

A Way Forward

HOMELESS & HOUSING

COMMUNITY SUMMIT 4

April 25, 2024 Report:
Issues, Outcomes Sought & Proposed Actions

Homelessness, and its growing urgency, has prompted stakeholders to reassess the effectiveness of the current system of care. At Summit 4, held on April 25, 2024, 35 community stakeholders gathered to evaluate past successes and chart a course for future support initiatives. Those in attendance included representatives from nonprofit organizations, bylaw enforcement, municipal and provincial governments, health, education, and those with lived experience. This summit emphasized forward-looking strategies, marking a shift from retrospective analysis.

This Summit was the last in a series of four. Summit 1, held June 12, 2023, focused on mental health, substance use, and housing. Summit 2, held February 1, 2024, focused on utilizing previous housing solutions and building on those by prioritizing based on need. Summit 3, held February 29, 2024, focused on housing development and communication. These three summits culminated in the future-focused Summit 4, A Way Forward.

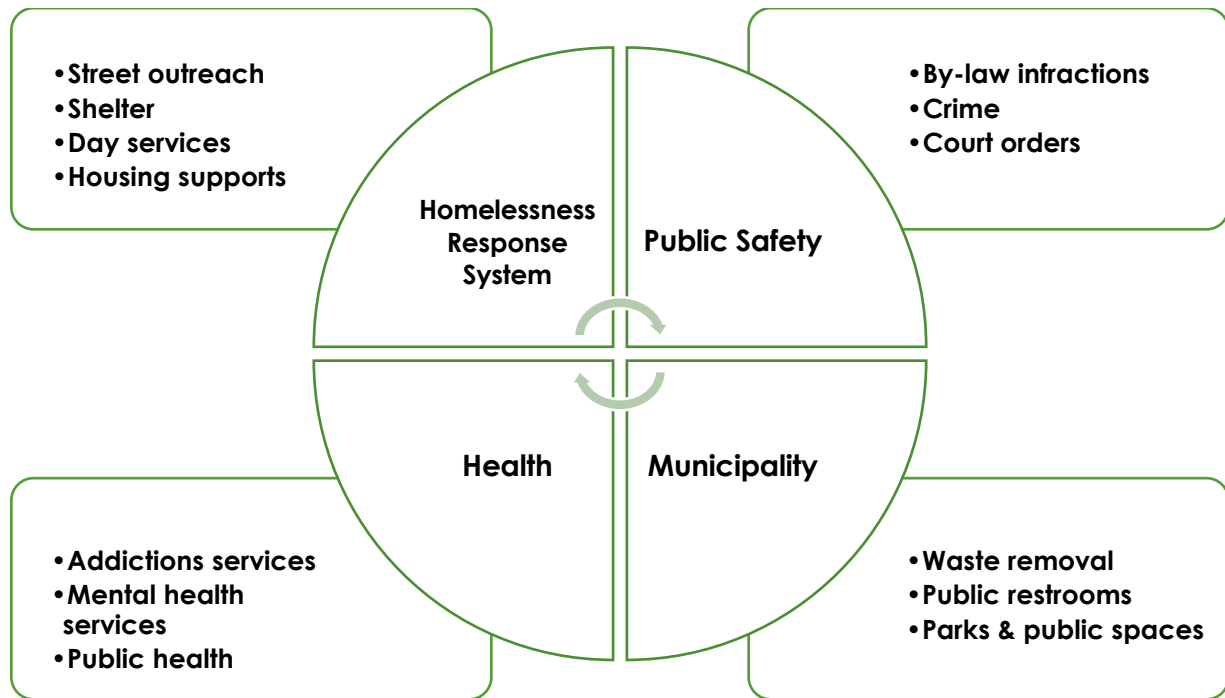
The discussion highlighted the extensive programs and services provided by the Medicine Hat Community Housing Society (MHCHS), including various partnerships, the evolution of the homeless system of care, and the recognition of achievements and existing gaps in service provision. A cornerstone of the system of care is Housing Link. This foundational program is the coordinated access point for individuals and families transitioning from housing insecurity and/or homelessness. Housing Link conducts comprehensive assessments to determine the level of need, ensuring that participants are matched with the appropriate support programs.

MHCHS, through Housing Link, has significantly expanded its efforts in housing loss prevention. Once a single-time-only financial support, this initiative has adapted to the increasing number of individuals and families currently housed and experiencing circumstances that have put them at imminent risk of homelessness, including rental and utility arrears.

Rapid Resolution, also provided through Housing Link, offers support for those needing housing or housing assistance. It provides case management to individuals needing assistance securing housing and continued support thereafter, but the goal of Rapid Resolution is to foster independence, enabling clients to transition out of the program successfully.

This multifaceted approach by MHCHS underscores the commitment to addressing homelessness and housing insecurity through innovative, inclusive, and responsive programming, continually adapting to meet the community's evolving needs.

After the programming summary, attendees were reminded of the Spheres of Responsibility, highlighting how various efforts to combat homelessness are interconnected. This framework underscores the shared accountability among government agencies, nonprofit organizations, businesses, and the broader community to support individuals and families facing homelessness.



Summit 4 sought to foster collaborative action and significant advancements by acknowledging the roles and contributions of each stakeholder. The goal was to promote innovative housing models and comprehensively address homelessness and housing insecurity, ensuring support for all community members.

Summit participants were asked to *Challenge, Support, Engage, Inquire, and Question Respectfully* while being *passionate, inquisitive, frustrated, compassionate, confused, flustered, enlightened, angry, indifferent, and humbled*.

The report below captures the findings and recommendations generated during A Way Forward Summit, providing a comprehensive overview of the identified issues, prioritized issues, what the community is doing well, and future outcomes the community envisions.

Participants contributed to roundtable discussions and reported their insights back to the full room.

Roundtable Discussion One: Listing the Issues where **seven prevalent issues** were identified.

Issues

Mental Health / Addiction

Housing/Transitional Housing

Shelters, Facilities, and Detox Centres

Communication and Awareness

Systems and Support

Contributing Factors

Other

Roundtable Discussion Two: Prioritizing the Issues, where each table discussed the various elements of the issues (above) and prioritized the most important topics. **Seven priorities** were dominant.

PRIORITIES

Addressing Addiction and Substance Use

Perception / Respect

Appropriate Housing / Shelter (Affordability, Supportive, Emergency)

Flooded Health Care System

Racism / Empathy

Communication / Understanding

Other

The following section will break out the discussions around each identified **Issue** and then follow with the subsequent **Priorities** determined above.

MAIN ISSUES AND CONCERNS IDENTIFIED

MENTAL HEALTH / ADDICTION

- **Substance use and behavioral issues:** Addressing substance use and, in some cases, subsequent behavioral issues, requires a multifaceted approach encompassing prevention, treatment, and support services tailored to diverse individuals. Substance use and behavioral issues present challenges in the community, impacting individuals' health, relationships, and overall well-being.
- **Mental health issues:** Accessing adequate support for mental health issues remains a critical challenge due to barriers such as stigma, limited resources, and systemic inequalities.
- **Addiction:** Accessing effective support for addiction issues is hindered by various barriers, including stigma, lack of accessible treatment options, and insufficient resources.

HOUSING / TRANSITIONAL HOUSING

- **Affordable housing:** Accessing affordable housing in the community is increasingly difficult. The lack of access exacerbates homelessness, housing instability, and socioeconomic disparities, impeding individuals and families from accessing safe and stable living environments. Systems for accessing affordable housing are complex and have an interplay of factors, including rising housing costs, inadequate supply, income disparities, and exacerbating housing and security for vulnerable populations.
- **Lack of accessible housing:** Finding affordable and physically accessible housing is difficult. The absence of accessible housing creates barriers for individuals with disabilities, limiting their independence and participation in society.
- **Lack of transitional/stabilized housing:** The absence of transitional and stable housing options in the community perpetuates cycles of homelessness and housing instability, hindering the ability to attain long-term stability.

SHELTERS, FACILITIES, AND DETOX CENTERS

- **Shelter for those in active addiction:** Having a shelter for people in active addiction is crucial as it provides a safe and supportive environment where they can access necessities such as food, clothing, and shelter while also receiving assistance and resources to address their addiction. This would also provide a sense of stability and community for individuals struggling with addiction.
- **Detox centers:** With the increasing demand for detox and treatment beds, accessing services can be difficult.

COMMUNICATION AND AWARENESS

- **Struggle to change perception:** Community perceptions of homelessness often involve ingrained biases and stereotypes. Changing the perception of what homelessness is, and involves, challenging stereotypes, and recognizing the diverse circumstances that can lead to homelessness is an important point of communication. The variables are diverse and include economic hardship, mental health issues, and systemic inequalities.

- **Racism:** Racism comes from entrenched attitudes, systems, and power dynamics that have perpetuated discrimination and inequality.
- **Perception of the problems/attitudes:** The issue of homelessness and attitudes towards it often involves stigma, misconceptions, and a lack of understanding about the complex factors that contribute to homelessness, leading to negative stereotypes and marginalization of those experiencing homelessness.

SYSTEMS AND SUPPORT

- **System navigation coordination:** The lack of coordination in system navigation for individuals and families experiencing homelessness results in fragmented services, duplication of efforts, and barriers to accessing necessary resources and support, often exacerbating challenges.
- **Limited peer supports:** Individuals experiencing homelessness often lack peer support, which can deprive them of valuable connections, empathy, and understanding from others who have faced similar challenges.
- **Lack of community connection:** Individuals and families experiencing homelessness often experience a profound sense of isolation and disconnection from their community, which can intensify feelings of alienation, loneliness, and despair, further hindering their ability to access support and resources.
- **Flooded healthcare system:** Community healthcare systems are strained, thereby making access to basic healthcare needs, mental health supports, and substance use supports increasingly difficult for all community members, especially those in vulnerable populations.

CONTRIBUTING FACTORS

- **Fear:** The mutual fear between people experiencing homelessness and those who are housed perpetuates social divides and impedes efforts to foster empathy, understanding, and meaningful solutions to homelessness.
- **Trauma:** The issue of trauma among individuals and families experiencing homelessness or housing instability underscores the need for trauma-informed care and support services to address underlying mental health challenges and facilitate pathways to healing and stability.
- **Cost of living:** The rising cost of living, largely driven by inflation, contributes to housing affordability challenges, pushing more individuals and families into housing instability and/or homelessness due to financial strain and lack of affordable options. Lastly, the challenges of the middle class and homelessness intersect as economic pressures, stagnant wages, and rising housing costs increasingly push formerly stable individuals and families into housing insecurity and homelessness despite their efforts to maintain financial stability.
- **Lack of education:** Limited education compounds barriers to employment, economic stability, and access to resources, further perpetuating cycles of poverty and housing insecurity.
- **Lack of public knowledge:** Individuals experiencing homelessness tend to have several complex underlying factors that contribute to their ability to remain stably housed. The public often does not understand these factors, leading to stigma, misconceptions, and inadequate support for effective solutions.

- **Primary care pressures:** Limited access to consistent healthcare exacerbates untreated medical conditions, mental health challenges, and substance use disorders, leading to heightened healthcare utilization and further strain on resources.
- **Wait times:** Delays in accessing housing, healthcare, and support prolong vulnerability and hinder the ability to achieve stability and well-being for those experiencing homelessness.
- **Housing-focused:** Several factors, such as mental health, trauma, and addiction, affect an individual's willingness to be housed; these may affect individuals' readiness to engage in a housing program and maintain stable housing.
- **Disability:** Adequate support and accommodation for individuals with disabilities is limited, increasing the vulnerability of those individuals facing housing instability.
- **Poverty:** Poverty and homelessness are intertwined as economic hardships and inadequate resources leave individuals and families unable to afford stable housing, perpetuating cycles of housing instability and homelessness.
- **Lack of community partnerships:** The lack of community partnerships may exacerbate housing instability. Partnerships increase access to resources, support networks, and collaborative solutions, which are necessary to address the multifaceted challenges individuals and families experiencing homelessness face.
- **Lack of empathy:** A lack of empathy for individuals experiencing homelessness often comes from stigma, which hinders community support, and undermines efforts to address the root causes of homelessness with compassion and understanding.
- **Heightened divisiveness in the political realm:** Political divisiveness impedes bipartisan efforts to implement effective policies and allocate resources toward addressing homelessness and housing affordability.
- **Shame/social stigma:** Individuals and families experiencing homelessness and/or housing instability may be facing shame and/or social stigma which may increase feelings of isolation, may increase barriers to accessing support services, and may undermine efforts to foster empathy and effective solutions within communities.

OTHER

- **Increasing need for resourcefulness:** There is an increasing need for resourcefulness among individuals working in the system supporting those experiencing homelessness. Workers must adapt to evolving challenges, leverage limited resources creatively, and foster collaboration to effectively meet the diverse needs of the vulnerable population they are working to support.
- **Petty crime:** The issue of petty crimes and individuals experiencing homelessness often arises due to survival needs, lack of access to resources, and systemic barriers, perpetuating cycles of poverty and criminalization of poverty. Petty crime may also be connected to mental health struggles and/or substance use.
- **Desire/readiness to engage:** The issue of desire and readiness to engage in a housing program by an individual experiencing homelessness can vary widely due to factors such as mental

health, trauma, substance use, and past experiences, highlighting the importance of tailored support and a person-centered approach in addressing housing instability.

Knowledge of where to go for help: Knowing where to go for help is hindered by fragmented service systems, lack of centralized information, and barriers to accessing assistance, leading to confusion and delays in obtaining crucial support.

- **COVID fallout:** The issue of people experiencing homelessness and COVID fallout highlights the disproportionate impact of the pandemic on vulnerable populations, increasing housing instability, health disparities, and socioeconomic challenges.

PRIORITIZED ISSUES, OUTCOMES SOUGHT, KEY POINTS, & SUGGESTED ACTIONS

ADDRESSING ADDICTION AND SUBSTANCE USE

Outcome Sought	Group Key Points	Proposed Actions
<p>Ensure appropriate system(s) are in place to lead individuals to appropriate supports.</p> <p>Enhance coordination of various supports to create seamless movement from one to another. Support the overall well-being of those experiencing substance use.</p>	<p>View substance use as a symptom: Substance use is but a symptom of trauma and other mental health concerns and must be seen as such.</p> <p>Increased education and support for youth: Programming for youth on addiction and substance use, risks, and health impacts.</p> <p>Provide education on healthy coping skills: As addiction is a symptom of other concerns, providing coping skills to help with any struggles is a life skill.</p> <p>Substance abuse: Substance use leading to health concerns, absence from responsibilities, accountability (etc.) is a continuing concern.</p> <p>Connection and relationships building through trust: Substance use leading to addiction degrades personal relationships and community connections.</p> <p>Supportive sober living after recovery/rehabilitation: Following treatment, people living in recovery often struggle with accessing supportive and appropriate housing.</p> <p>Counseling support: Appropriate support for those struggling with substance use as a result of trauma or mental health struggles.</p>	<p>Create housing for individuals experiencing homelessness in need of health care support: Utilization of federal and provincial funding to provide supportive and appropriate housing for individuals discharged from treatment or hospital with no fixed address but who require intensive housing and wrap-around supports.</p> <p>Establish shelter for those still actively using: Assess provincial and federal funding to ensure support for emergency shelters that accept and support individuals in active addiction.</p>

PERCEPTIONS / RESPECT

Outcome Sought	Group Key Points	Proposed Actions
<p>Enhanced community awareness of the varying factors contributing to housing instability.</p> <p>Clear understanding of resources to contact when in need or when supporting someone in need.</p> <p>Increased respect for all people and property.</p>	<p>Lack of understanding of contributing factors to homelessness: Community understanding, and empathy will help individuals and families experiencing homelessness and housing instability with community connection by reducing stigma.</p> <p>Presence of a community-wide resource list: Access to resources can be confusing to individuals requiring support and other service providers. A clear guide is needed on who to contact to seek out which service and who can access each service.</p> <p>Lack of respect for people and property: Disconnection, isolation, poverty, and substance use negatively impact behavior toward others and their property.</p>	<p>Awareness training/communication plan: Create a communication plan to help the community understand the variables contributing to housing instability and homelessness. Include a rollout plan with stakeholders, the public, and social media.</p> <p>“IF YOU WANT TO BE PART OF THE SOLUTION, EDUCATING PEOPLE IS PART OF THE SOLUTION”</p> <p>Create a city-wide resource package: Bring together stakeholders to create an easy-to-navigate list of resources that acknowledge varying client needs.</p>

Sphere of Responsibility: Homelessness Response Team, Health, Public Safety

APPROPRIATE HOUSING/SHELTER (AFFORDABILITY, SUPPORTIVE, EMERGENCY)

Outcome Sought	Group Key Points	Proposed Actions
<p>Ensure all individuals and families have access to affordable and appropriate housing.</p> <p>Plan for purpose-built housing. Connect development to community needs.</p> <p>Establish a transitional shelter.</p> <p>Reduced waitlists for services, programs, and housing.</p> <p>Determine a safe place for substance users to seek shelter.</p>	<p>Access to housing for all individuals and families in need: Limited housing in each area: affordability, accessibility (disabilities, culturally), and family. Accessibility to all housing types is required to increase for all community members to be housed.</p> <p>Purpose-built housing: Ensure those developing properties understand the community's need for this type of housing, including accessibility and single Indigenous parent housing.</p> <p>Need for more transitional housing (Sober Living): Individuals returning from detox/treatment who are in recovery need access to transitional housing that is appropriate for their stage of recovery.</p> <p>Waitlists with options: Waitlists include options to fulfill the varying needs of each individual/family seeking support.</p>	<p>Maintain data collection: Maintain accurate, up-to-date data on housing to capture needs in the community accurately.</p> <p>Advocate for housing needs: Use data to advocate for solutions to facilitate housing for all.</p> <p>Supportive housing solutions: Establish necessary resources to create supportive housing solutions for those in active addiction.</p> <p>Increase transitional/sober living housing options: Work to establish sustainable funding to increase the number of transitional housing/sober living units available in the community.</p> <p>Evaluate emergency shelters: Assess services offered by shelters, including physical layout for abilities and access for substance users, and assess their policies based on who they serve.</p> <p>Establish services for those not being served: After evaluating shelters that provide emergency shelter, address gaps in those requiring service and service provision.</p>

Sphere of Responsibility: Homelessness Response System, Municipality, Health

FLOODED HEALTH CARE SYSTEM

Outcome Sought	Group Key Points	Proposed Actions
<p>Sufficient staffing to provide adequate care for those needing service.</p> <p>Access to transitional housing is available for individuals healthy enough to be discharged but still need support.</p> <p>Local advisory committees lobby on behalf of the community.</p>	<p>Staffing for required need: Staffing is currently insufficient for those needing care, putting pressure on other service providers and families.</p> <p>Health care and housing systems: When individuals are discharged (either from hospital, detox, or treatment), for some, there is a lack of transitional housing options available. The housing options available do not fit the level of support needed by the individual and/or are inappropriate for an individual in recovery.</p> <p>Person-centered services: Services should fit the user rather than make the user fit into the system. The system should be adaptable to assist all people in need.</p>	<p>Connect housing systems and health care: Establish a supportive system that maintains continuity for individuals moving from exclusive health care support to housing where independent housing is not a viable solution.</p> <p>System gap assessment and reduction/elimination: System assessment identifies gaps and then determines adjustments to the system to reduce or eliminate these gaps.</p> <p>Establish community advocacy committees: Create committee(s) that includes members with backgrounds in health (mental health and addictions), housing, government (all three levels), and Indigenous and lived experience representation to advocate for changing systems and levels of service delivery.</p>

Sphere of Responsibility: Health, Homelessness Response System

RACISM / EMPATHY

Outcome Sought	Group Key Points	Proposed Actions
<p>Eradication of racism within systems and the community.</p>	<p>Eradication of racism: Racism is still prevalent within the community and systems. Racism may be eradicated by teaching and encouraging several actions: acceptance, understanding, seeing someone's whole self, creating awareness of intergenerational bias (conscious and non-conscious), and supporting one another.</p> <p>Kindness: Raise a generation of kind, empathetic humans by modeling kindness in how we treat people day-to-day.</p> <p>Pre-school/daycare anti-racism programming: The young years are where conscious and unconscious bias can be significantly molded. Long-term results can be significantly impacted if we can access kids at this point in their development.</p> <p>Promoting change: Participants expressed the need for individuals and organizations to model and promote change by using their voices and creating events and awareness campaigns.</p>	<p>Create a communication plan focused on kindness and empathy: Create a communication plan to be executed by partners, focusing on anti-racism, elimination of bias, increase in acceptance and understanding, and kindness.</p> <p>Growing acceptance and kindness in young children: Assess programming in pre-schools and daycares. Determine gaps in the anti-racism, acceptance, and kindness curriculum and develop supplementary material. Ensure the distribution of materials and support to local/community childcare centers and schools.</p>

Sphere of Responsibility: Homelessness Response System, Public Safety, Municipality, Health

COMMUNICATION / UNDERSTANDING

Outcome Sought	Group Key Points	Proposed Actions
<p>Clear understanding for everyone working in the system and accessing the system to know where to go for support.</p>	<p>Clarity of how to access services: Service information is available, but particulars on who can access it and when confuse system navigators and clients.</p> <p>Increasing communication about service opportunities within the community: Increasing communication about service providers and accessibility is important, but even more so is simplifying the information—making it accessible for service providers and individuals seeking support.</p> <p>Maintain a focus on the solution: Move the narrative away from the issues and focus on the solution for the client or system. By doing this, people working in and around the system will model change.</p> <p>Access lived experience: Fully understanding the system through its users will help create a full breadth of knowledge on usability, access, and gaps. Using this experience for peer support for individuals accessing services will help increase empathy and understanding.</p>	<p>Complete one-pager service provider initiative: MHCCHS will continue seeking one-page descriptions from service providers explaining the services they provide and requirements for access. The Red Telephone Directory.</p> <p>Create and implement a communications plan on housing and support services: Create a communications plan to help distribute information on housing support and services available to reduce confusion for individual users and system navigators in the community.</p> <p>Engage peer support and individuals with lived experience to share knowledge and support system navigation: Integrate individuals with lived experience to support the system navigators and individuals seeking assistance to help determine gaps and help individuals move through the system easily.</p>

Sphere of Responsibility: Homelessness Response System, Health, Public Safety

OTHER

Outcome Sought	Group Key Points	Proposed Actions
<p>The Other category includes elements of the System of Care that should be addressed. The outcome for this category stems from the three Cs: Connection, Compassion, and Collaboration.</p>	<p>Safe Downtown: Medicine Hat's downtown is perceived as unsafe, with an increasing number of individuals "loitering" and actively using substances in public. The visibility and function of the MHPS Downtown Patrol Unit (DPU) have been impactful in helping increase not only the perception of safety but safety itself.</p> <p>Caregiver burnout is a real issue. Both caregivers and professional service providers are burnt out, especially after COVID-19. Early intervention is needed to ensure both are supported and can continue to provide great work for the long term.</p> <p>Poverty: The cost of living is increasing and impacting households that historically have not been at risk of poverty, leading to housing instability and/or homelessness. We must stay aware of the risks and have flexibility in our programming to assist these individuals and families.</p>	<p>Maintain a constructive working relationship with Medicine Hat Police Service: Continue a positive working relationship with Medicine Hat Police Service to support those experiencing homelessness. Continue to evaluate initiatives and how they serve the community and ensure people feel safe. MHPS has created specialized programs such as the Downtown Patrol Unit (DPU) and the Safe Family Intervention Team (SFIT).</p> <p>Caregiver burnout: Provide support to minimize burnout and be proactive in implementing prevention measures and recovery support.</p>

Sphere of Responsibility: Public Safety, Homelessness Response System

SYNTHESIS & NEXT STEPS

The focus of A Way Forward, Community Summit 4, has been to examine what is being done well and move forward in supporting those in our community who are currently not being served.

The Medicine Hat Community Housing Society, its support services, and the community have implemented several effective strategies to address housing and system struggles. Key actions include:

- 1. Cooperation and Collaboration:**
 - **Systems Planning:** The community excels in sharing information, enhancing collective efforts and efficiency in tackling homelessness and its associated struggles.
- 2. Peer Support:**
 - **Small Community Relationships:** Strong, supportive relationships within the community foster a robust peer support network. These relationships assist in not only accessing resources but also increasing empathy and understanding.
- 3. Valued Lived Experience:**
 - **Incorporation into Decisions:** Decisions are made with the input of those with lived experience, ensuring policies and actions are relevant and effective – “Nothing about us, without us.”
- 4. Progressive Police Service:**
 - **Downtown Patrol Unit:** The police service is proactive with foot patrols and a dedicated downtown patrol unit, improving safety and business and community relations.
- 5. Community Engagement:**
 - **Participation:** There is a high engagement and participation from community members in sessions aimed at addressing homelessness and housing instability. The time people take to engage in these sessions demonstrates a commitment to improving the systems and increasing empathy for the vulnerable population.
- 6. Problem Recognition:**
 - **Acknowledgement:** The community acknowledges homelessness as a significant issue, which is the first step towards addressing it. Although Medicine Hat as a community has been addressing and acknowledging it for over a decade, understanding the importance of support for these individuals and families remains important.
- 7. Compassion and Desire to Fix the Problem:**
 - **Sense of Belonging:** Efforts are driven by compassion, aiming to create a sense of belonging for everyone in the community.
- 8. Advocacy:**
 - **Advocacy:** Strong advocacy efforts support homeless and housing-insecure individuals' and families' needs and rights. The system provides support through their journey to housing stability and is genuinely invested in the success of each individual and family.

9. Intergenerational Trauma Conversations:

- **Willingness to Discuss:** There is an openness to discussing the impacts of intergenerational trauma, which is crucial for understanding and creating long-term solutions.

10. Acceptance:

- **Human Dignity:** The community treats homeless individuals as human beings, recognizing their inherent dignity.

11. Willingness to Listen:

- **Communication:** The community is beginning to improve communication, showing a readiness to listen to the needs and experiences of homeless individuals and families. Understanding the experiences and systems from their perspective will help create better solutions for the future.

12. Action-Oriented Approach:

- **Modeling:** The community takes tangible actions to address homelessness, not just discussing but implementing solutions.

13. Permanent Supportive Housing (PSH):

- **PSH:** PSH is a critical component of the housing strategy, providing stable, long-term housing solutions. This is a great foundation for the housing strategy in Medicine Hat and the community.

14. Non-Market Housing

- **Housing Stability:** The City and the Medicine Hat Community Housing Society own non-market housing, ensuring affordable housing options are available to those in need.

WRAP UP

In conclusion, the final Summit marked a pivotal moment in the ongoing efforts to tackle homelessness in Medicine Hat, bringing together a diverse group of stakeholders to devise forward-thinking strategies. This summit is built on the foundational work of the previous three, focusing on mental health, substance use, housing solutions, and community communication. The collaborative efforts and comprehensive discussions at Summit 4 underscored the necessity of evolving and expanding support systems to meet the changing needs of those at risk of experiencing homelessness.

Medicine Hat Community Housing Society (MHCHS) and its partners have demonstrated noteworthy progress in their multifaceted approach to homelessness prevention and support. MHCHS is committed to providing tailored, intensive support to individuals and families, ensuring they receive the appropriate resources to achieve stable housing. Expanding housing loss prevention initiatives and integrating culturally sensitive practices further highlight MHCHS's adaptive strategies in addressing the complexities of homelessness.

Looking ahead, the insights and strategies developed through Summit 4 will be instrumental in shaping future initiatives. The emphasis on proactive, inclusive, and flexible support programs positions Medicine Hat as a leader in innovative homelessness solutions. Continued collaboration among stakeholders and MHCHS's dedication to responsive and culturally competent service delivery promises a hopeful path forward for the community, aiming to reduce and eliminate homelessness.

ADVOCACY AND POLICY REFORM

Actions	Engagement With	Lead Organization
Advocate for legislative changes to address housing issues such as rental controls and landlord registries.	Various ministries within the Government of Alberta	Medicine Hat Community Housing Society, Service providers, Private Developers, Business Community
Engage policymakers, community leaders, and stakeholders to prioritize housing on the political agenda.	Various ministries of the Government of Alberta and the Government of Canada, City of Medicine Hat	Medicine Hat Community Housing Society, Service Providers
Raise public awareness about the importance of affordable housing and the need for policy reform to address homelessness and housing insecurity.	Various service providers, community, business sector	Medicine Hat Community Housing Society, City of Medicine Hat, Social Service Organizations

Next Steps:

In collaboration with various service providers, Medicine Hat Community Housing Society will continue to explore the need for increased affordable and accessible housing options and advocate for the prioritization of housing for vulnerable populations.

STRATEGIC PLANNING AND RESOURCE ALLOCATION

Actions	Engagement With	Lead Organization
Develop comprehensive plans and strategies to increase the supply of affordable housing, including promoting "missing middle" housing options.	City of Medicine Hat, Government of Alberta, and Government of Canada	Medicine Hat Community Housing Society, City of Medicine Hat
Allocate resources effectively by investing in housing programs and initiatives that target the most vulnerable populations.	Various ministries of the Government of Alberta	Medicine Hat Community Housing Society
Support the implementation of housing initiatives through partnerships with government agencies, non-profit organizations, and private sector stakeholders.	Various ministries of the Government of Alberta, City of Medicine Hat, and social serving agencies	Medicine Hat Community Housing Society

Next Steps:

1. City of Medicine Hat Council members, along with City administration, will frame appropriate requests of various ministries of the Government of Alberta and the Government of Canada to communicate the needs of the Medicine Hat community.
2. CBO/CE staff with Medicine Hat Community Housing Society and appropriate community partners examine current housing gaps and explore available funding sources to increase housing stock.

EDUCATION AND CAPACITY BUILDING

Actions	Engagement With	Lead Organization
Provide education and training programs to stakeholders, including landlords, tenants, and service providers, on topics such as the Residential Tenancy Act and safety protocols.	Stakeholders, business and building development community, service providers	Medicine Hat Community Housing Society
Enhance stakeholder knowledge and skills through workshops, seminars, and certification programs on housing-related issues.	Service providers, non-profits, business community	Medicine Hat Community Housing Society, City of Medicine Hat
Build capacity for housing delivery by supporting organizations and agencies with the tools and resources needed to address housing challenges.	Business community, City of Medicine Hat, service providers	Medicine Hat Community Housing Society, City of Medicine Hat

Next Steps:

Medicine Hat Community Housing Society will scan current approaches to educating stakeholders and the community about housing needs, including affordability and appropriateness, and develop new and/or strengthen existing recommendations.

IMMEDIATE ACTION AND RESOURCE MOBILIZATION

Actions	Engagement With	Lead Organization
Address urgent housing needs by implementing short-term solutions such as transitional housing and emergency shelters.	Various ministries of the Government of Alberta and the Government of Canada, City of Medicine Hat	Medicine Hat Community Housing Society & City of Medicine Hat
Mobilize resources from government, philanthropic organizations, and the private sector to fund housing initiatives and programs.	Various ministries of the Government of Alberta and the Government of Canada, City of Medicine Hat	Medicine Hat Community Housing Society
Implement pilot projects to test innovative approaches and demonstrate the feasibility of scalable solutions to homelessness and housing insecurity.	Services Providers	Medicine Hat Community Housing Society

Next Steps:

CBO/CE at Medicine Hat Community Housing Society affirm their roles as the lead organization on housing matters and communicate Medicine Hat's needs to municipal, provincial, and federal governments.