

KHRC 2023 RESEARCH SHOWCASE & COMMUNITY ROUNDTABLE

SUMMARY REPORT



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Introductory Remarks

The vision of the Kelowna Homelessness Research Centre (KHRC) is that all communities and actors – regardless of size or location – have the knowledge and capacity required to support vulnerable members of society to ensure access to resources that will contribute to the end of homelessness. To that end, we gather, develop, and disseminate research evidence and Living/Lived Experience perspectives to strengthen understanding of the experiences of homelessness in small to medium sized cities through journal publications, community reports, toolkits, and plain language summaries.

On October 27th, 2023, we convened the KHRC Research Showcase and Community Roundtable, bringing together students, researchers, people with living and lived experience of homelessness, interested community members, and key stakeholders from a variety of agencies and organizations in Kelowna and the province of BC.

We enjoyed a full day of showcasing outcomes of research related to homelessness, student poster presentations, and community roundtables / interactive discussions on topics including public health and homelessness, innovative practices, allyship in research, and the big hairy questions.

The following pages provide a summary of the very rich discussions that took place during the event, snapshots of colleagues across the sector (many of whom were reuniting in-person for the first time since COVID-19!), and bolded, clickable links to helpful resources.

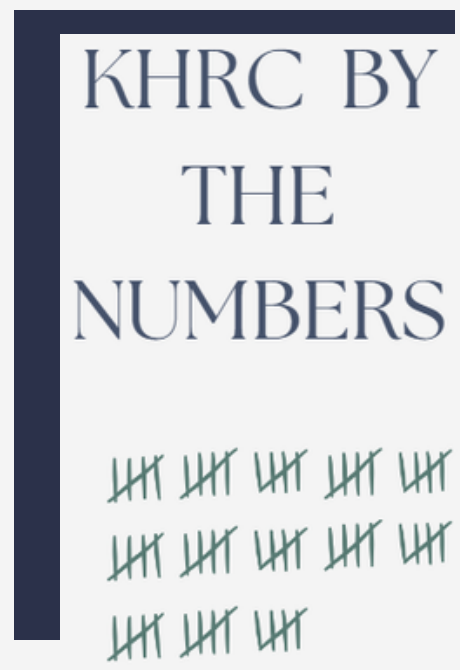
If you have any questions, ideas for further events, or would like to become more involved with KHRC, please reach out to us at ask.khrc@ubc.ca.



KHRC Research Outputs & Outcomes

Since 2019, the KHRC has been awarded research funds to engage in our mission and we have proudly produced:

- 6 community workshops and roundtables
- 12+ community presentations, speaker series, and panels
- 12+ conference presentations across Canada and the United States
- 8 scholarly publications
- 5 journal articles currently under review
- 2 toolkits
 - featured on the Homeless Hub and used in curricula
- 2 community reports
- 2 "Creating Allyship in Research" videos
- 20+ high quality professionals trained and mentored
- 36+ technical Reports, discussion papers, plain language summaries, newsletters, and research blogs



Research Highlights & Recap

Improving the Bereavement Experience Among People Experiencing Homelessness in BC



On July 26, 2023, members of the KHRC, **BC Centre for Palliative Care (BCCPC)**, and the Lived Experience Circle on Homelessness (LECoH) gathered together at City Park in Kelowna, BC with guests Edna Terbasket of **Ki-Low-Na Friendship Society** and Elder Grouse Barnes of Westbank First Nation in a closing ceremony for the research study. This ceremony was an expression of gratitude for everyone involved in the study, as well as a way to honour those who have died in our community and those who have been impacted by the losses. It is all too common for the bereaved who are experiencing homelessness to be unrecognized grievers in our community, who are then not adequately supported in their bereavement. We hoped this ceremony would provide an opportunity to feel seen and supported. During the ceremony, we were guided through an opening prayer, eulogy to honor all those who have died, a drumming circle, and smudging. We completed the event with food and a memorial art piece together: a white shopping cart adorned with the names of those we have lost, now respectfully located at OS4 in Kelowna.



KHRC and BCCPC now turn our attention to analyzing the data collected from the ~80 in-person interviews completed with people with lived experience of bereavement in the context of homelessness in Kelowna and Vancouver's Downtown East Side, to better understand their experiences and their thoughts on what can be done better in providing support. Research outputs will follow as they become available.

Organisational Changes to Address Homelessness: Lessons Learned from 3 Mid-sized Canadian Cities

A community engaged study in three small to medium ranged cities in Canada: Kelowna, British Columbia, Lethbridge, Alberta, and Sherbrooke, Quebec, at diverse points in time relative to multi-year plans to end homelessness. This comparative case study provides insight into the experiences of agencies in the homeless serving sector when adapting and integrating plans to end homelessness in their work.

Interviews took place with 40 service providers (a mix of frontline, supervisory/management and executive directors). Preliminary analytical findings suggest that a) jurisdictional issues and oversight complications, b) unstable and inflexible resources, and c) communication and data issues impact service providers' attitudes towards organizational change and their willingness and capacity to adhere to homelessness plans in their communities. Stay tuned for forthcoming journal articles.

Research Highlights & Recap

Services for Homeless Youth During COVID-19: The Case of a Canadian Community

This exploratory study aimed to understand how the COVID-19 pandemic has affected a medium-sized community's frontline workers in the Canadian youth homelessness services sector. This phenomenological case study elicited practitioner knowledge and experience in servicing homeless youth in Kelowna. Two in-depth focus groups were conducted and thematic analysis revealed five overarching themes: a) Community Connection, b) COVID-19 Challenges and Services, c) Provider Well-being, d) Successes, and e) Youth Services and Housing. The results illustrate the early impact of COVID-19 on service providers and provision for youth experiencing homelessness, and the adaptations needed to provide them with services during this time. Replication of this research into other regions and social services is recommended. Future research that provides a retrospective account would offer a valuable point of comparison of providing social services to homeless youth during and after COVID-19 public restrictions. Article available [here!](#)

Creating Allyship in Research



The Allyship in Research Toolkit provides researchers and practitioners with a framework to embed lived and living experience, and allyship, into their work. The toolkit describes ways to incorporate authentic participation into the entire research process or program development process, identifies strategies for engaging in a co-research/co-construction process, and outlines the benefits of practicing in this way. To accompany the toolkit, Creating Allyship in Research videos (short and long versions) are available that provide insight from those with experience in the area of homelessness – from service providers to those with lived experience of homelessness – highlighting why allyship in research is needed.

- [Allyship in Research Toolkit](#)

Research Highlights & Recap

Exploring Opportunities for Lived / Living Experience Circles

From co-researchers Rempel, Griffiths, Lloyd-Smith, Kelly, Hines, and Kirk (a team consisting of a mixture of PWLLE and student/community based researchers) comes a series of reports and a toolkit developed to support the work of communities, researchers, and others who are interested in community engaged processes for making social change. The Technical Report is a companion piece to a Community Report and a Toolkit for creating community based Lived Experience Circles (LECs).

- **Community Report: Exploring Opportunities for a Penticton Lived/Living Experience Circle**
- **Technical Report: Research Process – Penticton LEC**
- **Toolkit for Communities: Considerations for Creating Lived Experience Circle on Homelessness**



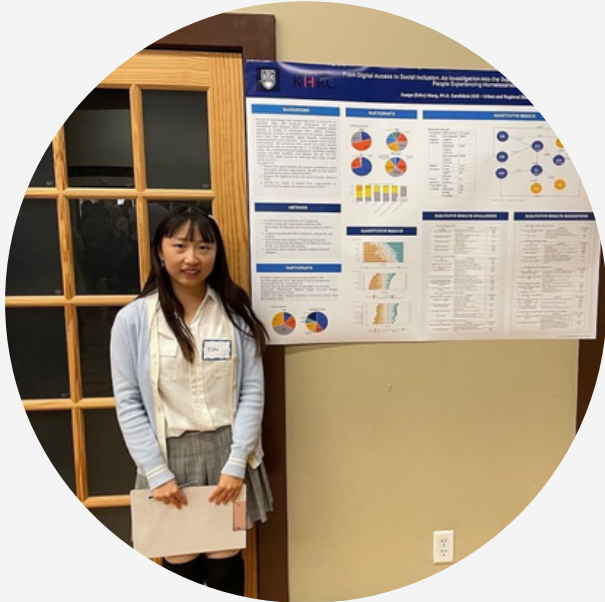
The Impact of Lived Experience on the Homelessness Sector

This community-based research project was designed to support the Central Okanagan Journey Home Society (COJHS) and the Lived Experience Circle on Homelessness (LECoH) in identifying and evaluating the impact of LECoH from members own perspectives and the perspectives of service who have worked with LECoH on various projects and initiatives in Kelowna since the design process of the Journey Home Strategy in 2018.

- **Impact of Lived Experience on Sector Community Report**



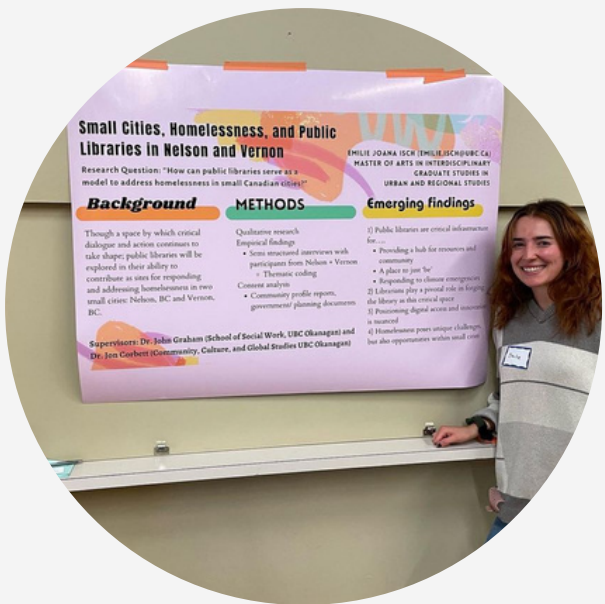
Student Poster Presentations



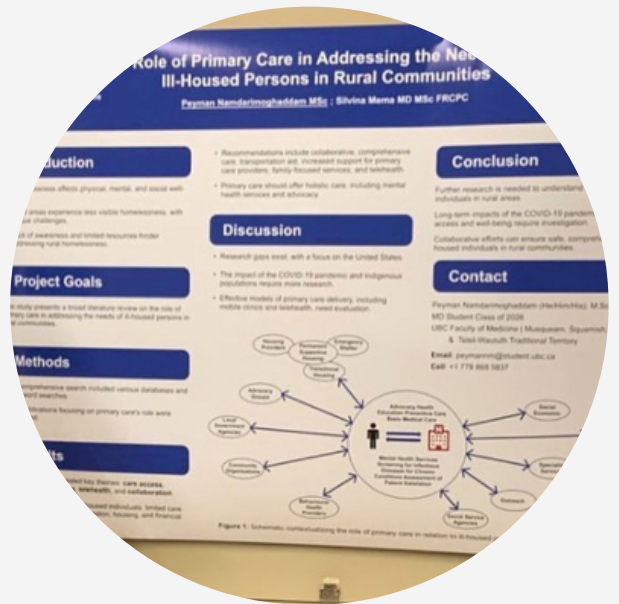
From Digital Access to Social Inclusion: An Investigation into the Supportive Role of Service Organizations for People Experiencing Homelessness – PhD Candidate Xuege (Echo) Wang
[echo0101@mail.ubc.ca]



Exploring the Role of Social Inclusion in Pathways Through Homelessness: Proposed Project – PhD Student Julia Henseleit
[julia.mulin@uq.edu.au]



Small Cities, Homelessness, and Public Libraries in Nelson and Vernon – MA Student Emilie Isch
[emilie.isch@ubc.ca]



Role of Primary Care in Addressing the Needs of Ill-Housed Persons in Rural Communities – 2nd Year Medical Student Peyman Namdarimoghaddam
peymannm@student.ubc.ca

Community Roundtables

Allyship Framework

Attendees considered how allyship and authentic participation is or can be incorporated into the entire research or program development process. The types of responses were related to how people honour allyship in their work, avoiding tokenism of people with living/lived experience, and reflected on how to close the loop with folks with living/lived experience in research and projects that have had their participation.

How do we co-design in a way that is impactful?

- It takes time to form relationships and build trust. We need to unpack and address perceptions of what co-design means to others in an organization (i.e., the principle of co-design).
- External pressures faced by researchers include:
 - Strategic priorities / timelines of organizations whose mandate may not align
 - Forming community relationships / connecting with those who have higher engagement
 - Capacity issues of departments and orgs (e.g., provincial)

How does co-design work? Could we:

- partner with community orgs on grants (and have the potential to have community do some of the high engagement to bring back results)?
- have help in identifying community priorities?
- go into communities that we don't hear much from (e.g., Chetwin, Terrace, Chilliwack, Cranbrook)?

Barriers to Allyship Framework and Co-Design

- Bureaucratic red tape to do community engaged research. Funding and finding funders who support non-traditional research priorities.
 - BUT, we can amplify voices (e.g., showcase/share, research (toolkits) and learn from people who have been pushed to the margins.
- Institutional barriers (i.e., municipal structure, hierarchical, patriarchal)
- coming to the table with equal voices, yet still being arms length, equal knowledge of structure/systems.

How do we address barriers?

- talk about the barriers,
- educating institutions on structures of people with living/lived experience (PWLLE)
- transparency of information
- through sharing information and the intentional action of being connected with PWLLE can lead to real time data
- Addressing the “noise” of what the public hears that is reported, media, how to give a voice to what is going on
- PWLLE on governance and decision making tables
- Using toolkits and strategies to support authentic allyship

“Allyship is deep, intentional, and active engagement with Lived and Living Experience.

The purpose is to co-create knowledge and solutions with the goal to develop, implement, analyze, and disseminate findings together”.



Community Roundtables

Humans Who Deal With Humans

Attendees discussed how to understand and support challenges encountered by “humans who deal with humans” (i.e., frontline service workers), and considered what organizational practices are best to maximize service provision? What do front line workers need or others who deal with homelessness? What would it be like if we addressed those needs? Are there issues in those organizational settings (e.g., burnout, sabotage, toxicity, happiness)? Several overarching themes were discussed:

Staff self-care: addressed through support from within the organization to educate folks on what self-care truly is, provide space to “do” self-care (together and separately), and then empower them to do so. Examples discussed included weekly staff meetings with space dedicated to addressing what the team needs, team building/retreats, and consistent internal communication. The emphasis was on having a solid team in this field because “if one member falls, we all fall.” Debriefing teams were a further suggestion.

Ongoing training: addressed through creating budgets that allow for consistent, relevant, and interactive training that is an embedded practice, particularly regarding boundaries and DEI training – embedded not performative. Other desired training areas included trauma, self-introspection,

Appropriate workload distribution and remuneration: not paying lip service to workload distribution but focusing on staffing appropriately as understaffing is dangerous and unsustainable. The authentic inclusion of people lived experience (not just with honorariums but fully employed). More conversations with lived experience – not just honorariums, but fully employed.

Addressing the systems within and across organizations: through appropriate workplace resources (e.g., institutional memory, transfer of knowledge, resource list for information and referral). Reduction of silos and replication of services to create better wraparound supports. Collaboration across the sector relieves stress on just one organization and increases a sense of partnership and teamwork instead of competition. We have many of the same goals and problems but addressing siloing (e.g., through regular inter-service meetings to support knowledge sharing, data sharing, cross sector case management) would decrease the issue.

Recognizing and supporting volunteers: remembering that volunteers need support as well as recognition for the work and value that they bring each day.

Community Roundtables

Innovative Practices

Attendees at this table discussed innovative practices and ideas to addressing and preventing homelessness, related to programs and interventions that have been successful, creative, and outside the box, such as:



Bringing more supports and resources to tent city such as: AA meetings, counselling services, nursing (mental health and otherwise), a chalkboard for people to identify what they need.

Increasing touchpoints from shelters and providing more wraparound supports was identified as folks can be lost during transitions.

More sector-wide roundtables and connections for de-siloing, brainstorming, and collaborating – and grant-writing together.

The need for a backbone agency to collect data and coordinate the work, reduce duplication of services, etc was noted.

Barriers and **challenges** to innovative practices were identified as well:

- How do we dial down permits and red tape.?
- Funding is needed for innovative programs not just critical programs. How do we address the barrier of waitlists?
- If we focus on different research methods, we can redirect evidence to reach other potential allies for buy-in as different audiences track different information.
- It's not just about reducing costs to the system but about increases to community, support, and companionship.

Community Roundtables

The Big Hairy Questions

At this roundtable we asked **“what are some of the questions that we could be asking? What questions are on your mind - things we want to learn more about, the ‘hard’ questions”**. This was less focused on finding solutions, and more of a speed round activity. A small sample of the questions are included below to stimulate further thinking and response.

What is the scope of human trafficking, sexual exploitation of women and of all folks on the streets in Kelowna? How do people get access to support and safe places?

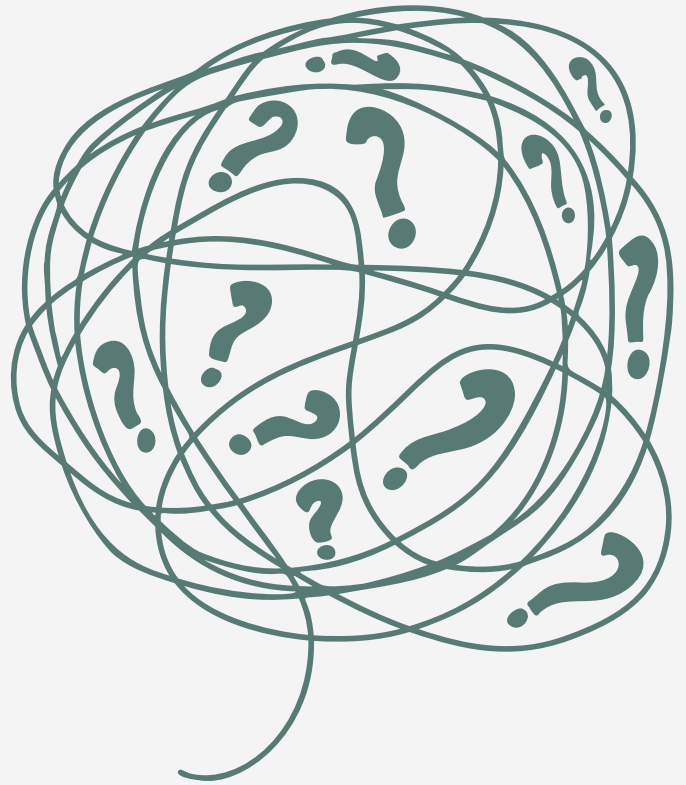
Why do so many people think that folks want to be on the streets?

Why the big gap between “wet” (addiction recovery) facilities and “dry” (abstinence-based) facilities? Why do we prioritize wet over dry? How does safe drug supply not mean we now “supply” drugs?

What keeps people stuck in shelter? How can we make shelters more inclusive?

Why isn't housing part of healthcare? Why are services focused on crisis response and illness managements? Basic Income -> why aren't we doing this? What defines acceptable housing for who?

What role does the City of Kelowna play in encouraging specific housing? What/how do we prioritize housing/building types? What is their responsibility? Why aren't governments just buying/building housing?



What influence does the funder have in directing the activities in the sector? How do we influence new research practices and training? How do we get rid of bad research and theory when it is still informing practice? How do we decolonize research and ground new work in reality?

What can be done before someone experiences homelessness? What can we do to support families to stay together and prevent trauma? What is the single most impactful thing we can do now as community members, individuals, and as organizations?

What is getting in the way of solving homelessness? Who is responsible for communicating the status of homelessness in our community? How often and using what measures?

What are the big topics of discussion that homeless people have? How has public perception around homelessness changed? How do educate/influence? How does the cost to address homelessness impact local tax burden – individually and municipally? What is the “business” of homelessness – how is money spent and where?

What is going on with the tiny villages? What are the anticipated outcomes? Who reports this information and how do we support? What is the connection / is there a connection between the tiny homes and the housing accelerator fund?

How are Indigenous employees being hired/supported and given non-token roles? How do we continue to act on the TRC calls?

How do we do systems change when the “system” is part of the system? What is the system?

“There are a lot of big hairy questions! Some have answers but for others, the answers are locked, the knowledge isn’t being shared in accessible ways, or we don’t know where to find them”.



Community Roundtables

Choose Your Own Topic: Private Sector, Information Sharing, & Meaningful Client Engagement

Attendees at this roundtable were encouraged to bring forth topics of their own choosing. During this session, the private sector, information sharing, and meaningful client engagement were top of mind.

How can we address disinformation (e.g., about human rights around homelessness and encampments) in the private sector? Businesses appear to have a say in decision making – how can we include them and encourage allyship? These are some of the ideas that attendees discussed:

- Community program – educational program for businesses
 - Positive engagement environment wherein people learn how to initiate relationships with people who are unhoused, how to navigate situations, etc.
 - RCMP/Bylaw get the call for situations and provides referrals for businesses to engage in the educational workshop/program.
- Creating and amplifying existing tools and resources for the public.
- Leveraging media streams for community ownership
 - Highlighting community strengths and what people in the community are doing to help.
 - How to help people find their own role and establish/strengthen partnerships and collaboration.
 - For those where the media can come to you, but you can't reach out to the media (e.g., bylaw), further the conversation by discussing local work done by other agencies and providing public education.
- We can “get loud”!
 - Certain professions are not allowed to speak about homelessness in certain ways.
 - Having others in the community to be able to provide that space at the table for those whose voices are not heard. For example, the value add of organizations like the BC's Office of the Human Rights Commissioner.

- Engaging in research that brings partners together and amplifies promising best practices.
- Special programs to hire those with lived/living experience.
 - Protected legal allocation – protects any legal hiring of certain groups (certain backgrounds) to address inequality.

Community Roundtables

Choose Your Own Topic: Prevention

Attendees at this roundtable were encouraged to bring forth topics of their own choosing. During this session, attendees were focused on prevention and strongly felt that prevention of homelessness is not being talked about enough and not being done. What ideas did folks bring forward?

- Engage in allyship with people with living and lived experience to
 - Complete in-depth interviews to identify moments in time that started their path to homelessness – the critical event(s) is important.
- Understand, identify, and scale up early upstream opportunities such as:
 - PreVenture: preventative mental health program in schools to identify those who may be at-risk.
 - Upstream Kelowna: an early intervention strategy to prevent youth homelessness and school disengagement.
 - BrainTrust: education and prevention programs.
 - Success by 6 BC: building community through programs, resources, and support.
- Homelessness starts early through housing instability. Consider prevention through organizations and programs such as: Parkinson Rec and Elevation Outdoors and shifting from child protection to child transformation – MCFD, family maintenance.

Barriers and challenges to prevention include:

- Coordination or lack of coordination at all levels – politically and service organizations
- Public knowing where to go for what is needed.
- Funding is there, just not able to do it. Why?
- The epidemic of domestic violence.

Public Health & Homelessness Discussion

Dr. Silvina Mema, Deputy Chief Medical Health Officer, Interior Health Authority, facilitated the “Homelessness & Public Health Interactive Discussion”.

Dr. Mema notes that we need to do more but by whom and with what resources? There are continued issues year over year, uncoordinated efforts from systems and health perspectives. If we reframe homelessness as a health issues, and understand that it is, we can make further impacts on systems change.

Collaboration between health officers is needed and advocating for topics of interest. **The Health Officers Council of BC Position on Homelessness, Equity, and Health** is the place to start as it’s an urgent call to action with recommendations for change, collaboration, and coordination advocating for:

- The right people collaborating (all levels of government with researchers and health systems. Many areas already do this but not in Kelowna) and brainstorming solutions.
- Provincial Health Officer (PHO) – advocating for a report on homelessness. Dr. Henry has agreed to draft and this report would elevate the visibility of homelessness as a health issue.

“Health is what allows people to achieve their full potential. If you’re on the streets freezing, you can’t achieve your full potential”.



When asked “what are some areas for input for a PHO report on homelessness” attendees noted the following:

- Understanding how we prevent homelessness and especially long-term homelessness.
- Addressing the opioid crisis: it has hit reserves and communities and people are dying because there isn't the knowledge of safe using and health care.
- There is nothing for rural communities. Kelowna is the hub for the Okanagan, but we can't look after our own people. People are being sent here and we can't take care of our own people.
 - Land, knowledge, power, privilege – one of the most pressing issues is homelessness of Indigenous people. Point in time count – up to 40% of people who are homeless are Indigenous. Population total is 6 or 7%.
- We need to think about the holistic approach to the problem and a wholesome solution – a transitional pathway through housing for everyone, so everyone is assessed off the bat, manned by able and educated people to send people in the right direction so the goal is to come out as a whole and healed community member.
- People need the basics of care. Water freezes in the winter when people sleep outside, they experience dehydration, they have no way of melting the ice and snow. It isn't for a lack of food and water, gasoline, etc. We do have those things and people can't access it and that is what makes it terrible.
- People are terrified to ask for help because they have been pushed to the side or mistreated by agencies. They go through cycles of traumatic story retelling. Disengagement and lack of hope because of treatment by agencies. The experience is visceral.
- We are discharging from the system (hospital) into homelessness. Instead, we need staff, transitional beds, privacy of health information, a place to put our stuff when receiving medical care. We need to break the stigma from the medical system on homelessness.
- The seed causes of homelessness need to be addressed. The PHO needs to advocate that. There needs to be a broad strategy and a review of provincial mandate letters. More resources are needed all around, especially for prevention.

Where Do We Go Now?

Community & Post-Secondary Roundtable Summary

Determining next steps at addressing some of the topics discussed in the community roundtables by considering how community agencies can be supported by/collaborate with post-secondary institutions (PSI).

PSI students in Kelowna have come to Central Okanagan United Church and other agencies for assistance in accessing food and shelter. Of note is international students: Their tuition is paid but other pieces are missing (housing and food insecurity or unavailability). It is lost potential for our communities if students cannot come and be part of the community and learning environment because of ancillary costs.

We need a better understanding of the data. How many students are in poverty, how is their learning affected, what has been their experiences?

Potential solutions/programs/interventions include:

- Home share programs (e.g. Pathways) – students are needed to fill the gap.
- Vancouver homelessness coalition - firehouse converted as warming shelter.
- University could support through volunteer programs/events.
- Build tiny homes on campus using sustainable building tech/UBC design competitions.
- Alumni sponsoring students.
- More community roundtables like this with the PSI supporting.
- The creation of a Lived Experience Chair at PSI (i.e., endow a chair held by a person with living/lived experience in departments) for high impact community engagement.
- Food bank services: we could look at aggregate data and bring partners in to develop some approaches.

Students want to work with data to inform community projects (e.g., Health Analytics Program at OC). We could be connecting students to faculty to community groups for analysis and data collection.

What are the needs right now and how do we work with the PSI to campaign and resource for those needs?

Where Do We Go Now?

Community & Municipality Roundtable Summary

Determining next steps at addressing some of the topics discussed in the community roundtables by considering how community agencies can be supported at the municipal level.

What would be effective? What do we need to know? What does the municipality need to know?

Moving from tent city to permanent housing (more than tiny houses as tiny homes are only a transition) and measuring outcomes of solutions.

- Providing choice in housing, choosing how you'd like to live and why – who it might be successful for? Duncan and Port Alberni as examples.

Accelerated housing – co-op housing?

- Raising money through social bonds.
- Takes time and resources, logistics, and coordination.
- For youth, developers to put in more specialized care, scattered site care
- The 'silver tsunami' – the aging/ elderly population entering into homelessness.
 - "Happipad" – intergenerational housing, young and old coming together, connect seniors and young people.
 - Assists in addressing social isolation.

Is this a role for the City? Are they a convenor? How do we take on that role? That would mean providing money and taking on a backbone role. Other areas discussed included:

- Legislation around rentals (e.g., Airbnb, operating without licenses, etc.) and an analysis of this new legislation.
- Rent controls and rent evictions (where are there still gaps and loopholes?)
- Information and communication - what is happening in the community?
 - How much do city officials know? We could provide them information on what is going on in this space.
 - Understanding around how funding is allocated to agencies (and how funding further sets agencies up to be siloed and creates a scarcity culture).
 - Ideas around creating a directory of who does what in the city (service and support based not location based)
- Neighborhood integration

Where Do We Go Now?

Community & Province Roundtable Summary

Determining next steps at addressing some of the topics discussed in the community roundtables by considering how community agencies can be supported at the provincial level.

- More community engagement (provincial roundtables)
 - Bring awareness to what is going on – how bad the situation is, how different systems contribute to homelessness. Emphasize how much people are really struggling and how better systems oversight is needed.
 - Public hearing – housing advocate
 - Engaging individuals within the housing sector
- Provincial de-siloing needs to occur, and interprovincial government conversations need to happen.
 - Ministry needs to work for the people:
 - Housing ministry: advocate for BC housing to not be a crown corporation, increased regulations for real estate speculation.
 - PHO: Homelessness is a health issue – it is a social determinant of health. It is being recognized as a public health issue at the provincial level but now what?
 - MCFD: prevention of homelessness.
- More people who have lived/living experience are needed in positions within government.
- Coordination and stable funding, lengthier MOUs for dedicated systems planning organizations.
 - 1-3 year funding terms are too short and it is not enough time get things done. Staff are dedicated and start projects but lose funding and then organizations lose institutional memory.
 - Operators' meetings for multiple organizations that provide similar services and determine how to allocate resources.

- Coalition building
 - Policy: relationship building with Ministries and thinking more deeply about the change we want to see. How to then go back to communities to coalition build?
 - Put pressure on the government to act. How do we get the government behind recommendations made by agencies and organizations (e.g., TRC, BCOHRC, Health Officers Council of BC Position on Homelessness, Equity, and Health)
 - BCOHRC human rights recommendations database: tool /database that gathers data / information about recommendations that have been made before.
- Accountability – levels of government to take responsibility to address homelessness.
- We can have the information, but what is the step to implement, and why is it not in the mandate letters? Consistency in the mandate letters across levels is needed.
- Collaboration – including people with lived and living experience
- KHRC could convene to have a monthly update with provincial and community partners.

“People experiencing homelessness need more than a bed and a sandwich. We need evidence-based research to develop programs, impact measurement – evaluating activities and outcome, collaboration and cohesion in the sector.”



Where Do We Go Now?

Choose Your Own – Where Else Do We Go? Roundtable Summary

Attendees chose to focus on **funding** as the main topic for this roundtable.

Funders can play a role in creating spaces to gather and determine what is most important (e.g., guns and gangs \$2 million grant: all organizations addressing that issue gathered and decided on what was most needed and who was best positioned to do the work. This was a call from the community, calling for collaborative grant writing). Funders have no way to understand which services provide what and to what degree. Each have their own data set and there is no way to compare one approach to another unless we come together. How do we create collaborative versus competitive funding?



Ideas included:

- Creating a funder round table – identify where the funders are on the map and the mandates. This could ensure that there is coverage over all issues and no overlaps.
- Working together with funders to adapt grant intake processes to recognize that not all organizations have/can respond to applications in the same way. Making the process more equitable and engaging in value-based grant writing collectively and including vetting processes for grants that include mentoring and connection with sector.
- Engaging in allyship with people with lived and living experience through the process: consider how funders can use their power in decision making to make sure PWLLE are at the table of grant assessment? How can funders reduce the barriers to participation in those committee spaces? By providing access to technology and technology skills training and appropriate remuneration to start.

Acknowledgments

Our deepest gratitude to the students, researchers, people with living and lived experience of homelessness, interested community members, and key stakeholders who attended the KHRC Research Showcase & Community Roundtable for your passion, insight, knowledge.

Thank you to Keith Simmonds and the team at the Central Okanagan United Church for the generous use of their space and their time for this important event.



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Special thanks to Emilie Isch, Navreen Bilkhu, and Julia Henseleit for their fantastic note-taking and capturing wonderful images during the event.

Funders

This report and the work of the KHRC is supported by the University of British Columbia Okanagan Eminence Program and the Social Sciences and Humanities Research Council of Canada.

