

IMOUTO HOUSING FOR YOUNG WOMEN

**DEVELOPMENT AND EVALUATION OF A SUPPORTIVE TRANSITIONAL
HOUSING PROGRAM IN VANCOUVER'S DOWNTOWN EASTSIDE**

2011 - 2013

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INTRODUCTION

After two years of fundraising, planning, and renovations, Imouto Housing for Young Women opened its doors in September of 2011. Imouto was developed to be a communal living, supported, transitional housing program for young women currently living and/or seeking services in the Downtown Eastside of Vancouver, British Columbia.

The program supports young women, ages 16-24, who are at risk and/or experiencing violence and abuse, exploitation, have no or unsafe housing and who face additional barriers to finding and maintaining housing including young women who are pregnant, who are First Nations, Métis and/or Inuit, women of colour, lesbian, bisexual or transgendered

and who may also be struggling with their use of substances and/or experiencing varying levels of mental wellness.

Operated in collaboration with a group of Program Partners, Imouto provided housing and support for 36 young women over the two year period between September 2011 and August 2013. This report provides background information on the development of Imouto, evaluation findings describing the impact of this supportive housing on young women, and a description of how the program model evolved over this time in response to women's needs and available community resources.

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CONTEXT

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1

PROGRAM INCEPTION

The idea for a supportive, transitional housing program like Imouto was conceived in 2009 during a series of discussion between Atira Women's Resource Society's CEO and the Executive Director of Watari Youth and Family Services. These discussions identified a small population of young women, currently accessing health and social services in the Downtown Eastside, who were chronically homeless, often living on the streets, "couch-surfing," and "shelter-hopping" for years at a time. Watari staff reported they were unsuccessful in engaging some young women to consider housing support outside of the Downtown Eastside neighborhood in spite of the availability of housing options and rent supplements. Without stable housing in their current neighborhood, many young women were not able to receive or access the services they needed to bolster their safety and health and support them to transition off the streets and out of the Downtown Eastside.

Three other organizations - Sheway, BC Women's Hospital & Health Centre and Covenant House Vancouver - were identified at this initial stage and invited to be part of creating appropriate housing for young women at 120 Jackson Avenue, later named Imouto. A number of additional appropriate community partners connected into the project as it developed (see a full description of program partners below).

Imouto is the Japanese word for "little sister" and was chosen because the building is located in historic Japantown, kitty corner from the Vancouver Japanese Language School.

THE NEED FOR TARGETED HOUSING FOR YOUNG WOMEN

When the need for a supportive housing program for young women in Vancouver's Downtown Eastside was identified, there were few housing options and programs targeted to female youth. Shelters are not youth-specific and there remains an insufficient number of beds for the numbers of people needing them (Greater Vancouver Regional Steering Committee on Homelessness, 2008; Istvanffy, 2007). As well, requirements of "clean time" at shelters are a known barrier to youth struggling with their use of alcohol and drugs. Atira Women's Resource Society operates several long-term, low-barrier supportive housing programs for "hard-to-house" women in the neighborhood and there are other women-only housing programs in the immediate area. However, these programs are often targeted at older women, pregnant women, women who are employable or who have taken clear steps towards addressing their struggles with mental wellness and/or substance use.

In addition to limited housing options in the neighborhood, service providers working with young women observed that many of them encountered numerous barriers to accessing housing. Young women reported previous denial of services, long waitlists, frustration applying for services and income assistance, and unsympathetic staff. Many also described negative experiences with previous housing programs such as poor physical housing conditions (including infestations with bedbugs and rats) and restrictive policies (e.g., strict curfews or a requirement that they remain abstinent from alcohol and drugs).

Previous research had shown that housing for street-involved youth is more likely to be successful if the housing is supportive: low threshold, has youth-friendly intake procedures, is based in principles of harm reduction, respectful of lesbian, gay, bisexual

and transgendered youth, provides support to achieve mental wellness and where youth are able to form positive relationships with staff who are respectful, non-judgmental and who focus on rapport building (Barnaby, Penn, & Erickson, 2010; Jost, Levitt, & Porcu, 2011). Other research has shown the importance of women-only housing for young women, especially if they have been violated or abused by men (Canadian Housing and Renewal Association, Novac, Serge, Eberle, & Brown, 2002; Lazarus, Chettiar, Deering, Nabess, & Shannon, 2011).

Imouto Housing for Young Women was developed to be a 'stepping stone' between short-term options such as shelters and longer-term housing programs for youth who are well on the road to reduction and recovery from substance use, are employable and choosing to leave the downtown eastside. The program was intended to provide a safe place for women to live where they can remain connected to their community, and be supported in beginning to learn tools to recovery from trauma, gender exploitation and problematic use of substances.

How many young women are living in the Downtown Eastside?

There are currently an unknown number of young women living in/frequenting the Downtown Eastside. The Vancouver Police Department, Ministry of Family & Child Development, Ministry of Social Development, Atira and other non-profit housing and service providers report girls as young as 13 showing up in the Downtown Eastside, most of whom "disappear" into places they can't be found such as privately owned single room accommodation hotels, shared accommodation, parks and drop-in centres and where they are vulnerable to exploitation and abuse.

PROGRAM PARTNERS

Since 2009, Atira Women's Resource Society has collaborated with several partner organizations in the planning, development, community/media outreach and implementation of Imouto. Their specific roles with respect to Imouto are described below.

Watari Youth and Family Services has provided case coordination for resident young women including strategic planning; coordinating case conferences and community planning meetings such as Hard Target; networking with social workers, frontline workers, parents and police.

Watari youth outreach workers have assisted youth in accessing income assistance, detox, counseling, treatment, food, mental health services, basic health services, street nurse program, courts, hygiene supplies, harm reduction supplies and repatriation. The case managers and youth outreach workers have been available on a daily basis to work with Imouto staff in providing the necessary supports to residents.

Members of the Eastside Integrated Youth Team, which includes Watari's case manager and an addictions counselor from **Vancouver Coastal Health** (VCH), have co-facilitated a well-attended bi-weekly movie night. This has provided an opportunity for residents to socialize and have fun, and to seek supports if needed. The VCH addictions counselor provides additional counseling and support to young women in the house outside of movie night.

BC Women's Hospital and Health Centre's Nurse Practitioner Community Outreach Services has offered primary health care services and support by Nurse Practitioners on site at Imouto on a weekly basis in a dedicated clinic room. BC Children's Hospital is providing ongoing support to the Nurse Practitioners by a Pediatrician around pediatric health issues the young women at Imouto may have.

Boys and Girls Clubs of South Coast BC's Nexus program has provided confidential one-to-one substance abuse counseling, with a focus on reducing the harms of substance use, to young women at Imouto who are concerned about their use of drugs or alcohol. For the young women on Nexus' case load, counselors work on building trusting relationships and providing individuals with additional practical support and advocacy depending on their needs and as resources allow. This may include court accompaniment, assistance in accessing income assistance, detox, counseling, treatment, food, mental health services, basic health services, hygiene supplies, and harm reduction supplies – essentially whatever the young women identify can help reduce harms in their lives.

Covenant House Vancouver (CHV) has provided outreach services to young women in the house who are on their caseload, including help with immediate needs, and engaging with youth long-term to provide support around abuse/trauma, mental health issues, and substance use. CHV also offers housing outreach workers who, upon request, can help young women explore and pursue their options for housing when they are ready to move out of Imouto. CHV also provides respite housing to young women at Imouto who temporarily need a short-term stay in a different location, provided they meet certain criteria.

Providence Health's Inner City Youth Mental Health Team has provided mental health services, including on-site appointments with the young women at Imouto. In year 2, a psychiatrist was on-site one day each month. Beginning in the summer of 2013, mental health support workers are on-site for up to 20 hours each week to support the young women's mental wellness.

Sheway has been involved in providing comprehensive health and social services to young women residing at Imouto who are either pregnant or parenting young children and who have substance use issues. This includes prenatal, postnatal and infant health care, education and counseling for nutrition, child development, addictions, HIV and Hepatitis C, housing outreach, parenting support, and assistance in fulfilling basic needs. A nurse comes on-site to provide perinatal health care to young women at Imouto who are clients of Sheway.

Aboriginal Front Door Society has collaborated with Imouto staff to support cultural connections for young aboriginal women living at Imouto.

University of Victoria School of Social Work has committed to providing practicum student placements at Imouto. Practicum students provide a range of supports to the staff and young women residing at Imouto depending on their skills and experience.

Imouto's Advisory Committee

An advisory committee comprised of these partnering organizations, community members and representatives from local and provincial government have met regularly since Imouto opened and act in a continuing advisory, advocacy and consultative capacity.

The Advisory Committee has had an important role to play in identifying barriers to referral coordination, ensuring smooth communication between program partners, and informing program development. The committee's complete terms of reference are available at <http://atira.bc.ca/Imouto>.

PROGRAM MODEL

Imouto Housing for Young women targets the most 'hard-to-house' young women. The initial program model was developed to be based on specific principles known through research and service delivery experience to be most appropriate for supporting this population and through consultation with community partners. Key features of the program model are described below.

Target Population

Age

The housing will be available to women and girls aged 18-24. Girls younger than 18 will be temporarily housed and supported in finding age-appropriate services in the community along with the programs' partners and the Ministry of Children and Family Development.

Gender

Youth who identify and live full-time as a girl/woman are eligible for housing at Imouto, including transgender women.

Priority Issues

- Safety – young women at risk of violence or abuse, who are being exploited, or have no/unsafe housing are given priority in intake decisions.
- Pregnancy – young women who are pregnant in addition to facing safety concerns will be given higher priority. It is recognized that sharing a bathroom with other residents is not ideal for women who are parenting infants, and all efforts will be made to help young mothers transition to more appropriate housing either before or after they give birth.
- Age – Priority will be given to younger women (16-19), as they face barriers to securing a safe place to live on their own. Young women who have "aged out" of foster care (at the age of 19) will also be given priority, as research suggests they are more likely to end up homeless and victimized.

- Additional barriers to housing – Young women who may face additional barriers to finding or keeping housing will be given priority, including women struggling with their use of drugs or alcohol or mental health issues, aboriginal women, women of colour and transgendered women.

24/7 Support

The initial program model was centred on support and care by a residential 'house mom.' The house mom provided basic supports to young women, including identifying their current support network, connecting them with other services for more intensive supports, helping the young women with cooking and ensuring the safety and general well-being of residents. Over the course of the first six months, this 'house mothering' model evolved to 24/7 support by non-residential staff in order to better meet the diverse and sometimes, intensive, needs of young women. (See p. 38 for a description of the changes to the staffing model)

Services by Program Partners

In addition to 24/7 on-site support by Atira staff, Program Partners provide a range of services and supports, including:

- Case management coordination;
- Community youth outreach;
- Substance use counselling;
- Pregnancy-related supports;
- Youth mental health services;
- Nurse practitioner community outreach services;
- Visits with children in care and;
- Support in finding alternative safe, affordable and appropriate housing.

Imouto's complete Service Model and Operations Management Plan are available on the web at <http://atira.bc.ca/Imouto>

How does Imouto support young women?

Young women who live at Imouto receive support and care from on-site staff and services offered by Program Partners. Staff and Program Partners work with the young women to:

1. Identify and work with their current support network(s);
2. Connect young women with other services for more intensive supports;
3. Support young women with cooking, nutrition and other life skills and by;
4. Ensuring the safety and well-being of the young women in and around Imouto.

Does Imouto accept referrals for young women from areas outside of the Downtown Eastside?

Imouto only houses young women who already living and/or seeking services in the Downtown Eastside. Neither Imouto staff nor Atira nor its Program Partners seek referrals of young women from other parts of Vancouver or other parts of the province/country.

Rent

Rent is the shelter portion of income assistance (currently \$375 per month). If a young woman is not on income assistance, other opportunities for rent subsidy will be sought.

Length of Stay

While Imouto is intended to be a transitional program, young women are able to stay at Imouto for as long as they need to, as long as they fit the program criteria. The housing outreach workers help women to find more appropriate/permanent housing when they are ready.

Drug and alcohol use on site

Young women are not permitted to use or sell illegal substances or drink alcohol at Imouto.

Overnight guests

For the safety of all the residents, overnight guests are not permitted at Imouto.



Services at Imouto Housing for Young Women are intended to be delivered through seven key principles.

YOUNG WOMEN-CENTRED

Services are tailored to the specific needs of young women, based on an understanding of gender and social inequality, and they place young women at the “centre” of the services they receive, supporting their unique strengths, choices, autonomy and preferred forms of communication and interaction.

VIOLENCE AND TRAUMA-INFORMED

The program is grounded in what is known about the impacts of trauma (including anger and a lack of trust) and the relationship between violence/abuse, the use of substances and the development of struggles with mental and spiritual wellness.

HARM REDUCTION

The program works to reduce risks related to substance use and other risky behaviours, while not requiring abstinence.

LOW BARRIER

The program strives to have as few barriers as possible ensuring young women can access the housing and/or other services. Only under very exceptional circumstances are women required to leave.

ANTI-OPPRESSION

Services are based on an understanding that First Nations, Métis and Inuit women, women of colour, lesbian, bisexual, queer or transgendered women, women with disability(ies) and women who use substances and/or struggle with mental wellness experience discrimination in our society and also face multiple barriers to accessing mainstream services.

RELATIONSHIP BUILDING

A focus on establishing ongoing supportive relationships of trust with young women by those providing services, achieved in part by working to provide consistency and predictability across time.

SAFETY FIRST

Establishing services that are physically and emotionally safe and do not re-traumatize women or jeopardize their safety is crucial for young women who have been victims of violence.

BUILDING DESIGN

The development of Imouto Housing for Young Women required the restoration of a 1912 heritage building at the corner of Alexander Street and Jackson Avenue. The building was designed to be a single room accommodation residence which could shelter a maximum of 17 young women.

Rooms are located on two floors and are complemented by shared washrooms and on-site laundry facilities. On the main floor is a common kitchen area, an office for on-site staff and a separate clinic space for nurse practitioners. On the basement level, there is a multi-purpose amenity room which includes furniture that can be moved around to allow for a broad range of activities such as meetings, special events, dinners and recreational events. The multi-purpose room also has a television and two computers with Internet access.

With the development of the adjacent lot to accommodate a shipping container housing project in 2013, Imouto also has access to a common patio and urban garden, which is located immediately outside the kitchen space.

How was the renovation of Imouto funded?

Atira purchased the site (500 Alexander and 120 Jackson) in 2009 with financing from Vancity. A forgivable mortgage was subsequently secured under CMHC's Shelter Enhancement Program and provided the financing for the renovation of the former International Inn, now called Imouto. Donations from a number of corporate and private donors completed the funding package.



LEFT: Before restoration

RIGHT: After restoration



EVALUATION APPROACH

- ▶ EVALUATION GOALS
- ▶ DEVELOPMENTAL EVALUATION
METHODOLOGY
- ▶ DATA COLLECTION AND ANALYSIS

2

EVALUATION GOALS

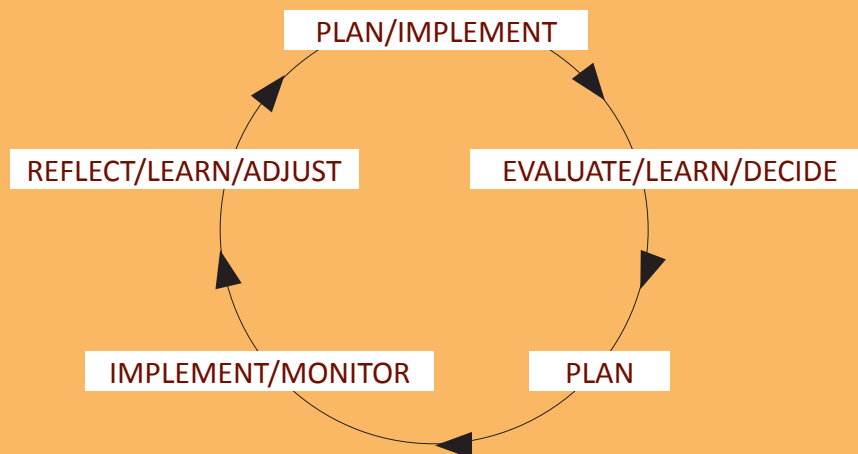
Imouto opened its doors in September 2011 and an external evaluation of the program began shortly afterwards. The intent of beginning the evaluation at program inception was to provide an opportunity for the evaluation findings to inform the further development of the program. The ongoing program evaluation has been viewed as a tool to document and assist with the program continually developing and responding to the changing needs of the residents.

As the program evolved over the first year to respond promptly to the needs of residents, the overall evaluation plan was revised to include more frequent data collection, analysis and sharing. Quarterly evaluation summaries have been developed and shared with Imouto staff, Program Partners, and interested individuals and organizations in the community. Evaluation findings have also been used in reporting to current and prospective funders and shared at academic conferences.

The evaluation has focused on monitoring program activities and changes in service delivery as well as outcomes for program participants. Overall, the evaluation had three central questions:

- 1. What is the impact of the program on young women's lives?**
- 2. To what extent are services being delivered based on the intended program principles (i.e., young women-centred, violence and trauma-informed, harm reduction, low barrier, anti-oppression, relationship building, safety first)?**
- 3. How can we improve the services provided to the young women?**

IMOUTO'S PROGRAM EVALUATION



Ideally, program evaluation is ongoing and contributes to a program's cycle of planning, implementing, learning and adjusting. In this model, evaluation is not an 'addendum' to a program, but is a key part of programming that allows organizations to continually develop and respond to the changing needs of program participants.

With funds from the Vancouver Foundation and the Homelessness Partnering Strategy (Human Resources and Skills Development Canada), an evaluation plan was developed prior to program opening and has been evolving since September 2011. The evaluation is focused on monitoring program activities and changes in service delivery as well as outcomes for program participants.

DEVELOPMENTAL EVALUATION METHODOLOGY

Developmental evaluation is an emerging approach to program evaluation that emphasizes innovation and learning (Patton, 1994). The purpose of a developmental evaluation is to help develop the intervention or program. Developmental evaluation can complement or precede traditional formative and summative evaluation approaches (Fagen, et al., 2011).

Developmental evaluation is particularly appropriate if an organization expects to develop and modify a program over the long term because of constantly shifting needs and/or contexts. This applies to the evaluation of innovative programs in their earliest stages of development or programs that are developing in complex or changing environments. “Developmental evaluation facilitates assessments of where things are and reveals how things are unfolding; helps to discern which directions hold promise and which ought to be abandoned; and suggests what new experiments should be tried.” (Gamble, 2008, p. 18)

Developmental evaluation approaches often involve close communication between evaluators and program staff and the use of data for continuous program improvement. Throughout the evaluation process, the evaluator may draw upon best practices and research and include an examination of the program within its social and political context (Gamble, 2008).

A developmental evaluation approach was determined to be appropriate for the evaluation of Imouto Housing for Young Women as it was recognized that:

- The program model would need to adapt to young women’s needs over time
- Outcomes would vary for different residents depending on their individual circumstances and the length of time they reside at Imouto
- A developmental evaluation would help to determine outcomes of interest in future summative evaluations
- The changing context of funding, program partner resources, overall community support and housing availability within and outside the Downtown Eastside would affect the implementation and operationalization of the program model

“Developmental evaluation supports the process of innovation within an organization and in its activities. Initiatives that are innovative are often in a state of continuous development and adaptation, and they frequently unfold in a changing and unpredictable environment.”

(Gamble, 2008, 13)

DATA COLLECTION AND ANALYSIS

The evaluation included the collection of both qualitative and quantitative data between October 2011 and September 2013 in the following broad areas:

- (1) Housing Status
- (2) Service Utilization and Supports
- (3) Relationships and Safety
- (4) Income, Employment and Education
- (5) Health & Life Skills.

Data collection included both program-level and individual-level processes and outcomes. As of September 2013, individual-level data had been collected for all residents who had left Imouto since program inception (N=29) in September 2011; basic descriptive data had been collected for current residents (N=7).

Whenever possible, efforts were made to follow young women after they left Imouto so that long-term outcomes can be established at later stages of the evaluation. As of August 2013, the housing status of 24 out of 29 former residents was known.

Sources of data included:

- Monthly meetings (bi-monthly meetings began 18 months after program inception) with program manager and case manager(s) from partner agency (N=18)
- Interviews with other Imouto staff (N=8)
- Attendance at staff meetings and program advisory meetings (N=13)
- Interviews with young women in May 2012, October 2012, May 2013 (N=11)
- House meeting minutes and written feedback surveys from young women (N=26)
- “Exit surveys” tracking individual changes and successes (N=23)
- Focus group/individual interviews with Advisory Committee members (N=14)

Data from the various sources were analyzed quarterly. Quantitative data were analysed through the use of descriptive statistics and qualitative data through the use of coding and a simplified ‘grounded theory’ methodology.



HOUSING IMPACT

- ▶ PREVIOUS HOUSING SITUATION
- ▶ IN-REACH SERVICES & SUPPORTS
- ▶ FAMILY, RELATIONSHIPS & SAFETY
- ▶ HEALTH AND NUTRITION
- ▶ SUBSTANCE USE AND HARM REDUCTION
- ▶ INCOME, EMPLOYMENT, EDUCATION AND CREATIVITY
- ▶ TRANSITIONS AND CHANGES IN HOUSING STATUS
- ▶ LONG-TERM HOUSING OUTCOMES
- ▶ WOMEN'S STORIES

3

Findings from the first two years of program evaluation indicate that Imouto Housing for Young Women has been successful in providing low barrier, stable housing to a population of young women who are typically considered “hard-to-house”. These are the young women Imouto was intended to provide safe housing and comprehensive support and services to: young women aged 16-24 who are homeless or otherwise living in risky situations, most of whom have lived in the DTES for many years; who have experienced violence and abuse; engage in survival sex work; are pregnant or who face additional barriers to finding and keeping housing, including struggles with drugs or alcohol, varying levels of mental wellness and racism.

In-reach services by Atira and the Program Partners as well as partnerships with other community organizations have been instrumental in ensuring that the young women are able to access the diversity of supports they need. While at Imouto, women were successful in developing their support network (including family, friends and social service providers), taking steps to improve their health and safety (e.g., through regular meals, more sleep, reductions in substance use and sex work, distancing themselves from abusive/exploitive men, use of harm reduction supplies and accessing health care), and to begin to plan for the future, including accessing education and finding employment and permanent housing outside of the Downtown Eastside. These impacts are described in more detail below.

PREVIOUS HOUSING SITUATION

The majority of women described unstable housing prior to coming to Imouto, such as couch surfing, living on the streets, staying at shelters or living with male partners in hotels or single room accommodations (SRAs). Approximately ten of the 36 young women described chronic homelessness longer than four years, usually from a very young age. One 22-year old woman reported being homeless for eight years, since the age of fourteen. Three women came to Imouto after attending detox. Four women left other supported housing programs that were not meeting their needs (e.g., programs for older women, curfew restrictions). Where young women were living before coming to Imouto is illustrated in the chart to the right.

Women living at Imouto have similar housing backgrounds to what is known from research in Vancouver and other cities – that homeless girls and young women often do not live on the street but in unstable, inappropriate or unsafe situations such as with older males, friends or families of friends, in drug houses or in unsupervised apartments with other youth.

(Erickson, King, & Young Women In Transit, 2007; Khandor & Mason, 2007; Lazarus, et al., 2011; State of Oregon Housing and Community Services, 2004).

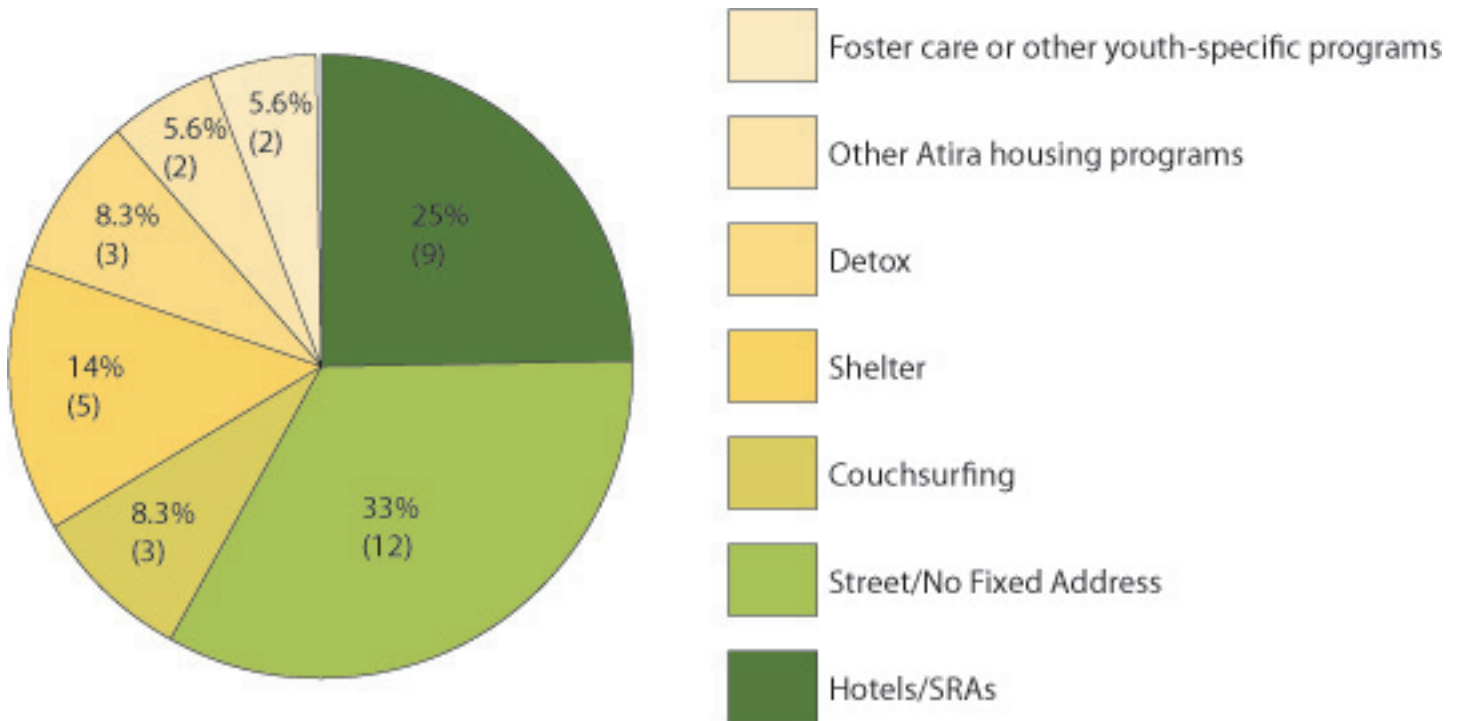


Figure 1: Previous housing situation of Imouto residents (N=36)

“Before Imouto I was homeless. And I was also crashing at my boyfriend’s hotel which is one of the scummiest hotels in the Downtown Eastside... Whenever me and him would get into a fight I would be homeless pretty much and I’d try and find someplace else to couch-hop.”

- Imouto resident

“[Before Imouto] I was couchsurfing...I was living at [a hotel] for a little while. Before that I was homeless for a long time, like, three years. I spent the majority of my time...without my own stable place to live. I mean, I’ve had places to live but they haven’t been suitable for me to stay at, so I’ve been out wandering all night or, you know, staying with friends. It wasn’t really the safest place to be.”

- Imouto resident

► BACKGROUND OF IMOUTO RESIDENTS

Since Imouto Housing for Young Women opened in September of 2011 until the beginning of September 2013, 36 young women have been housed.

- Over this two year period, the age range of residents was between 16 and 23 years old (see Table 1 for age distribution).
- All of the residents self-identify as women, except one youth who did not want to specify gender (but was born female).
- 24 out of the 36 women who moved into Imouto (66%) identified as having First Nations, Métis and/or Inuit ancestry. 11 (31%) young women identified as “Caucasian.”
- 14 of the 36 young women (39%) had Ministry of Child and Family Development (MCFD) involvement. Four have a history of being in foster care, four have/had youth agreements and six have children in care (one young woman was in foster care herself, and also had her child taken into care).
- Staff estimates that about three-quarters of the residents have been involved in survival sex work.

Table 1: Age Distribution of Imouto residents at time of program entry (N=36)

Age	Number of residents	Percentage of residents
16	1	2.7
17	1	2.7
18	2	5.6
19	7	19
20	5	14
21	11	31
22	3	8.3
23	6	17
24	0	0

IN-REACH SERVICES AND SUPPORTS

In-reach services – activities held on-site by Atira and the Program Partners – started shortly after the first resident moved in. Over the past two years, a number of activities and programs have been trialed, including biweekly movie night hosted by outreach workers, pizza night, Beauty Night, yoga, Aboriginal cultural programming (e.g., healing circle, powwow dancing), art workshops, Digital Storytelling workshops, a community kitchen, a weekly Nurse Practitioner clinic, weekly trips to the community centre and group counselling through Atira's Stopping the Violence Program.

Although the type and frequency of in-reach services has varied over the past two years and there have been changes in residents, approximately one-third to one-half of residents have tended to regularly participate in activities at Imouto. In general, most women do not appear ready for physical activities. When asked at house meetings and in individual interviews, women reported being happy with what was available. Several women who did not participate in house activities indicated that they were not interested in additional programming, but were pleased that the programming was available. In-reach activities have also resulted in residents making connections with other services (such as outreach or addictions counseling) offered by the partner organizations.

The most frequent in-reach services used have been Watari's case management and youth outreach, followed by movie night, VCH addictions counseling, Nexus' addictions counseling, recreation and outreach and the nurse practitioners. The young women expressed appreciation for the in-reach services they received.

"I've been connected with a D&A counsellor since I've been staying at Imouto which I didn't have before. And I met her cause of the movie nights they have."

- Imouto resident

"I actually think it's great that they have a bunch of stuff going on. Nexus comes on Friday mornings to take us to the gym, I've been doing that... the two [Nexus outreach workers] who bring us to the gym on Fridays, I've gotten to know them on a pretty good basis and now I can just call them up and go, 'hey, I have a doctor's appointment, can you guys drive me?' So, it's good."

- Imouto resident

"I didn't even know about Watari until I started staying at Imouto."

- Imouto resident

"[One] of the nurses... was awesome, she helped me a lot."

- Imouto resident

"I have been notified every time the nurse practitioners are there. Imouto's really good at letting us know what's going on... Imouto's pretty great, if I feel like I need something I just talk to the staff and they'll try their best to find somebody who can help me out with it."

- Imouto resident

"There's a lot of supports and services that Imouto connects all of us with and all of us have the option of taking it or not so I think it's really good."

- Imouto resident

Six of the 36 young women did not access any in-reach services but were already connected to services outside of Imouto when they moved in. Services outside of Imouto that residents utilized during their stay included those provided by Atira and her program partners (Enterprising Women Making Art, Stopping the Violence Counseling, Nexus' addiction counseling, Aboriginal Front Door, Covenant's housing outreach and Watari's youth outreach).

The young women also accessed services provided by a host of other community agencies, including: Insite, Urban Native Youth Association, DAMS' outreach, John Howard Society, Strathcona Mental Health, Family Services of Greater Vancouver's Directions outreach, Vancouver Police Department, Carnegie outreach, probation officers, WISH, Raincity outreach, MCFD and Vancouver Aboriginal Child and Family Services Society (VACFSS) social workers, Quest, physicians, Fir Square, the Gathering Place, Community Living BC, Ministry of Housing and Social Development, downtown court integrated social services, Native Health, trauma counseling, Mission Possible, Karma yoga studios, Heartwood, Three Bridges, Dialectical Behaviour Therapy group and counseling, La Boussole outreach, Native Education Centre and the Nisga'a Lisims government.

Several past residents at Imouto have reported that one of the significant changes for them since moving to Imouto has been increased awareness of available services and supports and of the choices available to them.

House Meetings

In June 2012, staff began holding weekly house meetings where women could share what is going well for them, make suggestions of how Imouto could be improved and resolve any conflicts. Weekly house meetings were suspended in May 2013 due to low turnout, possibly related to turnover in residents and seasonal changes in weather resulting in women spending more time outside the house. Staff are exploring renewing house meetings in Fall 2013 and other avenues of engaging residents. Residents are always welcome to make suggestions directly to staff or through a suggestion box.

FAMILY, RELATIONSHIPS AND SAFETY

Supporting the development of healthy relationships has been a key component of the program. Shortly after the program opened, a staff member commented that three of the first six residents had contacted their families of origin. Staff has also noticed over time that stable housing has allowed a number of young women to initiate contact with their families after long periods of disconnection. These relationships have evolved in different ways. In two cases, family members came from out-of-town to connect with women. Some women have given staff members their permission to provide their family members with updates on how they are doing when they call. Ten of the 29 young women who moved out during the two years covered by this evaluation (35%) had improved relationships with their families of origin attributable to staying at Imouto. Six of the 29 young women (21%) returned to live with their immediate or extended families.

Relationships have been supported and developed across multiple generations. While some women re-connected with their families of origin, other women requested support in building relationships with their children in care. Three of the six women who had children in care took steps, with the support and advocacy of staff, to re-connect with their children and work toward eventually having them back in their care. Two women who were previously homeless were motivated to seek housing as a precursor to re-connecting with their children in care. One woman's child (living in the care of her sister) was a huge motivator for her reducing her substance use. In addition, in the first two years of Imouto's operation, four women became pregnant and were supported in accessing health care, leaving an exploitive relationship, reducing substance use early in their pregnancies and in making decisions about the future. Two of those young women found supportive housing outside of the Downtown Eastside that is specifically for mothers. One young woman is at BC Women's Hospital & Health Centre Fir Square Combined Care

Unit and due to give birth in late September 2013; she has remained substance-free for the past month. These positive outcomes were supported by Imouto staff, outreach workers in partnering and other community organizations, and in-reach nurse practitioners.

Within the house, relationships between women have been varied. Many women know each other from living on the streets. Some women have developed friendships and provide each other with practical and emotional support. As the number of women in the house grew over the first year, there were more opportunities for peer support techniques. One staff reported that she observed many more instances of young women saying to each other, "Hey, do you think you could show me how to do this?" and residents taking care of each other by providing encouragement and problem-solving strategies. Two young residents worked together, with the support of a staff member, to plan and paint a mural on the second floor which was a very positive experience in building their relationship and a sense of community in the house (see p.41 for a picture of the mural).

Other residents keep to themselves or actively discourage the building of relationships, which staff attributes to "street survival strategies". Not all of the relationships in the house have been positive, and conflicts have arisen between residents. This is normal in a communal living situation, especially given the age and varying degrees of mental wellness of the residents. Staff have received extra support and training in conflict resolution and de-escalation techniques. In some situations, a respite stay by one or more residents at other community services or a review of program/resident agreements have been explored as options. Staff is continuing to find a balance between ensuring safety of all residents and staff and maintaining a low-barrier, anti-oppressive, harm reduction housing environment.

"Because [my boyfriend]...was pretty psycho when he was angry...there'd be huge tantrums and physical stuff I didn't want to deal with, so I wanted to go to a place where if I wanted to get away from him he could not get me. Couch-hopping at other friends' places was no fun because he could just come and kick down the door at some SRO and that wasn't safe. But at Imouto, I love it because they [the staff] get right on it. He has pulled that shit a few times where he's outside and yelling and trying to get inside and see me and whoever was working was like 'No, you can't come in here, she does not want to see you.'"

- Imouto resident

"I feel very safe here"

- Imouto resident

"Three things that have changed for me since coming to Imouto: 1. Schooling 2. No drug use 3. Closer to family."

- Imouto resident

"I'm not on the streets anymore and I'm not working [in the sex trade] as much."

- Imouto resident

The young women report positive relationships with many of the staff. Efforts are taken in hiring staff from diverse backgrounds and this seems successful as women report making connections with different support workers. Staff remark on the openness of most of the residents in sharing details about their lives, including sex work and drug use. They report young women asking for assistance, information, and accompaniment to appointments or meetings. Staff reports that the young women seem to need, and respond very well to, validation. The young women have been given opportunities to teach staff new skills, such as making bannock, which have been very positive experiences. Staff sees this validation and skill sharing valuable in helping the young women with confidence building and encouraging them towards their next steps. They suggest that enacting the feminist principle of "young women-centred care", such that they support the young women in their own lives without telling them what to do, has been important in establishing good relationships.

Staff has observed changes in women's relationships with men. Women reportedly ask staff for support and information in dealing with often exploitive and/or abusive relationships. Young women describe how living at Imouto has given them more control over their relationships and allowed them the space to think about ending unhealthy relationships. They describe Imouto as a safe place to escape from the streets and men following them, as well as the benefits of having their own home following a fight with a boyfriend. They report feeling supported by staff who deny entrance to certain individuals at their request and staffs' readiness to call police, if necessary.

Other young women comment on how glad they are of the locked door, cameras and secure windows in increasing their safety. Other young women report changes in their relationships with friends outside of the house, for some a reflection of getting on methadone and no longer using street drugs.

HEALTH AND NUTRITION

Since April 2012, lunches have been delivered daily by Save-on-Meats and Imouto continues to receive food donations. Staff supports women in grocery shopping, accessing services such as the Quest Food Exchange, making use of donated food items and developing their cooking skills. One young woman went grocery shopping on her own for the first time ever while living at Imouto. Staff has commented on how the physical appearance of many young women changes dramatically after moving to Imouto. Many residents appear to gain a healthy amount of weight, have improved hygiene and be better rested after moving into Imouto. Some fresh ingredients – such as kale, radishes, basil and sunflowers – are found in the garden next to Imouto, maintained by residents, staff and community volunteers.

The food program appears to have had more impact than merely nourishment. Staff report that food and activity in the kitchen have been important in bringing women together and in developing a sense of community in the house. They have observed residents assisting other residents with preparing food. Several residents who moved in later in the first year have strong skills in the kitchen and have prepared meals for the entire house. Staff has responded to requests such as collecting recipes and cooking bannock on a regular basis. For some women, having food available in the house has meant they do not have to leave the house on a daily basis and can focus on taking care of themselves in other ways. Several young women have suggested that expanding the food program, and having more healthy food available, would be even more beneficial.

Young women are often facing significant health issues when they move into Imouto. They report a diverse array of physical and mental health issues, including infections, abscesses, anorexia, self-harm, depression, anxiety, Post Traumatic Stress Disorder (PTSD), suicidal ideation, intestinal problems, heart problems, sexually transmitted infections and blood borne illnesses. Many young women are able to address long-standing or current health issues while living at Imouto. Women are connected with the

nurse practitioner clinic onsite or supported in visiting a community youth clinic, addictions treatment or to make doctor's appointments for specialized care. In spring 2013, mental health services in the form of a monthly on-site visit from a psychiatrist and outreach from a mental health worker began. This has resulted in several residents beginning to address their mental health concerns. One woman had major surgery shortly after moving in for a life-threatening condition; her support workers reported that stable housing was key in accessing this health care.

"Right now my fridge is stocked full of food. Now that I have the option of putting food in the fridge and being able to keep it... I'm eating better."

- Imouto resident

"It's kind of nice to be able to stay home and eat."

- Imouto resident

"[Since moving into Imouto] my health's gotten better. I've gained a lot of weight. I've used [substances] less and less. Having somewhere to sleep [has helped me in this]. I'm sick of being a struggling drug addict... This time it's different. Every time I look around outside, I'm like...'this is my world? What is this?' It's like I'm looking at it through new eyes."

- Imouto resident

Some of the young women with serious health conditions do not want to see a health-care provider due to previous bad experiences with health care. One young woman referred to this as “white coat phobia”. The nurse practitioners (NPs) on-site recognize how long it might take to build up relationships of trust with the young women. One of the NPs reported that she is “committed to being a gentle presence” in the house and to making herself available if and when the young women are ready to see her.

“She [the NP] is helpful, she helped me when...I almost died.”

- Imouto resident

“When you’re homeless, it’s pretty bad - body lice and bedbugs and things like that. They’re terrible. Since I moved into Imouto I haven’t had a problem.”

- Imouto resident

SUBSTANCE USE AND HARM REDUCTION

All 36 residents who moved in during Imouto's first two years reported substance use. Alcohol and heroin were the most common "drugs of choice." Other substances used include crack, speed, cocaine, crystal meth and marijuana. Approximately one-third to one-half of the young women accessed addiction-specific services while at Imouto. Staff observed many women reduced their substance use while living at Imouto, as well as the harms and negative health impacts that can accompany problematic use of alcohol and other drugs. Recovery from problematic substance use has included relapses for some of the young women.

These reductions in substance use can be attributed to several factors. For some women, having stable housing has meant they have a safe place to sleep after consuming alcohol or other drugs and they will stay at the house for a few days before returning to the streets. Other women have taken steps to addressing their substance use such as changing who they spend time with, creating distance from a boyfriend who began to use more, gaining insight into why they were using and connecting with an addictions counsellor. They credit many of these changes to living at Imouto.

In several cases, women reported going to detox or a residential addictions treatment program and then returning to Imouto as they did not feel ready to take the next step in their treatment or did not feel ready for a certain program. This has provided women with a safety net where they are able to access addictions treatment without returning to shelters or unstable housing if they are not successful. Residents express gratitude that Imouto is not a treatment program, that it feels more like a home, but with non-judgmental support around reducing their substance use. Staff report suggesting and helping young women engage in activities as alternatives to substance use.

Young women also reported appreciation that harm reduction supplies – clean needles and condoms – were available in the house, but discreetly so. Staff report that these items require regular replenishing.

"I hardly drink anymore."

- Imouto resident

"I think I've got more control of my addictions staying at Imouto. I'm definitely sleeping more and showering more... and doing my laundry more."

- Imouto resident

"I used to drink a bottle a day. Now I'm drinking a bottle every few days and eating more."

- Imouto resident

"I went in [to detox] and got a methadone prescription. It's amazing... It's making a huge difference to my health and well-being all around."

- Imouto resident

"I have more control over my addictions than before. Before I didn't because it was always around me and I had no escape from it, wherever I went it was in my face. So now with staying at Imouto I have the option of getting away from it... I like it a lot better now that I have more control, whereas before it felt like I was spiraling out of control."

- Imouto resident

"Before they [staff at detox] told me about Imouto, I'd actually tried to get into a bunch of other women's transition houses... As soon as I told them I was in detox, they were 'Oh, well, there's nothing we can do for you, sorry, goodbye.'... When I called Imouto the first time, I talked to [a staff member] and she was completely nice. I told her I was in detox and she said 'Oh, that's no problem, you stay your entire time at detox and when you're ready to come out, come down and you can meet us and fill out the intent to rent [form] and you can move in immediately.' I maybe called 15 places and, of all of them, Imouto was the only one that was helpful."

- Imouto resident

At the end of February 2013, a resident died while at Imouto due to a drug overdose. This event had an enormous impact on all residents and staff. The Imouto staff member on-site was alerted by another resident that a young woman was struggling after using unknown substances. The staff administered CPR and called 911. Following the resident's death, debriefing with staff and residents was conducted by staff from a program partner. At an organizational level, management explored obtaining naloxone overdose kits that had recently been piloted in a few community organizations. A full investigation was conducted and the findings shared with involved parties.

For two young women, this resident's death spurred them to make decisions about their own futures. One young woman entered detox the next day and then transitioned to a four-month residential treatment program; after completing the program, she is now residing outside the Downtown Eastside in a supported housing program that requires abstinence. Another young woman, who had made contact with her family in Ontario since coming to Imouto, contacted her parents the day following the resident's death. Her parents drove to BC and returned with her to Ontario with plans to receive addictions treatment.

"[One young woman] reported difficulties finding alternate housing as she found a lot of places judgmental about her substance use. She reported previously going to detox and then moving into a zero-tolerance housing program. One night she drank beer with friends and was kicked out."

- Atira staff member

INCOME, EMPLOYMENT, EDUCATION AND CREATIVITY

Almost all of the young women who have moved into Imouto have received income assistance or disability support. Those who were not were assisted by staff to complete the necessary paperwork (including getting identification) in order to access these benefits. A few women had part-time employment when they moved in and many more have expressed interest in pursuing training or employment. Living at Imouto provided many women with the stability they needed to explore options and work towards goals related to education and employment.

While not all of these ventures have been immediately successful, women report that they learned through the experience about what they need and are ready for. One woman commented how Imouto was “calmer” than where she was previously living and that she was able to sleep and wake up early to attend a skills training program. She reported asking staff for, and receiving, assistance in waking up and keeping appointments. Other young women secured part-time employment while living at Imouto. Several of the young women learned to budget while living at Imouto. One young woman worked hard to budget and save the funds needed to visit her family over the holidays. Several young women attended classes while living at Imouto and two left Imouto to attend school.

Art has been important to many of the young women living at Imouto. In addition to mural painting, mosaic making and other art projects taken on within the house, several young women have accessed a drop-in art program held downtown for homeless and ‘at-risk’ youth; other young women have connected with Atira’s ‘Enterprising Women Making Art’ and ‘Digital Storytelling’ programs. One young woman’s art was displayed in a popular coffee shop in East Vancouver.

“My life is more structured now. Before [Imouto] I would live very spontaneously, like whatever the day threw at me, but now I’m able to have appointments with people and be able to keep them. Like see my A&D counselor on a Monday and then Tuesday have movie night, then Friday mornings go to the gym. It’s more structured, whereas before I didn’t have that. It was just more, ‘I don’t know what I’m going to do today, I’ll find out when it happens’. I think it’s given me the ability to be more responsible because now I feel more stable.”

- Imouto resident

“I might do the [work skills training program]. Five hours three times a week. You get 15 hours. They pay you bi-weekly, same as a normal person. It’s going to be good. It’s going to help me a lot.”

- Imouto resident

TRANSITIONS AND CHANGES IN HOUSING STATUS

As detailed previously, all of the young women came to Imouto from unsafe or inappropriate housing situations. The young women currently residing in the house report increased safety and being supported to make significant changes in their lives with respect to their housing situation. For many of the residents, it is the first place they have felt at home for many years.

28 of the 36 young women who have been housed at Imouto during the first two years have moved on after an average stay of approximately six months. For women who have moved out (N=28), the length of stay has ranged from one month to seventeen months.

Twenty-four of the twenty-eight young women who moved out of Imouto in the first two years (%) transitioned to other housing options, of which fourteen were outside of the Downtown Eastside. The most frequent place young women went upon leaving Imouto was going to live with family (5 out of 28). The majority of women transitioned to a supportive housing program: supported mental health/concurrent disorders housing (14%), housing or program for pregnant women (11.5%), Transitioning to Independence Program (Watari) (3.6%), and Community Living BC housing (3.6%). In addition, two women (7.1%) attended a residential addictions treatment program. Four women (14%) moved into a different Atira housing program that was more suitable for their needs.

The pathway to transition from Imouto was not always smooth. Three young women tried other housing options, including treatment, and returned to Imouto because the other options were not a good fit. They expressed gratitude that their room at Imouto was held for them as they tested other options. Four young women returned to the street or with no clear transition plan and one woman left Imouto and attended a local shelter. The reasons for these departures varied. In some cases, women were struggling with their mental health and addiction concerns and were not engaging in available supports at Imouto. In a few circumstances, women chose to leave Imouto and live with a male partner.

Table 2: Length of stay at Imouto, current and past residents, September 2011- September 2013

Length of Stay	Current Residents (N=7)	Past Residents (N=28)
≤ 1 month	1	2
≤ 3 months	1	8
≤ 6 months	4	6
≤ 9 months	1	5
More than 9 months	0	7

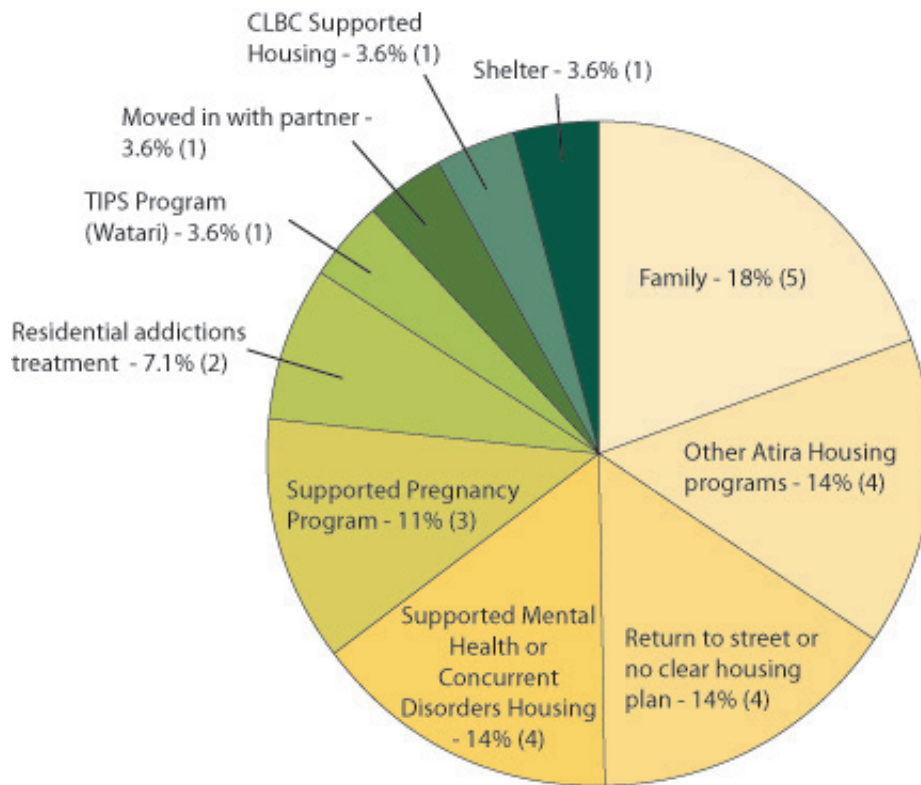


Figure 2: Imouto residents: Transitions at Program End (N=28)

"I like having my own place to go home to. Not having to rely on someone else being home for me to get into it."

- Imouto resident

"I like staying at Imouto."

- Imouto resident

"My room...it's my haven."

- Imouto resident

"[Before Imouto] I was struggling with homelessness and moving into SROs and then hating the SRO and then would rather be homeless. It was very chaotic."

- Imouto resident

"[I liked] having staff there to listen and also help make positive decisions/changes."

- Imouto resident

LONG-TERM HOUSING OUTCOMES

Whenever possible, in collaboration with program partners, efforts have made to follow young women after they leave Imouto so that long-term outcomes can be established at later stages of the evaluation. As of August 2013, the housing status of 24 out of 29 former residents was known.

Housing status one-year after moving out of Imouto can be determined for 9 out of 11 residents (those who moved out in Year 1, between October 2011 and August 2012).

For five young women, their housing status has been stable, i.e., they are continuing to live in the same housing situation that they transitioned to following their stay at Imouto:

- Three young women moved in with family
- One young woman moved into another Atira housing program
- One young woman moved into housing supported by the Watari Transitioning to Independence program

Four young women have experienced one or more changes in their housing situation since leaving Imouto:

- One young woman moved into a supportive pregnancy/early parenting housing program; she is now living in a BC Housing building
- One left Imouto to move in with her boyfriend; she is now living in an SRO in the Downtown Eastside
- One moved into another Atira housing program; she is now homeless
- One young woman moved into a supportive pregnancy/early parenting housing program; she remained there for several months before experiencing a relapse due to substance use concerns and became homeless. She reconnected with an outreach worker and moved into Imouto in summer 2013.

Due to the small sample of residents at one-year post-Imouto, these are preliminary findings only.

WOMEN'S STORIES

Here are the stories of three young women to illustrate changes resulting from living at Imouto. (Names have been changed).

Jennifer

Jen is a young aboriginal woman, only 16 years old when she moved into Imouto. She left her home in another province several years ago to get away from an abusive father and had been sleeping in parks and hotels in the downtown eastside and using injection drugs. Through Insite, the safe injection site, and Watari Youth Outreach, she heard about Imouto and came to live there. Her health improved dramatically due to sleep and food, and she went to detox. She started to think about leaving her boyfriend, with whom she had an unhealthy relationship. After being at Imouto for less than a month, she connected with her mom, who was incredibly relieved and overjoyed to hear that she was safe. Her aunt and brother came to Vancouver to visit her and she decided to return home with them. More than two years later, she is still living with family and doing well.

Harmony

Harmony, a 21 year-old Métis woman, called Imouto from detox to self-refer. She had been living on the streets with a boyfriend who had “anger issues” and was not supportive of her desire to stop using substances and she needed to be able to take a break from him. She connected well with staff and was very determined during her seven months in the house to make significant changes in her life. She had a great deal of insight into her substance use and was not too entrenched in her addiction, although she felt that her substance use was on the verge of spiraling out of control. Living at Imouto helped her to gain control over her addiction and gave her a sense of stability and security. She used her time in the residence to pursue information, resources, services, and alternate housing she learned about through Atira and in-reach staff. She felt Imouto was a supportive place for her to stay focused on what was important to her. She has now rented an apartment with a roommate in another city in the Lower Mainland and enrolled in a community college.

Shereen

Shereen has been homeless in the Downtown Eastside since fleeing her home province at the age of 13. She had a brutally abusive childhood. Her mom struggled with mental ill health and she spent part of her childhood in foster care. She was already using some drugs when she arrived in Vancouver and quickly became entrenched in the drug scene and sex trade, both of which became her life. She is now “a 19 year old who’s seen way too much for her age” according to one of her outreach workers. She was homeless almost the entire six years she spent in the DTES, mostly sleeping with dates, sometimes outside, sometimes couchsurfing, but never with permanent housing. She stayed in one SRA (single room accommodation) in all those years, but not for long. Every day she faced huge risks to her safety and well-being. *(continued on next page)*

Shereen (cont'd)

Outreach workers in the DTES found her to be one of the hardest young people to connect with they had ever met. She had lots of “attachment issues” and was extremely difficult to build a relationship with. It took outreach workers years to develop rapport and trust with her. They tried to get her connected to MCFD Youth Services but the agency was only able to provide her with clothing and food vouchers, not housing, as she was unable to adhere to their expectations of staying “clean” and not working in the sex trade.

When Imouto opened, outreach workers actively encouraged her to consider it as a potential place to live. It took almost eight months before she finally agreed to come check it out after spending a night in a shelter. Imouto accepted her immediately despite her not being on income assistance (and therefore unable to pay rent) and advocated for her to receive income assistance when she was ready to complete the paperwork. The smallest steps have been a struggle, such as getting ID and returning her income assistance stubs in order to pay her rent. Everything takes time. She has major health issues, lots of infections and abscesses from being so entrenched in her addiction and sex work. She spends most nights at home now. Staff at Atira and the program partners see these small steps as “miracles.” That she is safely housed for the first time in her life, “rather than in a ditch or an alley,” is an “immense success” from their perspective. They aim to one day get her to detox and have hope for her now that she is living at Imouto.

PROGRAM DEVELOPMENT

- ▶ STAFFING MODEL
- ▶ FOOD PROGRAM
- ▶ IN-REACH SERVICES
- ▶ GUEST POLICY
- ▶ REFERRAL AND INTAKE
- ▶ PROGRAM AGREEMENTS AND ISSUE
RESOLUTION
- ▶ CHANGES TO THE EVALUATION PLAN
- ▶ ALTERNATE HOUSING PROGRAMS
- ▶ MEDIA ATTENTION
- ▶ INTERGENERATIONAL MENTORSHIP PROGRAM

STAFFING MODEL

“The majority of the staff are pretty chilling. They have their own perspective on stuff... you get to talk to people for who they are. Not like “I am staff, I’m here, working here in a residence. [It’s] ‘you’re a person, I’m a person.’ “

- Imouto resident

“I like the fact that everything’s included....food, laundry, ‘added help’ if you need help.”

- Imouto resident

“The practicum student set [an employment program] up for me, she’s really neat... She understands, she doesn’t judge. A lot of people that live outside of the DTES and have grown up in more well-to-do families are really judgmental of girls [living in the DTES] when they first do a practicum. But she jumped right into activities with us; she’s really nice and helpful.”

- Imouto resident

In April 2012, Imouto shifted from a “house mothering” model with one full-time and one part-time House Coordinator (both residing at Imouto) to 24/7 support for the young women provided by one Program Manager (not living on site) plus several additional support workers. Shortly after Imouto opened, it became evident that many young women slept during the day and were more awake and active in the evening and at night. A night-time support worker was hired in early December 2011 to provide support during the evenings and at night-time so that the on-site House Coordinator could have respite. With additional funding from the Homelessness Partnering Strategy through Human Resources and Skills Development Canada, a complete shift to a 24/7 staffing model by a program manager and a team of support workers took place.

Imouto’s program manager and support workers describe providing a breadth of supports including: weekly check-ins, helping women find information (e.g., a phone number for Daytox), helping women to access community voicemail or to get ID, cooking and cleaning, resolving conflict, managing health issues (e.g., reminding women to take their meds, checking on women who have been using substances, and managing emergencies), coordinating appointments, providing emotional support, helping women fill out applications, printing safety plans requested by women, waking women up for appointments, monitoring guests and household activities.

Since the house opened in September 2011, there have also been almost a dozen volunteers and practicum students supporting programming at the house, including doing cooking and crafts and providing support and advocacy. The young women expressed appreciation for this additional support, and that it is being provided based on the principles underlying all of Imouto’s services.

FOOD PROGRAM

Within the first few weeks of operation, the development of a food program was identified as a priority. Initially, it was believed that women would be responsible for purchasing and preparing their own food. All rooms in the building have a sink and small refrigerator and women have access to a communal kitchen. Staff was prepared to support women in developing their cooking skills, if necessary, and to aid them in accessing low-cost groceries or in identifying organizations in the community that provided free meals on an ongoing basis.

Staff noticed in the first three months that many women followed a pattern after moving in. Women would often sleep for several days, shower and do laundry. After this, food would become a priority. For the initial group of residents, cooking and grocery shopping were challenges as many of them struggled with limited finances or budgeting over the course of a month and were working to address other urgent concerns. In response, staff began to make connections with other community organizations and to seek donations of food items. Funding was secured four months after the program opened for daily hot lunches.

At the weekly house meetings and in individual interviews, all women have emphasized that healthy food is important to them and requested that Imouto continue to develop its food program. Recommendations for improving the food program at Imouto have included: greater variety in lunches, more fruits and vegetables, ongoing availability of milk and other dairy products and having the kitchen stocked with “basics” like salt and spices, pasta, soups and cooking oil. While many women reported feeling supported in developing their cooking skills and grocery shopping, other women report difficulties with budgeting for food over the course of the month and/or do not feel ready to address this particular life skill area. Women indicated that they appreciate the donations available, but that this means that many ‘basics’ are unavailable consistently and that donations tend to be non-perishable rather than fresh items.

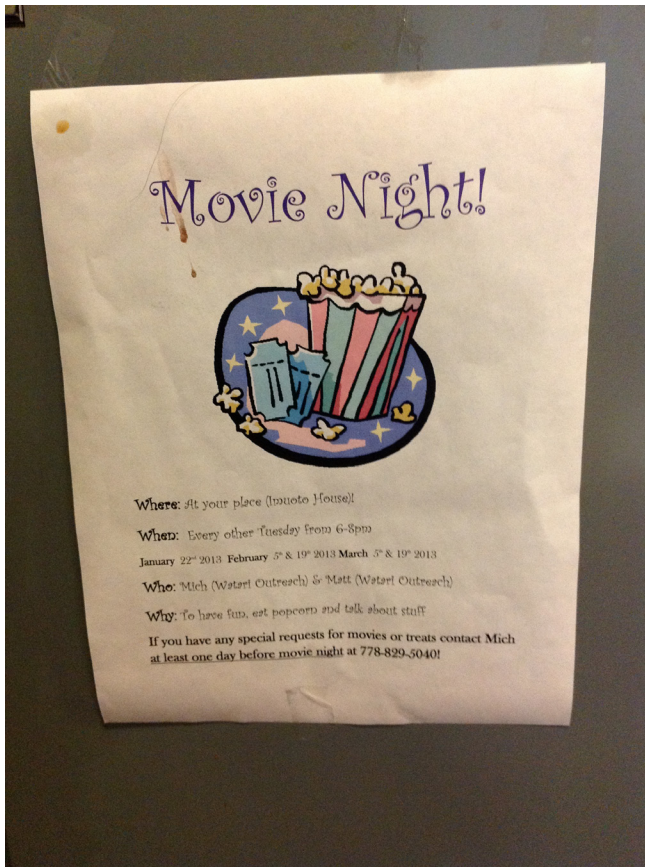
The food program currently consists of daily hot lunches and various house meals (e.g., Thanksgiving and Christmas dinner, Sunday dinners, pancake breakfasts, soup and bannock lunches). As well, donated food items are available for young women to supplement their own provisions.



The photo above is from an article in the Toronto Star, “Homelessness, childhood trauma, put youth at risk for drug use, HIV and hep C, studies find,” published on December 26, 2012. Gerri Tootoosis, Imouto program manager, prepares Christmas dinner for residents.



IN-REACH SERVICES



“Whenever there’s stuff going on there, I’m like, ‘yeah, I’m down, I’m down’ but the moment it comes time to show up, [other residents and I] all chicken out and run away. Sometimes you just don’t feel like doing community things... don’t want to be around other people.”

- Imouto resident

Over the past two years, a number of activities and programs have been trialed including:

- Biiweekly movie night hosted by outreach workers
- Pizza night
- Beauty night
- Yoga
- Aboriginal cultural programming (e.g., healing circle, pow wow dancing)
- Art workshops
- Digital storytelling workshops
- A community kitchen
- A weekly nurse practitioner clinic
- Weekly trips to the community centre
- Group counselling through the Stopping the Violence program

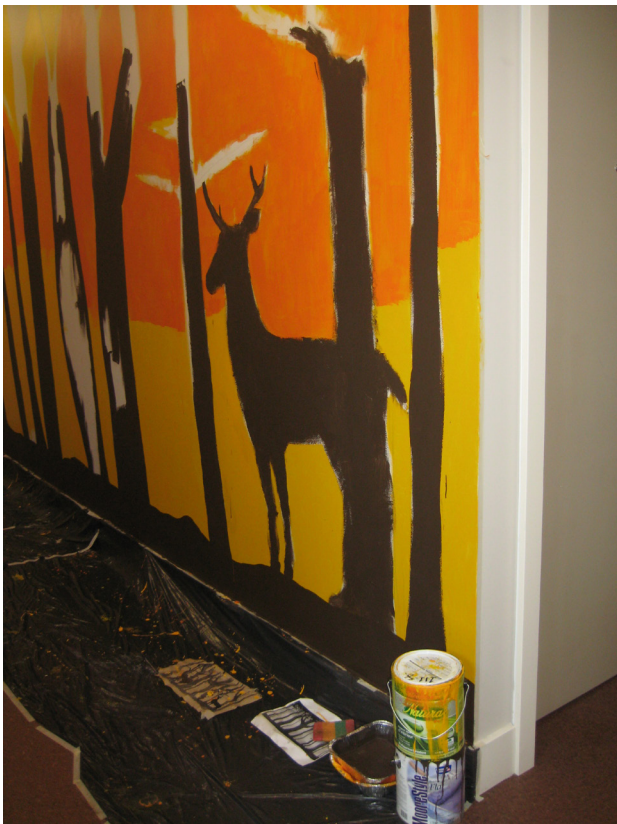
The most successful in-reach services have been programs that are consistently offered by the same staff. Gradual relationship building has been key to engagement with young women. In the first few months it became clear that programming needed to be offered in the late afternoons/early evenings as many women sleep during the day. Activities that have involved food have tended to be successful (food as part of community building); physical activities such as yoga and aikido have received the lowest turnout, perhaps reflecting that most women are not ready for physical activities at the current stage of life.

Although the type and frequency of in-reach services has varied over the past two years and there have been changes in residents, approximately 1/3 to 1/2 of residents have tended to participate in activities at Imouto. Staff has indicated they will continue to trial new programming in response to the needs of current residents. (For example, a survey of seven residents in August 2013 by Watari outreach workers indicated that 5/7 young women were interested in re-establishing ‘Beauty Night.’) However, it may be that for a significant proportion of women, program services and activities may be less important than the significance of having stable housing. For these women, knowing about the activities, having a choice to what extent they would like to participate in them and the opportunity to live independently may be more important factors.

GUEST POLICY

Initially, no visitors were allowed in Imouto, except program partner in-reach workers and residents' mothers (on a case-by-case basis). The policy was designed with young women's safety at the forefront. Within four to five months of being open, it became apparent that the policy was not addressing young women's isolation and thus compelling them to leave the house to find social interaction. Thus, to reduce isolation and to encourage residents to stay home more, daytime visiting hours were piloted whereby young women were able to have guests (screened by staff) in common areas. This proved very successful and was extended to evening visiting hours as well, which resulted in young women staying home more often in the evening/night-time as well.

The current guest policy appears to be a successful balance between women's safety, right to privacy and personal space, providing opportunities for women to develop relationships, and helping Imouto to feel like 'home.' However, an informal survey in May 2013 indicated that for five women, not being able to have overnight guests or male partners at Imouto was a reason for not staying at Imouto as much as they otherwise would or was a reason for considering moving out (e.g., one woman said she was considering living in the park with her partner).



This mural on the second floor was designed and painted by two residents and a staff member in Spring 2012.

REFERRAL AND INTAKE

Table 3 - Source of Referrals (* indicates that agency is a Program Partner)

Source of Referral	Number of Referrals
Watari *	7
Atira * (via other housing programs or housing outreach worker)	5
Carnegie	4
Insite	3
Urban Native Youth Association (UNYA)	3
Family Services of Greater Vancouver (including detox services)	3
Social worker	2
Mental health	2
Self-referral	2
Aboriginal Front Door*	1
Nexus*	1
La Boussole	1
Vancouver Police Department	1

“I just called and then came over to see the room that afternoon and signed the intent-to-rent form.”

- Imouto resident

Referrals to Imouto came from a wide range of sources, including shelters and other housing programs (primarily single room accommodation (SRA) hotels in the neighborhood), youth-serving organizations, mental health and addictions outreach workers and counsellors and organizations providing Aboriginal-specific cultural programming and services.

Over one-third (39%) of referrals came from Atira’s other programs or those of Imouto’s partner agencies. Women also contacted Imouto directly after hearing about the program through a variety of sources. Referral sources are listed in Table 3.

In the first two years, the maximum number of residents reached was 15. As Imouto has capacity for 17 residents, there was no waitlist at anytime during the two year period. Overall, women interviewed as part of the evaluation study reported no difficulties with the intake process and moving into Imouto. Two women commented on how they appreciated the flexibility of the program with respect to move-in dates. If a room was available immediately, women were able to move-in prior to the first of the month. Women also were able to move-in even if paperwork would not be finalized for a couple of days.

In 2013, staff began setting aside one afternoon a week for less urgent referrals. Service providers working with young women in the community were invited to drop by, take a tour of Imouto and to discuss the overall program. This approach was taken so that women who were not quite ready to take the next step were given an opportunity to see Imouto and meet staff without having to make a commitment and to also help staff determine if women were a good fit for the Imouto program.

PROGRAM AGREEMENTS AND ISSUE RESOLUTION

Over the course of the first year, the intake process evolved to include asking residents to sign a housing agreement with specific information about the Imouto program, resident rights and obligations and “good neighbour” expectations. In spite of these agreements, program staff has needed to address a range of issues and concerns:

- Conflict between residents (ranging from small incidents related to communal living to incidents requiring police involvement)
- Conflict between staff and residents
- Lack of engagement with staff and the overall program
- Rapid and critical deterioration of overall health due to mental illness and/or addictions, beyond staff’s ability to support residents (e.g., situations where hospitalization may need to be considered)

Many of these issues required staff to develop solutions on a case-by-case basis and in consultation with the Imouto program manager, Watari case manager, and Atira management. In spring 2013, several members of Imouto’s advisory committee decided to meet and discuss these “lessons learned” so that a more systematic approach to similar situations in the future could be developed. Some of the issues that this sub-committee is addressing are balancing resident and staff safety, the necessity of evictions in certain circumstances while still remaining a low-barrier program, and supporting women who may not be thriving over the long-term.

CHANGES TO THE EVALUATION PLAN

In the initial evaluation plan, the evaluation findings were to be analyzed and presented to Atira and Imouto's program partners on an annual basis to influence changes to the program model. It became apparent early on that it would be beneficial for the evaluation findings to influence program model development, and vice versa, on a more frequent basis. Monthly reviews, analysis, and meetings were established between the external evaluators and program staff, managers, partners and Advisory Committee.

The initial evaluation plan also included the use of participatory approaches with residents in the design and implementation of the evaluation (e.g., regular house meetings, feedback on interview questions and the formation of a young women's evaluation advisory group). However, it was initially difficult to engage young women in evaluation activities as most were working to address basic and urgent needs. Individual interviews appeared to be the best strategy for engaging residents in the early stages of the evaluation. In the interviews with young women and through ongoing consultation with program staff, strategies for a more peer-driven and youth-friendly evaluation process are being explored. Weekly house meetings were held regularly for almost a year with low but consistent turnout. Many women have also expressed interest in art-making and digital-storytelling workshops.

Initial plans to use paper-based self-assessment and goal-setting tools with the young women following intake were quickly changed to accommodate their preferred mode of communication (talking) in respect of 'young women-centred' principles. Paperwork was a noticeable barrier to building relationships with young women at the beginning of their stay at Imouto. Regular meetings between the external evaluator(s) and the young women's case manager and Imouto staff to enquire about goals and successes from their perspective were devised as an additional evaluation tool to capture outcomes.

Young women had the opportunity to provide input into how the program is working and what could improve, as well as the impact living at Imouto is having on their lives, through house meetings, written feedback surveys, and individual interviews with the evaluator(s).

"We were pretty idealistic early on in terms of how youth would choose to be involved, like the notion that the young women would join an evaluation advisory committee which, despite our best efforts, never happened. It's just where youth are at in terms of their lives, sitting and advising an evaluation isn't something they seem to want much to do with... which is not to say youth are not involved in the evaluation, they just had different ways of being involved."

- Janice Abbott, Atira's CEO



Creative activities appear to be one possible avenue for engaging women in future evaluations.

ALTERNATE HOUSING PROGRAMS

Since Imouto opened in September 2011, there have been changes in service provision in the Downtown Eastside as well as new supportive housing programs outside the community. The opening of a new supportive housing program for Aboriginal women and their infants in East Vancouver in December 2012 means that there are now more housing options for pregnant women and young mothers; two residents from Imouto moved to this new program. A new supportive mental health program for youth opened in Summer 2013 and three residents from Imouto moved into this new program.

Four of the twenty-nine residents who moved out of Imouto re-located to other Atira housing programs that were more appropriate for their needs. Five women were referred to Imouto or learned about Imouto through the Atira housing outreach worker or another Atira program. It appears that, for many women, Imouto is serving as a 'stepping stone' from homelessness or unstable housing to an appropriate supportive housing program.

MEDIA ATTENTION

"I think that having a physical presence for youth in the community has brought them a lens and [made visible] the idea that the community has young people in it, that they are physically here, that they [deserve to] be allowed to access services while they are here as opposed to having to leave the community, has been a real benefit."

- Advisory Committee member

"There was lots of resistance in the beginning. It would be good for [those people] to hear this story and hear their response to it. Imouto is not a bunch of 13 years old thrown into a haven for johns driving around the corner. There have been underagers that come here but only temporarily and it's more about making sure they're being taken care of by the appropriate folks. It's not the extreme stuff [Imouto's detractors] thought they'd be seeing. The struggles that have occurred are just in figuring out the program, not what those people thought it would be."

- Advisory Committee member

Prior to the opening of Imouto and during its initial first two years, many community agencies in the Downtown Eastside have expressed appreciation that there a low barrier housing program that they can refer young women to. The 'Hard Target' table - a group that includes youth outreach workers, the youth specific police car, social workers, probation officers, and others - gets together once a week to talk confidentially about high risk youth under 22, and develop safety plans to stop further entrenchment in the DTES. Members of Hard Target have expressed thankfulness that young women are safe at Imouto, that they can liaise with Imouto staff who respect their expertise, and that they can continue to support young women while they are staying at Imouto.

However, shortly after Imouto opened in September 2011, several individuals in the community, including Aboriginal youth outreach workers, women's advocates, and a former cop expressed disapproval of the Imouto housing program. They opposed the program due to a concern that placing "high-risk" young women in a neighborhood with open drug use, sex work and other crime would put them at further risk and entrench them in the neighborhood rather than helping them leave the neighborhood. These discussions garnered national media coverage and outspoken disapproval in certain community circles.

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Imouto housing project meant for women already in Downtown Eastside

BY ALLEN GARR, CONTRIBUTING WRITER SEPTEMBER 29, 2011 11:18 AM

Michelle Fortin knew immediately that the very idea of housing at-risk young women in the Downtown Eastside would, to use her word, be "incendiary." But that didn't stop the executive director of Watari Youth Community and Family Services from approaching Janice Abbott with the idea. Abbott runs Atira, the organization that, among other things, builds and operates non-profit housing for women in that neighbourhood. Fortin wanted Abbott to find a space for those hard-to-house young women and Fortin's staff would oversee their care.

STORY TOOLS

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Over the past two years, none of the outcomes that Imouto's opponents predicted have occurred. Imouto has provided a stepping stone for many women to leave the neighborhood. For women who are not ready to leave the neighborhood, they have been supported by having a stable and safe environment.

However, the negative media around the program did result in one of the government program partners distancing themselves from ongoing collaboration. As well, a major funder decided not to renew their financial support due to pressure from other community members. Several of Imouto's program partners have expressed concerns about young women who are not being served as a result of this negative political attention, and who thus may be at more risk, because of the challenges it has created.

"In terms of the effects the project has had on the community...there were a lot of expectations around failure and that has not happened."

- Advisory Committee member



In May 2013, Imouto was awarded first place in housing in the Women Transforming Cities group. The Women Transforming Cities Best Practice 2013 Awards recognize outstanding achievement in designing cities for the advancement of women that leads to transformation of cities. See <http://womentransformingcities.org>

INTERGENERATIONAL MENTORSHIP PROGRAM

In late 2012, Atira Women's Resource Society began building a 12-unit Recycled Shipping Container Housing project immediately to the east of Imouto, located at 500 Alexander Street. This project, Canada's first social housing built from shipping containers, resulted in 12 self-contained 320 sq. ft living units, each with a private bathroom, kitchen, and in-suite laundry. Floor-to ceiling windows are at each end and each floor is linked by an external staircase. Six of the units in the new container housing are intended for women who are over the age of 55 while the other six units are for younger women.

In spring 2013, funding was received from the Community Action Initiative to develop an intergenerational mentorship program between the older women moving into the new housing units and the young women living at Imouto. Over the spring and summer of 2013, a newly hired program coordinator consulted with young women at Imouto, community partners and older women in the community to develop a program model. Program activities will include community-building activities like communal dinners, arts and crafts activities, workshops and group outings. The program will begin in Fall 2013.



TIMELINE

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The timeline of key activities in developing and implementing Imouto Housing for Young Women at 120 Jackson Avenue is as follows:

Spring 2009	Atira's CEO is approached by the Executive Director of Watari Youth and Family Services, about setting aside units at Atira's Rice Block housing for young women who are street entrenched in the downtown eastside (DTES). It is determined that supportive, transitional housing specifically for this group of young women would be more appropriate.
Summer 2009	Atira purchases the site at 120 Jackson with financing from Vancity and raises money from Canada Mortgage and Housing Corporation (CMHC) and a number of corporate and private donors for renovations.
Fall 2009	Atira pulls together a group of key stakeholders and applies for program funding from the Vancouver Foundation
December 2009	Awarded funding from the Vancouver Foundation
January 2010	Advisory Committee begins to meet regularly to collectively develop program principles, model, evaluation and operations plan
August 2010	Collaborative program model completed
October 2010	Demolition begins at 120 Jackson
November 2010	External program evaluation plan developed
February 2011	Name "Imouto" chosen, which means "little sister" in Japanese
March 2011	Building permits secured and renovations start
April 2011	Atira develops formal MOUs with program partners
August 2011	House Mom/ Coordinator hired Renovations complete Applications are received and appropriate tenants selected
September 2011	Imouto Housing opens First young woman moves in (Sept. 9th) In-reach services initiated by partner agencies, including counseling, referral and advocacy for tenants Rents assessed and collected

October 2011	Movie nights by Eastside Integrated Youth Team (Watari and Vancouver Coastal Health) begin Evaluation methods and tools revised based on feedback from residents and staff
November 2011	1st quarterly evaluation snapshot created: 'A Glimpse at the First Three Months'
January 2012	Official Open House Monthly evaluation reviews initiated with program staff
February 2012	Nurse Practitioners start providing primary health services 2nd quarterly evaluation snapshot created, 'Looking Back at the First Six Months'
March 2012	Awarded two-year funding from the Homelessness Partnering Strategy
April 2012	Food program developed Shift to 24/7 staffing model Visiting Hours piloted
May 2012	3rd quarterly evaluation snapshot created, 'Adapting to Meet Young Women's Needs'
June 2012	Regular House Meetings begin Nexus begins taking women to Britannia Community Centre for fitness/swim/skate
September 2012	Year One evaluation document created, 'Looking Back at the First Year'
November 2012	Evaluation findings presented at FREDA conference Containers for housing project deposited next to Imouto
February 2013	Psychiatrist begins providing regular supports on-site
March 2013	Coordinator for Intergenerational Mentorship Program (IMP) hired IMP Coordinator begins to develop program model (funded by CAI Service Innovation Grant)

April 2013	<p>18-month evaluation update created</p> <p>Providence Health's Inner City Youth Mental Health Team begins providing additional mental health services on-site</p> <p>IMP Coordinator begins developing IMP program model through community consultation and environmental scan of existing mentorship programs</p> <p>Final report developed for Vancouver Foundation with input from external evaluators</p>
August 2013	<p>Container housing scheduled to open</p>
September 2013	<p>Intergenerational Mentorship program set to begin</p> <p>Two Year Evaluation Summary Report developed</p>

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