



"It is desperate out there. At age 51, I feel stranded, isolated and on the brink of having no shelter. I've worked my entire life but qualify for no assistance. It's frightening."

Abuse in relationships is still a hidden issue for many women and housing continues to be one of the biggest barriers to safety, as is ageism for older women who have become the **Hidden Homeless**.

Hidden Homelessness

Report



Women over 50+ Project - Consultant Report for Sunshine Coast Community Services

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This Project

Objectives

(Summarized from overall project proposal; Sunshine Coast Community Services)

The Sunshine Coast Community Services Society has received funds to investigate the needs of women who are older and fleeing violence or at risk of homelessness. The proposal under the Federal Innovative Solutions to Homelessness Program of Employment and Social Development Canada states:

'Abuse in relationships is still a hidden issue for many women and housing continues to be one of the biggest barriers to safety, as is ageism for older women who have become the hidden homeless. '

'Hidden Homelessness' will seek solutions that meet the unique local needs of older women fleeing violence. '

The proposal makes these points:

- We have an aging population
 - "Approximately 25% of participants of anti-violence services locally are women 55 or older, including women in their 70's and 80's."
 - "The 2011 Stats Can findings show that 53% of our community's total population is over 50 years of age. The Sunshine Coast is also identified, demographically speaking, as the "second oldest community in BC".
- We are experiencing a crises in housing our population
 - o "In the 2016 Sunshine Coast Community Foundation's "Vital Signs" survey, 34% of respondents said that housing was one of their top three concerns for our community. "
 - "For women of any age fleeing violence, housing is often a number one concern and a lack of housing presents a huge barrier to women seeking safety."

Women who are older have unique barriers to safety and specific age related needs

Atira Society's recent publication "Promising Practices" states:

"Women may experience violence confronting abuse and violence for the first time in old age, or navigate an abusive relationship for decades... Women who are older may be healthy or they may be unwell. They may have less self-confidence as a consequence of enduring years of abuse.

• The list of Promising Practices from the publication is found in Appendix 1; and informs this inquiry.

Project steps include: (See details in Appendix 2)

- o targeted outreach with older women about housing and services;
- o development of data collection tools for women and services
- reviewing current transitional housing models for older women fleeing violence in view of local capacity / readiness
- o reporting data findings and a work plan towards possible solutions
- o promotion of findings to educate and lay groundwork for partnerships.

Language used in the report / project

Throughout this report we use the phrase 'women who are older' or for the purposes of the boundaries of this project, 'women over 50 plus'.

Because of the frequency of mentions, we use SCCSS to represent the full title of Sunshine Coast Community Services Society. SCCSS supports Together Against Violence programs which include Yew Transition House; Thyme Second Stage Program; Women's Counselling Service; Women's Outreach Service; Community-Based Victim Services; Police-Based Victim Services and Children's Counselling Services.

Objectives for Consultant Section

Consultant April Struthers was retained to complete these deliverables within the project steps:

- 1. Data collection tools developed with plan and launch
- 2. Become knowledgeable about existing models of service delivery and facilitate consultation with stakeholders
- 3. Retrieve and analyze completed data
- 4. Provide a draft report / final report
- 5. Present at 'Sharing the Findings" end of project community event

April often reports on promising approaches in domestic violence, elder abuse and in prevention of violence. She was one of the writer developers along with Krista James and Raissa Dickenson of the draft Atira Report.

Background

The needs of women who are older and fleeing violence are met by two different sectors – the violence against women field and the socio-health field. Neither deals with all the complexities in the lives of women as they grow older. A 'service map' in Appendix 3 lists services which may be part of a support plan for any women over the age of 50.

'Systems [domestic violence and socio-health systems] can certainly improve in specific provision and in amount of provision, and in system coordination; but conceptualizing a third system which integrates both is a real possibility (James, Dickenson, Struthers 2015 draft).

An Approach

To reflect the experience and social location of older women it is suggested a 'Feminist plus' stance be taken where anti-oppressive and anti-ageist lens are used. (James, Dickenson, Struthers 2015)

As Penhale says, explaining the situation of older women fleeing abuse involves theories from both fields. (Penhale 2003). Struthers and Leaney (2009) say:

"In the field of elder abuse or abuse of older adults, most theory is grounded in in health and social work; approaches are most likely to be gender — neutral-which may not serve the needs of women fleeing violence. In addition the field of abuse of older adults has no unifying theory and no one theory explains all kind of abuse. It has been suggested that a promising approach in responding to older adult abuse could using gender based, Bias Free analysis and culturally relevant gender based analysis; but that analysis is in its infancy"

(Struthers and Leaney 2009).

Conceptualizing a Third Option

Struthers (2015) says to provide integrated services and practice that is of benefit to older women fleeing violence should these elements should be included:

- An appropriate 'lens'-aging / lifecourse / gender balanced (equality and safety)
- Multiple disciplines perspectives
- An anti-oppressive framework
- Case management of supports and interventions which last longer
- Person centered / women entered, trauma informed,
- Aging / lifecourse training
- Links to a range of housing options
- Evaluative component
- Integrating networks of responses
- Flowchart of pathways to service depending on individual need, careful risk analysis, safety planning, and resource availability.

(Struthers 2015 unpublished draft)

In order to more completely serve women who are older, and to begin system change, any planning for new services and physical infrastructure needs to consider these components.

Comments about housing on the Sunshine Coast

This report is prepared against the general backdrop of a housing crises on the Sunshine Coast. According to the recently released Vital Signs report, the Canadian Rental Housing Index ranks the rental housing situation on the Sunshine Coast as severe. (Vital Signs 2107)

There is anecdotal evidence from service providers, advocates and factual evidence from housing providers / consultants that there is a rental and affordable housing crises on the Sunshine Coast. Factors like increase in short term rentals, upward trend of the price of housing, amount of housing stock, pressure on and stock from the Lower Mainland, suitability of stock, lack of many multifamily or high density housing, low incomes; puts pressure on those seeking affordable housing (or any housing for that matter).

There is little available to suit women, especially older single women, as they age, many facing low or fixed pension income, inability to age in place because

of no really good models of housing /or social housing, or specific needs because of mobility or health issues.

The risk that older women will have less safe and secure housing is rising. More pressure and pushing out of vulnerable populations from the rental market means there is increased crises, likely more hidden homelessness, and possibly more actual homelessness, although this inquiry was not about counting the vulnerable population.

Housing is an overall critical context. Safely housing older adults and in particular women who are older is a primary issue outside of those facing violence or abuse in their contexts. This project concentrates on looking at those facing homelessness (many who are in fact already homeless but being sheltered in temporary arrangements), and women over 50 with violence in their living contexts or with the possibility of facing it due to becoming homeless. There are a number of agencies involved delivering services to women who are older, but as was reported in interviews, these are thinly staffed and stretched as they try to cover the emerging needs.

Nature of Project

This section of the project devoted to inquiry about the lived experiences of women over 50, and of insights from those serving women over 50 is ambitious for the amount of resources available. The report reflects an environmental scan rather than deep research.

Surveys results were not cross - tabulated, there is limited comparison of sets of surveys, there were time restraints which limited amount of re-checking tabulations and investigating the emerging themes.

The project did feature cooperation across services locally, began the conversation about tracking and responding to difficult and hidden issues, used internal resources of the SCCSS to gather and distribute data tools, contribute to design and assist with forming and facilitating focus groups. Together Against Violence and other staff / managers came together to plan and inform the project development process.

Key Considerations and Barriers to Women who are Older Seeking Service

Previous projects identifying the needs of for women who are older, list these issues to be recognized and addressed in designing services:

- Women who are older have different needs than younger women
- Ageism is a social issue affecting women who are older –policy and practice

- There are a series of identified barriers
- Women who are older, and any women, are subject to the affects of inter-sectionality (complex interplay of oppressive issues affecting life course).
- Women who are older face 'invisibility' socially and this is reflected also in lack of voice, profile in research and projects.
- There is general lack of information on aging
- Women who are older are subject to a variety of violence's, all of it under interpersonal violence and including but not solely being intimate partner violence.
- Women who are older generally face economic vulnerability (for a variety of reasons).

Details of these barriers can be found in the Canadian Centre for Elder Law project 'Your Words are Worth Something" (CCEL 2013) and in Appendix 4.

Methods

Data collection Challenges

This project ran over summertime and connecting with women participants and service providers was challenging and a lengthy process.

Service recording varied with the service and there was no agreed or standard way within each service to report (often no breakdown by age). There were issues of policy and confidentiality to consider. Cross service record keeping on an issue basis is not usually done, so tools and techniques were invented for this project.

Because of long standing relationships through Violence Against Women in relationship, Seniors Planning Table and Community response Network, it was possible to get agreement on how to approach this, and for distribution and return of surveys by services. Services which completed surveys participated for July, August and September 2017.

Parts of the Data Collection

Surveys

Three sets of surveys were produced and distributed:

- Surveys of women over the age of 50
- Surveys of the internal SCCSS) and external service providers
- Surveys completed by the leads of cooperating agencies external to SCCSS

Distribution was through services and outlets already serving women over 50, as well as more general service areas. The women over the age of 50 surveys were in electronic and paper form. A draw and prizes were part of the system to motivate completion.

- 250 completed surveys were received from women.
- 16 service providers completed surveys
- 4 services tracked numbers of women over 50 served and their needs over a 3month period.

Focus Groups

Five focus groups resulted in attendance by 8 women [held in Pender Harbour, Sechelt (3) and Gibsons (1)].

Service Provider interviews

Ten service providers had interviews (40-60 minutes with some follow up).

Analysis

Themes

The following are themes emerging from the 3 sets of data (surveys, focus groups and interviews):

Themes	Issues	Notes
Providing	High % of those served are at risk	Multi-disciplinary team
Services	There is no 'universal' screening tool around DV/EA	needed for high risk cases
	Support groups for EA/DV needed Timely and updated Information on resources, programs and	Lots of committees-but not necessarily give each other info Interagency exchange
	Good confidentiality Crises services response not bad –	opportunities needed
	but after that? Support for ongoing needs	
Health Needs	Screen for EA Link of mental/physical needs –EA Trauma informed needed	40% have chronic health needs
	Heavy caseloads Mental Health Served mainly by Women's counselling or Older Adult SCMH Groups needed	Dementia related violence, heart, diabetes, circulation, arthritis, cancers
		Medication cost

Age / Gender	Precipitating factors for EA/ DV and homelessness Multiple risks Marginalized economically already Sense of increasing vulnerability Specific Needs Of Older Women Service Approach differs (some GBA) Local shelter inadequate /dangerous option for women over 50 surveys comments show both the realities and how hidden the situation is Information on lifecourse needed	
Domestic Violence or Elder abuse	Link to housing Police/crown/justice mostly sees — reports Domestic Violence. Idea of removal equals charges dropped Elder Abuse have specific needs — not reflected in police/crown charges Less awareness of EA except amongst specialists	Not leave abusive situations because no where to go Crown sees patterns over time EA cases never surface for Crown (all DV grown old) Anecdotally need is seen to grow. T House and shelter say more demand – stats not clear More services or different services? Need or education of women who are older specific needs Good DV awareness
Housing	Where any stock? (Availability, cost, stability of rental) Choice? Substandard as income lessens Conflicts/abuse of landlords High cost/low income/instability Link to risk of homelessness Being pushed down the housing ladder	
Crises in Housing	Especially for vulnerable	

Family factors	Economic need in all age groups Women having no family here or nearby Families from Lower Mainland and other areas moving here with elderly parents and expectation of good set / choice of resources.	
Socio- economic Position of women over 50	Economic oppression Hidden needs More needs equals more oppression Poverty Change of circumstance late in life Demographic and economic realities of Sunshine Coast Not so many younger families	
Gender Bias	Yes it exists Male dominated drop ins Specific service providers aware and try to adjust Health needs-where are female doctors who recognize aspects of womens' aging, female psychiatrist?	Division of Family Practice needs to be part of this study
Coordination	Where are centres? Need for info generally and amongst service providers Need for coordinating networks	Pender Harbour Health Society Community resource Centre TAV services of SCCSS
Differing Needs of women over 50	Different decades of life course have different needs Housing /ability to remain independent	
Information	Everybody needs information on aging, resources, referrals Service, families, women	Navigation Referral pathways

Generally

The picture that emerges from a general analysis across the sets of data is similar to that offered in the Atira work (a result of a 3 year cross Canada project); with the added reality of having a high proportion of women over 50 in the population and intense pressures on housing locally – recently accelerated but a feature of the Sunshine Coast for perhaps the last 5 years

(The Sunshine Coast and Home Supports for Older Adults-Better at Home 2012).

Lack of recognition of the picture for women who are older and lack of policy, resource development and planning are appearing in this and other inquiries (Vital Signs 2017). Hidden vulnerability is showing itself. Pressures in housing and issues around aging/care; creates higher vulnerability for older women – crises for those who may choose to flee abuse – who face the 'perfect social storm'.

Service Provider Lead 3 month survey (4 agencies)

The most served age brackets were 50-70 yrs. A significant number of women were served over 3 months (13 new a month over 4 services). Of those served a significant number had an inadequate financial situation, 30% had unsafe housing and 50 % were unsafe from abuse. 6 needed crises temporary housing. A summary is provided in Appendix 5.

Women over 50 survey (238 responses)

Housing

- 80% are in single family homes
- 73% own and 27% rent
- 6% are with friends, family (couch) or in tents or trailers
- 90% say they are safely housed, 10% are not
- 49% live with a partner, all other arrangements are 51%
- 85% have stable (one year) housing, 15% have unstable housing
- Annual incomes-30% over 50,000; 35% are 25-50,000; 35% are under 24,000

When asked what they needed to leave an unsafe situation the majority said they don't know

When asked what information they needed to make the decision to leave, they answered: 45% housing, 20% legal, 20% financial

Service Provider General Survey (16) and Interviews (10)

- Anecdotal evidence of needs growing over the last few years
- Crises in housing recognized; especially for the vulnerable
- Do we need more or different services?
- There is less awareness of Elder Abuse than domestic violence except amongst specialists
- Domestic Violence cases do not see those abused charging abusers because of nowhere to go (housing) so cannot use the justice system
- The justice system has not seen elder abuse cases go to the prosecution service locally.

A list of interviewees is in Appendix 6.

Numbers of women over 50 requiring service

Outreach workers for homelessness estimate they have homeless women are at risk of homeless women on the caseload yearly. The transition house serves 79-113 women of all ages a year and estimate 25% of the women are over 50 years of age. The Women's Outreach worker estimates she sees 30 women over 50 a year

The issues as emerging from the surveys and focus groups are shown in a true but anonymzed story of a local woman over 50. (Appendix 7) It illustrates the experiences and dynamics of abuse in later years which lead up to homelessness.

Critical Need External to This Project

Interviews and discussion with service providers also revealed the need for a separate women who are over 50+ emergency shelter is needed, as the existing shelter has capacity needs, doesn't have separate or private accommodation for women; and cannot fulfill the safety requirements needed. Service providers report taking women to the shelters as the only option open but an'awful' one.

Outreach services from the shelter have provided valuable services for women who are older – those who are homeless or facing imminent homelessness or eviction; who make up about 10-15 % of outreach clients.

While a women only emergency shelter is a critical need, addressing that development is outside of the focus of this inquiry.

Emerging Needs

Themes and issues found within the data point to these conclusions:

- A need exists for women who are older to have a safe location and supportive services beyond which existing organizations can provide.
- The level of mobility and health needs and safety needs mean a unique provision is required.
- There is a need for coordination of services to focus on and to track situations of risk that develop for women who are older.
- A number of services are necessary and the Sunshine Coast is served already by a number but these
 are thinly staffed. All of Violence Against Women services, counseling, justice, food bank, thrift store,
 libraries are needed and contribute to safety, social inclusion, and disseminating information. Health
 services are needed to deal with both chronic health needs; and reports of abuse, neglect and self
 neglect/ support and service plans and coordination of those plans.
- Both service providers and women over 50 spoke to the need for information, updates, resource
 connections / referrals, and awareness raising of the issues facing women who are older. Women need
 information on housing, legal, financial, benefits, and health issues.

A shocking extent of vulnerability was revealed by the responses to the women over 50 surveys. 35% of respondents spent more than 30% of income on housing, 41% had chronic health needs, 39% felt isolated, 40% were mobility challenged, 50% had inadequate financial resources, and only 50% could afford legal help / remedies.

Models

Existing models of housing for women who are older fleeing abuse fall into two categories (James, Dickenson, Struthers 2015):

Shorter term transition house, safe houses, second stage houses. An example is AMA house in Surrey run by Atira –the only transition house for older women in Canada.

Longer term: safe floors in seniors residences, supported housing, for example the SAGE program in Edmonton.

A chart of all the types of provision for women who are older across Canada is included in Appendix 8.

It is clear that models need to address both physical (bricks and mortar) forms and a particular kind of long term and medium intensive cross service support (including trauma and chronic health needs). A diagram in Appendix 9 shows the continuum of housing that women over the age of 50 may require.

Transition Houses

Almost all Transition Houses surveyed by the Atira project give services to women over 50. Almost all of them feel that their service is inadequate; mainly for the reasons articulated in barriers to older women receiving service. Both the Atira project and a study in the Maritimes (Weeks 2016) say that transition houses offer a safe environment with food and shelter, but fall short offering what women who are older need. This is not a reflection on the agencies supporting transition houses, on staff or on leadership. The Atira project suggests practices in service that will fit women over 50's needs, but the structure, staffing, length of permitted stay, and lack of ability to give personal care, or handle specialized mobility of medical needs means another format for service needs to be developed (third option).

The SAGE Model

SAGE Seniors Association in Edmonton operates SAGE Safe House, which is a series of safe suites on a locked secure floor of a seniors residence. Stays of up to 60 days have services brought in to the floor and staff develop support plans, in an assisted living context. Nurses, a pharmacist and other services come to SAGE.

There are 8 suites and staff are social workers. The defining feature of SAGE is that before the service was begun a 2 year period of negotiation with service providers and funders ensured there was commitment, agreements, and protocols in place to support the physical operation. Support also follows women when they leave. SAGE is one of the few transitional housing for adults who are older which has evaluated its services. This has shown an 80% + rate of women not returning to abusive situations. (Dahm, Lee, Palamarchuk 2011)

Safe Suites

Hollyburn Family Services basically adapted the SAGE model to be delivered in safe suites in market rentals, along with health authority cooperation (some features of a stabilization unit between hospital and supported housing).

A third option would be a purpose built long term supported housing / service focal point; or purpose designed suites in an 'adults who are older' new residential development.

Local Solutions

Preliminary Discussions with the local Transition House staff, outreach staff and management and other service providers about models points to (but does not say definitely) rather than trying to adapt what is in essence a family style house (local transition house) to additional needs, and in view of the need for longer stays and differing support, that we look at short and longer term solutions; with a clear wish to have a purpose built environment in the medium future. This could be done in these ways:

- Make use of market or other suites / residences which can meet mobility needs, along with services
 using practices outlined in promising practices. Specialized services from health and other health
 providers also need to be factored in. The length of stay needs to be 90 days at least.
- Explore using space in yet to be developed older adult residences / or other residential buildings.
 (Factor into plans as they develop). An example would be where an organization has offices on one
 floor and residences above. In the Comox Valley the Homeless strategy and funds from the Regional
 District allowed the Transition House society to purchase a new build four plex for longer term
 transitional housing for women and children.
- A purpose built facility be designed with the same attention to practices and services as above. This would be an aspirational step which would require about 3 5 years to complete.

Because of the Sunshine Coasts demographic makeup, it is safe to predict that demand will not lessen; (interveners with the Health Authority report that the level of financial abuse cases with older adults they deal with is the highest in the health region) with increased attention to the issue and awareness raising, reports of abuse and violence will likely rise; if there is somewhere to move to – those involved in domestic abuse situations as women who are older, would have a greater chance of leaving their homes / situations.

The lack of affordable housing / rentals will not change soon nor will the level of the vulnerability of women over 50.

Poverty reduction and affordable housing solutions would be needed to accompany this development, or else women who are older would face bottlenecks in supply once they move on along the housing continuum from supported transitional housing. These are longer term challenges and challenges that are difficult to achieve; and fall into the category of social

determinants of health. Progress has been made on these aspects in the Comox Valley by integrating needs of women fleeing abuse, and other

housing offered by the Transition Society into the strategy of the Regional District and with membership on the Homelessness Coalition. See videos listed the references for a brief explanation of their approach.

The question of whether longer term supported provision and structure could be linked to local shelters development has been raised. The consultant's opinion is that there needs to be a separation of the two functions (not co-located) but possibly a sharing of outreach and other services. This needs further careful consideration because of the populations served; which have many differing needs (and some shared needs).

Atira Women's Resource Society has the largest number of facilities and targeted solutions in Canada for women who have experienced violence. Including both a transition house and supported housing for women who are older. Their facilities are scaled to a large urban population. They also have fiscal support through other social enterprise to support a variety of provision.

The lesson from Atira is to design for real needs, to follow promising approaches/practices that put women at the centre of decision making as to their care and combat ageism, and to use gender based lenses. A strength Atira has is that social enterprise generates for them discretionary funds they can use to develop needed services/ housing models beyond what major funders will. All of these lessons can be applied by services/agencies here in a more rural context on a much smaller scale, for our purposes.

The Third Option

Critical to following best practices is following the approach summarized on page 6 of this report. It engages both practice from the Violence Against Women field and the social – gerontological field. The suggestions in the work plan reflect this approach.

BC Housing

Creating a productive relationship with BC Housing (who are liable to be major funders in initial and ongoing financing of any option) in regard to new developments of transitional housing, is a strategic need. Since a relationship already exists around other transitional housing which SCCSS operates, this should not be a barrier. Housing consultants relate that as an organization, the following is what BC Housing looks for in their investments and developments:

- Presence of experienced non-profit building consultant
- Ability of lead organization to minimize community pushback around provision or location of provision
- Financial accountability
- A reliable non-profit society to maintain buildings

Recommendation Arising from the Inquiry

Information

- Develop a strategy to assist women to know where and what the resources are and how to access them
- Information is needed generally on the issue, on resources and on referrals. Services need to know service pathways.
- Continue the integration and cross program SCCSS cluster work which this project took advantage of
- Use the Promising Practices from the Atira documents in (Appendix 1) with input from the Health Authority
- Continue surveying services providers internal to SCCSS and external to SCCSS to really determine trends in services to women over 50
- Create a distribution plan, and discussion meeting schedule for this document
- Create a media campaign to illuminate issues and numbers (extent of need). This could be a follow up to the Vital Signs vulnerability report.

Other

- Assess current space for suitability (using locally developed Promising Practice's tool)
- Encourage using trauma informed practice
- Outreach and support groups are vital to being able to disseminate information and give a pathway for women to find service

Service

- Examine current coordination of service and seek improvement
- Build a circle of service around women over 50. Negotiate and gain extensive agreement for services internal to any space, which might be developed, and services external to a space.

- Examine the service 'funnel' that brings women over 50 into information and referrals.
- Develop short, medium and long-term solutions to the needs
- Examine the concept of a small scale, best designed, locally influenced 3rd stage housing model appropriate to the Coast. Suggestions follow.

Recommendations (selected) for development of an appropriate model

Development refers both to physical and service / practice aspects of a model. Improvements which emerged from the data are also listed here. A diagrammatic concept of the recommended model is shown in Appendix 10. A full workplan containing all recommendations in order of execution is in Appendix 11.

Short term - 'Safe Suites' and service parameters / agreed practice

- Schedule meeting of interested parties to respond to recommendations. This may require a series of meetings.
- Determine which organization will take leadership on recommendations and championing housing for women who are older fleeing abuse.
- Agree on need for safe suite and longer term capital intense solution
- Form a 'task force'

- Look for, identify, and cost rental suite possibilities for 3 suites in which to house women who are older.
 - Plan delivery of services support into those suites.
- Develop relationships and coordination between VAW and Health services / Health Authority
- Explore if there is a fit with Homelessness strategy and local government housing strategies
 - Join or ally with Housing Committees
 - Explore with Vancouver Coastal Health re stabilization or space /services for older women with intermediate to more advanced chronic care needs
 - Look at SERFI available land*
 - Explore including plans for accessible / safe suites (rented or purchased) being part of any plan for development of affordable or social housing
- Explore what preparation is needed to be ready to respond to a call for funding proposals from BC Housing.
- Examine service funnel and info / referral needs / pathways / protocols
- Support, continue and enhance outreach programs/ Awareness campaigns
- Identify funders and allies in medium and long term solutions
- Start a development fund
- Evaluate what you are doing

Medium Term

- Begin rental of safe suites
- Negotiate partnerships delivering coordinated services to a specific location
- Mobilize allies and funders / Fund raise and promote the issue and need
- Develop promotional material (info-graphics)
- Negotiate around need with BC Housing
- Involve broad community in issue solutions and double loop consultancy
- Celebrate improvement so far
- Prepare for long term involvement in development, funding and construction of purpose built facility
- Evaluation of activities

Longer term

- Development of purpose built facility
- Funding agreements
- Service agreements
- Monitoring for service and building / housing aspects
- Evaluate process and success points

Conclusions

The Women over 50 – Hidden Homelessness project was conducted between March and November 2017. It collected data from women over 50, and service providers. It attempted to find, gather and amplify the often absent 'voice' of women who are older.

The results of the project and findings from the data reflect what other projects concerned with older women have spoken to. Our local situation has added to the usual barriers and invisibility for women who are older; the realities of an area with a high level of adults who are part of a larger older demographic, and a housing crises (in affordability, availability and suitable stock). Both quantitative and qualitative data point to growing vulnerability.

The suggested models can be developed in a rural area with disparate, geographically separate communities. The models and workplan combine approaches from the violence against women field with the sociogerontological field (a hybrid, more closely aligned service approach for the needs of women who are older). The models cover short, medium and long term activities. The workplan would develop a broader community response of formal and informal service / safety.

There seems to be an appetite amongst local service providers to do a best design/best practice healthy communities type built environment for a larger capital project. This is not beyond the capacity of the local service and 'public' community, but requires close coordination and commitment at each step of the project. Processes to gain coordination and commitment do this needs to be embedded. Political will / alignment also needs to be developed.

This also offers the opportunity to do a developmental evaluation. In view of the lack of evaluative literature on such projects, the expertise developed here around both project and evaluation can be codified and offered as a social enterprise.

A project offering suitable models for women over 50 on the Sunshine Coast, can have a significant impact on the ability of women over 50 living or ageing well, or being part of a 'healthy' community. It would also be a valuable anti-ageism exercise.

The consultant offers thanks to participants, especially women living at risk who chose to tell their stories out of their vulnerability because they were interested in protecting other women. Thanks also to service providers and SCCSS staff and management for their collaborative work during this project.

App. 1 Promising practices

Promising Practices

- Support women who are older after they leave transition house
- Integrate evaluation into practice, including documentation of the use of services by women who are older
- Work towards system change for women who are older
- Nurture an environment that values women who are older
 - -pro-aging approach
 - -hiring and the presence of older women
- Develop outreach strategies tailored to women who are older
- Provide individualized, women centered support for women who are older
- Focus on relationships and relationship-building for women who are older
- Focus on safety for women who are older
- Facilitate access to health care for women who are older
- Develop strategic partnerships to help women who are older get the services they want ad need
- Provide women who are older with more time to transiti

App. 2 SCCSS Project Steps

SCCSS Project

1)TARGETED OUTREACH WITH OLDER WOMEN (Mar.15-Sept. 2017); connect Women's Outreach Services with older women in the community - coordinate with and educate other service providers and housing stakeholders re: older women's unique needs re: safe housing

2)DATA COLLECTION (April 1-Sept. 2017); develop and implement a data collection tool to help identify needs re: housing and older women fleeing violence gathering both quantitative and qualitative data from older women directly as well as via targeted stakeholders.

3)ANALYSIS OF EXISTING MODELS AND LOCAL CAPACITY (March 15-September 2017); review existing models and research focused on supporting older women fleeing violence re: housing and identify areas of promise for local implementation.

4)PRODUCE NEEDS ASSESSMENT REPORT (Oct. 2017); the report will have the following components:

- quantitative and qualitative findings re: need
- highlights of review other models and aspects with promise for applicability in our community
- work plan of recommended next steps to take towards addressing needs

5)SHARING THE FINDINGS (Nov. 2017); utilizing the report as a catalyst for social change by educating stakeholders and community about the report's

App. 3 Service Map

SERVICE MAP

Police Victims service

ACUT HER ER WOMAN FLEEING VIOLENCE ER, Sp. Units

PRIMARY HEALTH

Pharmacist

Dental

Home Care Community Care

Nursing

OT/PT/Diet/SW

JUSTICE

Poss abuse / neglect

Financial

INCOME

IA

OAP /CPP PWD

ΕI

MENTAL HEALTH

Childhood abuse

Trauma Other

OLDER **WOMAN**

IMMIGRATION

Sponsorship Status

SPIRITUAL SERVICES

ADULT PROTECTION

LEGAL SERIVCES

Advice

COUNSELLING/ SUPPORT/ MEDIATION/

Healing family relationships

App.4 Barriers for Women who are Older Seeking Service

Barriers to Women over 50 Seeking Service

- Socialized differently to younger women
- Having greater financial barriers than younger women
- Having health / functional challenges
- Having longer standing abuse
- Having reduced social networks
- May not recognize that shelters are open to them too
- Lack of knowledge about resources
- Fear of the effect of intervention on family members
- Support groups seen as largely for younger women
- Having greater accessibility and mobility needs
- Wishing to maintain family networks
- Wishing to maintain adult care responsibilities

App. 5 Lead Service Provider Survey results

Lead Service Provider Survey

Completed by a lead person at each of 4 local services (voluntary) to track services offered to older women over a 3-month period. The data shows how many women of what age groups the surveyed organizations are offering services to; and details about their housing situations and risk of abuse.

Services were

- Adult Mental health
- RCMP
- Non-profit
- Justice (Crown Counsel Prosecution Service)

#	Question				Jul	y				August				September				
1	1 Serve in a year					150												
2	New t	his mo	nth			19					11				9			
3	AGE	50-	60-	70-	80-	11	1		7 1		1	5	4	1	0	3	3	3
		59	69	79	89		2											
4	Need	temp sa	afe ho	using	-abuse	4					2				0			
5	Own h	nouse/	or ren	t		7/9					3/4				5/2	2		
6	Safe /	maybe	/mayb	e no/	unsafe	9	2		5	0	3	1	1	1	6	1	0	0
	housi	ng																
7	Safe/r	maybe/	maybe	no/	unsafe	2	1		6	?	0	0	4		2	1	3	1
	from a	abuse																
8	Crises	– need	for te	mp h	ousing	1	1			2			0					
9	Fina	Adeq	In	ade	Noacc	? 6		9	2	1	1	6	0	0	2	5	0	2
	nce q ess																	
10	Menta	al healt	h/subs	tanc	e use	4/1						3/0						
11	No do	ctor/Ch	ronic	healt	h need	0/1					0/6				0/6			
12	What	sector i	is pro	gram	in?		Justice 3 Justice 0				Justice 0							
							Enforcement 0 Enforcement 0				Enforcement							
					Health 0 Health 0 Mental health 0 Mental health 0				. 0	0 Health 0								
						Other 0			Mental health									
				Com Non p 3				Com Non p 3				0						
					Con	Com Non p 3		Continuit p 3				Other 0						
														Cor	n No	on p	3	
13	Comm	nents				2					0				0			

App. 6 Interview List

Interviews

Keely Halward	Program director
	Sunshine Coast Community Services Society
Denise Woodley	Director – TAV Programs
	Sunshine Coast Community Services Society
Bev Fearnehough	Clinician-Adult Mental Health Services
	Vancouver Coastal Health
Kathy Thomas	Clinician- Mental Health Services, Older adults
	Vancouver Coastal Health
Trevor Cockfield	Crown Counsel
	BC Prosecution Services
Nick Gaskin	Outreach Worker and Assistant Shelter
	Manager
	Rain City Society
Kym Harris	Better at Home Coordinator, Pender Harbour
	Area
Sue Jackel	Seniors Housing Advocate and researcher
Karen Whitby	RCMP

Test Interviews	
LeeAnn Johnson	
Marg Pearson	
Rosetta de Souza	
Data Collection Interviews	4

App. 7 One Sunshine Coast Woman's Story

One Woman's Story

Age late 60s

Has been in an on and off relationship with her partner for 10+ years. Most recently they have lived together for 2 and a half years. They refer to each other as husband and wife. They lived together in a house the man owns. His daughter does not like his wife and is abusive to her.

He had a stroke and was hospitalized and in rehab for some time. He went home and was doing quite well with his spouse's support and ongoing rehabilitation. When the daughter would visit she was rude and abusive to his wife. She tells his wife she is just a renter and tells them both that they cannot afford to live in the house anymore.

The daughter has power of attorney for her father. The father fell and his daughter insists he cannot be at home and he is hospitalized again. The daughter tells hospital staff the woman is a girlfriend and she is not informed of his medical information. The daughter has arranged for his mailing address to be changed to her address. She makes arrangements for her father to go to live with her until he can be placed in a residential facility. The man is of sound mind to make his own decisions but will not go against his daughters wishes. The woman cannot endure the daughters' abuse anymore and moves out to live with her own daughter.

The woman is brought to the Women's Outreach program by her daughter and a friend.

It appears there are intersecting issues of Family Law, elder abuse and possible abuse of power of attorney.

Women's Outreach connects the woman with a lawyer at Family Court, Legal Aid and Older Adult Mental Health to assess what rights the woman has and if any abuse of power is happening.

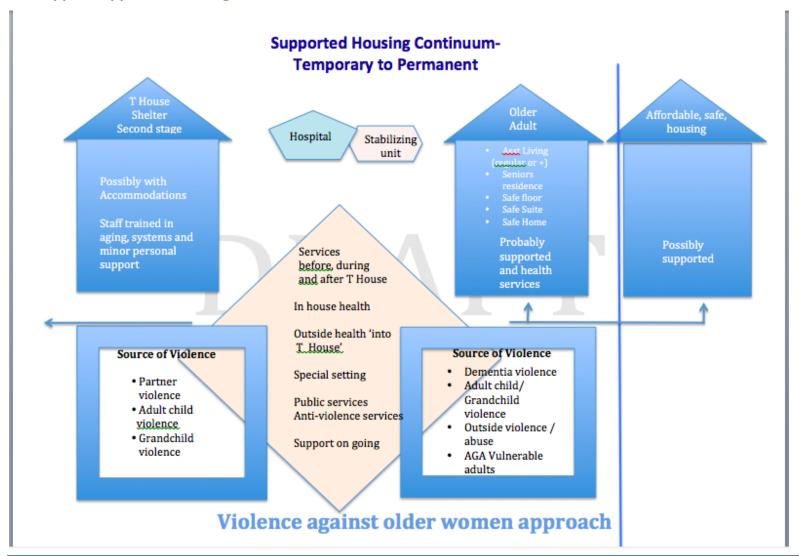
The woman is now homeless. She likely has a Family Law claim but would have to go to Supreme Court to make the claim and would have to represent herself, Legal Aid does not assist with division of property matters.

Provision	Funder	Staffing	Stay	Capacity
AMA transition House for women	ВС	1	30 days	6 beds
over 55 years	Housing		to 180	
	Atira			
SAGE Edmonton	Alberta	3	60 – 100	7 suites on locked floor in adults who are older
	Govt		days	residence with meals, assisted living
	Seniors			
	Housing			
Harrison Place 3 rd Stage House	ВС		3 years	22 one bed suites
	Housing			independent living
Safe Suite Program			60 days	3 suites
Age & Opportunity				and hotels, assisted living
Winnipeg, Manitoba				Men and women
Kitsilano Neighbourhood House				Independent living 'community' for adults who are older (low income) Attached to neighbourhood house centres A response to lower income adults who are older housing needs rather than population we are inquiring about. The construction model of offices / services with residential accommodation included could be examined.

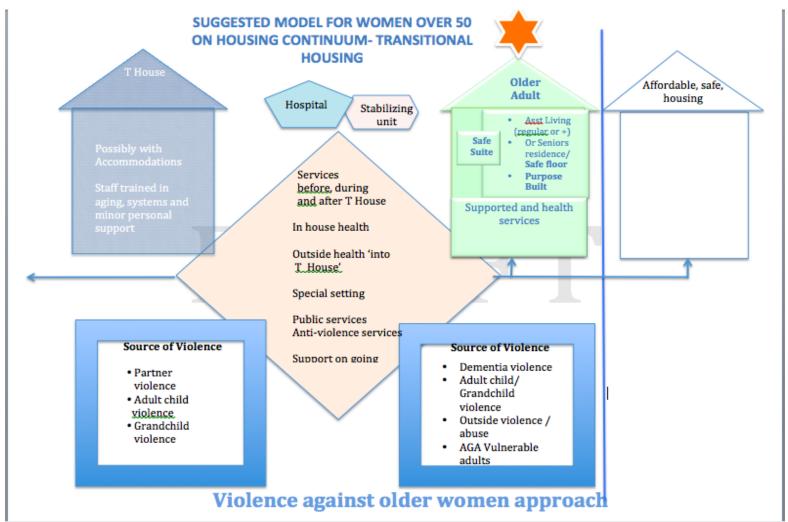
App. 8 Transitional Housing Models

Models

App. 9 Supported Housing Continuum



App. 10 Suggested model



App. 11 Workplan
Workplan for progress on model development
Items presented in suggested sequence of execution.

SHORT	What	When	Who
TERM			
SCCSS	 Examine and choose recommendations to follow up Examine and choose recommendations to follow up Plan work Organize series of meeting to disseminate findings and to agree action (safe suite and longer term solution) 	Late November - December	ED Program Director TAV Director
Champion Organization	 Determine Champion organization through anti-violence committees (?) which organization will take leadership on recommendations and championing housing for women who are older fleeing abuse? Build task force Begin building a relationship with BC HOUSING Identify funding for process work Identify funders and allies in medium and long term solutions Including funds for evaluation Start a development fund 	December to April	SCCSS??

	 Budget Identify when BC Housing will review SAFER rates in Sunshine Coast Negotiate with BC Housing around 'urban' level rates reflecting accommodation coasts (done in Squamish and Victoria successfully) Negotiate with BC Housing around subsidies for rental of safe suites in existing or new-build residential /social housing Identify development of service consultant (process around building task force and service aspects) and non profit building consultant (planning) 		
Service Providers	 Develop relationships and coordination between VAW and Health services / Health Authority Continue cross training with VAW and EA practitioners locally (aging) Develop with VCH education on aging for professionals Agree to continue record keeping and data collection Examine service funnel and info / referral needs / pathways Explore if there are protocols needing development amongst service providers Develop more support groups for women who are older Plan delivery of services / support into those suites Examine service funnel and info / referral needs / pathways 	January 2017- January 2018	VAW/CRN/VWIR

	 Explore if there are protocols needing development amongst service providers Support, continue and enhance outreach programs for women who are older Develop more support groups for women who are older Awareness campaigns 		
Coordination	 Committees dealing with violence/abuse response Explore how to be more coordinated Protocols required? Outreach to other services? 	Event in relation to World Elder Abuse Awareness Day June 15	Seniors Planning Table Community Response Network VAWIR
Task Force	 Examine and choose recommendations to follow up Form a 'task force' Identify lawyer and real estate agent to use in process of gaining transitional housing Look for, identify, and cost rental suite possibilities for 3 suites in which to house women who are older. Explore including plans for accessible / safe suites (rented or purchased) Funding for more support groups / outreach Plan delivery of services support into those suites. Explore if there is a fit with Homelessness strategy and local government housing strategies Join Housing Groups- SCHAC and SCAHS 	January to April 2018 (establish)	

	women with intermediate to more advanced chronic or acute care needs Explore including plans for accessible / safe suites (rented or purchased) being part of any plan for development of affordable or social housing; (ask DOS and other planners re developments planned) Explore what preparation is needed to be ready to respond to a call for funding proposals from BC Housing (contact building / housing development consultants) Identify when BC Housing will review SAFER rates in Sunshine Coast Involve local financial planners, institutions, notaries and lawyers about the issue and their possible contributions to awareness, prevention and good practice. Identify funders and allies in medium and long term solutions Start a development fund Begin rental of safe suites	
Information	 Liaison with Seniors Navigator Community Resource Centre Develop info graphics 	Immediate

Public consultation	 Awareness campaigns Involve local financial planners, institutions, notaries and lawyers about the issue and their possible contributions to awareness, prevention and good practice. Larger roll out of Its Not Right presentations and train the trainers Start media campaign around issue Response around organized opposition scenario for issue / building 	January 2017 -	CRN Coordinator
Capital	Dronger for long term involvement in development	September 2018- Dec 2018	Champion and Boards
Project	 Prepare for long term involvement in development, funding and construction of purpose built facility (including Senior Societies on the Coast) 		Champion and Boards
Evaluation	Plan developmental evaluation (embedded from the start)		

MEDIUM TERM	What	When	Who
SCCSS	• Leadership??		000000
Champion Organization And task force	 Build and maintain task force Explore feasibility funding envelopes Continue developing recommendation activity Have lawyer draft rental agreement embodying RTA needs and identifying special needs of women in Safe Suites Sustainability Planning Bring together funders and allies in medium and long term solutions Maintain a development fund Mobilize allies and funders Develop promotional material (info-graphics) Fund raise and promote the issue and need Track the need Do broad consultations and planning exercise for background to purpose built environment Negotiate around need with BC Housing. Develop draft to respond to BC Housing call Involve broad community in issue solutions and double loop consultancy Celebrate improvement so far 	December to April	SCCSS??

	 Prepare for long term involvement in development, funding and construction of purpose built facility Begin developing plans (up to or including working drawings), costing, Assess success of rental suite model Assess delivery of services support into those suites. Continue to explore accessible / safe suites (rented or purchased) being part of any plan for development of affordable or social housing Draft response for call for funding proposals from BC Housing. Review and continue building a development fund Discuss with BC Housing and BC Association of Transition Houses models operating in other parts of BC Evaluation of activities 		
Service Providers	 Monitor and assess relationships and coordination between VAW and Health services / Health Authority Continue cross training with VAW and EA practitioners locally (aging) Develop with VCH education on aging for professionals Test service funnel and info / referral needs / pathways Test protocols amongst service providers Maintain and monitor support groups for women who are older 	January 2018	Through existing committees

	 Have plan and launch delivery of services support into those suites Support, continue and enhance outreach and support programs for women who are older Awareness campaigns Negotiate partnerships around delivering coordinated services to a specific location Contribute to information on legal, financial, benefits and health issues for women over 50 		
Coordination	Assess coordination	Late Spring 2017	Task Force?
Information	Assemble and coordinate dissemination of information on financial, legal, benefits and health issues for women over 50		Community Resource Center
Awareness	 Awareness campaigns Roll out of Its Not Right presentations with new trainers Start media campaign around issue 		CRN

Capital Project	Identify major funders and prepare campaign to involve them	Champion and task force and other SC agencies
Evaluation	Use developmental evaluation	
Public Consultation	 Engage community engagement consultant Develop promotional material (info-graphics) Presentations on the dynamics, facts, and community impacts of women over 50 without housing and safety Public events to show models, costs, service supports, and existing community support. Public surveys to test opinions on developing housing and services for issue solution Social marketing campaigns 	Champion, task force

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