# Bridging Perspectives and Balancing Priorities: New Directions for Housing Policy in Canada

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**ABSTRACT**

In this paper, we outline three genealogies of housing policy in Canada—affordable housing, mental health housing, and housing for homeless persons—and present the focus, research, and strengths/critiques of these genealogies. The increased visibility and adoption of Housing First (HF) in Canadian policy has created tension between groups working on housing and homelessness. Critics rightly point out that HF does little to increase the availability and accessibility of affordable housing. We discuss the homelessness sector as a bridge between the affordable housing sector and the mental health sector and outline how collaboration might take shape in addressing homelessness and affordable housing in Canada.

**Keywords:** affordable housing, Housing First, homelessness

**RÉSUMÉ**

Dans cet article, nous présentons trois généalogies de la politique du logement au Canada—le logement abordable, le logement associé aux problématiques de santé mentale et le logement pour les personnes sans-abri—et exposons les discussions, la recherche, et les points forts / critiques de ces généalogies. La visibilité et l'adoption accrue de *Logement d'abord* dans la politique canadienne a créé des tensions entre les groupes de travail sur le logement et l'itinérance. Les critiques soulignent à juste titre que *Logement d'abord* ne contribue guère à accroître la disponibilité et l'accessibilité des logements abordables. Nous discutons du secteur de l'itinérance comme un pont entre le secteur du logement abordable et le secteur de la santé mentale et décrivons comment la collaboration peut prendre forme dans la lutte contre l'itinérance et le logement abordable au Canada.

**Mots clés :** le logement abordable, logement d'abord, l'itinérance

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In Canada and other Western countries, housing policy has gone through a period of "inertia" and "retrenchment" beginning in the 1980s as other policy issues have been prioritized (Carroll & Jones, 2000; Dalton, 2009). This shift has led to the neglect of housing policy despite extensive research identifying a growing housing crisis in urgent need of effective, long-term policies and programs in Canada (Dalton, 2009).

Deep cuts to affordable housing and income supports since the 1980s and 1990s have led to a shortage of affordable housing and increased financial strain on low income individuals and families (Gaetz, Gulliver, & Richter, 2014). The impact of these cuts on affordable housing stock has been exacerbated by increasing need for affordable housing resulting from psychiatric deinstitutionalization and by population trends as Canada's Baby Boomers enter retirement and require housing that is affordable on a reduced income (Grant & Munro, 2012).

Many of the long-term funding commitments for affordable housing made by the federal government prior to 1990 have come to an end, or are scheduled to draw to a close by 2033 (Pomeroy & Falvo, 2013). Recent federal funding dedicated to homelessness through the Homelessness Partnering Strategy (HPS, formally the Affordable Housing Initiative) expires in 2019. There is a dearth of strategic, long-term housing policy in Canada that is sorely needed to decrease rates of homelessness and increase the availability of stable, safe, affordable housing.

The purpose of this paper is to provide an in-depth exploration of similarities and differences among different sectors engaged in housing policy and to suggest new directions for housing policy in Canada. Expanding upon Hopper and Barrow's (2003) earlier framework, we review three genealogies of housing policy: (a) mental health housing (which they termed *housing as housing*), (b) affordable housing (which they termed *integrated housing development*), and (c) housing for homeless people. We begin by conceptualizing homelessness as a "wicked" social problem. Next, we review the three genealogies of housing policy, as well as noting the particular importance of policy that addresses Aboriginal housing. This review and analysis sets the stage for our closing discussion of the need for collaborative, synergistic approaches to developing public policy and advancing a national strategy to address homelessness and affordable housing.

## HOMELESSNESS AS A "WICKED" POLICY PROBLEM

Homelessness is a pressing policy problem in Canada. Since the 1990s, the incidence of homelessness has risen drastically. The most current research on homelessness in Canada suggests that over 235,000 Canadians experience homelessness each year (Gaetz et al., 2014). Of this number, roughly 5,000 people are *unsheltered* (absolutely homeless, living on the street, or in places not intended for habitation); 180,000 are *emergency sheltered* (those staying in overnight shelters intended for people who are homeless or fleeing domestic violence); and 50,000 are *provisionally accommodated* (those whose accommodation is temporary or lacks security of tenure; Gaetz et al., 2014; Gaetz, Scott & Gulliver, 2013). Additionally, one in five Canadian households are *at risk of homelessness*, meaning that these households spend more than 50% of income on rent (Gaetz et al., 2014). It is estimated that the costs associated with homelessness (i.e., social services, emergency healthcare, shelters, policing) are in excess of $7 billion annually).

Homelessness is a problem that crosses demographics and is the result of both individual factors and systemic factors. The variety of contributing factors makes homelessness a near-perfect example of a "wicked"

policy problem. Wicked problems are characterized by inconsistent problem definitions, divergent problem framing, and differing solutions across stakeholders (Rittel & Webber, 1973) and are the result of a complex interplay of economic, social, and political factors that vary across contexts and jurisdictions (Kreuter, De Rosa, Howze, & Baldwin, 2004; Rittel &Webber, 1973). Like all wicked problems, homelessness can be understood as a symptom of many other problems (Rittel & Webber, 1973). Although wicked problems require multi-dimensional solutions that address the dynamic nature of multiple underlying causes (Westley, Antadze, Riddell, Robinson, & Geobey, 2014), resource and capacity limitations make it necessary to prioritize certain solutions in the short term, while maintaining a comprehensive long-term strategy.

Canada is currently without a long-term, national, affordable housing strategy (Gaetz et al., 2014) and has only recently initiated a national mental health strategy (Mental Health Commission of Canada, 2012). Developments in housing programs and policy have been described as "haphazard" (Pomeroy & Falvo, 2013) and "scattered" (Carroll & Jones, 2000). Recent reports on homelessness in Canada have called for the development of national strategies that connect multiple pieces of the housing puzzle such as affordable housing, supports for individuals experiencing homelessness, as well as specialized services for specific populations (Gaetz, et al., 2014; Londerville & Steele, 2014). Transforming such strategies into practice will require effort on the part of policy makers to bring together multiple sectors, and to develop an understanding of commonalities and differences in approaches to housing across sectors.

## UNDERSTANDING STAKEHOLDER PERSPECTIVES ON HOUSING AND HOMELESSNESS

### Three Genealogies of Housing in Canada

In order to work towards a national housing strategy that connects multiple pieces of the housing puzzle, it is necessary to understand the perspectives of stakeholders in varying sectors working to influence housing policy. In Canada, the issue of homelessness is framed differently across sectors working to address housing issues. These differences in framing create competition among stakeholder groups within "policy arenas" (e.g., mass media, government), in which policy ideas vie for public attention (Hilgartner & Bosk, 1988). Such competition can lead to synergy and growth in understanding the issues and potential solutions (Hilgartner & Bosk, 1988), but it can also trap stakeholders in conflicts and impede the development of strategies for innovation (Moore & Westley, 2011).

In adjusting Hopper and Barrow's (2003) framework to the Canadian context, we consider three genealogies: (a) the mental health sector, (b) the affordable housing sector, and (c) the homelessness sector. This framework allows us to examine the tensions between mental health and affordable housing and their respective conceptions of "social good," while presenting the homelessness sector as an emerging bridge between these two sectors. In Table 1, we present several different dimensions on which these three sectors can be compared and contrasted, including (a) issue framing, (b) emphasis on research, and (c) the historical and political context.

## Table 1

### Dimensions and Elements of Three Genealogies of Housing

| Dimensions | Elements | Three Genealogies | | |
|---|---|---|---|---|
| | | Mental Health Housing | Affordable Housing | Housing for Homeless People |
| Issue framing | Target population | People with psychiatric disabilities | People living on low income. (People who are homeless and/or have a psychiatric disability are a sub-set of this population.) | People who are homeless. (People with a psychiatric disability who are chronically homeless are a sub-set of this population, but also includes women, families, youth, and Aboriginal people.) |
| | Focus | Improved mental health system of care | Economic inequality, poverty, and citizenship rights (people have a right to housing) | Ending homelessness |
| | Interventions | From custodial to supportive to supported housing | Accessible and affordable housing for all | Supportive independent housing as a triaging tool and one strategy among several—including calls for affordable housing |
| | Types of housing | Custodial, single-site, and scattered-site | A variety of different types of setting—social housing, co-ops, non-profits | Scattered-site vs. shelters, transitional, and single-site, creation of affordable housing |
| Incorporation of research evidence | Research | Considerable research on mental health and housing, therapeutic impacts | Considerably less research, except at the policy level | Growing research on homelessness |
| Political and historical context | Policy | Mental health policy; incorporation of housing as a social determinant of mental health, primarily provincial | Federal; diminution of the federal role in affordable housing since the 1980s | Homelessness, both federal (HPS) and provincial; Alberta as an instructive case study |

**Mental Health Sector (*Housing as Housing*)**

**From custodial housing, to the residential continuum, to Housing First.** Following the wave of deinstitutionalization in Canada in the 1960s, housing has become an enduring challenge in the provision of care for individuals with psychiatric disabilities (Nelson, 2012; Trainor, Curwood, Sirohi, & Kerman, in-press). Early systems of care coupled access to housing with treatment compliance and tended to occur in buildings occupied by other mental health service consumers. Custodial housing (mini-institutions in the community), such as Homes for Special Care in Ontario, was the first response to deinstitutionalization, and this type of housing continues to be part of the current landscape (Community Support and Research Unit, 2012). The 1980s introduced the notion of a residential continuum, or staircase model, with mental health consumers moving from more restrictive to more independent housing as their functioning improved. As the limitations of this approach became apparent (Ridgway & Zipple, 1990), independent supportive housing—marked by the provision of normal, scattered-site housing independent of clinical services—emerged in the 1990s under the banner of "supported housing" (Carling, 1995). With the growing population of homeless people, this approach was further developed to serve homeless people with mental illness and addictions in the late '90s with the Housing First (HF) model pioneered by Pathways to Housing in New York (Tsemberis & Asmussen, 1999). It should be noted that mental health housing has benefited from its separation from affordable housing. In Ontario during the Harris administration, for example, mental health housing remained intact while affordable housing was heavily cut.

In Canada, independent supportive housing has become a highly visible approach for people with mental illness (Trainor, Taillon, & Pandalangat, 2013). The renewal of HPS in 2013 by the federal government has prioritized independent supportive housing. This policy shift was largely informed by evidence from the Mental Health Commission of Canada's At Home/Chez Soi project, a two-year, five-city, randomized controlled trial of HF for chronically homeless people with mental illness (Goering et al., 2014). The research conducted during the implementation of At Home is emblematic of research in the mental health sector that largely seeks to create evidence that improves mental health service delivery by specifying individual, community, and systems level outcomes (Sylvestre, Nelson, & Aubry, in-press).

**Critiques.** Fundamentally, supportive independent housing is a "demand-side" solution to homelessness because it prioritizes the ability of particular individuals (people who are chronically homeless and have a psychiatric disability) to achieve housing, thus bolstering their ability as economic consumers. Supportive independent housing targets chronically homeless individuals who most intensively utilize costly social services among the homeless population (Aubry, Farrell, Hwang, & Calhoun, 2013). This approach does little to address the broader affordable housing crisis that underpins homelessness and has been negatively evaluated as a band-aid solution to this crisis. Affordable housing advocates have called Housing First a "street sweep" (German, 2008) and a neo-liberal program (Crowe, 2014), because of its emphasis on rental housing from the private sector. The discourse used to describe the HF approach in the media and sometimes by HF researchers themselves (Katz, Zerger, & Hwang, 2016) has tended to overemphasize the role of HF in addressing homelessness by presenting HF as a stand-alone solution or panacea. Failure to advocate for HF as a component of a multi-dimensional approach to addressing homelessness can undermine long-term goals (Katz et al., 2016) by presenting a quick fix and shifting attention away from systems-level issues that perpetuate the cycle of homelessness (Stroh, 2009).

**Affordable Housing Sector (Integrated Housing Development)**

**The rise and fall of affordable housing.** A second genealogy of housing in Canada is the affordable housing sector. This sector frames the issue of homelessness as an issue of fundamental citizenship rights and sees a strong role for government in ensuring a stock of affordable housing (Grant & Munro, 2012; Hartman, 2000; Hulchanski, 2002; Sewell, 1994; Shapcott, 2001). The affordable housing sector is primarily concerned with the needs of low-income citizens who have difficulty accessing housing.

Within the affordable housing sector, increases in accessible and affordable housing provided through a variety of housing types (e.g., social housing, co-ops, non-profits, private sector) is presented as the solution to homelessness (Londerville & Steele, 2014). Actors in the affordable housing sector emphasize the role of government, particularly the federal government, in supporting the development of affordable housing. As such, research in this sector tends to take the form of policy analysis. Researchers within the affordable housing sector have highlighted how housing policies in Canada led to increased inequality and polarized housing outcomes by creating a two-tiered system that benefited home owners but overlooked rental tenants, and by neglecting the development of new rental housing and social housing upon which low-income citizens and newcomers rely (Drummond, Burleton, & Manning, 2004; Hulchanski, 2004; Grant & Munro, 2012).

Affordable housing policy in Canada has fluctuated over the last century. Prior to the 1930s, the government had no role in housing, which reflected the view that the market should regulate housing. Beginning in the 1930s, the federal government began taking an active role in housing Canadians through the Canada Mortgage and Housing Corporation (CMHC). The CMHC was tasked with helping Canadians enter the housing market through loans and the provision of social housing in partnership with the provinces (Grant & Munro, 2012). During Prime Minister Mulroney's terms in the 1980s and 1990s, the federal government ceased all new funding for social housing and initiated a lasting period of passive involvement in housing policy.

In the decades that followed, the language of *affordable housing* has emerged in the place of *social housing*. Affordable housing connotes time-limited commitments on the part of government and multi-sectorial housing with the private, non-profit, and government sectors all playing a role in the provision of housing. The Harper government's commitment to federal housing policy has been described as being influenced by pragmatism and political expediency as opposed to a commitment to housing (Pomeroy & Falvo, 2013). The financial crises of 2008 provided the impetus for new funding in federal housing. This funding was a key component of the government's economic action plan and was largely a response to economic turbulence and the need to create jobs during a recession.

**Critiques**. The availability of affordable housing is an important determinant of homelessness in Canada. Creating more affordable housing stock is an important policy intervention that undoubtedly plays a role in ending homelessness in Canada. Within the affordable housing sector, it is important to consider the multiple social locations and oppressions of people who are homeless or precariously housed, and the disconnect between policies related to housing, income support, and mental health (Forchuk et al., 2007). It is unlikely that new stocks of affordable housing will be equally accessible to all individuals who require it. It is thus important to devise strategies that recognize the precarious substrata of people who are homeless or

precariously housed and devise strategies to ensure these individuals are supported in accessing affordable housing.

**Homelessness Sector**

**Ending homelessness.** The homelessness sector has emerged in Canada in the last decade and incorporates strands of both the mental health and affordable housing sectors (see Figure 1). The homelessness sector, like the affordable housing sector, is concerned with addressing the housing needs of all people who are homeless or precariously housed but is pragmatic in triaging the needs of different sub-populations of homeless people (e.g., people experiencing chronic homelessness who have a psychiatric disability). This emergent sector is most prominently represented by the Canadian Alliance to End Homelessness (CAEH) and supported by the Canadian Observatory on Homelessness. The homelessness sector has strongly promoted supportive independent housing, including HF (Gaetz et al., 2013), but has been strategic in its endorsement of this approach as a pragmatic strategy in the context of scarce resources. Simultaneous to endorsing HF in Canada, actors in the homelessness sector have also been strong advocates for affordable housing (Gaetz et al., 2014).

**Figure 1**

**Intersections of the Three Genealogies of Housing Policy**



Homelessness Sector
Social Good: Ending chronic homelessness by incorporating strategies from both the mental health and affordable housing sectors.

Mental Health Sector
Social Good: Improving mental health service delivery and housing for people who are homeless with psychiatric disability.

Affordable Housing Sector
Social Good: Reducing homelessness through advocacy for the creation and maintenance of affordable housing.

The focus of the homelessness sector is distinctive and specific—*ending homelessness*. This goal informs its approach to both housing intervention and research that are strategic and synthesize approaches from both the mental health and affordable housing sectors. The *State of Homelessness in Canada* (Gaetz et al., 2014), for example, specifies the scope of homelessness quantitatively, provides broad-based recommendations for funding and policy changes at the three levels of government (affordable housing), and highlights the success of supportive independent housing programs (mental health).

The homelessness sector has emerged with dramatic increases in homelessness in the 1990s. Federal policy initiatives like HPS signal a novel problem framing homelessness as a discrete social problem straddling multiple sectors (mental health, housing). The emergence of the Alberta Secretariat for Action on Homelessness and 10-year plans that promote HF have created a framework for the homelessness sector. Currently, research that extends the knowledge base on homelessness (c.f., Gaetz et al., 2014) coupled with the promotion of 10-year plans to end homelessness and community action plans (c.f., the 20,000 Homes campaign) are the focus of the homelessness sector.

**Critiques.** Some commentators have critiqued the homeless sector's economic framing of homelessness. Willse (2010) has suggested that the creation of 10-year plans, and the promotion of programs like HF, signal a shift in understandings of homeless from a social problem to an economic problem. The consequence of this economic framing is that the social world and poverty are increasingly framed in cultural narratives that support the expansion of neo-liberalism.

The homelessness sector is an important middle ground in which actors from the mental health and affordable housing sectors can collaborate. We will develop this argument in the discussion section. First, we explore the application of our three genealogies in the context of housing policy for Aboriginal peoples in Canada.

## ABORIGINAL HOUSING AND HOMELESSNESS IN CANADA

Housing and homelessness for Aboriginal peoples in Canada deserves special attention as a social problem and policy issue. Problems of mental health, affordable housing, and homelessness facing Aboriginal peoples in Canada are long-standing, severe, and inextricably linked with the historical legacy of colonization, oppression, trauma, and residential schools (Mitchell & MacLeod, 2014). The three sectors of housing policy are all relevant to Aboriginal people.

First, regarding the mental health housing sector, Aboriginal peoples in Canada experience high rates of mental health issues, often double those for non-Aboriginal people, particularly depression, suicide, and substance use (Bobet, 2006). These problems are rooted in historical trauma, oppression, poverty, and violence (Kirmayer, Simpson, & Cargo, 2003). As well, Aboriginal ways of understanding and healing emphasize a holistic view of well-being and distress and traditional cultural healing approaches that diverge radically from mainstream mental health practice (Kirmayer, 2012). However, it is possible to develop hybrid approaches that integrate the best elements of cultural competence and evidence-based practice in mental health. One example is the Winnipeg At Home/Chez Soi programs, which incorporated traditional healing with HF, and achieved positive housing and quality of life outcomes for homeless Aboriginal participants with serious mental health and substance use issues (Goering et al., 2014).

Second, policy development in the affordable housing sector is very important for Aboriginal people. On-reserve housing is often unsafe, inadequate, and overcrowded, and the state of off-reserve housing for Aboriginal people is not any better (Gaetz et al., 2014). On CMHC's three standards of "core housing need"—adequacy, affordability, and suitability—Aboriginal households fare far worse than non-Aboriginal households (Belanger, Weasel Head, & Awosoga, 2012). Moreover, Aboriginal people have much lower rates of home ownership (50.4%) compared with all of Canada (69.4%; Belanger et al., 2012). Poverty and racism are significant barriers to off-reserve housing for Aboriginal people.

Third, homelessness is a growing problem for Aboriginal peoples in Canada. Patrick (2014) has reported that 7% of Aboriginal people living in Canadian cities have experienced homelessness, more than eight times the rate of non-Aboriginal people. In cities in western and northern Canada, Aboriginal peoples typically comprise more than 40% of the homeless population (Belanger et al., 2012). While HPS has a separate funding stream for programs serving Aboriginal peoples who are homeless, the amount of funding dedicated to those programs is clearly insufficient to address the grave nature of housing and homelessness for Aboriginal peoples (Gaetz et al., 2014). The Canadian Observatory on Homelessness and CAEH suggest a first step to addressing homelessness for Aboriginal peoples in Canada is to audit the existing on-reserve housing supply in order to identify specific housing needs and to provide a realistic estimate of housing investments needed in the coming decade (Gaetz et al., 2014).

## DISCUSSION

The commonality of the three genealogies of housing in Canada is in promoting access to stable permanent housing. The primary differences between the mental health and affordable housing sectors are discrepant strategies to secure access to stable permanent housing. The mental health sector favours demand-side solutions that promote the ability of one vulnerable substratum of the homeless population to access housing, while the affordable housing sector favours supply-side solutions that ensures the accessibility of stable permanent housing for all Canadians. The problem of framing for these two genealogies is also divergent. The mental health sector sees accessibility to housing as a critical ingredient of effective service provision for individuals with psychiatric disabilities, whereas the affordable housing sector views homelessness as a manifestation of growing income inequity wrought by neo-liberalism. Both of these accounts of homelessness are important and bring value to efforts to promote access to stable permanent housing. There is work to be done in coordinating efforts between these two sectors to avoid unhelpful competition; the homelessness sector is an important meeting point.

### The Homelessness Sector and Housing First

The visibility of homelessness, combined with the substantial economic costs of emergency supports for the homeless population have created political pressure to take action. Key policy actors in the homelessness sector have been strategic in framing the problem and presenting solutions in ways that draw together diverse stakeholders and sidestep ideological barriers to policy change. The implementation of HF in Canada has been a highly visible shift in housing policy that has drawn public attention to the importance of advancing housing

policy. The homelessness sector has been able to leverage the success of HF into a broader conversation about homelessness and affordable housing in Canada (Gaetz et al., 2014).

**Ideology and policy.** The development of the At Home/Chez Soi project represents one major advancement in Canadian housing policy. The emergence of this national research demonstration project was influenced by Michael Kirby, a key policy entrepreneur who was able to bring together problems, politics, and policy regarding homelessness (Macnaughton, Nelson, & Goering, 2013) by responding to political concerns over the visibility of homelessness in Vancouver prior to the 2010 Olympics. Kirby, drawing upon expertise from a network of stakeholders in mental health and housing, framed the issue of homelessness in terms of inadequate supports for individuals with serious mental illness and the high financial costs of emergency services. In doing so, Kirby created a policy narrative for HF—generally considered to be a progressive approach to housing—that resonated with conservative stakeholders (Macnaughton et al., 2013). A similar approach was taken in the United States under the leadership of Phillip Mangano who pushed the administration of George W. Bush to adopt HF. Advocates for Housing First developed policy narratives for addressing homelessness that framed the issue in terms of the high cost of chronic homelessness and the economic salience of increased independence of the social service system and an eventual return to social functioning (Stanhope & Dunn, 2011).

Research findings have been influential in establishing HF within the United States and in Canada. In the American context, research evidence demonstrating the effectiveness of the HF approach for successfully housing chronically homeless individuals was also a key factor in overcoming ideological opposition in the policy development process (Stanhope & Dunn, 2011). In Canada, the positive outcomes demonstrated by the At Home/Chez Soi project strongly influenced the federal government's five-year renewal of HPS (2014–2019) which currently supports communities in implementing HF (Government of Canada, 2015).

**Limited resources and prioritization.** There have been many critiques of HF that highlight the limitations of this approach and express concern over the enthusiastic support for the approach demonstrated by governments focused on advancing neo-liberal agendas (Hopper, 2012; Kertesz &Weiner, 2009; Padgett, 2013). Although advocating for HF on the basis of cost savings and individualized mental health support has been fruitful in engaging diverse stakeholder groups, this approach avoids deeper, more difficult discussions regarding the impact of economic inequality—driven by advanced neo-liberalism—on homelessness (Stanhope & Dunn, 2011). These critiques are important and reflect the tension between the mental health and affordable housing sectors. The homelessness sector is an important middle ground that has strategically utilized HF as a strategy to prioritize needs, given resource constraints. HF allows the prioritization of a particularly vulnerable subset of the homeless population who utilize a disproportionate amount of system resources and for whom there is clear evidence showing the effectiveness of this approach. The homelessness sector has also demonstrated that HF is only a starting point and that affordable housing needs to be an integral part of the conversation about ending homelessness. A helpful demonstration of the synergy between HF and affordable housing is the example of Alberta's 10-Year Plan to End Homelessness, which incorporated both approaches, and has been successful in creating 2,000 housing units while significantly reducing health and justice system involvement (Alberta Secretariat for Action on Homelessness [ASAH], 2013).

**Systems Planning and Homelessness**

Systems coordination is a concept that makes intuitive sense but is difficult to achieve in practice. The idea of coordinating systems to address homelessness has existed for decades yet progress towards this goal has been minimal, with improvements made in the integration of services but little change in the integration of systems (Dennis, Steadman & Cocozza, 2000). Mental health, affordable housing, and homelessness are three sectors that are central to systems coordination efforts, but other sectors are also closely connected to the issue including healthcare, child welfare, social assistance, and corrections (Doberstein, 2016). Barriers such as resource issues, rigid boundaries between different levels of government and between sectors, and competing definitions of key issues all make coordination difficult (Doberstein, 2016). Enhancing coordination among sectors requires the development of a common framing of the problem and possible solutions, the identification of shared values and goals, and the illumination of the effect of how partial or sector-specific responses influence, positively and/or negatively, the ultimate goal of ending homelessness (Stroh, 2009).

**Current progress.** Currently, the most visible research that details systems planning and coordination is the "State of Homelessness in Canada" report (Gaetz et al., 2014). The approach outlined in this report is two pronged: (a) planning and coordination that increases the overall supply of affordable housing, and (b) planning and coordination that helps vulnerable people access housing. The recommendations of this report are important for both municipal and provincial planning. Alberta, for example, initiated a 10-year plan to end homelessness in 2007 that incorporates both increases in the supply of affordable housing and the prioritization of people who are chronically homeless through HF programs.

The incorporation of meaningful systems planning and coordination has accelerated in Canada with the most recent federal budget in addition to Ontario's affordable housing plan, both of which signal the maturation of the nascent homelessness sector. The current federal budget has allocated $2.3 billion in funding for housing and homelessness for 2016–18, marking the most substantive increase in federal funding for housing in the past 25 years (Lee, 2016). This budget will increase funding for affordable housing, expand HPS, and improve housing for Aboriginal communities. Additionally, the federal government intends to create a federal affordable housing plan in 2016–18. While the increases in funding are relatively modest, it is significant that the federal government is taking an active role in housing policy.

Ontario recently announced a long-term affordable housing plan that includes a concrete goal to end chronic homelessness in the next decade (Government of Ontario, 2016). This plan strongly incorporates planning and coordination that bridges the affordable housing and mental health sectors, including investment in new supportive housing units, increased funding for supportive housing, including HF, portable rent subsidies for survivors of domestic violence, and preventative funding in the form of rent subsidies and allowances. As a whole, the Ontario strategy seeks increased coordination between the housing and health sectors and works in tandem with the federal plan.

## FUTURE DIRECTIONS

Systems coordination presents a step towards addressing homelessness but it alone is not sufficient to stimulate change. Although the 2016 federal budget indicates renewed interest in investing in housing, both federal and provincial financial commitments continue to be short-term in nature. Ongoing advocacy is

necessary to ensure adequate funding for a long-term collaborative housing strategy and to ensure services across sectors connected to homelessness are sustainable and capable of supporting their most high-needs citizens. Achieving a coordinated, national housing strategy requires stakeholders working within multiple sectors to align their framing of the issue of homelessness and to collectively advocate for housing as a key policy issue. This advocacy, if paired with ongoing research and evaluation to mark progress and identify shifting trends, can ensure housing remains a key issue within the Canadian policy arena.

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