of all renters paying more than 30 per cent of their income on housing, and half of those spending more than 50 per cent of their income.

In the 2011 Metro Vancouver Homeless Count Final Report, almost everyone surveyed, sheltered and unsheltered, said they would choose housing over homelessness. Low income and high rent were the most frequently cited reasons for a lack of housing.

CALL TO INCREASE THE SHELTER ALLOWANCE

A single person on social assistance receives \$7,320 yearly. This translates to \$610 a month, of which \$375 is allocated for housing. The November 2009 BC Stats report, *Earnings and Employment Trends*, found that based on the low income cut-off lines, not only did BC have the highest incidence of low income individuals in the country in 2007, but also the highest housing and rental prices in Canada. Moreover, as First

Call's 2010 *Child Poverty Report Card* notes based on Statistics Canada data of 2009, nearly half of the poor children in BC lived in families with at least one adult working full-time year round, and the poverty rate of children in two-parent families was rising.

Proponents for the housing rates remaining the same argue increasing rates will only increase profit-taking by landlords. However, such arguments fail to consider the erosion of purchasing power as the BC housing and rental market has trended upwards, forcing people further into the margins of the housing continuum and into shelters.

EMERGENCY SHELTERS

Shelters act as a gateway for the homeless and their role is to assist individuals to return to stable housing. As this report will discuss in Section 5 gender is an important consideration in not only design but also case management to enable effective service provision.

ENFORCEMENT OF MUNICIPAL BYLAWS

Municipal bylaws provide for the safety, health and welfare of people, and the protection of property. The enforcement of bylaws provides a means by which cities and municipalities can regulate living conditions within certain communal standards. Geller argued that cities that fail to enforce such bylaws directly contribute to the erosion of not only safe housing but also the displacement of people, and housing being allowed to deteriorate to the point cities agree to land redevelopment.

SCATTERED HOUSING

At the Symposium, Trish Crawford of the Elizabeth Fry Society of Kingston discussed the benefits of scattered housing. Scattered housing involves service providers renting or purchasing housing such as apartments throughout a community or city. Individuals who reside in the housing are provided support to meet their needs. Such models can be used for either short term transitional needs or long term housing. The advantages are both individual and systemic. Scattered housing allows for the capacity and resilience of individuals to care for themselves to the degree possible. It

offers a lower unit cost per individual for service provided, disperses people throughout communities which limits the concerns of neighbourhood dwellers, offers protection of privacy to the individuals and families receiving service, and enhances community integration. This option is particularly valuable in smaller communities, with fewer homeless, where capitalization costs and the significant costs of staffing can be minimized when not needed.

MODULAR HOUSING

Modular housing, also known as trailer homes, can also offer reduced cost solutions. Design can vary from utilitarian to more luxurious. On the shelter-to-housing continuum, they sit somewhere between temporary heat shelters and permanent housing. Modular homes have been used extensively for housing in both retirement and northern communities and are reported to cost an average of \$40,000 to \$55,000 per unit. They have the added advantage of portability to vacant land anywhere.

There can be resistance to considering modular homes by those that argue they do not provide the same construction standard as more permanent housing and thus are not respectful of people, and some of questioned the environmental footprint of housing that is relatively short-term when compared to traditional construction. Modular homes do present the potential for expedited response compared to the time frame of new construction and are not outside the norms of housing standards within which many live. If provision of maintenance is required, modular housing can address smaller population needs economically.

5. OPERATIONAL DESIGN – INSTITUTIONAL COMMITMENT TO WOMEN'S SAFETY

WORKING WITH ARCHITECTS

Interviews with Larry Adams of Neale Staniszkis Doll Adams Architects and Adele Wilson of Terra Housing Consulting provided insights into the processes architects undertake in determining how to best use a space to ensure functionality, typically known as programming. The architect's role is to take a client through a design process to explore the type of building, and how its space will be used and operated. To work effectively together, a shelter provider needs to articulate the interplay of staff and clients within the constructs of bylaws, contracts, and legislation to consider how they relate to the function of the space so that the architect can design the space adequately. Many of the issues identified relate to the way in which the staff and clients interact.

The benefits of working through these issues and architectural process include:

- Keeping costs down during development stage because there are fewer surprises or change of direction;
- Keeping operating costs down by designing a building or space the organization truly has the capacity to manage;
- Allowing full stakeholder engagement by getting the contributions of those who will know. Planning and forethought will save a great deal of time for all stakeholders, not to mention the health and well-being of the organization's clients;
- Identifying institutional priorities;
- Contributing to long term program sustainability, and
- Enhancing staff and client safety.

Four considerations are identified from the Symposium discussions that are tied to organizational mission and values and directly impact the interplay of staffing and shelter operations, design and gender responsive services. Thinking about them prior

to the completion of the design process will assist the shelter operator to build space that enables them to work in the way they intended. The categories themselves are organized into themes that arose in the Symposium, and provide a starting place for discussion without being prescriptive.

CAMERAS

Cameras were discussed in some detail at the Symposium and their use was not without question or controversy. Questions related to how cameras were used, such as to monitor activities or record activities. The use of cameras for monitoring externally was not a point of particular consideration, however internally it did raise concerns as did the use of recorded material. Where cameras would be located internally and the degree of intrusion into the privacy of clients was of particular concern.

Key questions included:

- In what instances would a recording be referred back to and for what purpose?
- For what length of time would recordings of the events be kept?

Organizational considerations raised included using a recording to resolve client disputes or for the protection of staff from allegations, while others advocated for discussions centred on the issue of client perceptions, feelings, and dispute resolution. Use of cameras raises additional policy concerns for organizations related to their values and procedures related to police demand for recordings, potential legal liability incurred by the presence of cameras and the sense of security they provide clients, the criminalization of shelter residents, time involved for staff in court for testimony if it was demanded, and Human Resources policies around such matters including those that limit potential by the shelter provider created by the cameras presence.

Questions related to the fiscal demands of cameras raised the long term technical and human resources necessary to maintain the camera and monitoring system. The amount of time and manner in which the staff interact with the camera monitoring screen was raised. The camera's two-dimensional view on the monitoring screen limits what is visible, and the presence of a camera raises the issue of recording what the camera sees and the subsequent issues of data storage if so.

All these questions are tied to organization culture and mission and relate to the individuals serviced. Most central of all however, was how do people being served feel about cameras, why do they feel that way, and is the use of a camera fostering or hindering pro-social behaviours and culture.

As they relate to design, if cameras are used their placement and the shelter design needs to accommodate them. Sight lines for cameras can involve unimpeded views, large spaces, sound carrying, and the lack of privacy.

STAFF AND CLIENT INTERACTION

Questions about the degree of physical interaction between staff and residents are central to the design, and are strongly influenced by the culture of an organization.

Stephanie Covington, who has researched, written and lectured extensively on gender responsive programming and strategies, presents compelling research for the high need of interpersonal connection and interaction for homeless women between themselves and others, including staff. Her recommendations regarding the interaction between staff and female clients are integrated into the self-evaluation audit tool for organizations, which has been provided is Appendix 2.

There is some research regarding male homelessness that raises the spectra of dealing with unpredictable behaviour, particularly in minimal barrier shelters. Shelter providers may wish to consider design considerations related to risk, safety, and behaviour management so as to provide for staff and client safety. Some co-ed shelter providers consulted in the preparation of the report suggested operators may wish to construct staff-only space and manage access to it, or create some distance between staff and clients through such measures as having wider counters.

Organizational policies and protocols may also influence how service providers consider program design needs. Policies related to the management of conflict, critical incidents, staff training or other requirements related to behavioural management, intervention and motivational interviewing, and the need for staff withdrawal or exit from situations of risk may be important heuristics to identifying needs.

CLIENT SELF-MANAGEMENT

The extent to which women will manage their own care will significantly impact the space's design. Client involvement with household chores like laundry, cooking and access to food, and cleaning will play a role, and will affect not only design but also staff job descriptions. City planning representatives, the staff people that make recommendations to council on applications for rezoning, can also strongly advocate for a particular design or use considerations including the kind of kitchen, water supply, fire sprinklers and unit size in their evaluations. These are important things for a shelter provider to be aware of as they will determine the affordability of the proposed options and may impact decision-making.

If an organization provides housing, hospitality services and at least one but not more than two prescribed services through their program to three or more adults who are not related by blood or marriage to the operator of the premises, under the Community Care and Assisted Living Act of BC, they are required to register as an assisted living facility which will impact shelter operations. Under the Act, hospitality means meal, housekeeping and laundry services, as well as social and recreational opportunities and a 24 hour emergency response system. For the purpose of the Act, prescribed services include activities that are common in shelters such structured behaviour management and intervention with clients, central storage of medication, distribution of medication, administering medication or monitoring the taking of medication. It is in the shelter provider's interests to carefully consider these matters as they will determine whether or not the shelter falls under the Act and therefore regulations pertaining to assisted living facilities. The key determinants will in all likelihood be the services defined as hospitality services.

Most shelters would meet the Act as it relates to case management, fire safety and food services. There are further requirements, however, related to the spatial design of facilities, square footage per resident, and bedrooms that can prove challenging for a shelter.

There are other issues not related to regulation and licensing which can impact client self-management and shelter operations, such as pets and any concerns around allergies or safety having them might raise. If services aimed at enhancing client dignity, such as clothing donations, are available they will need to be managed. If volunteers are welcomed or household tasks are expected to be shared between

clients and staff, those elements will also require management but can create benefits for all.

SAFETY PROTOCOLS

Policies and protocols are particularly important in providing consistent shelter service delivery and safety. Asked to identify areas where policies could provide them with more comfort and less anxiety about their personal safety, women and staff in a shelter focus group identified the following:

- Staff that are able to see and approve people coming in the shelter front door, either via camera or window placement.
- The design of washrooms and the procedures around their use. Separate facilities were desirable, with the potential alternative of separate times for shower usage, and the separation of showers from toilets. The ability to monitor the protocol put in place was important.
- For co-ed shelters that did not designate women-only space, the ability to modify how space was used depending on the presence of women was important. For non-residential space used for shelters such as temporary heat shelters, the question of moveable dividers or partitions was discussed.

Factors related to the creation of a comfortable environment from personal threats included:

- Behavioural expectations. Clear rules regarding violent behaviour, threats, sexual harassment, intimidation, and entitlement to a grievance process are required as individual and organizational values may be different when it comes to accepting or challenging statements and behaviours related to bigotry against people of another race, religion or sexual orientation.
- The needs of transgendered people and the issue of whether organizations deferred to the individual's presenting gender.
- The criteria upon which staff determine whether to intervene in the protection of a child or woman within a couple or family relationship. The management of intimate behaviours between couples and the provision and degree of privacy provided them was also important.

These considerations provide not only important information for the manner in which a shelter operates but also inform how an architect can design the space to support the decisions made around public and private space in a shelter, privacy versus protection, and the amount of flexibility required in the space. As the design process proceeds, further changes become increasingly difficult and increase costs, therefore the early involvement of all users and stakeholders facilitates effective decision making.


GENDER READINESS

The introduction to this report noted that the discussion of gender in relation to shelter provision is seen by some as less than legitimate and highly debatable. This may come as a surprise for women since most take it as a given they have the same rights and entitlements as men do. They don't view themselves as a minority of which there are too few to provide equity in services afforded the majority (men).

Equality for women and gender analysis is the starting point in Canada and the virtually the rest of the world for international development discussions to improve the lives of those in developing countries and ensure that women are represented within those societies. . For international organizations and in countries around the globe, considering gender is not only legitimate but expected and the various arms of the UN regularly audit their own activities throughout the world. Signatories like Canada (with the provinces) regularly report to the UN on their compliance regarding the Convention on the Elimination of Discrimination against Women.

Yet still in BC, the discussion of gender in relation to shelter provision is seen by some as unwarranted. The needs of women are considered to be virtually the same as vulnerable or feeble men in a shelter, and that therefore the issue need solely be considered in light of the safety and security of the person. Such a perspective ignores that women are not feeble men. Women have their own needs and requirements to assist them in dealing with their homelessness more than just physical safety. As discussed, low income affects women's health more than men, as do the effects of drugs. Women also have higher prevalence of mental illness, and the BC Provincial Health Services found low income women in comparison to low income men were more greatly affected by food insecurity and homelessness.


EFry has built on these principles in producing the Gender Responsiveness Tool, attached as Appendix 2. By having its board or senior staff go through the Gender



Responsiveness Tool, an organization can identify any gaps or challenges it might be having around knowledge and service to women. Those gaps can be met through organizational policy, staff training, or outside support of gender-knowledgeable people and organizations.

For organizations seeking a process to integrate gender into their practice, Astrida Neimanis of the United Nations Development Programme wrote *Gender Mainstreaming in Practice* in 2000, and it has since gone on to three editions and is used by UN agencies to review themselves and their activities. Neimanis, on page three of her report, writes that the 10 step framework provides a process for “assessing the implications for women and men of any planned action, including legislation, policies or programs, in all areas and at all levels. It is a strategy for making women’s as well as men’s concerns and experiences an integral dimension of the design, implementation, monitoring and evaluation of policies and programs in all political, economic and societal spheres so that women and men benefit equally and inequality is not perpetuated.”

The framework makes the point that not everyone will agree or understand why integrating gender and being responsive to it, what it calls mainstreaming gender, is necessary or what it means to them. It urges the importance of arguing the point through educating people and planning communication. It also emphasizes the need for the process to be a dynamic one with ongoing review, conducting gender self-audit of activities, and building relationships and trust for engagement by women.



6. RECOMMENDATIONS

At the Symposium, Shawn Bayes of EFry presented the following list of recommended actions for BC organizations seeking to ensure gender-responsive service delivery:

- Build relationships and links with existing support services for women such as health care, legal, social housing, social services and employment training programs, and violence against women and victim support services;
- Provide training and education in effective therapeutic approaches and core issues affecting women to all staff who work with women;
- Develop and implement procedures to address claims of violence, intimidation or sexual harassment;
- Designate separate women-only spaces including sleeping areas, washrooms, lounge/eating areas and program/counseling space;
- Define separate sleeping accommodations for women in co-ed settings with a door so women control their physical sleeping space, and
- Ensure safe access to washrooms. All washrooms should have door locks that can only be opened with a staff controlled key or a similar measure. If the washrooms are not women-only areas, they should be in highly visible areas.

Other recommendations include:

Government

- Develop an inter-governmental working committee, comprised of provincial, municipal and BC Housing representatives, to focus on women's safety, homeless families and the creation of best practices in shelters inclusive of contract language, integration in the BC Housing Frameworks, a gender responsive framework, and a protocol for homeless families in the province when there is no shelter, nor viable Transition House option. This is crucial in meeting the Human Rights Act and the Charter of Rights and Freedoms' obligations to protect women.

- Develop clear indicators for success in gender responsive programs and services, and incorporate those in Requests for Proposal (RFP) for shelter operation and construction, and service contracts.
- Support the collaborative development of best practices in the sector, including gender-responsive policy development and practice by organizations.
- Prior to every release of an RFP in rural communities, consider all possible alternatives for homeless women including such options as mobile homes, scattered housing or other low-cost options rather than assume that separate space for women is cost-prohibitive.

Shelter Providers

- Use organizational gender responsive assessments such as the one included in this report to act as a guide for building gender-responsive programs and services.
- Implement gender-responsive staff training, program evaluation and monitoring systems.
- Assess existing facilities with the design points outlined in this report to determine any safety limitations.

Architects and Developers

- Build a policy checklist for clients to identify their gender-responsive program needs.
- Capture and share technical design success in meeting safety needs of women.

7. RESOURCES & REFERENCES

PARTICIPANTS AT THE SYMPOSIUM WERE FROM THESE ORGANIZATIONS:

A.L.I.V.E. – Aboriginal Life in Vancouver Enhancement Society	Gordon MacKenzie Architects Inc.
Atira Women’s Resource Society	John Howard Society North Okanagan/Kootenay
AWAC: Association Advocating for Women and Children	Lookout Emergency Shelter
BC Housing Homelessness Services	NSDA Architects
BC Society of Transition Houses	Ripple Effect Society
Catholic Charities	Salvation Army
City of Abbotsford	Senior Services Society
City of Burnaby	South Fraser Community Services Society
City of New Westminster	South Fraser Women’s Services
City of Surrey	Stepping Stone Community Services Society
City of Vancouver	Terra Housing Consultants
CitySpaces Consulting	Tri-City Transitions Society
Comox Valley Transition Society	UBC Students
Covenant House	Union Gospel Mission
CPA Development Consultants	United Way of the Lower Mainland
Douglas College	University of Calgary
Downtown Eastside Women’s Centre	Vancouver and Lower Mainland Multicultural Family Services Society
Elizabeth Fry Society of Greater Vancouver	West Coast LEAF
Elizabeth Fry Society of Kingston	WISH Drop-in Centre
The Geller Group	

RESOURCES:

1. BC Society of Transition Houses, does research on domestic violence. One particularly relevant publication is *Report on Violence against Women, Mental Health and Substance Abuse*. February 2011. Accessed January 19, 2012: www.bcsth.ca/sites/default/files/BCSTH%20CWF%20Report_Final_2011.pdf
2. Centre for Research & Education on Violence against Women and Children offers extensive research on working with women and children who have experienced violence, focusing mostly on domestic and intimate partner violence. Particularly relevant to this report is *"I Built My House of Hope": Best Practices to Safely House Abused and Homeless Women*. 2009. Accessed January 19, 2012 www.crvawc.ca/documents/Safely%20Housing%20Abused%20Women%20Final.pdf
3. Ivanova, Igklika. *The Cost of Poverty in BC. A joint publication of the Public Health Association of BC, SPARC BC and CCPA*, July 2011. Accessed January 17, 2012: www.policyalternatives.ca/sites/default/files/uploads/publications/BC%20Office/2011/07/CCPA_BC_cost_of_poverty_full_report.pdf
4. Klein, Seth and Lorraine Copas. *Unpacking the Housing Numbers: How much new social housing is BC building?*, September 2010. Accessed January 9, 2012 at: www.policyalternatives.ca/sites/default/files/uploads/publications/BC%20Office/2010/09/CCPA-BC-SPARC-Unpacking-Housing-Numbers.pdf
5. McCallum, Kate and David Isaac. *Feeling Home: Culturally Responsive Approaches to Aboriginal Homelessness*. Centre for Native Policy and Research and SPARC BC, July 2011. Accessed January 19, 2012: www.sparc.bc.ca/resources-and-publications/doc/478-feeling-home-final-report.pdf

6. Neimanis, Astrida. 2001. *Gender Mainstreaming in Practice: A Handbook*. United Nations Develop Program, Regional Bureau for Europe and the CIS: Bratislava. The 3rd edition is available online, accessed February 5, 2012, at www.undp.org/women/mainstream/docs/Gender_Mainstreaming_in_Practice__A_Toolkit.pdf
7. Pivot Legal Society. *Yes, in my Backyard: Welcoming inclusion, upholding human rights*. Accessed January 19, 2012, www.pivotlegal.org/pivot-points/publications/yes-in-my-backyard-toolkit
8. Social Planning and Research Council of BC (SPARC BC) provides extensive social research in BC on a wide range of issues. Accessed January 19, 2011, their homelessness and housing reports can be accessed at www.sparc.bc.ca/resources-and-publications/category/45-affordable-housing-a-homelessness.
9. Walsh C.A. & Beamer, K et al (2010). *Listening to the Silenced: Informing Homeless Shelter Design for Women through Investigation of Site, Situation and Service, Social Development Issues*. Volume 32 (3)35-49.



Symposium on Effective Shelter Design to Promote Women's Safety

November 15, 2011

Asia Pacific Hall, Wosk Centre for Dialogue

8:30 – 9:00 am	Registration
9:00 – 9:15 am	Welcome Remarks Shawn Bayes, EFry Alison Brewin, Facilitator
9:15 – 10:15 am	Shelter Operators' Panel: The Challenges Alice Kendall, Downtown Eastside Women's Centre Karen O'Shannacery, Lookout Society
10:15 – 11:15 am	What Women Need to Feel Safe Carla Alexander, Douglas College Dr. Christine Walsh, University of Calgary
11:15 – 11:30 am	BREAK
11:30 am – 12:30 pm	Design Considerations Gwyn Symmons, City Spaces Consulting Ltd. Don Mctavish, Victoria Cool Aid Society Coretta Peets, Victoria Cool Aid Society
12:30 – 1:30 pm	LUNCH
	Lunch Address: Gender Responsive Housing for Women Trish Crawford, Elizabeth Fry Society of Kingston
1:30 – 2:20 pm	Non-Shelter Solutions Michael Geller, The Geller Group
2:20 – 2:35 pm	BREAK
2:35 – 3:25 pm	Tools to Support Safety in Shelters Shawn Bayes, EFry
3:25 – 4:25 pm	Participant Discussion: Key Recommendations
4: 25 – 4:30 pm	Closing Remarks

Presented by



APPENDIX TWO

Symposium on Effective Shelter Design to Promote Women's Safety Speaker Biographies

Carla Alexander – Instructor, Douglas College

Carla Alexander is an instructor in the Faculty of Child, Family and Community Studies at Douglas College. Prior to her doctoral studies in social work, Carla worked in the Tri-Cities as a family support worker and in community development. In addition to her research assistance in the study, *Optimal Shelter Design for Women*, her research includes mapping resources for newcomers in the Tri-Cities, and reciprocity and mutuality in social worker-client relationships.

Shawn Bayes - Executive Director, Elizabeth Fry Society of Greater Vancouver (EFry)

Shawn Bayes has worked with EFry for 25 years, the last 14 as executive director. She has extensive experience working with individuals, and particular expertise related to gender programming for women and girls, and the needs of high-risk children. A founding member, along with Trish Crawford, of the Canadian Association of Residential Options for Criminalized Women (CAROW), Shawn advocates for recognition of the differential pathways to homelessness, addiction, and criminal justice involvement for women; and their consequent need for gender responsive services. She is a published writer on matters related to the needs of children of prisoners, case management for homeless and criminalized individuals, and the criminal justice implications of legislative changes.

Alison Brewin, LLB - Principal, Alison Brewin Consulting

Alison Brewin has more than 20 years' experience in BC's non-profit and charitable sector, and is the immediate past Executive Director to West Coast LEAF. From 2001 to 2011, she led the organization's work to advance women's equality in BC, and helped put the organization front and centre on gender issues in the province's laws and public policy.

Trish Crawford – Executive Director, Elizabeth Fry Society of Kingston

Trish Crawford has 40 years' experience working in women's issues and social services in the Greater Kingston area and has been with the Elizabeth Fry Society of Kingston for 26 years. In her capacity as executive director she oversees the women's halfway house, the operation of supportive and affordable apartments, transitional housing and homeless beds for women. The agency also provides comprehensive wrap around support services which include Community Kitchens and Gardens, Financial Literacy and Leadership and many women centered outreach programs.

Michael Geller - President, The Geller Group

Michael Geller is a Vancouver-based architect, planner, real estate consultant and property developer with four decades' experience in the public, private and institutional sectors. He is president of The Geller Group, which comprises Michael Geller & Associates Limited (MGAL), active in planning and real estate consulting; Laneway Cottages Inc. which is seeking opportunities to develop laneway housing around the region; and Geller Properties Inc., a builder of small, 'niche' residential projects including apartments for people who do not want to live in apartments. Michael also serves on the Adjunct Faculty of SFU's Centre for Sustainable Community Development.

Alice Kendall – Coordinator, Downtown Eastside Women's Centre

Alice Kendall is the Coordinator of the Downtown Eastside Women's Centre where she has worked for the past 14 years. Her background includes over 20 years of advocacy on issues affecting women, particularly in the Downtown Eastside.

Don McTavish - Shelter Program Manager, Victoria Cool Aid Society

Don McTavish is the Manager of the Shelter Program for the Victoria Cool Aid Society. He has worked with the society since 1996 and currently oversees three shelter sites including: Sandy Merriman House, a 25 bed women's specific shelter; Next Steps, a 15-bed multi-gender transitional shelter, and Rock Bay Landing, a 150 bed multi-gender shelter that includes family accommodation.

Karen O'Shannacery - Executive Director, Lookout Emergency Aid Society

Karen O'Shannacery is the executive director and a founding member of the Lookout Emergency Aid Society. For over 40 years, she has been a housing advocate for the homeless and disenfranchised in the Downtown Eastside. Karen co-founded a provincial Shelter Network which links to the long term solution of homelessness: affordable housing with adequate support services, and spearheaded the creation of a Cold\Wet Weather Strategy (now Greater Vancouver Shelter Strategy and an Extreme Weather Strategy). Most recently, Karen was appointed to the Order of BC in recognition of her leadership and commitment.

Coretta Peets – Housing Program Coordinator, Victoria Cool Aid Society

Coretta Peets is a coordinator in the Housing Program for the Victoria Cool Aid Society. She has worked in shelter and housing programs since 2001. Her background includes working on the Downtown Eastside in a women's shelter; coordinating family shelter in mixed age/gender shelters, and most currently, coordinating housing buildings for people in touch with mental health, addictions and forensics services.

Gwyn Symmons - Principal, City Spaces

Gwyn Symmons is principal of City Spaces, a Vancouver-based planning and design firm that focuses on housing, health and education, development planning, community design and communications. Providing strategic advice and managing complex and large projects are Gwyn's specialties, including residential and mixed developments, health, sport and educational facilities, government policy and programs.

Christine Walsh - Associate Professor, University of Calgary

Christine A. Walsh is an associate professor in the Faculty of Social Work at the University of Calgary. Her ground-breaking program of research examines homelessness and poverty, seeks collaboration with strategic partners, develops innovative methodologies, employs culturally sensitive and community capacity-building approaches, and includes novel knowledge translation strategies. Her current research partners with women in Alberta and Saskatchewan with direct experience with homelessness and incarceration to create solutions to end the cycle of poverty, homelessness and incarceration. In partnership with collaborators at McGill University, she is exploring hidden homelessness among immigrant women in Montréal and Calgary and is collaborating with Calgary women to deepen our experiences of the Housing First Model of transitioning from homelessness using photovoice.

SELF AUDIT OF BEST PRACTICES FOR SHELTERS SERVING WOMEN

The tool is drawn from the best practices identified to provide positive outcomes for women, inclusive of those transgendered, who are entering into gateway services for addictions support, addictions treatment, and homeless shelters. Three key documents were used ShelterNet's 2005 report on *Best Practices for Shelters*, RESOLVE's 2009 report *I Built My House of Hope: Best Practices to Safely House Abused and Homeless Women* by Tutty et al; and *Best Practices in Action: Guidelines and Criteria for Women's Substance Abuse Treatment Services* prepared by Gates Consulting in 2006 funded through the Ontario Ministry of Health and Long-Term Care. Each of these reviews considers service for women within co-ed settings.

The self-assessment tool draws heavily upon an audit survey and format from a Health Canada document used as the basis for the Review of Women's Substance Abuse Treatment System in Ontario by Gates Consulting (2006). The criteria used to develop the self-assessment tool are those things identified to provide the best outcomes for women related to:

- client contact, engagement, outreach and aftercare;
- overall program values and philosophy;
- approaches to address physical, personal and interpersonal issues;
- retention of clients in the case management process and goals, and
- integration of relevant support services.

Operational Practices		
Governance	Your organization mission, goals, and objectives identify the unique needs of women and interventions specific to women.	
	Organizations with a board: women-only organizations have a board with a majority of women; other organizations have a minimum of 50 per cent women.	
	Your organization's program, policies and practices reflect and support best practice principles at all governance levels.	
	Your organization has policy and procedures to address allegations of complaints or sexual harassment for the Board, staff, volunteers, and clients.	
Education and Training	Your counsellors have education & training in core issues and effective therapeutic approaches identified by best practices.	
	You engage in cross-training with other shelter and organizations that have expertise in women's issues.	
Hiring and Staffing	Women-only programs: your policies and procedures require female staff for clinical, program delivery, and support positions.	
	In co-ed services your policies and procedures ensure that female staff are available to work with women both day and night.	

	Your program has only female staff conducts bed checks	
	Gender mixed groups are facilitated by a female clinical staff.	
Physical Facility	The physical safety and confidentiality of women is ensured by your policies & procedures (such as security systems, lighting inside and outside, and screening of visitors).	
	In co-ed residential settings, you have designated separate women-only spaces (including sleeping area, lounge/eating area, and program/counselling spaces).	
	Residential women-only services are located in a separate and dedicated facility.	
Physical Facility for Pregnant and Parenting Women	In all residential services (women-only, specialized and co-ed) you provide a dedicated private and comfortable space for mothers to visit with their children.	
	You provide program you provide a dedicated space for children's programming, childcare, and mother-child programming; or where space cannot be made available onsite, you have linked with allied services to fill this gap.	
	You have a dedicated physical space for both mothers and children together	
Addressing Barriers		
Complex and multiple needs	You have established linkages with other community services for women to develop partnerships for co-service delivery (such as services for women of different cultures, languages, abilities, ages, sexual orientation, living situations, legal status, physical and mental health status, geographic locations, as well as services for women who inject drugs or are street or sex-trade involved).	
	Your policies and procedures ensure that women are provided with case management support, including advocacy for other needed services, either by you or by a partner service.	
	You provide support and advocacy to marginalized women and those leaving violent or abusive situations who require assistance in meeting basic needs (e.g. shelter, food, and transportation arrangements through either internal mechanisms or advocacy with other sectors).	
	You have established linkages with the range of support services women require (such as health care services, legal services, social housing, social services and employment/training services, trauma services, violence against women services, and victim support services).	
	You have established links and partnerships with resources for transitional and stabilization or support including substance abuse-specific resources and other sectors.	
	You have established linkages with harm reduction services (such as methadone maintenance therapy).	
	You have partnerships or service agreements with prenatal services and other services for pregnant and parenting women.	
	You provide assistance for transportation arrangements (through either internal mechanisms or advocacy with other sectors).	
Accessible Service Locations	Your agency has centrally located service delivery site, with proximity to public transportation whenever possible.	
	Your agency site is in proximity to other women's services.	

Case Management Issues	
Flexible Admission Criteria	You ensure at each phase women are clearly informed of their treatment choices, rights, and options of the intake and case management process.
	You have policies and procedures to ensure that all requests for service are considered and that your admission criteria do not discriminate based on factors such as race, sexual orientation, language or ethnicity, HIV/HCV status, legal status, drug use, or other factors that differentiate clients.
	Your admission procedures are flexible and welcoming (e.g., allowing women to bring a support person, accepting children during the process, and providing flexible hours of service).
	You ensure that women who cannot be admitted to your program due to unavoidable program limitations are connected with alternative resources within the community.
Assessment and Referral	You have a client-centred and flexible approach to administering the case planning tool and admission criteria (including service strategies for individuals with mental health and addictions issues.)
	Your initial assessment and subsequent referrals include information about core issues and is respectful of, and consistent with, each woman's situation.
	You obtain information from women to identify immediate needs for support and linkages.
Duration	You offer a flexible duration of stay based both on the assessed needs of each woman and on recommended best practices.
Gender Informed Services	Women-only services: you offer programming that is gender specific in content, delivery, and that addresses core issues.
	Co-ed services: you offer programming that provides women-only, gender specific, specialized sessions on core issues.
	Women-only services: your programs incorporate educational, skill building, and experiential learning
	Your programs for women are collaborative, non-hierarchical, empowering, relational and strengths-based.
	Your programs for women are informed by motivational and harm reduction approaches.
	Your programs for women have trauma informed approaches.
Stage of Change Based Approaches	You use motivational counselling and stages of change based approaches in all phases of engagement and programming.
	You integrate harm reduction approaches into the program approach.
	Your policies and procedures support using harm reduction approaches to address the needs of women who are using pharmacotherapy (such as Methadone Maintenance Therapy) or who are active in their addiction.
Gender Balance in Mixed Gender Services	At a minimum, co-ed groups are comprised of at least one third women.
	If your program cannot achieve gender balance in co-ed groups, women are provided individual counselling onsite or referred to community women's services.
	A female facilitator facilitates or co-facilitates co-ed groups.
Gender Responsive Approaches	Your staff is informed and provided gender specific information related to addiction, mental health, nutrition, as core components of case planning.
	You offer women-specific relapse prevention, education and strategies that focus on situations of particular risk for women (e.g. interpersonal relationships, emotional/physical triggers).

Specialized Issues		
Co-occurring Substance Use and Mental Health Issues	You have partnerships in place for integrated assessment, treatment planning, and intervention when a mental health issue is identified.	
	Your admission criteria reflect a client centred and individualized decision making process for admitting women with serious mental health issues.	
Trauma and Post Traumatic Stress Disorder	Your shelter protocols and case management planning is trauma informed and, at a minimum, includes establishing safety as part case plan through facilitating the woman to use trauma grounding techniques.	
	All program staff is trauma informed and can respond appropriately to women experiencing the consequences of trauma.	
Pregnant and Parenting Women		
Engage & Retain Pregnant & Parenting Women	You provide outreach to or linkage with sites of first contact for pregnant and parenting women to engage and involve women.	
Access to Services for Pregnant and Parenting Women	Your policy ensures rapid access to residential and community-based services for pregnant women based on first available bed or service space; pregnant women take precedence over all other clients who may be awaiting service.	
Effective Services for Pregnant and Parenting Women	Your program incorporates supportive strategies to enhance the factors that are protective of the health of the fetus (such as linkages to prenatal care, nutritional counselling, basic life supports, health care, safe accommodation).	
	You support reduced substance use strategies or safer use strategies as intermediary harm reduction approaches in appropriate situations.	
Relationships with Children	You provide children's programming or linkage to relevant community services.	
	You facilitate a barrier free service through outreach, one stop service, and an integrated systems approach among both substance abuse services and other sector services that can provide childcare, food, and transportation when needed.	
Child Protection Issues	Your policies establish a positive and ongoing relationship with local child protection services (including cross training).	
	Your policies and procedures address child protection issues in accordance with mandatory reporting guidelines. Formal protocols with child protection services have been established to ensure that appropriate reporting and supportive linkages are made.	
Monitoring and Evaluation		
Program Monitoring and Evaluation	You have a monitoring or evaluation process in place that includes best practices guidelines.	