



peers

VICTORIA RESOURCES SOCIETY

Gender-Based Housing Research Report



Authored by Leigh Elliott and Lily Grant on behalf of Peers Victoria Resources Society.

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Acknowledgments

We acknowledge with respect the Lekwungen peoples, now known as the Songhees, the Esquimalt First Nations, and the WSÁNEĆ peoples, upon whose traditional territory these housing sites reside. We recognize that homelessness and gender-based violence are intersectional issues rooted in colonialism that continue to be reproduced through contemporary colonial structures. It is therefore crucially important to think about how the findings of this report are disproportionately linked to the lives of Indigenous people and their families.

We would like to thank the Gender-Based Housing Advisory Committee members for sharing their experiences, knowledge, and expertise for this important project.

Introduction

This project was funded through the Victoria Foundation to support initiatives addressing gender equality at the local level. The primary purpose of this project was to make recommendations for an Operations Manual and note best practices regarding the creation of a supportive housing site in Victoria B.C. specifically tailored to sex workers and 2SLGBTQ+ (Two Spirit, Lesbian, Gay, Bisexual, Transgender, Queer, and other members of the rainbow community) individuals. To accomplish this, the two research leads conducted a literature review on the history and need for a supportive housing site specific to these marginalized populations in Victoria B.C.. Secondly, the researchers engaged in community consultations with site managers both in Victoria and Vancouver for shelters and supportive housing sites that served sex workers and/or gender and sexually diverse individuals to learn from their experiences. Finally, the research leads recruited a Gender-Based Housing Advisory Committee comprised of folks with lived experience in sex work, being unhoused (or precariously housed), and who identified as 2SLGBTQ+, to directly engage with the community to learn how a supportive housing site in Victoria B.C. would best meet their needs. This report details the information collected from all three phases of this project.

Literature Review

The History

In Victoria B.C. there are currently no supportive or transitional housing that prioritize or addresses the specific needs of sex workers and/or the 2SLGBTQ+ community. Vancouver B.C. has supportive housing and shelter programs for 2SLGBTQ+ youth, TN2S (Trans, Non-Binary, and Two Spirit) individuals, and sex workers that have all shown to meet a need for health and

housing in their local communities (see section on local examples to follow). They also demonstrate, through the high demand for housing/shelter at these locations, the importance of developing more housing sites for these underserved populations.

Currently, the only organization that provides support that specifically addresses the complex and intersectional housing needs of sex workers (including 2SLGBTQ+ sex workers) in the Greater Victoria region is Peers Victoria Resources Society. Peers Victoria is an organization by and for sex workers that has operated a Housing First (HF) program since 2014, providing support for current or former sex workers primarily through financial assistance— in the form of rent subsidies or help with moving/housing costs— and health and social supports (Shumka et al., 2017, 4).¹

Demographic Information

Previous literature on homeless youth estimates that 2SLGBTQ+ youth make up 20-40% of the homeless youth population (Mottet & Ohle, 2003; Abramovich & Shelton, 2017). This number is concerning when put into the context that approximately only 5-10% of youth identify as 2SLGBTQ+, demonstrating that 2SLGBTQ+ youth are overrepresented in the unhoused community (Abramovich & Shelton, 2017). Unfortunately, there is a lack of statistical information on the percentage of adult unhoused people that identify as 2SLGBTQ+ and/or engage in sex work in Canada

¹ Housing First (HF) is a strategy for addressing homelessness that stipulates housing is a *human right* that should not be contingent on participant engagement with therapeutic services or detox programs. Its success is often reflected in how closely model fidelity is followed in terms of available and affordable housing stock, consumer choice and diversity in housing selection, financial supports to help with housing costs, and co-ordinated health and social supports tailored towards person-centred care (LL, 4).

According to the “2020 Greater Victoria Point-In-Time Housing Count and Housing Needs Survey”, of the 1,523 people experiencing homelessness in Greater Victoria who completed this survey on March 11, 2020, 12% self-identified as 2SLGBTQ+, 2.1% identified as “another gender identity” (not male/man or female/woman), and another 2.2% did not disclose their gender (Fiorentino et al. 2020, 12). Importantly, this number (12%-16.3%) likely greatly underrepresents the 2SLGBTQ+ population in Victoria. This is due to a variety of factors including: (a) participants may feel comfortable disclosing their gender or sexual identity; (b) trans, non-binary, two-spirit, or gender diverse (TN2S) folks may self-identify as being a man or woman; and (c) 2SLGBTQ+ participants may be harder to reach through the methods taken by the research team given that they are statistically more likely to shelter outdoors than in an indoor location (Fiorentino et al., 2020, 12).²

Regarding sex worker representation in the “Point-In-Time” survey conducted in the Capital Regional District, 16.3% cited “informal income” (which includes sex work, panhandling, and bottle return) as their main source of revenue (Fiorentino et al., 2020, 21). Importantly, this number does not include participants who engage in sex work for supplemental income, or who may be taking a break from the industry, or who—due to stigma or a variety of other reasons—chose not to identify as a sex worker and/or report informal income as their primary source of revenue.

² Of the participants interviewed, 50% of participants who identified as “another gender identity” stated that they were currently unsheltered (as opposed to emergency sheltered or provisionally sheltered), which is significantly higher than those who identified as male (35.1% unsheltered) and women (29.1% unsheltered) (Fiorentino et al. 2020, 12).²

Although these numbers from the Point-In-Time survey may not seem high, they make up a significant portion of the demographic reached in 2020. Furthermore, it can be assumed—based on the reasons noted above—that these percentages underrepresent the actual number of unhoused/precariously housed individuals who identify as 2SLGBTQ+ and/or engage in sex work. Regardless of whether the Point-In-Time survey data underrepresents the number of 2SLGBTQ+ folks and/or sex workers in the unhoused community of Victoria, the numbers given are still significant, and represent populations that face additional barriers to housing and have health and housing needs that are often unmet by supportive housing contexts in the Greater Victoria Region.

The Need

There have been some recent studies conducted in the Greater Victoria Region to further explore the need for safe and appropriate housing for local 2SLGBTQ+ folks and/or sex workers. Since Peers Victoria began their HF program, they have conducted focus groups and interviews with participants to see if their housing needs are being met and what their experiences have been trying to secure housing. A report published by Peers in 2020 stated:

There is currently no purpose-built housing in the region that meets the specific needs of those supported by the Peers Housing First Program; that is, housing that addresses the intersections of sex work, harm reduction, gender and Indigeneity. This has been identified as a primary unmet need among people served through the Peers Housing First program (Paterson et al., 2020, 3).

The report goes on to discuss what the ideal housing requirements would be to address the intersections of sex work, harm reduction, gender, and Indigeneity. Specifically, some of the expressed needs for participants around supportive housing were: to not feel as though they are under surveillance from staff; to have less rules around guest access (i.e., not requiring

guests to sign in, get their photo taken, or answer questions) to provide more privacy for their clients; to allow sex work to occur in residents' rooms and/or to have "working rooms" that can be rented out; to have a harm reduction approach to sex work within the house (i.e., condoms made available, bad date lists distributed, safety precautions in place for outcalls or in-calls, etc.), to not have curfews, etc. (Paterson et al., 2020).

The needs for TN2S sex workers specifically around housing (amongst other issues) were explored during a recent community consultation process carried out in the context of Greater Victoria, Vancouver Island, and the Lower Mainland of British Columbia. During these consultations and focus groups participants describes experiencing consistent housing insecurity—both in trying to find and keep housing—as they face stigma for both engaging in sex work and being TN2S (Bhandar, 2021, 26). Participants expressed experiencing the following problems with finding and securing housing: not feeling safe from neighbors or other residents, fearing eviction because of their identities and/or work, and worrying about working from home even though it might be the safest place for them to engage in sex work (Bhandar, 2021, 26). Importantly, these concerns are consistent with findings from another report published by Peers Victoria on the problems their HF clients experienced with scattered housing sites (Shumka et al., 2017).

When discussing shelters and supportive housing options participants openly stated that these are not safe spaces for TN2S people due to discrimination (including systemic) and abuse. As a result many participants stated that they were unwilling to seek these resources. A focus group participant as well as staff members who were consulted for this study stated that unhoused 2SLGBTQ+ people are not prioritized at the systemic level by BC Housing and other

housing providers in the area. This is a gap in service that needs to be prioritized considering that waiting for years on BC Housing’s registry is more dangerous for 2SLGBTQ+ people than cis-heterosexual individuals given the stigma, discrimination, and violence 2SLGBTQ+ people face in shelters and in their daily lives (Bhandar, 2021, 28).

Focus group participants and survey respondents for this study expressed a desire to have spaces accessible to them where they would be able to connect with other TN2S sex workers to learn from each other and share harm reduction strategies for their work (Bhandar, 2021,30). Creating a supportive housing structure that addresses the specific needs of sex workers and 2SLGBTQ+ identifying folks and facilitates a safer space for community collaboration and support is both necessary and important given the barriers that 2SLGBTQ2+ individuals and sex workers face in securing safe and appropriate housing.

Consultations with Service Providers in Vancouver & Victoria

An investigation into Low-Barrier Housing and Shelters for Sex Workers and 2SLGBTQ+ Individuals in Vancouver and Victoria.

[WISH Shelter \(Vancouver\):](#)

WISH shelter for current or former women+ sex workers opened its doors on October 26th, 2020, amid the COVID-19 pandemic in Vancouver’s downtown Eastside. It has 23 beds including three emergency “crash” beds near the entrance of the shelter that have a time limit of 6-8 hours for guests due to COVID-19 (WISH, 2020). The remaining 20 beds are in “pods” that allow for one medium sized bag to be stored within the space; participants also have access to a locker upon check-in for them to store their belongings (WISH, 2020). WISH shelter is a substance-free space; participants are not allowed to consume substances in the shelter,

but they are able to do so in the respite area outside—where harm reduction supplies are also provided (SP-1). Furthermore, WISH shelter has a no guest policy and asks that participants do not engage in sex work within a two-block radius to ensure that the shelter remains a safe space for those who are not currently active in the trade (SP-1).

Aspects of WISH shelter that set them apart: there are no time limits on participants' stays within the shelter; individuals can use the shelter for whatever purpose they desire and there is no "goal setting" or "case plans" for participants; there are no curfews, participants just have to check-in once every 24-hours; and beds are held for those participants who are in the hospital or in detox programs (SP-1). WISH shelter is envisioned to be a place of respite for participants, and as such it maintains quiet hours from 11AM-5PM and 11PM to 5AM to ensure that those currently engaged in sex work have quiet hours for sleeping during the day (SP-1).

[The Vivian \(Vancouver\):](#)

The Vivian is a three story 24 room building run by RainCity Housing. It opened its doors in 2004 in Vancouver's Downtown Eastside and was the first fully accessible transitional housing program in Vancouver that is specifically designed for women—and femme gender diverse and non-binary individuals—who face systemic and individual health and housing barriers (RainCity, 2021). Currently, all 24 units are filled by women+ who are actively working in the sex trade who also have mental health and/or substance use challenges (SP-2). Although The Vivian falls under transitional housing, there is no time limit on how long residents can stay. There are some women who have been in the building for 6 years (SP-2). The Vivian is set up to be as low-barrier as possible and housing staff work with the women+ to help them achieve certain goals that residents set out for themselves (SP-2).

The Vivian is only serviced by women+, which includes Peer witnessing for substance use. The Vivian allows residents to use in their room (but ask that they never use alone) and the building also has a peer worker who comes in the evenings for 6 hours to witness substance use in the Peer use room (SP-2). Residents are allowed to have guests, but they can only have one guest at a time and guests are not allowed to room hop (SP-2). Furthermore, guests must vacate the building between 10AM and 12PM as those are the hours service providers drop into the Vivian to provide support services to residents (SP-2).

There is no curfew for residents or check in process for when they arrive back at the housing site. Additionally, residents are not required to “check-in” with staff on a daily basis; instead, staff maintains a “seen list” that they fill out every day. If a resident hasn’t been seen in 72 hours or been in contact with a staff member then staff will file a missing person’s report. Staff ask that if residents are going to be gone for an extended period that they either let staff know ahead of time or call and check in with a staff member (SP-2).

If there are issues of conflict or violence between residents, or towards staff members, the person responsible will be asked to leave the housing site for a few days and will be given an emergency bed at a triage shelter down the street to offer them some respite and distance from the conflict. If the situation escalates, or the resident continues to be disruptive to the household and is putting others at risk, then the manager looks for other housing options for the resident. No one is asked to leave until there is another housing option available that will meet the resident’s needs (SP-2).

[Aoki Ross House \(Vancouver\):](#)

The Aoki-Ross House opened its doors in June 2021 during the COVID-19 pandemic. It is a converted 24-room hotel in Vancouver's Downtown Eastside that was purchased by the City in 2019 and is currently run by Atira Property Management (SP-3). It is the first housing project in B.C. that is specifically for two-spirit, transgender, and gender-diverse youth and adults (the age range in the building is currently between 20-70) (SP-4). The first floor of the building consists of six rooms typically reserved for individuals needing more privacy (such as people recovering from, or expecting, surgery) as these rooms come equipped with a washroom and shower. The top two floors have nine rooms on each; each room has its own sink and fridge but otherwise the washrooms, showers, and kitchen are all shared between residents (SP-3).

Since the house has just recently opened, residents and staff are still determining housing operations for the space. The Aoki Ross House is unique in that the tenants co-govern the project alongside housing staff. Before move-in the only "guidelines" were the building's motto: "be kind to yourself, be kind to others, and be kind to the building" (SP-3). Tenants have determined that they will meet every few weeks to bring up concerns, collaboratively address housing needs, and discuss political activism to bring awareness to the health and housing needs of the TN2S community (SP-3). As such, how the building operates is open to resident needs and desires. Tenants are compensated for attending these monthly meetings to show appreciation for their time and to help minimize hierarchical structures between staff and residents (if staff are being paid to attend the meeting so too should tenants) (SP-3).

Currently, there is no curfew for the building or rules around having guests so long as they are respectful and abide by the motto of the building. The staff do require that residents

check in with them once in a 24-hour period (either through just seeing them or if they are away through a call or text) to ensure that they are safe. As of now there is no safety consumption site/peer use room. However, there is a harm reduction station set up in the house where supplies are provided. Residents are encouraged not to use alone and are provided with the following options: to let the manager know so that they can be in the room with them, to use at the front door of the building in front of staff, or to use out in the open (SP-3).

Community connections are important at the Aoki-Ross house. The house hosts local community members to come in and speak about certain topics such as harm reduction and sex work to both connect with community programs and to help address stigma and lateral violence. Additionally, the Aoki Ross House have partnered with a local no-barrier food bank for two-spirit folks to provide communal food for the house if the residents wish to engage in communal cooking (but this is not mandatory). Finally, staff members have connected with Vancouver Police Department's 2SLGBTQ+ liaison officer as a resource to utilize if they ever have issues with a police response at the house that need to be addressed (SP-3). However, that has yet to be necessary and is viewed as a last resort.

[RainCity LGBTQ2S+ House \(Vancouver\):](#)

RainCity Housing has a Housing First program for LGBTQ2S+ youth in Vancouver BC that began in January 2015 (Abramovich & Shelton, 2017, 137). It currently operates primarily through rent subsidies and support programs (SP-5). However, when it first opened, it also operated out of a small house that had five rooms available for program participants. Since the house was so small the residents lived relatively independently, and housing operations took on

a more tailored approach based upon the fluctuating needs of the three residents (SP-5). There was no curfew, guests were allowed, and program operators were able to mediate if there were conflicting needs in the house.

This HF program included community dinners every Sunday wherein community allies and 2SLGBTQ+ professionals would be invited (Abramovich & Shelton, 2017). 2SLGBTQ+ identifying doctors, social workers, and nurses would volunteer their time and attend community dinners. This resulted in program participants being able to find health care and support services within their community, which they found to be very helpful in terms of safe and timely service delivery (SP-4). In terms of health outcomes, one program evaluation demonstrated that by the end of two years 9 out of the 28 youth no longer had problematic substance use— a success rate that service providers believe demonstrated the effectiveness of the program (SP-4).

[Atira's SisterSpace \(Vancouver\):](#)

SisterSpace is an Overdose Prevention Site (OPS) in Vancouver's Downtown Eastside. It is the first women-only community-accessible OPS in the world that is TN2S inclusive. In a radio interview, the CEO of Atira, Janice Abbott, discussed that it is important to have a women-only supervised consumption site as women often make the decision to forego seeking OPS services when they are co-ed because they feel unsafe with the male clientele (Roundhouse98.3, 2017). Abbott says it is not uncommon in the Downtown Eastside for women to have to stand in line at an OPS next to someone who recently abused them; as a result, they feel more comfortable accessing women-only services (Roundhouse98.3, 2017). SisterSpace acknowledges the effects

of trauma on substance use and embodies trauma informed practice in attempting to create a welcoming space that will not trigger a traumatic response for women who use substances.

[Sandy Merriman House \(Victoria\):](#)

Sandy Merriman House (SMH) is run by the Victoria Cool Aid Society and is funded by BC Housing. It is an emergency shelter that provides space for 25 folks who do not identify as Cisgender-males and has four emergency beds that can be utilized by those in crisis who need a bed for the night (usually set up through service providers, the police, or the hospital) (SP-6).

SMH has strict policies that address violence and disrespectful behaviour towards other residents. New residents must go over a mandatory commitment form with staff before admittance (SP-6). The commitment form covers SMH's no violence policy and their zero tolerance for racism/discrimination. It also clearly states that SMH welcomes trans, non-binary, and gender diverse folks in the house and that discrimination and disrespectful behaviour towards these individuals will not be tolerated. This intake process allows new residents the opportunity to ask questions or address issues they might have about gender diverse residents in the building (SP-6).

SMH has a 2AM curfew for residents, however, this is negotiable with staff for those residents whose work prevents them from returning before curfew. SMH also posts the BDAR sheets in the building and makes them available for residents who engage in sex work (SP-6).

SMH has a no-substance use policy. However, they understand that guests still use substances and try to put harm reduction measures in place for their residents. Harm reduction supplies are available in an alcove under the stairs of the building so that residents do not have to ask staff for supplies (SP-6). Sharps containers are placed in each of the washrooms, and

staff do wellness checks on residents who they notice have been in the washroom, or their room, for a long period of time. In addition, there is a camera that overlooks the backyard so that staff can keep an eye on any residents who may be engaging in substance use outside.

Community Consultations: The Creation of the Advisory Committee

The co-leads for this project utilized Peers Victoria's social media platform and program leads to disseminate their call for submissions to the Gender-Based Housing Advisory Committee (GHAC). All interested applicants were asked to fill out a demographic survey to ensure that participants had lived experience in being unhoused and/or precariously housed and that they also had either lived experience in sex work and/or identified as 2SLGBTQ+. The co-leads also tried to ensure that the GHAC had BIPOC representation and variance in age. The GHAC ended up having 5-6 members (one member only attended one meeting) who met once a month for four months to discuss issues pertinent to housing operations specifically for this site. All but one member had lived experience in sex work (although that participant does burlesque); five members identified as 2SLGBTQ+; three members were persons of colour; and all members had lived experience in being unhoused or precariously housed.

Two of the four meetings were held in person (with a zoom-in option for participants) and two were held over zoom due to a surge in Covid-19 cases. The meetings lasted three hours and all GHAC members were provided with a \$100.00 honorarium and refreshments (when in person). The GHAC members were provided with the literature review prior to the first meeting and were encouraged to bring their own topics of discussion to the group and/or raise concerns about the housing site. In addition, the co-leads also provided discussion

questions/topics to prompt conversation and ensure all areas related to housing operation were addressed.

Findings from Community Consultations & Considerations for Operations

The GHAC for this project had robust conversation around how a housing site serving sex workers and 2SLGBTQ+ individuals in Victoria BC would ideally function and be structured. The following are some areas that were discussed and decisions that were arrived at amongst participants that should be used to inform the creation of an Operations Manual for a housing site of this nature. The one overarching recommendation was that there are ongoing household meetings for residents and staff to discuss the needs of the household and to determine “rules” as a collective on an ongoing basis. Importantly, the GHAC appreciated that Aoki Ross House in Vancouver compensates residents for attending these meetings, as it demonstrates an anti-hierarchical approach to house management by valuing the expertise and time of residents equally to that of staff (who also attend).

Structures of Support

(1) Staffing Considerations:

- a. Staff should represent the population in the house. Meaning, that a large portion of staff should have lived experience in being unhoused, in sex work, and/or identify as 2SLGBTQ+.
- b. Dedicate funding towards the employment of peer workers for harm reduction staff as well as hiring residents to do some of the work on site.

(2) Recommended Training for Staff:

- a. Staff should be trained in de-escalation, trauma-informed practice, decolonial practices and approaches, harm reduction practices, available resources in the community, etc. Staff should also have a minimum of First Aid Level 2.

- b. There should be a staff member trained in systems navigation to help residents navigate resources in the community as well as to help waitlisted folks get temporary or permanent housing elsewhere.
- c. Ideally have one staff member with some legal training who can help residents navigate some legal issues they need support with. Or, have a relationship with a local law office to help with this.

(3) Educational Opportunities for Residents:

- a. Have workshops and trainings available to residents, such as: First Aid, wound care, business training, tax filing, Food Safe, conflict resolution, de-escalation, porn industry/online sex work 101, peer work, etc.
- b. Connect with entrepreneurs, tech folks, and IT professionals for workshops on how to protect yourself online and prevent viruses.
- c. Encourage and compensate residents to offer workshops to other residents on their areas of expertise (i.e., gardening workshops, art workshops, cooking workshops, etc.).

(4) Systems Navigation/Access to Resources:

- a. Have on-site supports available for: healthcare and healthcare system navigation, legal assistance, assistance with paperwork (including for ministry applications), ID clinics, and nutrition.
- b. Have drop-in clinics for various health professionals on-site, including nursing and counselling (ideally someone who specializes in substance use).
- c. Have ministry representatives come to the site to help residents fill out forms.
- d. Have a professional come in around tax season to assist residents with their taxes.
- e. Have staff create “files” for residents who wish to have support keeping their paperwork together.
- f. Assist residents with the logistics of moving in and out of the building.

- g. Have bus tickets available for residents and an account with a taxi company that is **only** to be used in an emergency (e.g., escaping a bad date or a violent situation).
- h. Have a house vehicle that staff can use to take residents to appointment and run errands.

Safety

(1) Security Measures:

- a. Have security cameras in strategic areas to allow for residents to feel secure without the feeling of surveillance. Ensure that residents know where the video cameras are so if they are feeling unsafe, they can enter those areas and know where it is safe to store belongings.
- b. Give residents the option of having a webcam or security camera in their room that they can turn off at their discretion. This provides residents the option of increased security as well as the option to have a staff member watch from afar when they are using substances (to retain some privacy).
- c. Have discrete emergency buttons in individual rooms that residents can press when in need.
- d. Have staff check in with residents according to the preference of each resident (text, call, in person; once every 24 hours, 48 hours, etc.).
- e. Ensure that the address of the house is not disclosed publicly and that residents do not share this information online to keep other residents safe.
- f. Have a P.O. box available for residents to use if they do not want to disclose where they live to others outside the house.
- g. Have locks on room doors that only staff and that individual resident have.
- h. Have a buddy system and/or group chat set up for current sex workers who engage in outcalls.

(2) Harm Reduction:

- a. Have harm reduction supplies (including safer sex supplies) available for residents. Ensure these supplies are accessible and that residents do not have to ask staff for them.
- b. Have BDAR sheets available for residents to pick up.
- c. In a resident meeting discuss whether a safe consumption space is desired. If not, utilize the HOPPS model and have staff and peer workers available for witnessing.
- d. Have naloxone kits and oximeters onsite and offer overdose response training to residents.
- e. There should be conversations and training around fire prevention and response, and natural disaster planning.

(3) Communication:

- a. Have monthly or biweekly house meetings—during which residents are compensated for their time— where folks can check in and make decisions regarding the house.
- b. Establish a group agreement that is made between housemates.
- c. Ensure that residents are vetting clients and that people are checking the BDAR sheet and group chat to make sure abusers are not coming into the house.
- d. Communicate about guests and clients before they are in the house (as best as possible) through a resident group chat or another platform.
- e. Have conversations with residents before moving in about the group agreement, respectful behaviour (including being anti-racist, anti-oppressive, and to be aware of and using people's preferred pronouns), conflict resolution, etc.
- f. Have residents take online courses before moving in/within six months of moving in on non-violence communication, de-escalation, trauma-informed practice, etc. so that people have training around healthy communication.
- g. Establish relationships with shelters or other supportive housings sites to allow for temporary relocations of residents who are being disruptive or violent (24–

72-hour break from the house) to give them a chance to get separation from the house or to “cool off”.

- i. This should be a part of a multi-step process wherein there are interventions that can happen before or after and wherein the housemates are consulted.
 - ii. This helps to avoid bringing in the police.
 - iii. If the issue persists, help the individual transition to another space—no one should be without housing.
- h. Create an environment that is respectful, positive, and non-judgemental.

(4) Response for Emotional Violence:

- a. Peer workers can have a talk with the person inflicting the violence to explain why it is harmful and to try and understand why this behaviour is occurring.
- b. Have a “strike” system in place that leads to temporary suspension from the house or eviction. But there are always way to “undo” strikes by putting effort in and showing accountability (for example, by partaking in an anger management course)—effort should be honoured.
- c. Have a holistic approach to de-escalation by sending notices for all residents when an incident occurs with the option for anyone to come forward If they wish to disclose any additional information or harms or have a house meeting to discuss the incident as a household.

(5) Response for Discriminatory Violence:

- a. Same as emotional violence but with the following:
 - i. Have ongoing prevention education that fosters an anti-discriminatory environment.
 - ii. Mandatory education/training for people being discriminatory—this could be a way of “undoing” a strike.

(6) Response for Physical and/or Sexual Violence:

- a. Zero tolerance. Extreme circumstances (rape, assault with a weapon, etc.) lead to immediate removal from the house while also attempting to relocate them.

- b. In other circumstances, use the strike system as discussed above.
- c. In all cases where an individual is removed temporarily, the house can then meet to discuss what they would like to see occur in terms of a response. This way consequences are not top down but are decided upon as a household.
- d. Have resources available for the survivor and the individual who inflicted the violence post-incident so that they can get the support they need.
- e. Gradual integration back into the house could be an option depending on the wishes of the other residents (while prioritizing the wishes of the survivor).

Considerations for Physical Space

(1) Common Spaces:

- a. Communal kitchen with communal dinner and prepared food options made available for residents. Have relationships with local organizations that donate food/meals or provide food at a reduced rate.
- b. Common rooms available for residents to socialize.
- c. A multi-purpose room that has computers available for residents. This can be used as a space to hold workshops, have books and art supplies available, to participate in online meetings/trainings, etc.
- d. The multi-purpose room could also be a space that has a murphy bed and can be rented out by residents to entertain clients in.
- e. Have an infirmary room that people can use when they are sick that can also be used as a temporary shelter space for when people are in crisis, but we do not have rooms available. This room can also be used by drop-in nurses, counsellors, and other medical professionals who wish to consult privately with residents.
- f. Have a shared laundry space for residents that can be booked out or managed by staff. However, either outsource or have staff maintain laundry for bedding, towels, and common area materials (dish towels, cloths, etc.).
- g. Have a backyard with a shared garden space and/or a relationship with a local community garden. This garden space can be used to generate produce and herbs for the housing site.

(2) Room and Housemate Considerations:

- a. Ideally have a diversity of choice for room selection. Meaning, some folks prefer to share a room, while other prefer their own room, others may prefer access to a private bathroom, etc.
- b. Have chores available for residents in which they receive compensation. Be flexible in terms of allowing for residents to switch or pick up shifts.
- c. Quiet hours and considerations around noise are to be determined by the residents at biweekly meetings. It was suggested by participants that accommodations could be made to support daytime sleeping schedules.
- d. Ensure that a certain percentage of rooms are dedicated to residents who engage in sex work, are BIPOC, and who identify as TN2S.

(3) Visitors (Clients):

- a. If the house sets up a working room that residents can bring clients to, please consider the following:
 - i. Have a separate entrance for the room and include a separate bathroom with a shower attached to the room for clients to use.
 - ii. Include a murphy bed in this room for when it is used for clients.
 - iii. Consider investing in a collapsible pole that can be used in this room for entertaining clients as well as for pole dancing workshops.
- b. Have a day of the week where clients are not allowed in the house. This allows for residents to have a day that can bring over friends and family over when sex work does not occur in the house. However, have this as an option that can be discussed on an ongoing basis at resident meetings.
- c. Regardless of whether a working room is established, have a separate entrance for clients so that residents do not have to run into clients on their way in or out of the house.

(4) Visitors (Friends and Family):

First and foremost, this is an area where “rules” should be decided upon as a household as everyone’s needs will be different regarding guests. However, what follows are some suggestions made by the AC on how to navigate guests.

- a. Have designated days and hours for quiet time where no guests are allowed in the common areas.
- b. Have rules that prevent live-in partners and perhaps have limitations on how many times guests are allowed to visit in a row. For example, a guest is not there 75% of the month.
- c. If space allows, have areas of the house where kids are allowed and where substance use is not. For example, if there are two common areas, have one common area where kids are permitted for visits and have one common area where substance use is permitted. This will also be helpful for residents in recovery who find substance use triggering.

Conclusion

Opening a supportive housing structure that addresses the specific needs of sex workers and 2SLGBTQ+ individuals is incredibly important for creating a safer space for community collaboration and support. Especially when considering the barriers that 2SLGBTQ2+ individuals and sex workers face in securing safe and appropriate housing that accommodates and recognizes sex work as work. This report recommends that a housing site be opened in Victoria B.C. specifically for sex workers and 2SLGBTQ+ individuals; and that the recommendations for the operations of that site outlined in this report be considered. Furthermore, we recognize that due to funding constraints, our community consultations were limited. Therefore, it is encouraged that more community consultations with sex workers and 2SLGBTQ+ individuals are undergone in Victoria B.C. to better understand the evolving needs of these communities for supportive housing.

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- (SP 1-6) Represents information collected from service providers and housing site managers who were interviewed for this project.*