Creating a space where we are all welcome

Improving access to the Toronto hostel system for transsexual and transgender people

A research project prepared by: Christina Strang & Deanna Forrester

In collaboration with: Joyce Brown & Gloria Gallant

Canada

Toronto
Acknowledgments

The researchers would like to thank the members of the trans communities, hostel staff and management for their willingness to respond openly and honestly to the research questions and for their careful consideration of the issues. The members of the Steering Committee also provided invaluable guidance and support throughout the research project.

It is our hope that the research findings will be used to assist members of the trans communities in accessing shelter services and that the sector will welcome us.

The Wellesley Central Urban Health Grants Program

The Lesbian and Gay Community Appeal

Deanna Forrester, Project Research Assistant

Kyle Scanlon, Program Co-ordinator, Trans Programme (The 519)
Jake Pyne, Project Co-ordinator, Trans Hostel Access Project (The 519)
Anna Travers and Vlad Wolonyk, Sherbourne Health Centre
Cindy Cowan, Executive Director, Nellie’s Hostel
Wairumu Wamuko, Shelter Manager, Fred Victor Centre Women’s Shelter
Michelle Taylor, Fred Victor Centre Women’s Day Program

Silke Haller, Fred Victor Centre Harm Reduction Program

Keith Hambly, Director of Housing and Shelter Services, Fred Victor Centre
Alice Gorman, City of Toronto, Public Health
Fiona Murray, City of Toronto, Community and Neighbourhood Services
Maura Lawless, City of Toronto, Community and Neighbourhood Services

Many thanks to the clients, volunteers and staff of all the Toronto shelters who participated in this project and to:
Merli Pera, Community Information Toronto
Ontario Association of Hostels, Toronto Chapter
Claudia Medina, Voices of Positive Women
Nicci Stein, Acting Executive Director The 519
Robert Johnson, Maggie’s
Maureen Lynch, Maggie’s
Gavin Downey, Trans Youth Toronto (The 519)
Joyce Murray, Consultant
Gloria Gallant, Consultant

...and most of all, the trans community of Toronto for their support and courage. This work could not have been done without your active participation and cooperation.
# Table of Contents

## INTRODUCTION
- Definitions: Transsexual, Transgender and Other Common Words 2
- Size of the Population and Use of Toronto's Shelter System 2
- The Development of Services for the Trans Community 3

## METHODOLOGY
- The Research Model 4
- Key Stakeholders in the Research Process 4
- Data Collection 4
- Trans Community Consultations 5
- Shelter Sector Consultations 5

## INTERVIEWS WITH MEMBERS OF TRANS COMMUNITIES
- Referral and Intake Procedures 6
- A Preference for Women's Shelters 7
- Experiences of Harassment and Discrimination 8
- Views on Designated Space 10
- Positive Experiences 10
- Suggestions for Improving Access and Shelter Services for Trans Individuals 11

## INTERVIEWS WITH SHELTER STAFF AND MANAGEMENT
- Intake Procedures 12
- Anti-Discrimination Policies 13
- Harassment and Discrimination 13
- Existing Facilities 13
- Stand Alone Shelter Facilities or Designated Space for Trans Residents 14
- Training Needs 15
- Staff Suggestions for Improving Access and Shelter Services for Trans Individuals 15

## CONCLUSIONS

## RECOMMENDATIONS

## APPENDIXES
- Appendix 1 - Background of the Researchers 19
- Appendix 2 - Steering Committee Members 19
- Appendix 3 - Literature Review and Resources 20
- Appendix 4 - Model Policies 21
- Appendix 5 - Letter from Shelter, Housing and Support 24
Introduction

In 2003, Fred Victor Centre received funding from Wellesley Central Urban Health Grants, the Lesbian, Gay Community Appeal and the Supporting Communities Partnership Initiative (SCPI) to conduct participatory research on the specific shelter needs of the homeless and street-active trans communities and the barriers they face in accessing Toronto's shelter system. A Steering Committee was established to guide the project. It included representatives from the City of Toronto Shelter, Housing and Support Division, Toronto Public Health, the Trans Programme at The 519 Community Centre, the Trans Hostel Access Project, Fred Victor Centre Housing, Fred Victor Centre Women's Hostel, Nellie's and the Sherbourne Health Centre.

The goals of the research were to:

1. Make recommendations about the kinds of support and shelter services to most effectively meet the needs of homeless transsexual and transgender individuals.
2. Identify ways to reduce the barriers to services and create shelter environments that are safe, welcoming, and accessible.
3. Make a recommendation to the City of Toronto as to whether or not there should be a shelter specifically developed to meet the needs of transsexual and transgender individuals.

This project did not seek to explore the different identities of this community nor did it seek to explain the existence of transsexuals and those who are transgender. Rather, it is assumed that lower income and street-active transsexual/transgender people, like many other marginalized and disenfranchised communities, are entitled to fair and equal access to the shelter system.

Definitions: Transsexual, Transgender and Other Common Words

For the purposes of this report, two common words, transsexual (TS) and transgender (TG), are used most frequently. While TS and TG both have very clear and different definitions, they are often used interchangeably by members of the trans communities, usually because they feel that a specific word will be better understood.

- Transsexual is commonly used to describe someone who identifies psychologically and emotionally as a gender different that their assigned sex at birth. (Mottet and Ohle, 2003: 7) They may (or may not depending on circumstances) take hormones, undergo a variety of sex reassignment surgeries, and in many or all ways present themselves in a manner that is consistent with their gender identity.
- FTM or female-to-male refers to a person who was given the gender identity of a female at birth and has transitioned, or is transitioning from female to male.
- MTF or male-to-female refers to a person who was given the gender identity of a male at birth and has transitioned, or is transitioning from male to female.
- Transgender, trans, or gender variant are umbrella terms used to describe individuals who fall outside of society’s gender norms. This may include people who cross dress, androgynous people (with gender identities somewhere between traditional views of male and female) or people who feel they do not conform in stereotypical ways.

Size of the Population and Use of Toronto's Shelter System

There is no census data on the number of trans people in Toronto, or in Canada but it is generally acknowledged that Toronto is home to the largest and most diverse community of transsexual and transgender people in the country. Most transsexuals, who have the financial means to successfully complete a transition to the other sex, do so and carry on with their lives. Thus, it is difficult to determine the total number of transgendered individuals. The Clarke Institute (a division of The Centre for Addiction and Mental Health) estimates that transsexuals occur once in every 30,000 to 50,000 people. While this statistic has been somewhat debated, the 1 in 30,000 figure would mean that there could be 153 transsexuals among the four million people living within the Greater Toronto Area. This figure does not include the migration of transsexuals from other parts of the country because they believe Toronto to be a more accepting environment.¹

¹ The 17 shelters included in this study reported serving 117 trans individuals in the past year, however some individuals may have accessed more than one shelter.
Because of social stigma, many trans individuals who are visibly gender variant face unemployment, poverty and rejection from their families, friends and communities. They also endure harassment and occasionally violence. Studies indicate that trans people often suffer from extremely low self-esteem. This combined with poverty has contributed to substance use, self-harm, suicide, depression and mental health issues. (Mottet and Ohle, 2003) As a result, there are transgender individuals who are living on the streets or in the shelter system and of this group, a large proportion are street active. As more of the trans community access or attempt to access the shelter system, there has been increasing discussion about how best to accommodate those who transition from one gender to another.

The Development of Services for Trans Communities

Trans people are often misunderstood to be a branch of the gay and lesbian community, and as a result their specific needs go unmet at the community and social service level. Most frontline services either incorporate trans people into their existing services without acknowledging their special needs, refer them to unequipped gay, lesbian and bisexual organizations, segregate them, or deny them service out of fear, lack of understanding, and discrimination. Because of these barriers to service, many trans people simply decide to side-step help of any kind, which in turn reinforces their marginalization.

Many of the street-active trans population in Toronto are male-to-female transsexuals engaged in the sex trade. This group is particularly vulnerable to acts of violence because of the stigma associated with this lifestyle. After a transsexual woman and a transvestite male were murdered in Toronto in 1996, service providers began to focus more attention on this population.

In March 1998, The 519 Church St. Community Centre founded the MEAL Trans Programme (later renamed The Trans Programme) to respond to the lack of community-based services for trans people - specifically those who were street-active and/or sex trade workers. It began as a weekly drop-in for lower income and street-active TS/TG people. This was the first community-based program that was directed by and for transsexuals and transgender people, including those who were sex workers.

With a trans community based effort operating from within the social service sector, staff with the MEAL Trans Programme were able to advocate for resources for some of the pressing needs identified by the participants. The most urgent issues identified were:

- HIV/AIDS;
- violence towards trans sex workers;
- substance use; and
- homelessness.

A TS/TG sex worker outreach program was created and an HIV/AIDS information and prevention campaign was developed. Partnerships were made with harm reduction services across the city. However, with the exception of a few women’s shelters, the most challenging task was to increase access to the City’s shelter system.

With financial assistance from SCPI in 2001, The 519 launched a hostel-training project, the Trans Hostel Access Project. This project recruits TS/TG people from diverse backgrounds and trains them to facilitate workshops for shelter providers. These facilitators provide an interactive workshop based on the needs of the particular shelter. The project offers staff training on homeless TS/TG issues and assists in policy development. It also acts as a resource for both street-active trans communities and shelter providers in Toronto.

Between April 2002 and July 2003, the Trans Hostel Access Project trained staff and some residents at 17 shelters. The program is seen as a very effective tool in educating both staff and residents on trans community issues. However, members of the trans community continue to experience challenges in accessing shelters and they often face discrimination and harassment once in the shelter system. Thus the need for a participatory research project was identified in order to develop a 'best practice' service model for working with homeless transsexual and transgender people accessing shelter services in Toronto.
Methodology

The Research Model

A participatory research model involves a community in defining the issues that require research, participating in the research design, collecting data and analyzing the results. In this instance a modified participatory process was utilized. Although it was not feasible to involve members of the homeless and street-active trans community in every facet of the research, members of the larger trans community did oversee all aspects of the project.

Both principal researchers are members of the trans community who have long and well-established connections to homeless and street-active trans people. Trans members on the Steering Committee provided input at every stage of the research process, offering valuable insights from their work experience with the trans community.

The researchers were able to gain the trust of the community and assure the respondents that the goals of the research were to improve services for homeless trans individuals. They carried out interviews and facilitated focus group consultations, gathering both qualitative and quantitative data about the shelter needs of trans people and their experiences in accessing and maintaining residence in the shelter system. Once the data was collected and analyzed, focus groups were reconvened to present the findings to both trans community members and service providers and to invite further input and analysis of the draft recommendations. Thus, homeless trans community members who participated in the initial interview process were also involved in the final steps of the research process.

Key Stakeholders in the Research Process

A Trans Access Project Steering Committee was formed with representatives from the City of Toronto, the Public Health Department, shelters, services that work directly with the trans community and/or services that would be affected by the recommendations from the research project. The committee supported and informed the process of the research, contributing to the development of questionnaires for trans community members and service providers, helping to interpret data from service provider perspectives, and assisting in communicating with key partners in order to facilitate the completion of the research in a timely and effective manner. The principal researcher also met regularly with two outside consultants who offered research and editorial assistance. The Fred Victor Centre co-ordinated the project, providing administrative resources, direction and support.

Additional key stakeholders were also consulted during the course of the project. They included:

- Members of the Ontario Hostels Association (OHA) who made connections with colleagues at other shelters in order to facilitate participation in this study. They also discussed scenarios involving trans individuals, and conducted outreach with current and former trans residents. OHA reviewed the preliminary report and provided feedback on the recommendations.

- The Trans Programme at The 519 Church St. Community Centre - host to Toronto’s only TS/TG drop-in, trans-youth programming, TS/TG sex worker HIV/AIDS programming, and the Hostel Training project on trans issues. Staff from the Trans Programme met with the principal researcher on a regular basis to offer information, resources, outreach to their participants, direction, encouragement and support.

- City of Toronto staff assisted in further focusing the research. A letter from the Shelter, Housing and Support Division was sent to all the shelters in Toronto, introducing the Trans Access Project and encouraging shelter participation.

Data Collection

The research involved both qualitative and quantitative approaches. Data was collected on:

- the shelter needs of street-active and homeless TS/TG individuals and the barriers they face in accessing and residing in the shelter system
- the need for a stand-alone TS/TG specific shelter
- the perspective of service providers in addressing the needs of the trans community and barriers within the system
Interviews and focus groups with the trans community were taped and the data was transcribed. Data from the interviews with shelter staff and management was recorded manually. A searchable database was developed with Microsoft Access 2000 to assist in analyzing the responses from shelter providers and the trans community.

This report does not represent the views of all shelter operators but includes a sample of staff from 17 of the 65 separate shelter locations, shelters for single men, single women and youth in the Toronto shelter portfolio. Shelters that serve women who are leaving abusive situations were not included in the study. As the project was carried out during the summer months, when many staff were away on holidays, it was difficult to arrange interviews with as many people as had originally been anticipated.

Thirty-nine trans individuals were consulted for this study. They were selected by street outreach staff and staff of The 519. Individuals who had accessed or attempted to access the shelter system were targeted.

**Trans Community Consultations**

Data for this section was compiled from three focus groups that included 30 people and nine individual interviews, for a total of 39 participants. Thirty-four of the respondents were MTF and five were FTM. Although the city has statistics on the number of transgendered individuals using the shelter system, it does not have a breakdown as to FTM or MTF. It is generally reported that the vast majority of trans individuals accessing shelters are MTF.

Interview questions were designed to encourage participants to discuss what is and what is not working for trans people in the shelter system, to outline their needs, to review their experiences in shelters and to make suggestions for improvements to the sector. The researchers endeavoured to ensure that the focus groups were accessible to trans individuals and that their voices would be reflected in the report. In order to achieve this the following steps were taken:

- The facilitator of the focus groups was the project assistant who had conducted street outreach and thus had gained the participants' trust. She was assisted in each group by the principal researcher.
- The focus groups were held at locations and times that were chosen by the majority of trans community members - usually at services regularly accessed by the community, at hours that were convenient.
- Those who were unable to attend the focus groups or were uncomfortable participating in a large group were offered the option of a one-on-one interview.
- All participants were paid $50 in recognition of the value of their input.
- Anonymity was guaranteed to all participants and identifying information was removed from the data.

Focus groups were held at The 519 and The Adelaide Resource Centre for Women. Individual interviews took place in coffee shops, restaurants and drop-ins. All focus groups and interviews were recorded with the permission of the participants and then transcribed.

**Shelter Sector Consultations**

A letter from the City of Toronto's Shelter, Housing and Support Division of Community and Neighbourhood Services was sent to all shelters in the City. It provided an overview of the Trans Access Project and encouraged shelters to participate in the research. Members of the Trans Access Project Steering Committee facilitated a meeting with the Toronto chapter of the Ontario Hostels Association to introduce the project. The Steering Committee also helped to compile a list of shelters representing the various sectors in the system: women's, men's, co-ed, youth and faith-based. (Faith-based shelters were defined as those operated by churches, synagogues or mosques or based on a particular religious philosophy). The faith-based groups were considered separately although they also fit under other categories.

Management and front-line staff of 17 Toronto shelters were interviewed in 24 separate sessions for this project. The 17 shelters included:

- five women's shelters;
- five youth shelters;
Table 1 - Shelters interviewed by sector

<table>
<thead>
<tr>
<th>Sector</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Faith-based</td>
<td>24%</td>
</tr>
<tr>
<td>Women</td>
<td>29%</td>
</tr>
<tr>
<td>Men</td>
<td>6%</td>
</tr>
<tr>
<td>Gay</td>
<td>10%</td>
</tr>
</tbody>
</table>

- five faith-based shelters (men, women, youth and co-ed);
- one co-ed shelter;
- and one men's shelter.

Forty-two people (11 executive directors, 7 management staff and 24 front-line shelter staff) were interviewed. Separate interviews were conducted with management and front-line staff to ensure that both perspectives were represented. All participants were assured of anonymity and all identifying information about particular shelters was removed from the data.

Shelter staff were asked a series of questions that were designed to determine the issues related to TS/TG access to the shelter system, operational challenges from a shelter providers' perspective (for example, the dilemmas involved in providing separate space for trans individuals) and training needs. A variety of topics were covered including, intake procedures, anti-discrimination policies and conflict protocols for trans and non-trans residents. Staff were also encouraged to offer suggestions that would contribute to the provision of accessible and appropriate services for this community.

To ensure that summary findings and recommendations emerging from this project were relevant and representative of the views of project participants, the preliminary findings were presented to meetings of both the Ontario Hostel Association and the Trans Community.

Interviews with Members of Trans Communities

People just don't have a clue, who we are, why we are, what we are. They just think it's choice. You know, some people don't even have the most basic understanding...The services, they just don't know.

Referral and Intake Procedures

Of the 39 people who participated in the research, ten were staying at shelters at the time of the interview and a total of 32 had stayed at shelters at some point in their lives. Thirteen had been refused entry into the shelter system on at least one occasion.

Participants reported that they were entering the shelter system in three ways:

- the majority were using the few shelters that they had found to be accessible, either from their own experience or through word of mouth in the trans community;
- some were using referrals from Street Helpline (Community Information Toronto), one of the few services in Toronto that keeps a list of shelters that are considered to be accessible to trans people; while
- other participants said that they were referred by staff at the Trans Programme at The 519 Church Street Community Centre.
Most places I go ask me if I'm on hormones or if I've had surgery.

I tried getting a meal at a women's shelter once. I'm MTF [male to female] but I don't pass as female yet. So, they have a policy and they do accept trans women but you have to present as female in every possible way. So they told me explicitly that I have to wear makeup, a wig, women's clothing, everything... you know, for me, that's kind of discriminatory because I looked around and saw other women, and some of them had short hair and some of them were not wearing makeup. You know women come in all different styles, right? But, I was being told that because I was a trans woman that I had to make myself look like a stereotypical woman to be accepted in that space.

Participants reported being denied entry because the intake worker felt the applicant did not appear to be committed towards a TS/TG transition process based on their physical appearance, or because trans women were not considered "real women" unless they had undergone sex reassignment (genital) surgery and/or were taking hormones. Participants also reported that they had to abide by certain conditions not required of other residents. For example, participants stated that they were instructed to wear breast prostheses and makeup and to be clean-shaven at all times. They reported being told not to wear clothes deemed "too sexy", and in some cases it was suggested that they not wear pants.

A lot of the time, I wasn't believed and was turned away for housing. It was easier to squat and live in parks than to even go through the [hostel] system at all.

Participants indicated that restrictive rules regarding appearance and dress at shelters was oppressive. They suggested that such rules might have a negative impact on self-esteem as trans people often base their self worth on their ability to pass in society.

A Preference for Women's Shelters

While the vast majority of lower income, homeless and street-active trans people are TS/TG women, more TS/TG men are beginning to access the shelter system. Yet both groups reported using the women's shelters, particularly those that are located in the downtown area with easy access to twenty-four hour a day transit. The preferred shelters were those that had completed training on trans accessibility. Faith-based shelters were reported to be the least accessible. Although many participants spoke about having experienced abusive relationships, none of those interviewed had accessed the shelters for women leaving abusive situations.
Well, transgendered women would rather stay at a women's shelter for the obvious reason that they're going through that transition to become a woman so why not be with women. We feel we are women.

I'm learning a lot more about what being a woman is all about from being at [a women's shelter] because I'm surrounded by women, I can feel really good and I don't have to have my guard up because of men around.

When asked why they were primarily accessing the women's shelters, all of the respondents said that it was because it was safer. Trans women indicated that they felt it was the appropriate choice because they are women and they have a right to access women's services. When trans men were asked, they also indicated that women's shelters were much safer for them. All of the trans men said that they feared sexual harassment and violence at the hands of residents in the men's shelters.

Of the 39 participants, 15 had stayed at men's shelters. Of this number, three were trans men (FTM) and twelve were trans women (MTF). The trans women said that to stay at men's shelter was a guaranteed "outing". They described being singled out for verbal, physical, and sexual harassment from other residents. According to the trans community participants, shelter staff provided little support or intervention in these situations. The respondents felt that staff in the men's facilities had little awareness of the needs of trans people and conveyed the view that the trans population belonged in the women's shelters. The trans women interviewed indicated that they would only stay at men's shelter as a last resort. Many felt that staying on the street would be preferable.

It's scary in men's hostels and it is because there's a lot of violence... You're going to put on your shoes and go 'cause it's scary.

I think rape would be a huge concern for me in men's hostels.

Trans men made the following comments:

It's just been a disaster 'cause I don't fully pass...it's ten times more dangerous to be there [men's shelter] than it is to be pretending to be a woman and going to a women's shelter which is incredibly degrading and demeaning in itself when that's not who you are.

There's a lot of repressed hatred for trans people and a lot of times that comes out in rape or other forms of violence.

Most [male] shelters I've been in have stated that I'm not allowed to tell anyone I'm trans, and if I do, I'll be removed, I'll be barred.

Both male and female trans respondents suggested that, with a few exceptions, as opposed to the staff at women's shelters, staff at the men's facilities lacked the knowledge and sensitivity to issues of sexual assault, sexual harassment, homophobia and discrimination towards TS/TG people.

Experiences of Harassment and Discrimination

Generally, participants reported that they hoped to get to know other residents and make new friends when staying in a shelter and they wanted a "calm stay". Yet, almost half of the interviewees who had stayed in shelters felt unwelcome. A number of participants indicated that they had been discriminated against by other shelter residents.

- Fourteen respondents said that they were harassed by other residents.
- Eight stated that they had been assaulted.
- It was reported that non-trans residents sometimes create incidents involving trans people in order to have the latter discharged.
- Trans residents reported hearing other residents express disgust at having to share facilities and/or rooms with trans people.
- Trans residents described instances in which shelter residents had insulted them on their looks and/or their ability to pass, made inappropriate comments about their genitalia and used incorrect pronouns to describe them. Discriminatory comments by residents were often made in public shelter spaces such as restrooms, change rooms, television areas and dining halls.
- Individuals working in the sex trade were also insulted about their lifestyle and/or sex trade activities.
Participants in the study stated that with a few exceptions (shelters that make it clear at intake that anti-trans harassment is not tolerated in any form and actively enforce that rule), most shelters tend to be quite lax in following up on incidents in which trans residents are harassed. Participants reported that harassment often intensifies if other residents realize that staff do not enforce anti-transphobia policies (if they exist).

_I was in a shelter and every time, I was going into my room, my roommate would call me names...I was there for two months, and the whole two months she was calling me names...The staff did nothing._

Participants cited instances in which they felt discriminated against by staff or singled out by the implementation of particular shelter rules.

- Some shelters place added conditions upon trans people during their stay and this can give the impression that trans residents are different from the rest of the shelter population.
- Over 40% of the trans respondents stated that their biggest fear was that they would be blamed by staff for incidents within the shelter simply because of their identity as trans people.
- Fifteen stated that they voluntarily left shelters because of rigid rules and curfews, resident harassment and staff discrimination or indifference.
- In some instances, trans participants felt that they had been unfairly targeted by staff because of their trans identity.

_There was a group of transsexuals including myself staying at [a woman’s shelter] and one transsexual who was not in our room had an outburst with one of the women. And as a result, the next morning all of us were woken up by the police telling us we had to leave because of the one transsexual. If I were staff, I would have dealt with the individual who had the issue first hand. I mean, I definitely wouldn’t have kicked out the rest of the transsexuals because that would be a discriminating thing to do and it’s ignorant._

- Eleven of the trans women participants felt that they had been harassed by shelter staff.
- Four of the trans women said that they were treated as if they were men by shelter staff even though they identified as women.
- Nearly half of the respondents had been asked to leave a shelter.

Discrimination within shelter settings was compounded when trans people were involved in the sex trade. Sex workers who were interviewed emphasized that shelter rules and curfews need to be flexible. The City of Toronto Shelter Standards clearly states that sex workers are to be allowed overnight passes, however, some shelters do not follow this guideline. In addition, participants reported that anti-sex work sentiment was often expressed in shelter settings.
Views on Designated Space

During the focus group discussions, a variety of views were put forward as to the desirability of designated space and/or the need for a range of shelter options. Only twenty percent of the trans respondents suggested that there should be a specific trans shelter with trans staff. Others indicated that all shelters should be trans accessible or that there should be some designated beds for individuals not comfortable in the current shelter system. Specific support for transgendered individuals in the shelter system was also identified as a need.

Positive Experiences

Although the interviews revealed that trans people encountered problems in the shelter system, thirteen participants also noted that they had had positive experiences in shelters. Factors that contributed to a positive experience were often quite simple, such as when:

- trans residents connected with other residents and made friends
- shelter staff were supportive

Table 5 - Trans community participants - primary factors that determine a positive stay at a shelter
• shelter staff followed clear non-discrimination policies regarding trans residents
• there were flexible curfews and overnights for sex trade workers
• housing was accessed

I was there for a month and a half and the housing worker actually found me housing. That was the best thing. Also, one of the counselors actually referred me to some of the women’s hostels.

...getting connected to things like harm reduction, getting to replace my ID and not having to pay for it, getting connected to social housing.

The best thing that happened to me in the hostel was [that it was] more of a retreat from the street...so it was a place where I could go, a safe place to go and rest and regenerate myself.

Suggestions for Improving Access and Shelter Services for Trans Individuals

When participants were asked for suggestions to improve access and service to trans individuals in the shelter system they recommended that:

• Shelter staff uphold the rights of trans individuals;
• Appropriate policy and procedures for the intake process should be developed and be mandatory for all shelters in the system;
• Anti-discrimination policies include trans residents;
• Incidents of discrimination toward trans residents be addressed immediately and it be made clear that the shelter does not tolerate such behaviour;
• Intake procedures, shelter rules and expectations be the same for both trans and non-trans residents;
• Accessible complaints policies and procedures for trans residents;
• There be flexible curfews and overnights for sex trade workers; and that
• There be HIV/AIDS education and support programs that are trans accessible.

Interviews with Shelter Staff and Management

Forty-two individuals (11 executive directors, 7 management staff and 24 front-line staff) from 17 shelters were interviewed in 24 sessions. Separate interviews were conducted with management and front-line staff to ensure that both perspectives were represented. All participants were assured of anonymity and all identifying information about particular shelters was removed from the data.

Of the 17 shelters interviewed there were:

• 5 women's shelters
• 1 women's faith-based shelter
• 1 men's shelter
• 2 men's faith-based shelters
• 5 youth shelters
• 1 youth faith-based shelter
• 1 co-ed shelter
• 1 co-ed faith-based shelter
Table 7 - Shelter Sectors - brief overview of research sample

- Women 29%
- Youth 29%
- Men's faith-based 6%
- Faith-based 6%

Table 8 - Shelter Sectors - distribution of trans residents accessing within the last year

- Women's 49%
- Men's 15%
- Youth 12%
- Faith-based 6%

Thirteen of the 17 shelters that participated in the research accept trans people at their facility. Staff at four of the shelters indicated that they do not currently accept TS/TG residents. Only one of the faith-based shelters accepts trans residents based on self-identity. At the time of the interview, two women's shelters and four youth shelters had trans residents staying at their facility.

It was reported that 117 trans people had accessed the facilities of the 17 shelters during the past year:

- 57 in the women's shelter sector
- 18 in the men's shelter sector
- 18 in the youth shelter sector
- 14 in the faith-based shelter sector
- 10 in the co-ed shelter sector

(Note: some respondents may have accessed more than one shelter)

Staff noted that trans people stay a relatively short length of time compared to non-trans residents. This was particularly evident in the youth, faith-based and co-ed shelters. The average length of stays reported for trans residents were:

- Women's shelters - 84 days
- Men's shelters - 60 days
- Youth shelters - 5.5 days
- Faith-based (all types) - 4 days
- Co-ed shelters - 1 day

Table 9 - Average length of stay for trans residents by shelter

<table>
<thead>
<tr>
<th>Sectors</th>
<th>Days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Women's</td>
<td>84</td>
</tr>
<tr>
<td>Men's</td>
<td>60</td>
</tr>
<tr>
<td>Youth</td>
<td>5.5</td>
</tr>
<tr>
<td>Faith-based</td>
<td>4</td>
</tr>
<tr>
<td>Co-ed</td>
<td>1</td>
</tr>
</tbody>
</table>

Intake Procedures

Intake procedures differ from shelter to shelter. Staff at two of the shelters reported that trans individuals are asked specific questions on hormone replacement therapy and sex reassignment surgeries. This information is then used to determine whether or not an individual is to be admitted to the shelter.
Front-line shelter staff reported that while it was extremely rare, there had been occasions when they were hesitant about admitting someone who identified as trans. In each of these situations, the potential new resident was identifying as trans female. Shelter staff expressed fear about the possibility of admitting men who might be posing as trans women. They reported incidents where they were unclear if an individual requesting shelter was in fact trans.

**Anti-Discrimination Policies**

Shelters are required to have anti-discrimination policies that cover a wide range of issues (e.g. discrimination is not permitted on the basis of race, religion or sexual orientation). 58% of those included in the study posted the policy around the shelter and in the office, and 37% read it to residents during intake. 25% provide specific examples of oppression that are not tolerated at the shelter.

Only 42% of shelters surveyed had a specific written policy concerning non-discrimination towards trans people. Among the shelters that participated in the study, all the youth, men's and women's shelters (with one exception) had implemented a trans anti-discrimination policy (some were written, others were not). One co-ed facility was in the final steps of implementing a policy. None of the faith-based shelters reported having any kind of non-discrimination policy for trans residents.

One faith-based shelter noted that they do not allow trans women on the women's side of their co-ed facility.

*We have a sort of practice protocol that has an explanation for workers to make to trans [residents] on why they are being put on the men's floor. They also tell them how to dress. There are restrictions on how they dress and the makeup they can and can't wear...We have to assess whether they are going to incite violence and negative hostile reaction from the male residents. There is a growing group of staff that feels we should be more embracing around the trans thing. It is causing quite a bit of controversy here. Regardless, my executive director is very clear that we aren't going to be changing our trans policy.*

**Harassment and Discrimination**

Initially, 29% of the staff reported having heard derogatory terms used against trans residents. However, when probed, over 50% revealed that they had heard the deliberate misuse of pronouns and gender inappropriate slurs at their shelters. Comments such as "shemele", "faggot" and "he-she" were reported as overheard.

When shelter staff were asked about standard procedures in dealing with incidents within the shelters, it was reported that more than 66% were mediated and resolved (to the satisfaction of the staff). In incidents involving TS/TG residents however, they reported that almost 67% resulted in a discharge for the TS/TG resident.

**Existing Facilities**

None of the shelters have designated rooms for trans residents, but rather accommodate them in the general shelter facilities. Three shelters had tried having designated space for trans residents but due to loss of funding when beds were empty, and a belief that it was more equitable to integrate trans residents, the trans spaces were converted back to general accommodation.

It was noted that incidents between trans and non-trans residents commonly occurred in the washrooms and communal change areas.² The shelters that were rated highly with the trans community had at least some private restrooms. Staff from

² Some staff indicated that they would make arrangements for trans residents to shower at low-traffic hours (sometimes as early as 4:00 a.m.) and/or allow the use of staff or disabled access washroom. However, staff agreed that this practice was far from ideal and most certainly isolated trans residents.
these shelters indicated that it was important to have this choice of facilities for all residents.

- 37% of the shelters surveyed had communal shower facilities.
- Over 50% reported that they had shower stalls with private change areas contained within communal areas and/or private showers.
- 17% of the shelters had communal restrooms, while 21% had private ones. Fifty percent said they had both private and communal restrooms.  

**Stand-Alone Shelter Facilities or Designated Space for Trans Residents**

Service providers had a variety of responses to the idea of a stand-alone trans shelter. Those that supported the idea of a stand-alone facility typically had little experience with trans residents, while those who did accommodate the trans population tended to express concerns about a specific trans facility.

**Table 11 - Percentage of shelters who have received 519 training**

- Shelters who identified having had the 519 trainings: 62%
- Shelters who did not identify having the 519 trainings: 38%

**Table 10 - Percentage of shelters who support integrated vs. stand-alone program**

- Integration is achievable: 38%
- Integration is not achievable: 62%

**Table 12 - Shelters Trained for integration**

- Shelters who received 519 training and oppose integration or feel it cannot take place: 13%
- Shelters who received 519 training and support integration: 87%

---

3 Data was not collected for all facilities.
Shelter staff supporting the stand-alone shelter suggested that trans people would not have their specific needs met in an integrated shelter setting and mentioned the challenges of trying to understand the behaviours of trans people.

The shelter staff who supported integrated shelters expressed concern that segregation could increase feelings of isolation and the separation might suggest that trans people do not belong at a shelter. They also indicated that non-trans residents might feel that trans residents were receiving preferential treatment or were considered to be different by the shelter staff if they were accommodated in separate space.

Staff at every shelter that had undergone intense staff development and/or policy development concerning TS/TG access suggested that a stand-alone shelter would allow other shelters to remain inaccessible.

Training Needs

Seventy-nine percent of shelter staff reported that they were comfortable talking openly with each other about trans issues or concerns. They felt that they could provide adequate information about trans people to non-trans residents, they could emphasize that trans people were welcome at the shelter, and that anti-trans discrimination was not tolerated. However, many expressed a desire to receive more training in order to learn more about the issues and needs of this community. They also stated that they lacked knowledge about the technical aspects of sex change (such as how hormonal therapy works, or the specific mental and physical health needs of trans people) and they felt that this hindered their abilities to relate to trans residents.

Some front-line shelter staff expressed fear of reprisal from management if they were to raise their own personal issues and concerns about integrating trans people into their shelter. Others reported that at times, they did not have the support of their colleagues on trans issues even though they had received education and training with the Trans Hostel Access Project (The 519).4

Staff from one shelter, described their experience of developing a trans inclusion policy with the help of The 519. Two trans trained staff worked on the shelter's policy committee and consulted with other staff around specific scenarios, staff concerns and expectations. At the same time, The 519 conducted resident workshops.

_The whole thing really worked because it was a much more holistic approach. We can use [this] as a model approach for similar policy development._

Workers indicated that having a clear written policy and protocol for front-line shelter staff and intake workers was vital in maintaining a sense of equity in working with trans residents.

_Staff have a good awareness of trans people and work with a common language on the issue....Most feel comfortable following our guidelines even if they don't agree._

However, they felt that the section on TS/TG accessibility in the revised City of Toronto Shelter Standards is vague and leaves shelter staff free to interpret the Standards according to their own philosophies.

Staff Suggestions for Improving Access and Shelter Services for Trans Individuals

- Require all shelter staff to receive training from The 519
- Have training available for shelter residents
- Have the City of Toronto monitor shelters to ensure accessibility for trans people and consistency across the sector
- Provide an advocate in the shelter system; someone to connect trans people with shelter service providers and community based services that are accessible and work well with the trans population
- Provide accessible harm reduction and counselling services for trans residents

---

4 Under the City's Shelter Standards individuals who identify as female are to be admitted to women's shelters.
Conclusions

During the past few years, definite progress has been made in the provision of shelter services for the trans community. However, the research indicates that trans individuals still face barriers in accessing the shelter system. Once accommodated they often experience discrimination from other residents as well as staff members. Participants in the research stated that they felt like outcasts in some shelters. They reported that at times they had been refused access, under serviced, targeted, or barred from services. Harassment from other shelter residents was reportedly a frequent occurrence and many of the TS/TG people interviewed had left shelters for this reason.

Both trans women and trans men reported that the women's shelters offered the safest environment, particularly those shelters that had received training on trans issues. Faith-based shelters were reportedly the least accessible.

Service providers are still struggling to understand and define accessibility. Four of the 17 shelters surveyed do not accept trans people, intake procedures differ widely among the shelters, and most services do not have written anti-discrimination policies that include the trans community. Half of the staff reported that they had heard derogatory comments made about trans residents, indicating that they are cognisant of the discrimination experienced by the trans community.

Staff from a range of shelters indicated that integration of the trans community within the shelter system was both possible and desirable. Workers emphasized that having a clear policy and protocol for front-line shelter staff was vital in ensuring accessibility to trans residents, yet these were often lacking.

In order to build on the gains that have been made in the shelter system and reduce barriers to access, training of both staff and non-trans residents is needed. Anti-discrimination policies that include trans residents and clear procedures for admitting and sheltering trans residents are also critical in ensuring consistent service across the sector.

Although there were a variety of views as to the importance and/or desirability of having a trans shelter or trans beds, it appears that some designated space is needed for people who are still exploring their options regarding gender and/or people not ready for an integrated setting.

Another issue that was identified through the research process was the need for long-term housing for the trans population. Many trans individuals remain for long periods in the shelter system because there are few housing options available to them.

The research also highlighted the need for a City process for addressing complaints within the shelter sector. Significant change across the system will not occur without the inclusion of resources to address the issue. In addition to training, it is necessary for the City of Toronto to take a strong stance in promoting trans accessibility with the various shelter providers. Trans residents also need advocates who can refer them to appropriate shelters and services and provide case management as needed.
Recommendations

The following recommendations offer a “Best Practice” model that would:

- Increase accessibility and services for trans individuals within the shelter system
- Reduce the barriers to shelter currently being experienced by the trans community
- Provide support to the TS/TG community and to shelters in the implementation of the City of Toronto’s new Shelter Standards on accessibility for TS/TG people

1. ONGOING ROLE OF THE TRANS ACCESS PROJECT STEERING COMMITTEE

Recommendation:

That the Trans Access Project Steering Committee broadens its membership to include additional representatives from the shelter sector (particularly the men’s and youth shelters) and other stakeholders as deemed appropriate by the Committee. This expanded Committee would be responsible for:

- Promoting and monitoring the implementation of the recommendations contained in this report;
- Working with The 519 in the development of an implementation strategy for the provision of services recommended in this report;
- Accessing SCPI funding to hire a consultant to evaluate the impact of these recommendations at the end of the first year of implementation; and
- Working with the City liaison person (as outlined in recommendation 4).

2. TRAINING

Recommendations:

Resources

That the City of Toronto increase funding of the Trans Hostel Access Project for a minimum of three years to ensure that this project has the resources to implement the training and development recommendations contained in this report.

Policy Development

That all shelters be mandated to develop and implement intake policies, accessibility protocols, and anti-discrimination policies for TS/TG residents, in partnership with The 519.

Staff Training

That all shelter staff (full-time, part-time and casual) participate in ongoing staff training provided by The 519 on TS/TG issues.

Resident Development

That all shelters develop and post a non-discrimination policy that specifically includes non-discrimination towards TS/TG residents and read the content to all residents upon intake.
That all shelters provide ongoing resident development and awareness workshops/activities, facilitated by The 519, on the needs, issues and realities of TS/TG people.

That educational material on TS/TG issues be made available and/or be posted in the shelter residence common areas.

3. OUTREACH, ADVOCACY AND CASE MANAGEMENT

Recommendation:

That the City of Toronto contribute to the funding of a specifically mandated staff position to provide referrals, advocacy and case management services for TS/TG people accessing the shelter system. Such a position should be located in an agency that is currently offering services to and has credibility with the trans community.

4. SHELTER LIAISON STAFF

Recommendation:

That the City of Toronto fund a City staff position for a one-year period to liaise with shelter service providers, supporting them in working towards accessibility, assisting in the development of policies and procedures, and facilitating forums to discuss and resolve operational issues. This staff person would also develop support materials and literature for the shelter sector, centralize existing materials, and conduct further research into the feasibility of establishing designated beds for the trans community (see Recommendation 5). It is suggested that this position should be evaluated before the end of the one-year period. The Trans Access Project Steering Committee should provide input into the job description for this position and be part of the selection process.

5. TS/TG DESIGNATED BEDS

Recommendation:

That there be a minimum of 10 beds dedicated to the TS/TG community within an existing City of Toronto shelter which is located in the downtown section of Toronto. The beds would be designated for people who are still exploring their options regarding gender, those who don't identify strongly with either gender, and people not ready for an integrated setting. Other shelters would be expected to continue to accommodate trans individuals. The City, in collaboration with the Ontario Hostel Association, should develop a process for implementation of this recommendation. Staff to support these 10 beds should be recruited from the TS/TG community.

6. CO-ORDINATION WITH SHELTERS FOR WOMEN LEAVING ABUSIVE SITUATIONS

Recommendation:

That the Trans Access Committee work with VAW shelters and the Assaulted Women's Priority Housing Program to facilitate accessibility for TS/TG women who are fleeing violence.

7. LONG-TERM HOUSING

Recommendations:

That The 519 provide information and training to permanent and transitional housing providers with respect to the needs of the TS/TG community.

That the Fred Victor Centre Housing Access and Support Program work with the TS/TG community to access transitional and long-term affordable housing units that would be dedicated to the trans community.

8. OMBUDSPERSON

Recommendation:

That the City considers appointing an Ombudsperson to the Access and Equity Unit. This position would investigate a range of complaints in the shelter and social housing sectors.
APPENDIX 1
BACKGROUND OF THE RESEARCHERS

Christina Strang, Consultant

Christina Strang has been a part of the TS/TG community services sector in Toronto virtually since its conception in 1998. Christina was the principal researcher with The 519 TS/TG HIV/AIDS Booklet Project which worked closely with the trans sex workers of Toronto to develop the city’s – and Ontario’s – first information and resource campaign targeting TS/TG people involved in the sex trade – The Happy Transsexual Hooker – which she presented at the International Conference on HIV/AIDS in Durban (South Africa). Christina went on to co-ordinate the MEAL TRANS Programme (Trans Programmes – The 519) until 2002. In that time she worked to establish trans community based initiatives at The 519 Church St. Community Centre as a key stakeholder in the social services sector through a persistent community partnerships campaign. She founded Trans Youth Toronto, Canada’s only community based programme directed by and for trans youth. As well she developed the city’s first initiative to provide training and support for hostel service providers with the aim of fostering an accessible hostel system for homeless trans people – where one did not presently exist. Christina went on to become the Community Partnerships Co-ordinator with Voices of Positive Women where she facilitated community based initiatives with a provincial membership of HIV positive women until Spring 2003. Christina’s core principle in working with communities has always been community based and has always believed the success behind initiatives with which she has been attached is primarily due to the involvement of the communities with which she has been fortunate enough to work with. Their spirit is reflected in every endeavour for which she feels they are the true owners.

Monica Forrester, Project Assistant

Monica Forrester comes from four years as Toronto’s only outreach worker dedicated to serving TS/TG sex workers. As such, she has been on the forefront of HIV/AIDS prevention, education, and awareness for trans people in Canada. She co-produced The Happy Transsexual Hooker with Christina Strang in 1999 - which was the first and biggest HIV/AIDS prevention and information campaign ever directed towards trans sex workers in Toronto. She served two consecutive terms on the Metro Toronto Police Force Lesbian Gay Bi Trans Community Liaison Committee where she specifically represented the needs and interests of the TS/TG sex workers. Monica continues to act as a stakeholder in all interests concerning trans sex workers and devotes her time towards outreach, advocacy, and main resource for her community at The 519 Church St. Community Centre where she handles outreach and facilitates trainings for hostel service providers on the needs of homeless trans communities.

APPENDIX 2
TRANS ACCESS STEERING COMMITTEE MEMBERS

City of Toronto, Community and Neighbourhood Services, Shelter, Housing and Support – Fiona Murray, Manager, Planning and Development
City of Toronto, Community and Neighbourhood Services, Shelter, Housing and Support – Maura Lawless, Manager Operations and Support Services
City of Toronto, Public Health – Alice Gorman, Community Health Officer
Fred Victor Centre Housing – Keith Hambly, Director of Housing and Shelter Services
Fred Victor Centre Women’s Hostel – Wairumu Wamugo, Hostel Manager
APPENDIX 3  
LITERATURE REVIEW & RESOURCES

Literature Review:

Much of the research related to the transgender community has been published in the last decade. Ki Namaste's report Access Denied, on the experiences of transsexuals and transgenderists with health care and social services in Ontario, was one of the earliest studies that investigated shelter access for this community. (Namaste, 1995)

None of the youth or women's shelters Namaste contacted had a written anti-discrimination policy that included transgendered people. Namaste found that staff members of the shelters and drop-ins for homeless women were generally more familiar with transgender issues than staff working with homeless youth. Among the shelters surveyed there was outright refusal to admit transsexuals or transgendered individuals, acceptance if the individual was post-operative, and acceptance if the individual could provide documentation that they were undergoing a gender transition (i.e., a letter from the Gender Identity Clinic at the Clarke Institute of Psychiatry or a doctor).

In this 1995 report, Namaste recommends:

The current practices and policies of youth, homeless and women's shelters must be reviewed, in light of the information presented in this report. In all cases, staff members need training on TS/TG issues. Such training must address not only proper etiquette, but also the responsibility of an agency to provide services to transgendered people in need. Staff and agencies, moreover, are responsible for ensuring that TS/TG people who use their facilities are safe from violence, discrimination, and harassment from other shelter residents. A review of these policies needs to occur in each shelter agency in Ontario, as well as at the level of shelter associations. (Namaste, 1995:33)

The U.S. National Coalition for the Homeless recently commissioned a comprehensive study on shelter access issues for the transgender community. Transitioning Our Shelters: A Guide to Making Homeless Shelters Safe for Transgender People, is intended for shelter administrators and staff, government officials and anyone interested in making shelters safe for transgendered people. (Mottet and Ohlie, 2003)

The study found that the single most important ingredient in making a shelter safe is to understand and implement a policy of respect for transgender people. This policy of respect for transgender individuals focuses on a person's self-identification. It is not considered relevant as whether or not an individual has made body modifications through hormone therapy or surgery.

The report recommends training on transgender issues for both residents and shelter staff.

In order for shelter staff to adequately serve the transgender community, they must first learn and understand who transgender people are and what type of discrimination they face. (Mottet and Ohlie, 2003:43)

In March 2002, the Boston Public Health Commission implemented protocols to improve services for transgendered guests in its homeless services program. The Protocol for Serving Transgender Guests, intended for use by all staff at homeless services, recognizes transgender individuals according to their gender identity. In order to raise awareness and begin to break down barriers to equal treatment for transgender homeless people in Boston, the Commission brought together representatives from TransHealth, and a number of other service providers to provide training to nearly 100 management and front line shelter staff.
Resources:

Trans Programme and Trans Hostel Access Project (The 519 Church Street Community Centre), Toronto, Ontario

Initiated in 2001 by the Meal Trans Programme (renamed Trans Programme in 2003), this project recruits TS/TG people from diverse backgrounds and trains them to facilitate workshops for shelter service providers. Trans Programme staff visit individual shelters to facilitate an interactive workshop based on the particular needs of the staff group. In addition to staff training on homeless TS/TG issues, the programme offers assistance in policy development, and acts as a resource for both the lower income and street-active trans communities and shelter service providers in Toronto. Shelters that were in the process of becoming more TS/TG accessible reported that the services of the Trans Programme were invaluable.

Allison Cope & Julie Darke. Trans Accessibility Project: Making Women's Shelters Accessible to Transgendered Women, Kingston, Ontario, Queen's University, October 1999


This publication is intended as a resource for shelter service providers who are attempting to become more accessible for TS and TG people. However, the work is highly academic and a large portion of the document is spent discussing the continuum of gender. While there are many good recommendations contained within this manual, a document prepared by the same authors in 2002 is written in a style that is much more accessible (see below).


www.transalliancesociety.org/education/documents/02womenpolicy.pdf [accessed: May 2003]

This manual is an excellent resource for women’s services that are trying to understand how and why transsexual women are women and why it is essential to make services accessible to them. It highlights access and safety issues for transgender people – or those who live outside of society’s ‘gender norms’ – in a largely gendered community service network. Unfortunately, like its predecessor, this document does venture into academic explorations around gender identity. However, the practical recommendations would be useful to most shelter service providers. The book is also a handy reference tool for policy development on TS/TG access.

APPENDIX 4
BEST PRACTICES AND MODEL POLICIES

Fred Victor Centre
Fred Victor Centre
Women’s Hostel

Trans-gendered / Transsexual Policy

Fred Victor Centre Women’s Hostel serves all individuals who present for intake that identify as women. All individuals are to be admitted based on the sex/gender by which they themselves identify they are living full-time - not by genital designation – as it is specific to the sex/gender by which this hostel is mandated to serve.

For example: a transsexual woman (male-to-female) presents for intake and is to be admitted regardless of whether or not she has received sex reassignment surgeries of any kind. One exception only is that for female-to-male trans people (or “FTMs”) must be admitted if that potential resident feels that they simply are not safe at a men’s facility or need to access services typically associated with women’s hostels (such as anti-violence programs, etc.) or both. This should be done regardless of how far along the potential resident may be in their transition.

The hostel is committed to on-going resident development and awareness workshops/activities on the needs, issues and
Procedure

- Staff may not ask for medical specifics of a trans resident’s transition outside of what is asked of all residents (i.e., medications that are to be kept at the administration counter, specific physical and mental health needs, etc.).
- Intake based on the length and extent of a potential TS/TG resident’s transition is to be considered inappropriate.
- Intake based on a potential TS/TG resident’s physical appearance or ability to “pass” as their identified sex/gender is to be considered inappropriate.
- It is not permitted to place conditions on TS/TG residents that would not be placed on a non-trans resident (i.e., forcing a trans resident to dress a certain way, compelling a trans resident to wear makeup, insisting a trans resident wear breast prosthesis, insisting a trans resident must be currently under the care of a medical professional for their gender identity issues)
- Staff must base discharges, service restrictions and warnings following any incidents involving trans residents on individual behaviour only.
- Staff who have not completed at least initial staff development on TS/TG issues must submit all incident reports involving trans residents to the executive director whereby any or all decisions can be reversed.
- TS/TG individuals presenting for intake are not to be turned away or referred to another shelter unless (i) the shelter is at capacity and has reported being so to the Street Helpline, and/or (ii) the individual is currently banned from that specific facility.

Staff & Resident development

All staff (full-time, part-time and casual) must take part in ongoing staff development on the needs, issues and realities of TS/TG people from a City of Toronto endorsed agency providing the trainings.

Fred Victor Centre
Facilitative Management Philosophy

In implementing a working strategy consisting of identified best practices, it is necessary to base all policies and mandates on a community based philosophy taking into account the interests and opinions of the communities of people a hostel is housing.

It should be an unmistakable policy for anyone hoping to provide better access for homeless trans people, and many other communities of people, that these people are given venue to express their concerns and offer their feedback on the future directions of the hostel they access. Fred Victor Centre has developed a solid practice based around their philosophy of “facilitative management”

... “facilitative management” is an operational framework which helps homeless people to participate in decision making while recognizing their diverse skills and abilities. It is understood that facilitative management is based upon choice and personal responsibility. This framework also assumes that people are able to manage their lives and participate in creating a stable and safe community, in which all members, tenants, board and staff are mutually responsible and accountable to each other for their behaviour, choices and decisions.”

Fred Victor Centre
Housing Services Brief
Facilitative Management
Nellie's Policy Development Process

The Board sets and approves organizational policies with respect to our organization's mission. These areas include but are not limited to women and violence, poverty, homelessness and oppression. These policies govern our organization and are integrated within our organization. Our policies reflect an integrated feminist anti-racist/anti-oppression framework.

The organizational and governance policies are developed by Board Committees and Board approved. The standing Board Committees are made up of Board Members, Board Committee Members (Community Volunteers) and Staff (both front-line and management). We have a policy development policy that is used as a tool by respective Committees in the development of all broad organizational and governance policies.

The Social Justice and Anti-Oppression Board Committee develops, reviews and recommends changes to our Anti-Racism/Anti-Oppression policy and implementation plan. The Board approves this policy and any changes. Training is provided to all new stakeholders, Board, Staff and volunteers annually at our Training and Orientation session. Training includes specific application of these policies to all stakeholders who work within the organization.

Program and Service Policies and procedures are developed within the framework of these broad organizational policies. These policies are developed by management staff in consultation with both the staff teams and Executive Director. The standing Staff Anti-Racism/Anti-Oppression committee will also review policies and procedures to ensure compliance with AR/AR policy and implementation plan. This standing staff committee has a Terms of Reference, meets quarterly and consists of front-line staff, both permanent and relief, and management staff. New policies and procedures are reviewed at team meetings and at quarterly program staff day aways. Training and orientation on policies and procedures are provided to new staff, program volunteers and students. Any required changes or gaps within policies and procedures are identified through staff and resident feedback and complaints, on-going external training and education and changes in best practices, legislation and Funder requirements etc. Policies are reviewed regularly by staff teams. On-going training and education is provided to all staff, program volunteers, students and to residents in the area of anti-racism/anti-oppression policy and education. Services and program policies are accessible to clients through the resident handbook.

Policy Development at Women's Residence

1. The need to develop a policy usually arises from one or more of the following events:
   - A new standard is set internally or by an external source
   - A new question/concern regarding client service arises
   - The old policy no longer reflects the current practice or philosophy

2. It is often the staff that directly deliver the service that will bring to management’s attention that a policy may be lacking or needed to be revised.

3. Management then has to:
   - Clarify with staff what exactly is needed and what is the issue/concern that is not being addressed by existing policies
   - Draft a very preliminary policy with procedures
   - Have the policy reviewed by staff, other management, peers, clients and other stakeholders or key informants
   - Incorporating the input requires that many drafts will be developed before there is a policy that sufficiently addresses and clarifies the issues/concerns. It also means that there will be an ongoing dialogue with the stakeholders already identified for their continued input and review of the many drafts.

4. Finally, once the policy looks good enough to staff and management, the policy needs to be rolled out through staff meetings, postings in memo boards, attached to emails, clients' meetings, individual supervisions.

Developing a policy that can be implemented/operationalized does require a lot of patience and reworking of the material. It may strain already overburdened workers and stakeholders and the easy way is to 'just put something down on paper'. However, that must only be the first step. Not all policies require this much effort, yet the ones that have a serious impact on client service delivery or staff work life and environment definitely do.
APPENDIX 5

LETTER FROM SHELTER, HOUSING AND SUPPORT DIVISION

July 15, 2003

To: All Shelter Operators
From: Phil Brown, General Manager

RE: Trans Access Project

The Fred Victor Centre is conducting a participatory research project to examine and develop a "best practices" service model for working with homeless transsexual and transgender people who access hostel services in the City of Toronto. The Fred Victor Centre is a multi-service centre that provides housing, shelter, programs and services for homeless and low-income people. Funding for this project has been provided by Wellesley Central Urban Health Grants, the Lesbian and Gay Community Appeal and through the Community Planning and Research envelope of the Supporting Communities Partnership Initiative (SCPI).

The project objectives include:

• Identify ways to reduce barriers to service and ways to enhance the accessibility of hostels for homeless transsexual and transgendered individuals;
• Develop a "best practices" service model for working with homeless transsexual and transgendered individuals;
• Develop recommendations regarding specific supports and services to most effectively meet the needs of homeless individuals; and
• Develop options regarding future shelter or program development specific to this population group.

The core work will be undertaken between July and September 2003 and includes a questionnaire for shelter providers, focus groups with the homeless transsexual/transgendered community, one on one interviews with a sample of homeless transsexual/transgendered, and focus groups with shelter operators and key stakeholders. The questionnaire for shelter providers and focus groups will provide an opportunity for input and feedback into the project. A Stakeholder Advisory Reference Group has also been set up with representatives from shelters, and key service agencies to provide advice and guidance to the process.

The Shelter, Housing and Support Division is looking forward to the findings of this project to assist us in future strategic planning and shelter development initiatives. I would encourage and appreciate your participation in this study.

Project team members will be in touch with you shortly. If you have any questions about this project please do not hesitate to contact Christina Strang, Project Consultant at 416-536-9783 or Keith Hambly, Fred Victor Centre at 416-364-3522 extension 402.

Sincerely,

Phil Brown
Executive Summary

Over the past several years, an increasing number of transgender individuals have been using Toronto's shelter system; however, the processes and the procedures for accessing shelters are not consistent across the sector and trans individuals have reported difficulty in receiving service. In response to this issue, Fred Victor Centre undertook a participatory research project to determine the specific shelter needs of the homeless and street-active trans communities and the barriers they face in accessing Toronto's shelter system. Funding for the project was provided by Wellesley Central Urban Health Grants, the Lesbian, Gay Community Appeal and the Supporting Communities Partnership Initiative (SCPI).

The goals of the research were to:

1. Make recommendations about the kinds of support and shelter services required to most effectively meet the needs of homeless transsexual and transgender individuals.

2. Identify ways to reduce the barriers to services and create shelter environments that are safe, welcoming, and accessible.

3. Make a recommendation to the City of Toronto as to whether or not there should be a shelter specifically developed to meet the needs of transsexual and transgender individuals.

A Steering Committee composed of representatives from the City of Toronto, Shelter Housing and Support Division, the Public Health Department, shelters, and services (including trans service providers) that work directly with the trans community guided the project. The two principal researchers, members of the trans community, were knowledgeable about the shelter system and well connected with poor, homeless and street active trans community members.

Data was collected from 39 trans individuals through three focus group sessions and nine individual interviews. Forty-two people from the shelter sector were also interviewed. They represented 17 women's, men's, youth, co-ed and faith based shelters. These 17 shelters reported having served 117 trans individuals during the previous year.

The researchers found that during the past few years, definite progress has been made in the provision of shelter services for the trans community. However, the research indicates that trans individuals still face barriers in accessing the shelter system. Once accommodated, trans residents often experience discrimination and harassment from other residents and in some instances from staff members. In spite of City policies that stipulate that shelters should be accessible to trans individuals not all shelters accept trans residents and many do not have anti-discrimination policies that apply to the trans population. Although training has had a major impact on shelter service provision, both trans individuals and shelter staff identified the need for further training sessions.

The following data was gathered from the interviews with the trans community members.

- Participants expressed discomfort with shelter intake procedures and found the process to be intrusive. Some were denied entry based on their appearance or their responses to questions about surgery and/or hormone replacement therapy.

- Both trans men and trans women preferred to use women's shelters as they were perceived to be safer than men's shelters.

- Fourteen respondents stated that they were harassed by other residents or staff and eight said that they had been assaulted. It was reported that shelter staff often failed to follow up on such incidents.
• Trans respondents reported being the target of discriminatory comments made by other shelter residents.

• Fifteen respondents stated that they left shelters because of rigid rules and curfews, resident harassment and staff discrimination or indifference. Twenty percent of respondents suggested that there should be a stand-alone shelter for trans residents. Others preferred integrated space or designated beds for individuals not comfortable in the current system.

Interviews with shelter providers elicited the following information:

• There were a variety of intake procedures among shelters.

• Four of the 17 shelters did not accept trans residents.

• Only 42% of the shelters surveyed had a specific written anti-discrimination policy that included trans people.

• Shelter staff were divided in their opinions about the need for a stand-alone trans shelter, however, the majority suggested that integrated settings are preferable.

• A majority of shelter staff expressed a desire for more training. They indicated that clearly written policies and procedures for front-line staff are crucial in ensuring that trans residents receive equitable treatment.

• Staff who had received training from the Trans Hostel Access Project (part of The 519 Community Centre) recommended that it be made available to all shelter staff.

Summary of Recommendations

The recommendations from the report were developed through extensive discussions with the Project Steering Committee. In order to obtain additional input, the preliminary findings and recommendations were also presented to the Ontario Hostel Association and to a special meeting of trans community members.

The recommendations encompass a range of activities related to policy development, training and service provision. Because of the importance of consistency in access and service across the sector, it is critical that the City of Toronto take a strong position in assisting shelters to become accessible.

It is therefore recommended that:

1. The Trans Access Project Steering Committee broaden its membership and take responsibility for implementing and monitoring the recommendations contained in this report;

2. The Trans Hostel Access Project receive increased funding in order to undertake training in the areas of policy development, staff education and resident development;

3. The City of Toronto contribute to the funding of a specifically mandated staff position to provide referrals, advocacy and case management services for TS/TG individuals accessing the shelter system;

4. The City of Toronto fund a Staff position for a one-year period to liaise with shelter service providers, supporting them in working towards accessibility, assisting the development of policies and procedures, and facilitating forums to discuss and resolve operational issues;

5. There be a minimum of ten beds dedicated to the TS/TG community within an existing City of Toronto shelter, which is located in the downtown section of Toronto;

6. The Trans Access Committee work with Violence Against Women shelters and the Assaulted Women’s Priority Housing Program to facilitate accessibility for TS/TG women who are fleeing violence.

7. The 519 Community Centre provide information and training to permanent and transitional housing providers