



main street project

STRATEGIC PLAN

Autumn 2021 - Summer 2026

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A companion document outlines the tasks, proposed costing and key performance indicators as the business plan for the strategic plan.





LAND ACKNOWLEDGEMENT

Main Street Project is located on Treaty One Territory, the homeland of the Anishinaabe, Cree, Dakota, Dene, and Oji-Cree Peoples, and the homeland of the Metis Nation. Main Street Project approaches work with humility and in hopes of contributing to an agenda of reconciliation. We acknowledge the Indigenous Peoples of this land whose footsteps have marked this land for time immemorial. We acknowledge ourselves as visitors living and working in this territory.

AUTHORSHIP

Main Street Project Board and Management were responsible for the development of the Strategic Plan in collaboration with a broad range of stakeholders.

OrgCode Consulting Inc. and Narratives facilitated content development for this strategic plan from a broad cross section of stakeholders.

Narratives facilitated the development of “Towards Reconciliation and Anti-Oppression”, a supplementary document to the strategic plan which informed all sections pertaining to Indigenous Peoples, and which included the formation of the Indigenous Leadership Circle. OrgCode Consulting Inc. facilitated the development of all other parts of the strategic plan.



Designed by:

bounce



METHODOLOGY

To create the strategic plan, engagement occurred with:

- 28 people with living experience, currently using Main Street Project services, using a structured interview guide;
- 18 key informants from other service providers, non-profits, government and business interests using a semi-structured interview guide;
- 99 respondents to an external SWOT survey;
- 34 respondents to an internal SWOT survey;
- Participants in six focus groups;
- Engagement with the Indigenous Leadership Circle formed to help inform the work on culturally appropriate practice, reconciliation and de-colonization;
- The Main Street Project Board of Directors, led by the strategic planning committee



CHAPTER ONE:

SUMMARY

The Main Street Project 5 Year Strategic Plan was developed with considerable internal and external input. It identifies a renewed mission and vision, and identifies core values to guide our work over the next five years. It further identifies specific objectives and goals that we are committed to acting upon during this period of time.



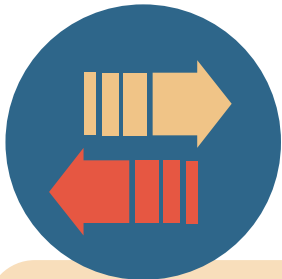
OUR MISSION: To provide safe and welcoming places of respite and healing with services that aim to reduce harm for people experiencing homelessness, substance use and/or mental health challenges, while working collaboratively to achieve measurable success in the journey to end homelessness.

OUR VISION: A community in which everyone has access to a safe space where dignity, respect and self-determination are supported

OUR CORE VALUES: Reducing harm, trauma-informed, reconciliation and anti-oppression.



We aim to address four key objectives, with specific goals and tasks for each objective, over the next five years:



OBJECTIVE ONE: ADVANCE THE IMPLEMENTATION OF HARM REDUCTION

Goals for Objective One:

1. Continue low-barrier services, with an eye to continuous improvement
2. Continue peer-led services with an eye to continuous improvement
3. Develop training materials, educate and implement standardized harm reduction resources and materials across all Main Street Project service areas, and continue to train and reinforce harm reduction theory and practice with staff teams
4. Develop training materials, educate and implement Motivational Interviewing, Trauma-informed Care, and Strengths-Based Approach across all Main Street Project service areas, to assist with life changes associated with reducing harm.
5. Expand access to primary care services
6. Work with community stakeholders to transform and reimagine safer sobering
7. Support or lead the design of an approach to safer consumption, request permission to implement a safer consumption site from all orders of government, and implement if possible
8. Support or lead the development, approval and implementation of a Managed Alcohol Program
9. Make people experiencing homelessness the prioritized population to be served through voluntary withdrawal management
10. Consult, train and implement culturally appropriate modifications to services and supports
11. Decrease demands on emergency services and provide an alternative to emergency services whenever possible
12. Support legal, community access to safer drug supply, and implement if possible



OBJECTIVE TWO: PREVENT AND END HOMELESSNESS

Goals for Objective Two:

1. Enhance the housing focus of our work
2. Increase supports to people exiting homelessness
3. Expand supportive housing options
4. Work to expand safety for women and 2SLGBTQ+ people – both those that are literally homeless as well as those experiencing hidden homelessness





OBJECTIVE THREE: FURTHER EMBRACE AND SUPPORT TRUTH & RECONCILIATION, DECOLONIZATION AND ANTI-OPPRESSION

Goals for Objective Three:

1. Strengthen the role of Main Street Project as a support, resource and connection to Indigenous-led cultural supports and services
2. Improve the feeling of cultural safety for Indigenous people that work at Main Street Project or use Main Street Project programs or services
3. Support Indigenous businesses and service providers in the City of Winnipeg
4. Collaborate meaningfully with Indigenous partners and community members in developing policies, practices and activities
5. Actively seek to dismantle and diminish racism, misconceptions, homophobia and stereotypes against any person or group of persons
6. Identify and work to remove all forms of oppression both internally at MSP and externally as they affect the community we serve




OBJECTIVE FOUR: STRENGTHEN THE ORGANIZATION BY IMPROVING INFRASTRUCTURE, TECHNOLOGY AND PROCESSES

Goals for Objective Four:

1. Further develop the staff team in all main street project program areas
2. Review existing internal policies and procedures: update and create, as necessary
3. Develop a comprehensive maintenance and replacement strategy for equipment and assets
4. Develop a capital plan for Main Street Project
5. Improve documentation, data collection, data management and outcomes reporting
6. Develop and implement a Main Street Project file management system with file standards for each type of file (paper and electronic) across Main Street Project
7. Sustain and expand partnerships and collaboration





We believe that with our renewed mission and vision, and living our core values, we can advance our work of engaging and serving people that use substances, have compromised mental wellness, and experience homelessness to assist with reducing harm, experiencing improved wellness, and meet immediate needs, while keeping an eye towards assisting people with integrating into housing and community. We believe that we can take direct action and support reconciliation, decolonization and anti-oppression work within our own organization and in the community. We also believe we can undertake work “behind the scenes” over the next five years to improve and strengthen our overall organization. We maintain optimism with the work and challenges ahead of us over the next five years, and shall endeavor to be worthy of the highest esteem of each person we serve, community partners, and our funders.



CHAPTER TWO:

WHO WE ARE & WHERE WE ARE HEADED

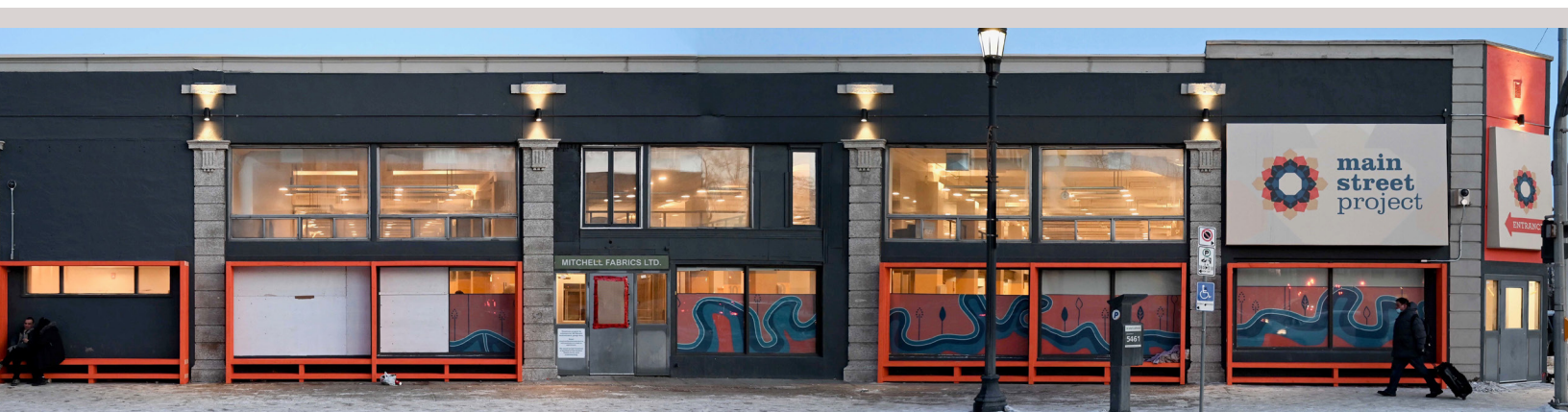
During the time period of this strategic plan, Main Street Project will realize its 50th anniversary of service. We have been a mainstay in the community throughout our history, augmenting and growing our services based upon community needs. Our roots were anchored in harm reduction before the phrase or concept was made popular, meeting vulnerable people wherever they are at literally and circumstantially. We have been providing services and programs that meet immediate needs, connect people to solutions to their homelessness, and assisting people living with compromised mental wellness, substance use, and a litany of other health conditions from brain injuries to chronic disease. Our job is not to heal or fix people; it is to serve people without judgment, meet immediate needs, and provide hope so that people can realize a self-determined, autonomous version of who they are and who they want to be. It is our privilege to serve others, not their privilege to be served by us.

In the beginning, we provided a safe space for people who used alcohol, experienced housing instability, and needed a place to come inside, during Winnipeg weather events. While our programs and services have evolved, and the population of people we serve has expanded in diversity and volume, the core of our existence remains strong. We are a harm reducing, multi-service agency and we are proud of the many lives we have had the honour to positively impact, and

are humbled to have provided witness to the resiliency and strengths of thousands of people in need. We don't see homelessness, substance use or mental illness as a problem to be solved; we see people with potential.

We acknowledge that we have been imperfect as an organization. We have work to do to build trust, improve the implementation of evidence-informed and evidence-based services, effectively measure what we do, and grow and expand partnerships with other organizations in the community. We need to diversify our staff and board further. We need to be critical of what we do to make necessary improvements, and be open to change. There is no shortage of work we know needs to be done, from updating and creating internal policies and procedures to asset management; from supporting access to primary care to decreasing demands on emergency services in the community through our outreach programming and overdose response. We are ready to embrace the challenges and opportunities of strengthening our organization and improving our service outcomes.

One of our biggest shortcomings has been our work with Indigenous Peoples and Indigenous organizations. We are not, and have no plans to be an Indigenous organization. However, we acknowledge and embrace that the vast majority of people that use our services have Indigenous identity. Some are well connected



CHAPTER TWO: WHO WE ARE & WHERE WE ARE HEADED (continued)

to culture and a home community, while others are not. To strengthen our role as allies, it is incumbent upon us to ensure all of our services are culturally appropriate, that our staff and board has more Indigenous representation, and that we are sufficiently trained and implementing culturally appropriate practices. We accept that we need to be more trauma-informed to better meet the needs and form meaningful relationships and rapport with Indigenous Peoples that have been impacted by colonial history and settlement, Residential Schools, the 60s Scoop, at times inadequate or unsafe housing and water and food security, and intergenerational trauma. We need to be better supporters and advocates for Indigenous issues that impact the people we serve. We need to be better partners with Indigenous organizations that excel in their service orientation and service delivery. We need to apologize for past wrongs, learn from those mistakes so as to never repeat them again, and advance the practices of reconciliation, decolonization and anti-oppression.

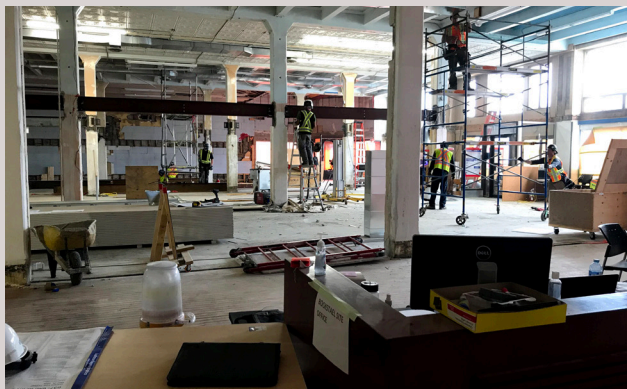
The majority of our programs and services are oriented to meet the needs of people who are, or who recently have, experienced homelessness. We accept the responsibility of contributing to preventing, reducing and ending homelessness in our community. It is no longer acceptable to try to manage homelessness. We simply will run out of capacity if there is constant inflow into homelessness without suitable attention to outflow. More importantly, perhaps, we are contributing to wasted human potential and exacerbating costs of managing homelessness without focusing on ending it, one person at a time. We believe in person-centred,

customized approaches to meet housing instability needs that are aligned to evidence-based and evidence-informed practice. Our shelter and outreach services need to be more oriented to housing solutions in addition to meeting immediate needs. We need to be supportive of expanding housing and support options for people to exit homelessness successfully. We need to ensure our detox services maintain a preference for people experiencing homelessness or recently accessed housing.

Brave and bold changes are expected to be initiated in some of our programs and services over the next five years. In addition to being more culturally appropriate and evidence-informed throughout all of our services, we intend to pursue the following over the next five years:

1. We will collaborate with our stakeholders to transform the Intoxicated Persons Detention Act to an alternate form of safer sobering;
2. We will support or lead the design, approvals and implementation of a Managed Alcohol Program;
3. We will support or lead the design, approvals and implementation a Safer Consumption Service

We look forward to the challenges and opportunities over the next five years. We will stay true to our harm reduction roots. We will improve our services and engagement with Indigenous Peoples and the Indigenous community. We will prevent and contribute to ending homelessness in our community. And we will strengthen our organization and better manage and protect our assets.



CHAPTER TWO: WHO WE ARE & WHERE WE ARE HEADED (continued)

MISSION, VISION AND VALUES

As we prepare for our next five years of services, policy, advocacy and impact, we have worked with our staff, board, and people that use Main Street Project, an Indigenous Leadership Circle, and the broader community to examine what our mission, vision and values should be. In this time of renewal, we have asked ourselves: What is our central aim? Where are we headed? What are our core beliefs?

MAIN STREET PROJECT MISSION

To provide safe and welcoming places of respite and healing with services that aim to reduce harm for people experiencing homelessness, substance use and/or mental health challenges, while working collaboratively to achieve measurable success in the journey to end homelessness.

To understand our commitment to this mission and how we will turn it into action, we want to move from assumptions in interpretation to explaining what this means to us.

“Safe and welcoming places” means that we are committed to the emotional and physical safety of everyone where people of different cultures, ages, gender identities, sexual orientation, history of housing instability, mental wellness, substance use and/or illness feel accepted, honoured and supported.

“Respite and healing” means that we are committed to create an environment and offer services that allow people to take a break, experience aspects of recovery, rest, sleep, eat, and get better. We want to encourage emotional, spiritual, psychological and physical healing through cultural, therapeutic and medical services.

“Reduce harm” means the individual process of achieving an improvement over one’s baseline. We look at the reduction of harm holistically. It means outreach, education and access to resources and supplies. It means providing a safe place to recover and come down by choice. It means accessing other resources as necessary to assist with harm reduction. We embrace the individual nature of reducing harm in one’s life and are supportive of autonomy and self-determination in the quest to reduce harm. Furthermore, to reduce harm requires us to be accepting and supporting the potential of all people that use Main Street Project services regardless of potentially harmful behaviour the person is engaged with.

“Working collaboratively” means we do not feel that Main Street Project needs to “go it alone” in the pursuit of serving people. We embrace the opportunity to work with other organizations, the Indigenous community, the faith-based community, government and business. We will bring our expertise and resources to the table to pair and supplement the expertise and resources of others. We will listen to critical feedback to get better. We will help support other organizations in their delivery or expansion of services when it is aligned to our core values.

“Achieve measurable success” means that data is important to us. We want to centre our work activities towards achieving outcomes (the difference those services provided make), not just outputs (the volume of services provided). We need to prove that what we do is making a difference in people’s lives in measurable ways. When success is achieved it is a force multiplier: people that use our services feel more confident we can assist them too; other organizations can trust that working alongside Main Street Project will yield results; and, funders and donors can feel confident that an investment in Main Street Project is an investment in making a difference.

“Journey to end homelessness” means that we see our role not as managing homelessness, but as actively contributing towards preventing and reducing homelessness in our community, supporting the broader community aim to end homelessness. This means that we want to help people avoid homelessness whenever it is safe and appropriate to do so. If homelessness does occur, we want it to be of a short a duration as possible, and help people reconnect to safe, appropriate, permanent accommodation.



MAIN STREET PROJECT VISION

A community in which everyone has access to a safe space where dignity, respect and self-determination are supported.

“Community”, to us, denotes both an association between people that share common bonds, as well as physical spaces. The diverse nature of the people we serve means that people who make use of our services may self-identify as belonging to more than one community: the community of people experiencing homelessness; the community of people that live with compromised mental health; the community of people that use alcohol or other substances; the community of trauma survivors; etc.

“Everyone”, to us, means that we are inclusive. We welcome and celebrate diversity. We embrace the opportunity to see each person as unique, with strengths and potential. We value the dignity and worth of every human life. We do not discriminate. We work to ensure that, whenever possible, restricted access to our buildings or services are reserved for the most serious of situations that cannot be resolved in any other way, and are never permanent in nature.

“Access” is an important part of our vision. Respecting personal autonomy, we can and will offer safe, inclusive and welcoming spaces, but, moving forward, we will work to ensure that taking part in any or all of our programs and services is an individual, voluntary choice. We will be there for everyone. We do not want anybody to be forced or mandated to use any of our programs or services, even temporarily. Self-determination and autonomy of the individual are important to us.

“Dignity”, to us, means each person we serve is worthy of our highest esteem. We strive to honour the existence and worth of each person served through Main Street Project. We know that many of the people we serve have been subject to stigmatization and “other-ing”, being marginalized in mainstream access to services and supports whether that be income, housing or healthcare. We need to make an extra effort to acknowledge each person; to let them know they are seen and their humanity and personhood is acknowledged.

“Respect”, to us, means acknowledging and admiring each person’s qualities, while maintaining due regard for each person’s feelings, wishes, rights and traditions. Our job is not to change the essence of who each person is, but rather to help that essence shine through and be seen. We appreciate the values, knowledge and feelings that each person we serve has, while also appreciating that each person has strengths and worthiness.

“Self-determination” is supported by Main Street Project because we believe each person has the right to a future that is not dictated by their past. Many vulnerable people are prevented from making decisions on their own by systems of support and care, incarceration and/or requirements of other systems like corrections or child welfare. We respect people’s autonomy. We see people as masters of their own life and future. We empower people to make informed decisions about what they want relative to their current needs and future goals. We support people in making decisions about their own life aligned to their own values and beliefs.



CHAPTER TWO: WHO WE ARE & WHERE WE ARE HEADED (continued)

MAIN STREET PROJECT VALUES

We have identified four core, essential values to guide the organization throughout the next five years in implementing this strategic planning. Those values are: reducing harm, reconciliation, anti-oppression, and being trauma-informed.

REDUCING HARM

We believe in evidence-informed policies and programs that help decrease the harmful impacts of homelessness, substance use, mental health and trauma, and promote person-centred, strengths-based, and self-determined wellness.

RECONCILIATION

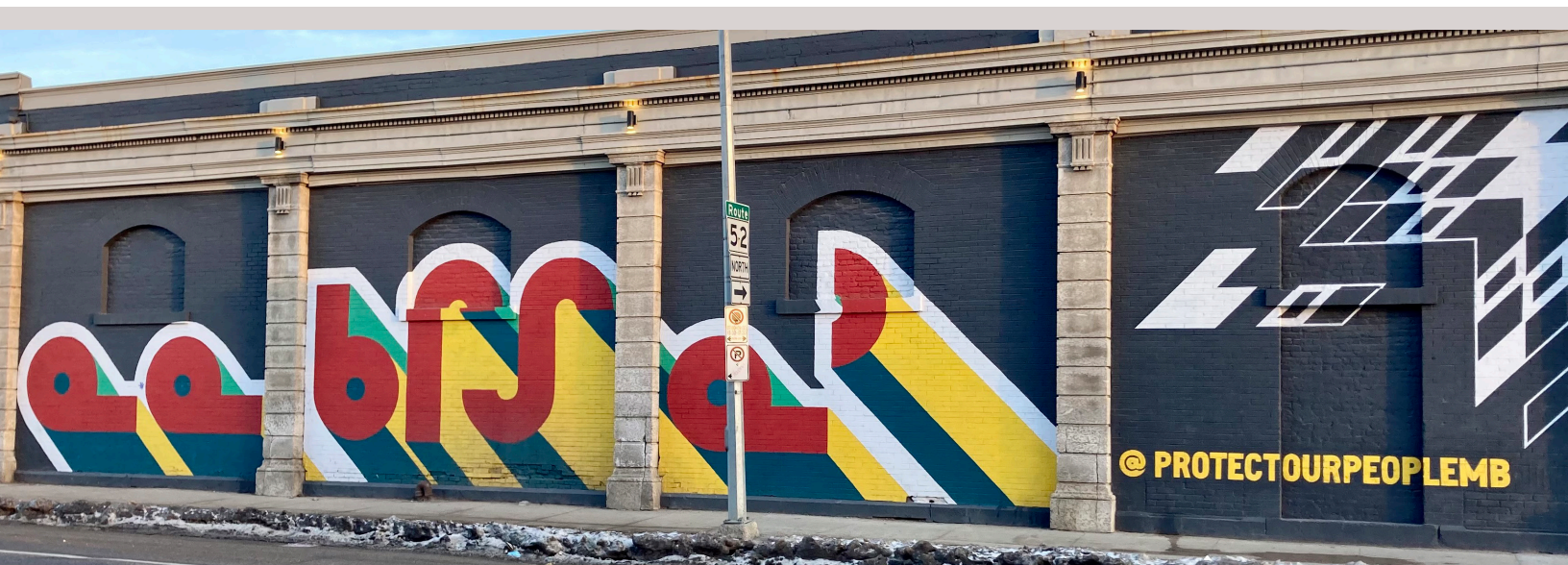
We believe in actively engaging in amending historical relationships with Indigenous Peoples and Indigenous organizations, creating safe spaces for healing, integrating culturally appropriate perspectives, programming and staffing, and promoting access to culturally appropriate resources.

ANTI-OPPRESSION

We believe in actively working against oppression, so that we can create safe spaces for all population groups served that are historically marginalized, “otherized”, or oppressed.

TRAUMA-INFORMED

We believe that given the widespread nature of trauma, and the daily impacts of historical traumas on the people served, that embracing a trauma-informed approach is critically necessary to create feelings of emotional and physical safety, support mutuality and collaboration, build trust through transparency, leverage the expertise of peers with lived experience, empower people to make decisions about their own care and life, and appreciate the impacts of historical, cultural and gender issues on people’s experience(s) of trauma.

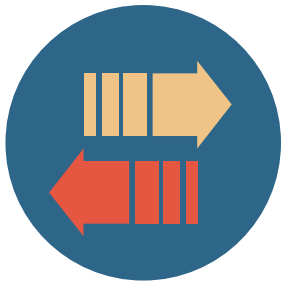


CHAPTER THREE:

STRATEGIC OBJECTIVES, GOALS & TASKS

Strategically, we aim to address four key objectives over the next five years:

1. Advance the Implementation of Harm Reduction
2. Prevent and End Homelessness
3. Further Embrace and Support Truth & Reconciliation, Decolonization and Anti-Oppression
4. Strengthen the Organization by Improving Infrastructure, Technology and Processes



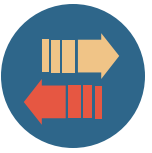
OBJECTIVE ONE: ADVANCE THE IMPLEMENTATION OF HARM REDUCTION

Harm reduction is part of the DNA of Main Street Project, practiced since our origin creating a safe space for people experiencing street-level intoxication to the assortment of harm reduction programs and services offered today throughout the organization. To advance our work on implementing harm reduction, we need to confront and amend some of our practices that are not entirely aligned to harm reduction currently, and bravely enter into a space of innovation that may challenge the dominant ideology of services to people living with substance use issues or compromised mental wellness, impacted by trauma, or experiencing homelessness.

“Harm Reduction” does not have a universally agreed to definition, and as such, to provide clarity on what harm reduction means to Main Street Project, we define it as follows:

Harm reduction is a public health response to reducing the negative consequences associated with risky behaviours with the goal of keeping people safe and minimizing death, disease and injury from high risk behaviour. Harm reduction programs vary depending on the behaviour(s) they address, but generally include outreach and education to specific populations that emphasize the individual’s ability to care for themselves, education on the risks of specific behaviour, treatment resources, prevention resources, and the provision of materials that can lessen the potential for harm. In this approach, “risky” behaviour does not have to stop. Instead, it is modified in a way that reduces the potential for harm to the person engaging in it and/or their community, while also respecting an individual’s autonomy to choose to engage in certain activities.





OBJECTIVE ONE:

ADVANCE THE IMPLEMENTATION OF HARM REDUCTION (continued)

Harm reduction promotes evidence-based, person-centred practices that are rooted in public health and human rights. This philosophy is a non-judgmental ethic that prioritizes the dignity of an individual through the support of their self-identified interests and self-defined wellbeing. People are not required to have abstinence or sobriety goals as a condition to receive housing, health care or other necessities of life like harm reduction resources. Harm reduction creates the conditions people need in order to make safer choices when engaging in activities that involve risk - in order to minimize the negative impacts of stigmatized behaviour on themselves and the community.

Harm Reduction is heart work: the most effective way to meet people where they're at by using safe relationships to promote a life worth living. Main Street Project strives to be an agency that provides compassionate support through Harm Reduction strategies.

In our work of reducing harm, we embrace the following five principles throughout all operational areas and policies of the organization:

PRAGMATISM

We believe that the focus of our work must be to reduce the most immediate and tangible harms experienced as a result of the individual's substance use, mental illness, trauma and/or homelessness.

PRIORITIZATION OF GOALS

We believe goals are set at the individual level, with more immediate actions that can reduce the most immediate harms prioritized ahead of longer-term, more future oriented goals.

FOCUS ON HARMS

We believe in the reduction of harmful consequences of behaviours to the individual and society.

FLEXIBILITY AND MAXIMIZATION OF OPTIONS

We believe actions and possibilities should be considered at the individual level, without expectation of a particular course of action in a certain order. Our practice of harm reduction is not one size fits all.

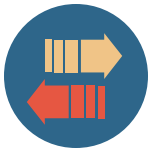
AUTONOMY

We believe the decision to engage or avoid potential harmful behaviours is a personal one, and the decision to engage with harmful behaviours comes with the responsibilities associated with it.



OBJECTIVE ONE:

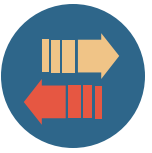
ADVANCE THE IMPLEMENTATION OF HARM REDUCTION (continued)



Our attention for the next five years to advance the implementation of harm reduction throughout Main Street Project will embrace the following goals:

1. Continue low-barrier services, with an eye to continuous improvement.
2. Continue peer-led services with an eye to continuous improvement.
3. Develop training materials, educate and implement standardized harm reduction resources and materials across all Main Street Project service areas, and continue to train and reinforce harm reduction theory and practice with staff teams.
4. Develop training materials, educate and implement Motivational Interviewing, Trauma-informed Care, and Strengths-Based Approach across all Main Street Project service areas, to assist with life changes associated with reducing harm.
5. Expand access to primary care services.
6. Work with community stakeholders to transform and reimagine safer sobering.
7. Support or lead the design of an approach to safer consumption, request permission to implement a safer consumption site from all orders of government, and implement if possible.
8. Support or lead the development, approval and implementation of a Managed Alcohol Program.
9. Make people experiencing homelessness the prioritized population to be served through voluntary withdrawal management.
10. Consult, train and implement culturally appropriate modifications to services and supports.
11. Decrease demands on emergency services and provide an alternative to emergency services whenever possible.
12. Support legal, community access to safer drug supply, and implement if possible.





OBJECTIVE ONE:

ADVANCE THE IMPLEMENTATION OF HARM REDUCTION (continued)

1. Continue low-barrier services, with an eye to continuous improvement

ANTICIPATED TASKS

- Identifying current barriers to service access that can be resolved through lowering barriers to service
- Developing specific low-barrier service standards operated by Main Street Project and providing training on them using a standardized framework
- Developing a guest Bill of Rights for people that use Main Street Project services
- Introducing robust diversion to the delivery of shelter services
- Increasing rates of re-housing through low-barrier services
- Establishing expectations for each program area that are socialized and supported in implementation rather than rules that are enforced that can be punitive

We believe the provision of low-barrier services is an act of empathetic social service. It is incumbent upon us to ensure that our spaces are safe, welcoming places that are easily accessed. We believe in working with service users to socialize expectations of behaviour in our spaces, rather than hard and fast rules that are enforced with our community members. We take intentional measures to help ensure our services are person-centred and trauma-informed, where we have removed all reasonable barriers to provide an inclusive space.

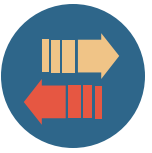
Low-barrier service does not mean there are no barriers to services. It means we are engaged in an ongoing process of balancing the needs of individuals with a broad range of needs and behaviours that may be a barrier to service access elsewhere, with the desire to maintain a safe place free from racism and violence.

Low-barrier service is not low-quality service. It is a type of service that is exceptionally high-quality for the population that it aims to serve. We shall maintain rigorous training for staff and develop transparent standards and a guest Bill of Rights for service use.

Low-barrier services exist, in part, to streamline access to solutions to homelessness at the individual level, so as to avoid places like shelter becoming vectors of therapeutic incarceration. The purpose of shelter is not to heal or fix people. It is to empower people to realize their fullest potential outside of shelter. As such, we treat shelter as the process of helping people realize solutions to their housing crisis outside of shelter, in ways that are safe and appropriate for the specific needs of the individual.

To reduce the potential of cumulative impacts of longer shelter stays, we believe in effectively preventing and diverting people from shelter when there are safe and appropriate alternatives to shelter. When an individual must use shelter because they have no safe and appropriate alternatives, we aim to make shelter stays as brief as possible, with a rapid return to safe and appropriate accommodation, whether that be independent housing, housing with supports, or a return to living with friends or family. We reject the notion that shelter is a place of last resort and a catch-all for all other systems. Instead, we believe that shelter is the service of first choice for people experiencing homelessness that want to reconnect to safe accommodation as quickly as the system of supports allows.





OBJECTIVE ONE:

ADVANCE THE IMPLEMENTATION OF HARM REDUCTION (continued)

2. Continue peer-led services with an eye to continuous improvement

ANTICIPATED TASKS

- Identifying, training and supporting people with lived experience and expertise in delivering services using a standardized approach
- Articulating peer roles in different service areas across Main Street Project
- Providing harm reduction education and supplies through peer led services
- Expanding participation of trained peers across Main Street Project program areas where and when appropriate

We believe in the power of peers, and the unique contributions that people with lived experience bring to the work. Trained, supported peers have the unique ability to live their empathy from a place of experience, and empowers peers to bring that unique perspective and ability to people experiencing homelessness.

The provision of harm reduction in peer services requires journeying with people, and is predicated upon strong rapport and trust being developed and implemented between the peer and the person

receiving services. It is our approach to peer-led services that people with lived experience that are developing that rapport and trust can focus on meeting immediate needs without expectation or requirement that the individuals engage in longer-term, case management services.

3. Develop training materials, educate and implement standardized harm reduction resources and materials across all Main Street Project service areas, and continue to train and reinforce harm reduction theory and practice with staff teams

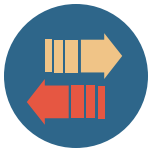
ANTICIPATED TASKS

- Developing standardized harm reduction resources and materials across all Main Street Project service areas
- Developing harm reduction training curriculum
- Delivering training throughout the organization on harm reduction theory and practice
- Implementing a standardized harm reduction approach across Main Street Project

A consistent understanding of harm reduction and the resources and materials used in the delivery of harm reduction is the starting point for promoting consistent practice of harm reduction across all Main Street Project service areas. We acknowledge that while harm reduction is a core part of our identity as an organization, over time there has been different material developed for specific program areas and/or the application and understanding of harm reduction is not always consistent among staff throughout the

organization. We believe that a greater emphasis on developing consistent training materials, as well as delivering consistent training across program areas will result in the implementation of a more standardized approach to harm reduction throughout the organization. This is in the best interest of our community members that avail themselves of harm reduction education and resources in the organization. They deserve consistent understanding and application of harm reduction.





OBJECTIVE ONE:

ADVANCE THE IMPLEMENTATION OF HARM REDUCTION (continued)

4. Develop training materials, educate and implement Motivational Interviewing, Trauma-informed Care, and Strengths-Based Approach across all Main Street Project service areas, to assist with life changes associated with reducing harm.

ANTICIPATED TASKS

- Developing training materials on Motivational Interviewing, Trauma-informed Care, and the Strengths Based Approach
- Educating staff across all program areas on what Motivational Interviewing, Trauma-informed Care and the Strengths-Based Approach are and how to apply these approaches in their work
- Implementing the renewed approach to use Motivational Interviewing, Trauma-informed Care and the Strengths-Based Approach in assisting with life changes associated with reducing harm

The application of Motivational Interviewing, Trauma Informed Care and the Strengths-Based Approach are intended to assist our program participants in being able to make life changes associated with reducing harm.

We view Motivational Interviewing as essential for eliciting behaviour change by helping program participants explore and resolve ambivalence. Exploring and resolving ambivalence can be crucial for assisting the people we serve in reducing harm – or even considering reducing harm as a starting point.

We understand and realize the widespread nature of trauma, and we see how past trauma can be related to feelings and behaviours in the present. We think

Trauma Informed Care is critical to the work of reducing harm because it understands and considers the pervasive nature of trauma and promotes environments of healing and recovery rather than practices and services that may inadvertently re-traumatize.

To assist people that we serve in reducing harm, a focus on their self-determination and strengths are also necessary. When we understand the program participant's strengths, and their goal(s), we can provide hope inducing supports. Through the strengths-based approach, we see the people we serve as resourceful and resilient, even when in adverse environments.

5. Expand access to primary care services

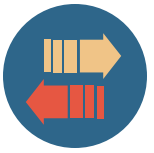
ANTICIPATED TASKS

- Developing a business case for the addition of more health care services on site
- Creating a comprehensive health care access strategy that transcends all Main Street Project programs and services
- Advocating for increased nursing positions within Main Street Project and/or more funding for Main Street Project to hire its own nursing staff
- Formalizing service pathways and partnerships to enhance access to mainstream health services for Main Street Project service users

The people we have the privilege of serving do not always access traditional health care opportunities, other community-based health care, and/or, if they do try to access health care elsewhere are not always

treated with dignity and respect in a non-judgmental manner. We believe that sustaining and creating new pathways to health care within Main Street Project can effectively respond to emerging health care needs, help





OBJECTIVE ONE:

ADVANCE THE IMPLEMENTATION OF HARM REDUCTION (continued)

maintain care for existing health care needs, and help navigate effective engagement with other health-based resources in the community. By bringing health care to the end users of Main Street Project services rather than expecting the service-users to go to health care services elsewhere improves health care access and decreases harm.

Many of the people we serve have health issues complicated by, or caused by their participation in higher risk behaviour such as injection substance use, consumption of non-palatable alcohol and unprotected sex. Wounds, infections, organ damage and disease are experienced by many of the guests we serve. Turning a blind eye to these health issues, or waiting for mainstream health services to figure out how to meet the health needs of the population we serve is unrealistic. We want to decrease death, disease and injury amongst people engaged in higher-risk behaviour, and help people receive the health care they deserve without stigma.

Stable, suitable and affordable accommodation is good health care. Social determinants of health demonstrate the importance of stable, suitable, affordable accommodation for a person's health and overall well-being. We see the provision of health care services directly within Main Street Project, and facilitated by Main Street Project, as a necessary ingredient for reducing and ending homelessness. A pathway to improved health care long-term, while addressing more immediate and chronic conditions while a person is experiencing homelessness, are necessary functions for Main Street Project to achieve its mission and vision.

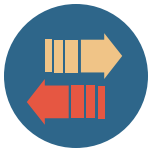
We will continue to use and expand the use of a nurse practitioner and nursing services to bolster our ability to assist the people we serve with addressing current physical health, mental health and addiction needs, while continuing to work on strengthening our connection to mainstream health services in ways that are respectful and effective for the population that we serve.

6. Work with community stakeholders to transform and reimagine safer sobering

ANTICIPATED TASKS

- Researching alternate models of safer sobering
- Engaging with people that have used Protective Care, as well as staff that have worked in Protective Care, on the model they think would work best to replace the existing approach to Protective Care
- Engaging with the community-based sector, government, health providers and law enforcement on their desired approach to an alternative form of safer sobering
- Developing a model for safer sobering that will work best for Main Street Project, the people served by Main Street Project and the broader community
- Articulating core principles and values that will inform the work of safer sobering
- Notifying funders of the desire to move away from the current model of Protective Care, and advocate for transfer of funding to an alternate model of safer sobering
- Renovating the physical space where Protective Care currently operates to a more community-friendly, non-punitive space that is aligned to the new model of safer sobering
- Training staff on the new safer sobering model
- Implementing the new safer sobering approach





OBJECTIVE ONE:

ADVANCE THE IMPLEMENTATION OF HARM REDUCTION (continued)

We believe the Protective Care offered through the Intoxicated Person Detention Act is antiquated. We believe it may be oppressive to continue to operate this program in the way it currently operates. Nonetheless, we will continue to see the need for safer sobering services with sufficient supports.

Over the next five years we aim to wind down our involvement in the program as currently operating. We will endeavour to replace the program with an approach to safer, supported sobering that is more aligned to the needs of the people we serve. We will look, in part, to other models in the country that have demonstrated promise in shelter-based models of safer sobering.

We want our approach to safer sobering to be person-centred, trauma-informed, voluntary, non-coercive and effectively supportive of people without judgment. We want to create a more welcoming environment where

stigma associated with benefiting from a safer sobering space is decreased. We want to be able to open up supportive dialogue with guests of our safer sobering place as a gateway to other services and supports, including pathways to housing for people experiencing homelessness that use the safer sobering facility.

Working with community and government partners, along with the Indigenous community, it is our intention to develop and work towards implementing a safer, supporting sobering program over the next five years that is culturally appropriate and sufficiently staffed to create an environment where people can sober up. Furthermore, we will develop policies and procedures that orient the safer supported sobering service as an integrated part of our continuum of support services for people living with addiction or dependency that are experiencing homelessness.

7. Support or lead the design of an approach to safer consumption, request permission to implement a safer consumption site from all orders of government, and implement if possible.

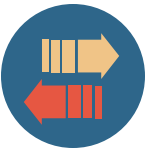
ANTICIPATED TASKS

- Developing a working group of Main Street Project, community, health care and law enforcement to explore what a safer consumption site could look like operated by Main Street Project
- Articulating core principles and values that will inform the work on safer consumption
- Researching models and approaches to safer consumption
- Performing due diligence requirements to satisfy all orders of government in the delivery of safer consumption services
- Developing a model for safer consumption that will work best for Main Street Project, the people served by Main Street Project and the broader community
- Securing funding for the delivery of safer consumption services
- Identifying, and if needed renovating, a physical space to deliver safer consumption services
- Training staff on safer consumption
- Implementing the new safer consumption model

We appreciate that there will be mixed feelings in the community and politically, but we feel we can no longer primarily do overdose response through Naloxone, and instead need to be more proactive and work more on overdose prevention, and improving health outcomes through the provision of a safer consumption site. In

the same way we stood up to create special services as a Public Health response to the pandemic, so too must we embrace the reality that from a Public Health perspective a safer consumption site is needed in the community for people experiencing housing instability as a response to the opioid epidemic. We believe





OBJECTIVE ONE:

ADVANCE THE IMPLEMENTATION OF HARM REDUCTION (continued)

the provision of a safer consumption site aligned to the main currents of thought and practice in this area from elsewhere in the country, is an act of pragmatic compassion and an act of radical acceptance. Our history and our impact has repeatedly demonstrated that notions of a drug free society are abstract at best.

Canada's first sanctioned safer consumption site opened in 2003. Public opinion of safer consumption sites has continued to increase, especially as a result of Canada's current overdose crisis, according to recent research on the matter.

Safer consumption sites are supervised health services. It is a place where individuals can inject or consume the substance of their choice, which they bring to the facility, in a safe and clean environment. Trained staff provide supervision to the consumption. Safer consumption sites are more hygienic than many other situations where the people we support would be using substances. In a supervised consumption site, the individual can get access to testing of the product they are about to consume, access supplies for safer use, receive education on safer injection techniques and infection prevention, get access to medical and counselling services, and receive referrals to substance use treatment if that is what the person is seeking. Essentially, the safer consumption site provides overdose prevention and intervention by trained staff that are always ready to assist. We also believe that the safer consumption site will provide another opportunity to assist people in connecting to housing and other support services.

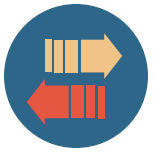
This approach is proven to have benefits for communities such as reducing risk of overdose, reducing public drug use, discarded equipment,

infectious disease spread, and strain on emergency medical services. Safer consumption sites also provide a safe space for people to connect with staff and peers.

Applications to deliver a service of this nature are submitted and processed through the Government of Canada. The opening of a safer consumption site involves the exemption of section 56.1 of the Controlled Drugs and Substances Act (which prevents people from possessing controlled substances). These exemptions are normally granted one year at a time. The following are a few requirements of the application: a description of the site, services, and target population, and the method of drug checking. The application also involves outlining policies in place, for example, roles and responsibilities of staff as well as training requirements and addressing unidentified substances. Furthermore, the application requires a consultation report outlining community engagement and response, as well as a letter of opinion from the Minister of Health of Manitoba. The application also requires a fiscal plan. After submitting the application, there is opportunity for the Government to provide feedback on the application, and for the applicant to respond with more information.

We feel that the introduction and provision of safer consumption services can help decrease stigma associated with substance use. We want to be a place of acceptance and support, not judgment. We want to help decrease harm to the broader community. We want to further move from a reactive approach to opioid use, where Naloxone administration is the primary response to saving lives when there has been over-consumption, to a more proactive, supportive and appropriately staffed location for people to consume and get further supports.





OBJECTIVE ONE:

ADVANCE THE IMPLEMENTATION OF HARM REDUCTION (continued)

8. Support or lead the development, approval and implementation of a Managed Alcohol Program

ANTICIPATED TASKS

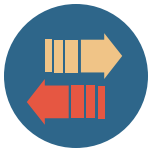
- Researching models and approaches to Managed Alcohol Programs
- Performing due diligence to satisfy all order of government in the delivery of a Managed Alcohol Program
- Developing a model for the Managed Alcohol Program that will work best for Main Street Project, the people served by Main Street Project and the broader community
- Securing funding for the delivery of a Managed Alcohol Program
- Identifying, and if needed renovating, a physical space to deliver the Managed Alcohol Program
- Training staff on the Managed Alcohol Program
- Implementing the Managed Alcohol Program

Managed Alcohol Programs (MAPs) are harm reduction interventions. MAPs address alcohol usage, mental health, and well-being in a truly person-centred, holistic model. As of March 2020, there were over 20 permanent sanctioned Managed Alcohol Programs across Canada, most of which in Western Canada. MAPs are primarily designed for people experiencing alcohol use disorder (AUD), or who engage in high-risk drinking. On the streets, people consuming large amounts of alcohol face intersecting harms such as being treated as criminals, being stigmatized and discriminated against, facing many disconnections, and unmet health needs. Conventional interventions do not address harms associated with individuals experiencing AUD. Conventional interventions narrowly focus on acute alcohol detoxification and “fixing” people rather than supporting them through a strength-based lens of acceptance, respecting the autonomy and individuality of each person, and providing lasting psychosocial and housing supports. Harm reduction involves recognizing substance use and focusing on minimizing harm. MAPs usually provide regularly scheduled administered alcohol, a form of housing, connections to psychosocial and health supports, and programming which promotes activities of daily living and community integration. Programs provide alcohol to participants in a recovery-oriented way to support participants on their own journey by promoting autonomy. Participants are not required to participate in all programming as respecting each person’s choice and space in their journey is central to MAPs.

Canadian research reveals that MAP participants reported significantly reduced levels of harm with lower alcohol consumption when compared to those actively lowering alcohol consumption without MAPs. Furthermore, those who participate in MAPs spread drinking out throughout the month, because they have access to alcohol and spaces where consumption is safe. Consuming lower amounts of alcohol over time is significantly safer for people being a healthier way to consume, reducing their risk of harm when drinking, their risk of being a victim of violence, and run-ins with police and emergency health services. Furthermore, participants in MAPs shows sustained success when provided support and stable housing.

MAPs take on many forms, the greatest difference between programs being if they are clinically or community run. Providing alcohol for medical purposes is not restricted to licensed healthcare professionals, although it is essential that staff roles are clearly defined. Providing managed alcohol is a way to provide support for the chronic conditions such as AUD, incorporate Indigenous cultural safety, provide holistic harm reduction and trauma-informed care.





OBJECTIVE ONE:

ADVANCE THE IMPLEMENTATION OF HARM REDUCTION (continued)

9. Make people experiencing homelessness the prioritized population to be served through voluntary withdrawal management

ANTICIPATED TASKS

- Examining referral pathways into the withdrawal management program, and identify frequent non-homeless referral points
- Working with funders to amend population criteria for access to withdrawal management services
- Amending intake policies and procedures to reflect preference for people experiencing homelessness
- Identifying alternate accommodation post-withdrawal management services to help support the person where they are at
- Implementing changes to preferred population to be served through withdrawal management services

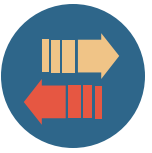
Withdrawal management services are an important part of the continuum of services and supports that make up our supported response to substance use. Withdrawal management services help reduce harm to the individual and the community. At the individual level, people can initiate a pathway to sustained sobriety if they so choose, or provide their body a break for a short period of time before continuing to use. At the community level, the withdrawal management services decrease the overall impacts of dependency on substances.

Main Street Project provides the only non-medical withdrawal management services within the community. We are a vital service in the addiction recovery response. Nonetheless, there are improvements to be made over the next five years. To help reduce the harms of homelessness and substance use disorders,

it is our intention to ensure there is a preference for people experiencing homelessness in using the withdrawal management services. It is also our intention to improve our approach to finding safe and appropriate places to exit to from withdrawal management services, and to explore different models of second-stage, post-withdrawal management services to sober living for those who choose to continue abstinence in their use of substances.

The key feature of non-medical withdrawal management services is the support. A high level of support is aligned to who we are as an organization. Operating non-judgementally, we create a safe space for the support work to occur with dedicated, appropriate staffing.





OBJECTIVE ONE:

ADVANCE THE IMPLEMENTATION OF HARM REDUCTION (continued)

10. Consult, train and implement culturally appropriate modifications to services and supports

ANTICIPATED TASKS

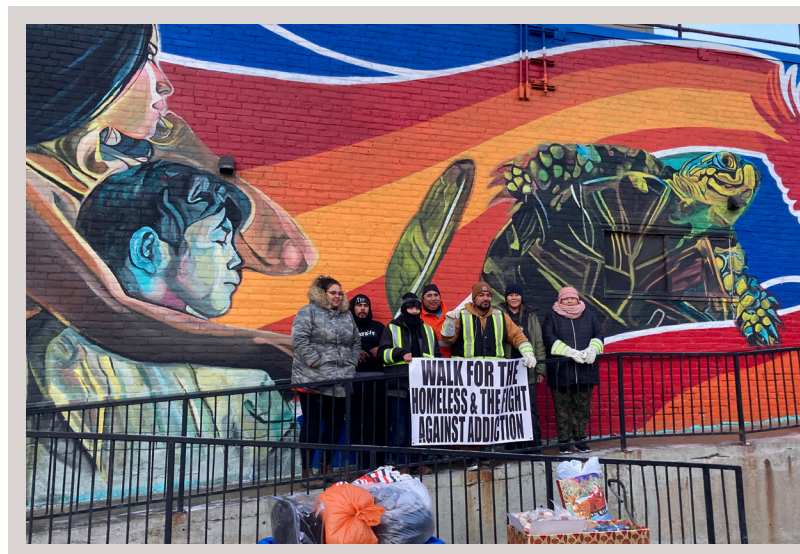
- Reviewing all programs and services through a lens of whether the services are culturally appropriate or causing harm because of disconnect to cultural considerations, especially as it pertains to Indigenous people that use Main Street Project programs and services
- Consulting Indigenous community and our Indigenous Leadership Circle on amendments to make to programs and services to be more culturally appropriate
- Training staff on culturally appropriate services and modifications to programs and services to be more culturally appropriate
- Implementing changes to programs and services to be more culturally appropriate

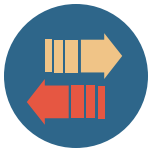
We acknowledge that our historic practices have not always been as culturally appropriate as they could have and should have been. We are deeply sorry for the potential harm caused by our ignorance, especially to Indigenous people. Acknowledging the potential harms caused by past practices, we are committed to ensuring the implementation of culturally appropriate practices is seen as an active engagement in the space of reconciliation as we aim to reduce harm moving forward.

Top to bottom within the organization, and across all program areas, we are committed to consultation and being educated on how to make our practices and engagements more culturally appropriate in a manner that will help us achieve our renewed mission and vision, and is aligned to our values.

We understand that historical exclusion and stigma are not the responsibility of Indigenous people to solve, but our issue to confront and embrace. We see Main Street Project's renewed commitment to racial justice and equity as an opportunity to not only amend our own programs, but to also be a strong ally and advocate in amending and improving mainstream systems of care and support for Indigenous people.

The disproportionate number of Indigenous people experiencing homelessness, issues with substance use, living with trauma, and living with compromised mental wellness is not the fault of the Indigenous person, but the fault of our own broader systems of care and advocacy, and failures of government policy and funding. We acknowledge that at times we have been complicit in approaches that further stigmatize and disproportionately impact Indigenous people such as the Protective Care program Main Street Project has historically operated. As one example of our commitment to make real change happen, we are committed to finding an alternative approach to safer sobering in ways that are more community-based and culturally appropriate.





OBJECTIVE ONE:

ADVANCE THE IMPLEMENTATION OF HARM REDUCTION (continued)

11. Decrease demands on emergency services and provide an alternative to emergency services whenever possible

ANTICIPATED TASKS

- Mapping all of the ways in which Main Street Project programs and services (e.g., street outreach, low-barrier shelter, overdose response) intersects with paramedic, police, fire and hospital responses to people experiencing homelessness in the community
- Working with partners in police, fire, paramedics and hospitals, developing a protocol on Main Street Project response versus an emergency services response
- Tracking data and costs savings associated with a Main Street Project response versus an emergency response
- Decreasing engagement with police, fire, paramedics and hospitals of Main Street Project service users through non-emergency responses provided through Main Street Project

Main Street Project already provides a de facto emergency response through the likes of overdose response and the administration of Naloxone as well as early interventions through low barrier shelter and contact-driven street outreach which allow us to engage vulnerable people that may need health or police services. We are advocates and supporters in this space with the people we journey with. We are committed to increasing our response to further decrease demands on paramedic, police, hospital and fire responses whenever safe and appropriate to do so.

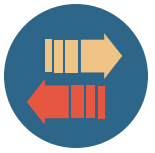
Historically, we have had mixed engagements with emergency responses in our city. We choose to focus on the positive ways in which our partners in emergency services have worked to understand the population we serve, their needs, and our approach to service delivery. We believe building upon some of those solid relationships and a desire to see people experiencing homelessness, substance use issues and/or compromised mental health as people with potential rather than as a problem to be solved.

We acknowledge that some of the service users of Main Street Project are frequent users of emergency services in the community. We understand that this comes with financial costs, as well as impacts the

response of emergency services to other people in the community that may have a need for emergency services. We believe that through a better articulation and implementation of our emergency service and prevention services, we can save the broader community money and reduce the load on emergency responses so they can respond to true community emergencies. That may still entail engaging with Main Street Project community members from time to time, but it is our intention to decrease that level of involvement over the next five years.

To move forward with this strategic objective, we anticipate considerable engagement with responders in the emergency services sectors to undertake an exercise in joint understanding of roles and responsibilities, and to work with those emergency service providers to develop a clear, robust protocol for when engagement can and should be undertaken by Main Street Project versus when the engagement and services are best provided by emergency services. We are open to that dialogue and believe that through mutual understanding and support, there is more Main Street Project can be doing in a formal sense to decrease demands on emergency services.





OBJECTIVE ONE:

ADVANCE THE IMPLEMENTATION OF HARM REDUCTION (continued)

12. Support legal, community access to safer drug supply, and implement if possible

ANTICIPATED TASKS

- Developing a working group of Main Street Project, community, health care and law enforcement to explore what access to safer drug supply would look like for the community
- Articulating core principles and values that inform the work on safer drug supply
- Researching models and approaches to safer drug supply
- Performing due diligence to satisfy all order of government in the delivery of safer drug supply
- Developing a model for safer drug supply that will work best for the people served by Main Street Project and the broader community
- Securing funding for the delivery of safer drug supply
- Training staff on safer drug supply
- Implementing safer drug supply

We see firsthand the impacts of the toxic drug supply in the community. Overdoses as a result of fentanyl or other synthetic drugs are increasing. We believe that a safer supply of drugs is required in our community to address the toxic drug supply. Over the next five years, we will support or lead access to legal and regulated supply of drugs because we see the potential to better support people that use drugs to stay alive.

The overarching goal of safer supply is to allow people that use drugs to access from a safe, regulated and legal source. This is preferred to the toxic versions of drugs available through illicit market. Some of the substances used by people that would benefit from a safer supply include heroin, fentanyl and methamphetamines.

Safer drug supply, whether led or supported by Main Street Project, is aligned to our harm reduction philosophy and practice. Drawing upon the evidence of injectable opioid agonist therapy approaches, safer drug supply provides regulated, legal and safer substitutes for illicit drugs that they are using. Research suggests that this approach is effective at reducing people's exposure to, and impacts of, the illicit drug supply in the community, and will support other health and social benefits.

Canadian research that has tested the application of safer drug supply provides encouraging results for Main Street Project to help realize in our community context. We know that where tested, safer drug supply

program participants are almost always going to stay involved in the program and that fatal overdoses decrease dramatically. We know that safer drug supply increases access to primary health care, increased testing for HIV and Hep C, reduces homelessness, reduces criminal activity to pay for drugs, and decreases survival sex work. These intended results of safer drug supply align well to who Main Street Project is and what we want to achieve by way of broader community outcomes on homelessness, substance use, and access to primary health care.

We see safer drug supply as an important component of harm reduction services in the community. We embrace safer drug supply work as another example of strategy and actions that are aligned to a human rights based approach to drug policy. We believe a safer drug supply will reduce overdose deaths in our community, and it will help end a broader range of harms related to the criminalization of drug use.

Working with community and government partners, along with the Indigenous community, it is our intention to develop and work towards implementing a safer drug supply over the next five years. We believe there is urgency to act on this matter though recognize that this work will likely be a challenge to help educate relevant parties, develop policy, create a business case, and move forward with a plan even within the five year span of this plan.





OBJECTIVE TWO: PREVENT AND END HOMELESSNESS

Over the past couple decades, there has been an increasing shift in community after community throughout Canada to make the change from managing homelessness to ending homelessness. End Homelessness Winnipeg champions this perspective locally. The Canadian Alliance to End Homelessness is leading this work as a national non-profit. The Government of Canada through Reaching Home funding has also clearly highlighted the need to achieve reductions in chronic homelessness and reductions in homelessness amongst Indigenous Peoples.

The state of homelessness in the community is troublesome. The effects of colonization and the treatment and exclusion of Indigenous Peoples in being supported adequately by all orders of government are clear: about two-thirds of people experiencing homelessness in the community identify as Indigenous. We see the impacts of historical exclusion and the woeful state of affordable, suitable and appropriate housing in the community for the population we serve. We see disconnects, long-waiting lists and discrimination practiced by mental health and substance use recovery services. We see, first hand, the growing number of encampments and people sleeping rough throughout the community. Homelessness is a humanly constructed disaster in our community. For too long we have seen people experiencing homelessness being blamed for the state of their disconnect from housing; but, we feel that it is too easy to blame the person experiencing homelessness and is, in essence, a cop out. We feel it is time to think and look critically at the range of services available to the vulnerable people we serve, and advocate for changes in action, greater investment in housing and supports, and an expansion of supportive housing options.

Our housing work has been good, but there is room for improvement. We are proud of our work at the Bell Hotel and Mainstay. We see the effectiveness of connection to supportive staff, the opportunity for people to demonstrate autonomy and resiliency, and the improvements in quality of life and overall wellbeing. We know that the answer to homelessness is housing with the right supports to assist people in staying housed. We know the value of ensuring our case work is strengths-based, trauma-informed, and person-centred.

All service providers in our community need to make a concerted effort to align our programs and services to increasingly prevent homelessness, and to help people exit homelessness for safe, appropriate alternatives including family reunification, subsidized housing, or independent private market housing. Aligned to best practice, we know that the people we serve do not need to be healed or fixed in order to access and sustain housing, but supports are required for many to make the transition successfully out of homelessness and to sustain their housing.

We need to be a larger part of the shift to focus more on preventing homelessness and rapidly housing people out of homelessness. Yes, affordable housing is scarce. Yes, income assistance rates are inadequate relative to the costs of housing. Yes, many people will benefit from longer-term, intensive supports. But what's the alternative? If we do not focus more on preventing and ending homelessness we will continue to see and feel the demands on shelter space and on street outreach, with people sustained and hopefully kept alive, but not resolving their actual homelessness. We run the risk of our shelter services becoming a form of therapeutic incarceration if we do not empower and support people to exit homelessness.





OBJECTIVE TWO: PREVENT AND END HOMELESSNESS (continued)

Our attention for the next five years to advance the implementation of preventing and ending homelessness through Main Street Project programs and services are focused on the following goals:

1. Enhance the housing focus of our work
2. Increase supports to people exiting homelessness
3. Expand supportive housing options
4. Work to expand safety for women and 2SLGBTQ+ people – both those that are literally homeless as well as those experiencing hidden homelessness

1. Enhance the housing focus of our work

ANTICIPATED TASKS

- Reviewing/evaluating existing shelter services for alignment to housing-focused shelter
- Reviewing/evaluating existing street outreach services for alignment to housing-focused engagement
- Participating fully in community Coordinated Access design and implementation, including advocating to government and funders
- Training staff on practices to enhance housing focus, based upon the review/evaluation of services
- Implementing more housing-focused practices in our existing services
- Tracking necessary data on housing efforts and outcomes

There are three areas we will focus most on over the next five years to enhance the housing-focus of our work: infusing more intentional housing work within shelter; complementing our peer-driven street outreach with housing-focused engagement; and, participating in the design and implementation of Coordinated Access with the community.

Housing-Focused Shelter

A housing-focused shelter is emergency accommodation that sees the purpose of shelter as the process of getting people re-housed rather than a destination to participate in programming, rehabilitation, treatment, stabilization, or housing readiness. While our casework assistance has been able to help many people exit homelessness for housing from our shelter over the years, we need to renew our focus on this aspect of the work and advocate for additional resources to expand this focused attention.

A housing-focused shelter practices diversion with every new person that engages with the shelter, and practices rapid resolution with individuals that need to come into shelter, to help them re-attach to housing as quickly as possible.

A housing-focused shelter is purposeful, thoughtful and deliberate in the use of data to understand the population, assign staff to follow-through on housing-focused engagement with specific community members, and measures success by shortening lengths of stay, having positive exits from shelter, and not returning to shelter in the future.

A housing-focused shelter is unrelenting in focusing on housing as the solution to homelessness through Coordinated Access as well as outside Coordinated Access when the person has the economic means to be housed and does not require additional supports, or has friends/family that it would be safe to stay with, where it will not jeopardize the housing, and where the family/friend is willing to have the person experiencing homelessness stay with them.





OBJECTIVE TWO: PREVENT AND END HOMELESSNESS (continued)

This approach to housing individuals/families maximizes the resiliency of each person and is customized to the specific strengths and housing opportunities for each individual. Staff throughout the housing-focused shelter see re-housing as an intervention, and as such are active in engaging with community members about housing, interfere with the trajectory of homelessness to make the experience as short as possible, and use persuasion rather than threats or punishment to help individuals focus on housing.

Housing-Focused Street Outreach

As a complementary approach to our peer-led, contact-driven street outreach, the time is right to expand mobile housing assistance services into the outreach mix. Housing-focused street outreach is intended to be high-impact in assisting very vulnerable people exit homelessness from an unsheltered situation to housing. To date, while some people have been able to successfully end unsheltered homelessness for housing, it has not historically been a major focus of our outreach work. We need to change this.

Working with people that are unsheltered and sleeping rough or in encampments will continue to be primarily driven by peers. However, over the next five years we will work to have more mobile housing support assistance that is integrated with the peer workers delivering outreach. This will allow us to leverage the relationship and trust developed to steer the conversation towards exit from homelessness.

Coordinated Access Participation and Implementation

Coordinated Access is a funding requirement for communities that receive Reaching Home funding through the Government of Canada. The intention of Coordinated Access is to match the right person/family to the right housing intervention, in the right order, using a transparent decision-making process guided by established community priorities.

If done well, we believe Coordinated Access can have a positive impact on reducing homelessness amongst the people we serve. We believe that it can increase housing options and accelerate the speed with which people can exit homelessness.

2. Increase supports to people exiting homelessness

ANTICIPATED TASKS

- Strengthening the service model for housing supports in community
- Training expansion on evidence-based and evidence-informed approaches to increase success of community-based housing supports
- Advocating for additional funding to expand community-based housing support services
- Implementing additional community-based housing supports
- Tracking necessary data on housing efforts and outcomes

As hard as it can be to help someone secure and move into housing, it can be even harder to help some individuals with a range of complex and co-occurring needs to stay housed, especially if it has been some years since they have had housing. We believe that to truly embrace the work of ending homelessness, we must continue to improve our supports to people in our existing housing programs, and explore opportunities to expand our presence of housing supports to people exiting homelessness into the private market or community housing.

We wish to enhance the availability of follow-up supports we are able to provide people that exit homelessness to destinations other than our Bell Hotel or Mainstay operations. With these enhanced supports in place, we feel — and have seen in many other jurisdictions — that landlords may be more inclined to rent to the people we serve if they know the individual is coming with follow-up support services.

We are open to different models for completing this type of work and the preferences of funders. It would be our hope that we can provide a combination of





OBJECTIVE TWO: PREVENT AND END HOMELESSNESS (continued)

moderate case management services as is found in Rapid Re-Housing initiatives, and Intensive Case Management, the dominant form of support services made available to formerly homeless people now in housing in jurisdictions like Alberta and Ontario.

Helping people exit homelessness and supporting them is a good financial investment on the part of funders. As was demonstrated in the At Home/Chez Soi Housing First evaluation in Canada, every \$10 invested in housing and support services saves \$21.72 to the broader community and government. Morally and fiscally it is the right thing to do.

Increasing support to people exiting homelessness is also hope-inducing for other people experiencing homelessness, potentially. Having proof points of exiting homelessness can alter the momentum amongst the homelessness community to become more interested and focused on solutions to homelessness. It can also be a morale boost for staff of the agency, not seeing the same people daily without hope in sight, and provides greater confidence to staff that should a community member exit for housing, at least four out of five will not return to homelessness over the longer-term.

3. Expand supportive housing options

ANTICIPATED TASKS

- Working with community partners and all orders of government to create and implement a supportive housing expansion plan
- Articulating the ways Main Street Project can assist with supportive housing expansion
- Expanding supportive housing in the community in partnership with other community-based organizations

We believe the community needs more supportive housing options. This can include site-based, congregate supportive housing models to scattered site apartments with off-site supports that conduct on-site home visits. Expanding supportive housing options in the community, however, does not mean that Main Street Project must be the delivery agent of more supportive housing options, but Main Street Project needs to be supportive of supportive housing options, when necessary, and share insights, expertise and experience from delivering support options for people in housing, as appropriate and requested.

Supportive housing options are diverse. There is not a “one size fits all” approach. For some of the people we serve, onsite 24/7 staff can be critical to stabilization and responding to specific housing and support needs. This is especially true for people living with serious mental illness and chronic, compulsive or chaotic substance use. For other people we serve, daytime support services onsite may be sufficient. Still other people may do just fine with a support worker visiting them for an hour or less once per week. We believe it is important to design and implement supportive housing options that work for people, rather than trying to get people to conform to just one particular type of supportive housing.





OBJECTIVE TWO: PREVENT AND END HOMELESSNESS (continued)

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OBJECTIVE TWO: PREVENT AND END HOMELESSNESS (continued)

4. Work to expand safety for women and 2SLGBTQ+ people – both those that are literally homeless as well as those experiencing hidden homelessness

ANTICIPATED TASKS

- Developing a working group of management and frontline staff, as well as service users and women-specific organizations to focus on safety for women that use Main Street Project services
- Developing a working group of management and frontline staff, as well as service users and 2SLGBTQ+ focused organization to focus on safety and inclusion for 2SLGBTQ+ people that use Main Street Project services
- Conducting an examination of all services through a gender lens and making recommendations for improvements
- Conducting an examination of all services for inclusion and safety of 2SLGBTQ+ people
- Implementing improvements on safety and inclusion for women and 2SLGBTQ+ people that use Main Street Project services

Heterosexual men are the primary group of people that experience homelessness and the system of supports and programming leans towards the needs of this group. When this occurs, there can be impacts on women that use homeless services, as well as people whose sexual orientation is not heterosexual.

We are encouraged by the work elsewhere in community to better understand the service needs of women and 2SLGBTQ+ people that experience homelessness. We will continue to contribute to this important community work, and when aligned to our mission, vision and values, will support and implement strategies that more effectively meet the needs of groups other than heterosexual men that use our services.

When we speak of “safety”, we embrace the need for both physical and emotional safety. We want a community that is free from gender-based violence and free from violence against 2SLGBTQ+ people. We believe that Main Street Project should be a safe place for people of all gender identities and sexual orientations. We shall aim to be a more welcoming place, a more inclusive place, and a safer place for women, non-binary people and 2SLGBTQ+ people that use our services.





OBJECTIVE THREE: FURTHER EMBRACE AND SUPPORT TRUTH & RECONCILIATION, DECOLONIZATION AND ANTI-OPPRESSION

Main Street Project accepts that we have historically not always been strong allies in supporting the work of Indigenous organizations and we have, at times, not served Indigenous Peoples that use our services as well as we should have because of cultural ignorance. While we are not an Indigenous organization, and do not aspire to be an Indigenous organization, we must do better at meeting the needs of Indigenous people that use our services and be a better support to Indigenous organizations. We embrace the opportunity for improving our services and programs to be more culturally appropriate, by training our staff, board and volunteers to be more culturally competent, and to support and work with Indigenous organizations in partnership. We have work to do to heal past wounds and right past wrongs. We shall deliberately engage in this process of Truth and Reconciliation in the coming five years, leaning into the difficult conversations, listening attentively so to hear and understand, and take intentional action to improve.

Too many Indigenous Peoples in our community experience homelessness. The best available data suggests that two-thirds of people experiencing homelessness in our community identify as Indigenous. The proportion is even higher amongst younger people experiencing homelessness. Many people are quick to rightly point out that this is disproportionate to the overall population of our community. We believe that such an explanation only reinforces “otherness” — that somehow there is something wrong with Indigenous Peoples themselves for experiencing high rates of homelessness. Instead, we choose to intentionally view these higher rates of homelessness as proof of historical exclusion, stigma, discrimination, racism, and failed public policy. Blaming or pitying Indigenous Peoples for homelessness is wrong. We need to journey with people compassionately and non-judgmentally, promoting knowledge, experiences and resiliency, and creating pathways for wellness and connection to culture.

As an organization that is committed to harm reduction and preventing and ending homelessness, Jesse Thistle’s definition of Indigenous homelessness and its component parts will help shape our thinking and engagement in this space. We accept that Western definitions of homelessness do not fully describe the complexity of homelessness as it relates to colonial policies and practices, impacts and lived realities; that homelessness for many Indigenous Peoples is more than not having a safe place to call home. Collectively, too many Indigenous Peoples have experienced disconnection from land, family, culture, community and identity. Residential schools, the Sixties Scoop, practices within the child welfare system in Manitoba and Canadian public policy significantly contribute to homelessness amongst Indigenous Peoples.





OBJECTIVE THREE: **FURTHER EMBRACE AND SUPPORT TRUTH & RECONCILIATION,** **DECOLONIZATION AND ANTI-OPPRESSION (continued)**

Our attention for the next five years to further embrace and support reconciliation, decolonization, and anti-oppression are the following goals:

1. Strengthen the role of Main Street Project as a support, resource and connection to Indigenous-led cultural supports and services
2. Improve the feeling of cultural safety for Indigenous people that work at Main Street Project or use Main Street Project programs or services
3. Support Indigenous businesses and service providers in the City of Winnipeg
4. Collaborate meaningfully with Indigenous partners and community members in developing policies, practices and activities
5. Actively seek to dismantle and diminish racism, misconceptions, homophobia and stereotypes against any person or group of persons
6. Identify and work to remove all forms of oppression both internally at MSP and externally as they affect the community we serve

1. Strengthen the role of Main Street Project as a support, resource and connection to Indigenous-led cultural supports and services

ANTICIPATED TASKS

- Establishing a formal Lived Experience Circle to provide ongoing guidance and support
- Setting timelines and goals for the implementation of Truth & Reconciliation and Anti-Oppression Framework
- Creating an Ethical Space through seeking out and listening to diverse voices and perspectives
- Encouraging and supporting open communication between management, Board members, staff and volunteers through making time for questions and concerns and transparency on the processes taking place
- Practicing cultural humility to reduce biases in Main Street Project policies, practices and programs
- Integrating the relevant articles of the United Nations Declaration of the Rights of Indigenous People, and the Truth and Reconciliation's Calls to Actions in the organization
- Incorporating the relevant recommendations of the Final Report on Missing and Murdered Indigenous Women and Girls

Main Street Project can improve the role the organization plays in supporting, resourcing and connecting to Indigenous-led cultural supports and services. Internally, we know there is work to do to review all of our programs and services, policies and procedures, Human Resources and volunteer engagement. We can improve the integration of Indigenous culture into our programs and services through the input, collaboration, guidance

and implementation by Indigenous people. We can improve referrals to Indigenous-led organizations and partners outside of our organization when appropriate and desired by the person we are serving. We can collaborate better with Indigenous organizations and Indigenous leaders on matters such as advocacy, service planning, and government investment in our sector.





OBJECTIVE THREE: **FURTHER EMBRACE AND SUPPORT TRUTH & RECONCILIATION,** **DECOLONIZATION AND ANTI-OPPRESSION (continued)**

We also don't know what we don't know. It would be inappropriate to think that we, a non-Indigenous organization, can flip a switch to suddenly Indigenize all of our programs and services. It is with public humility that we call upon our Indigenous partners, Elders present and emerging, Indigenous staff, Indigenous Board members, and people that are Indigenous that use our services to hold us accountable in this process of learning, listening, healing, amending our practices, and advancing Truth and Reconciliation. Formally, we are committed to establishing a Lived Experience Circle to provide ongoing guidance and support.

To also provide accountability, we commit to setting timelines and goals for the implementation of the Truth & Reconciliation and Anti-Oppression Framework. Committing to timelines and goals will help us ensure that it is put into action. We will strive to make meaningful change in Truth & Reconciliation and anti-oppression by heeding the guidance from the Framework.

In addition to the Framework, another source of guidance for us will be the relevant articles of the United Nations Declaration of the Right of Indigenous People, the Truth and Reconciliation's Calls to Action, and the recommendations from the Missing and

Murdered Indigenous Women and Girls final report. While many of the articles are written for the State to act, we believe that articles that speak to the likes of self-determination and being free from discrimination can be embraced at Main Street Project, and we can be an ally in helping to ensure the other articles, as well as the Truth and Reconciliation's Calls to Action are followed by government.

We will create an Ethical Space. It will be an intermediary between two knowledge systems; building a foundation of knowledge sharing. We will engage and be respectful to learn, listen and share, seeing Indigenous values, principles and practices as equal to Western approaches to knowledge.

We know this will be a new beginning in many respects, which will benefit from enhanced communication throughout our organization and with both the Indigenous community and broader community. We will benefit from communication that is open and patient; one that invites inquiry and scrutiny. We believe that the more transparent we can be on the processes taking place to improve our support, resource and connection to Indigenous-led cultural supports and services, the better.

2. Improve the feeling of cultural safety for Indigenous people that work at Main Street Project or use Main Street Project programs or services

ANTICIPATED TASKS

- Cultivating a safe space in which Indigenous community members may practice culture and ceremony such as smudging
- Educating Board members, staff and volunteers on cultural awareness, cultural safety and cultural humility
- Committing to non-violence and avoiding the involvement of law enforcement unless absolutely necessary
- Integrating Indigenous elements, led by Indigenous partners, artists and creators into Main Street Project settings such as murals, land acknowledgements, Seven Sacred Teachings and art, and supporting the creation of culturally adapted gathering places
- Working preventatively to help ensure Indigenous people can stay within their respective communities to receive supports
- Implementing a mentorship program led by Indigenous leadership, Elders and role models, to allow Indigenous community members to seek guidance and healing





OBJECTIVE THREE: **FURTHER EMBRACE AND SUPPORT TRUTH & RECONCILIATION,** **DECOLONIZATION AND ANTI-OPPRESSION (continued)**

Cultural safety, to us, means we will actively consider how social and historical contexts, as well as structural and interpersonal power imbalances shape the experience of receiving services from Main Street Project. Staff, volunteers and Board members need to be self-reflective and self-aware with regard to position power and the impact this power has on Indigenous service users. The “safety” component of “cultural safety” is defined by the Indigenous people that receive services, not by Main Street Project that provides the service.

Cultivating a safe space is overdue at Main Street Project. Indigenous staff and service users, along with Indigenous community members, require a safe space to practice culture and ceremony. We will consult and engage further on which facilities to create the safe spaces within, and how those should be established, set up, and made available.

Cultural humility, to us, means we must humble ourselves as learners when it comes to understanding the experience of others. This is a life-long process of being self-reflective. Being successful at cultural humility also means Main Street Project needs to promote cultural awareness (understanding differences and commonalities between cultures), competency (attaining skills, knowledge and attitudes to engage in more effective and respectful ways), and sensitivity (recognizing the differences between cultures and the importance of these differences).

We renew our commitment to non-violence. We strive to create service environments that are free of physical, emotional, psychological, spiritual and cultural violence, where verbal abuse does not occur. We aim to resolve conflict through non-violent means. We commit to using law enforcement only when absolutely necessary,

recognizing that many conflicts can be de-escalated before reaching a stage where law enforcement may be required.

Main Street Project can improve the integration of Indigenous elements into our practices. We feel it is important for this to be led by Indigenous partners, artists and creators. We are open to transforming some of our facility settings through the likes of murals, land acknowledgements, Seven Sacred Teachings and Indigenous art. The creation of culturally adapted gathering spaces for Indigenous community members is something that we can facilitate occurring within our organization.

In addition to the work we are committed to doing within Main Street Project to improve feelings of cultural safety, we are committed to contributing to preventing the need of Main Street Project services in the first place. We know that some of the people we serve that are Indigenous would prefer and may be better served if they were able to stay in their home community to receive supports rather than journeying to Winnipeg to receive supports and services. We will work with our Indigenous partners to work on a model and approach to make this preventative work possible.

To further promote cultural safety, we will work with the Indigenous community to develop and implement a mentorship program. We believe this is best led by Indigenous leadership, Elders, and role models. The purpose of this would be for Indigenous people that use Main Street Project services, as well as Indigenous staff, the opportunity to seek guidance and healing, when necessary.

3. Support Indigenous businesses and service providers in the City of Winnipeg

ANTICIPATED TASKS

- Prioritizing purchasing from Indigenous business, artists, creators and Indigenous supplies for organizational needs

An organization of our size has a marginal amount of purchasing power. However, we can be more deliberate in our approach to purchasing supplies for the organization. Whenever prudent and possible, we will prioritize purchasing from Indigenous business, artists, creators and Indigenous supplies for our organizational needs.





OBJECTIVE THREE: FURTHER EMBRACE AND SUPPORT TRUTH & RECONCILIATION, DECOLONIZATION AND ANTI-OPPRESSION (continued)

4. Collaborate meaningfully with Indigenous partners and community members in developing policies, practices and activities

ANTICIPATED TASKS

- Engaging with Indigenous community members, communities and leadership before any activity or programming affecting Indigenous people that use Main Street Project programs or services are implemented
- Connecting Indigenous people that use Main Street Project to culturally appropriate long-term healing services and workshops run by Indigenous people
- Increasing the participation and representation of Indigenous people on Main Street Project's Board and all levels of staff
- Hiring Indigenous staff that speak Indigenous languages
- Recruiting peer support positions through non-computer means
- Decolonizing recruitment requirements whenever possible
- Holding regular meetings with the Indigenous Leadership Circle to guide implementation of the 5 year strategic plan
- Providing connection to Indigenous partners for land-based education to Indigenous people that use Main Street Project
- Connecting Indigenous people to Indigenous partners to offer culturally appropriate life skills programming

Meaningful collaboration, to us, means an intentional process and dedicated effort for Main Street Project to engage with the Indigenous community, Indigenous-led organizations, Indigenous staff, and Indigenous people that use our services. It is not about random touchdown points or one-way communication. We start with a shared understanding of intentions, and engage in meaningful dialogue to clarify those intentions. From there, we co-develop action steps to follow in implementation. Those actions will produce outputs and outcomes. We believe that outcome examination is a collaborative process to incorporate different viewpoints to extract meaning from what is transpiring. This leads to reflection on what has and is occurring relative to stated intentions, intended activities and the outcomes produced. This then allows for a re-examination of the initial intentions, and meaningfully co-producing amendments in intentions, actions or intended outcomes.

As we go through the process of reviewing our programs and services, and creating new services or expansions of services, we will consult with Indigenous people that use our services, Indigenous staff, and the Indigenous community. This will be done prior to any implementation of changes or new programming. Whenever a possibility for co-creation of changes exist, we will pursue those.

The majority of our services are an emergency and crisis response to homelessness and reducing harm. We respect that the process of life and housing stability for some of the people we serve requires an investment of time and commitment to journeying with people that surpasses the programming we provide. For people that are Indigenous that use our services, we will endeavour to connect them to culturally appropriate longer-term healing services and workshops run by Indigenous people if they desire. In addition, we will endeavour to connect to Indigenous partners for land-based education for Indigenous people that use Main Street Project programs or services.

To enhance collaboration that is meaningful, we are committed to increasing the participation and representation of Indigenous people on Main Street Project's Board and staff across all levels of the organization. At a minimum, we will pursue a target of 30% of Board members, management, and direct service staff as being Indigenous, and 50% as female. We will work to position the organization to improve upon the 30% Indigenous representation in subsequent strategic plans to be even more reflective of the proportion of people that are Indigenous that use Main Street Project programs or services.





OBJECTIVE THREE: FURTHER EMBRACE AND SUPPORT TRUTH & RECONCILIATION, DECOLONIZATION AND ANTI-OPPRESSION (continued)

From a Human Resources perspective, we aim to achieve three areas of improvement pertaining to Indigenous people. One, we intend to hire qualified Indigenous staff that speak Indigenous languages to further improve communication and cultural connectivity between staff and Indigenous people that use our services and programs. Two, we intend to remove barriers whenever possible to hiring Indigenous people including the ability to recruit peer support positions through non-computer means. Three, we will actively work to decolonize recruitment requirements whenever possible. Positions that do not require professional accreditation or diplomas, certificates or degrees will move towards an examination of experience and lived expertise instead.

In establishing a Truth & Reconciliation and Anti-Oppression Framework for the organization, an Indigenous Leadership Circle was formed. It is our intention to continue to engage with the Indigenous Leadership Circle throughout the implementation of this five year strategic plan. We also plan to continue to engage the Indigenous Leadership Circle throughout the implementation of the Truth & Reconciliation and Anti-Oppression Framework.

5. Actively seek to dismantle and diminish racism, misconceptions, homophobia and stereotypes against any person or group of persons

ANTICIPATED TASKS

- Advocating for Indigenous people when providing services that involve interacting with other members of the community
- Appointing an individual as the responsible party to ensure Truth and Reconciliation and anti-oppression goals are continually worked towards
- Publicly acknowledging the role and contributions of Main Street Project in the process of colonization and release public statements on important events and news affecting Indigenous peoples
- Assessing the appropriateness of volunteers engaging with Indigenous people if/when volunteers do not undergo the same training as staff and Board members
- Advocating for rights, inclusion and equity for marginalized groups such as 2SLGBTQ+, non-binary persons, persons living with mental health issues, persons that use substances, women, racialized people, newcomers and refugees that use our services

Strengthening our service delivery, improving our ability to provide meaningful advocacy, and renewing our commitment to be collaborators with the Indigenous community and Indigenous people, we accept that Main Street Project has a role to play in dismantling and diminishing racism, misconceptions, homophobia and stereotypes against Indigenous people. Furthermore, to strengthen our service delivery we must also improve our ability to advocate for the right, inclusion and equity of 2SLGBTQ+, non-binary persons, persons living with mental health issues, persons that use substances, women, racialized people, newcomers and refugees that use our services.

When interacting with other members of the Winnipeg community, we will advocate for Indigenous people that use our services, and will actively engage in dialogue to challenge assumptions and stereotypes, racism and misconceptions that Indigenous people face on a far too regular basis. We hope to advance equity in this pursuit. We can role model for other organizations how to be advocates and allies in this way.

Furthermore, we will advocate for other people or groups of people that also face issues with misconceptions, assumptions and stereotypes that can be marginalizing and oppressive. We want to





OBJECTIVE THREE: **FURTHER EMBRACE AND SUPPORT TRUTH & RECONCILIATION,** **DECOLONIZATION AND ANTI-OPPRESSION (continued)**

actively dismantle these misconceptions, assumptions and stereotypes that can negatively impact women, non-binary people, members of the 2SLGBTQ+ community, persons with physical disabilities, persons with intellectual disabilities, persons with brain injuries, racialized people, people who are newcomers, immigrants or refugees, persons living with mental illness, and persons that use substances.

To help move our intentions along and to help strengthen accountability, we will appoint an individual as the party responsible for ensuring Truth and Reconciliation and anti-oppression goals are worked towards over the next five years. We expect to provide opportunities to discuss Truth and Reconciliation and anti-oppression as an entire organization, as well as in each of our functional service areas. We will work to expand communication outlets so that there is broader input on decision-making.

We acknowledge that Main Street Project has engaged in activities and conversations historically that have not always advanced Truth & Reconciliation and may have

perpetuated oppression. We have been participants in aspects of colonization. As we work hard to transform, we will work to appropriately publicly acknowledge our past roles and wrongs. Moving forward, we will release public statements on important events and news affecting Indigenous people.

To improve and advance our work of dismantling and diminishing racism, misconceptions, homophobia and stereotypes against Indigenous people, we will more carefully vet when and how to use the offers of assistance from corporate and donor volunteers. We are committed to putting the needs of service users ahead of the needs of donors and volunteers in instances when the participation of the volunteer may re-traumatize or cause harm to Indigenous people, or other marginalized and oppressed people that use Main Street Project programs or services.

6. Identify and work to remove all forms of oppression both internally at MSP and externally as they affect the community we serve

ANTICIPATED TASKS

- Providing training to staff throughout all programs on oppression and anti-oppression
- Developing a working group across MSP program areas to identify all forms of oppression internally and externally
- Developing an action plan to remove all forms of oppression internally and externally

In order to engage in better anti-oppression work, we feel it is necessary to provide training to staff. With a firmer grasp on the nature of oppression – its dynamics of power and its systemic qualities – we can avoid unintended collusion with oppressive systems. We need to pay attention to the ubiquitous nature of privilege and oppression and the potential consequences of ignoring the reality that oppression exists. We do not want to be complicit in oppression, nor do we want to see exclusionary and marginalizing behaviours normalized. If we consciously enter into the work from a place of anti-oppression, we are better equipped to expose and dismantle oppressive relationships and systemic power arrangements.

After training is provided, we will form a working group across MSP program areas to identify all forms of oppression internally and externally that impact our program participants, staff and community. From there, we will develop an action plan to endeavour to remove all forms of oppression from MSP, and advocate for ongoing dismantling of oppression as some of our community members experience elsewhere in community, engagement with government, and engagement with institutions.





OBJECTIVE FOUR: STRENGTHEN THE ORGANIZATION BY IMPROVING INFRASTRUCTURE, TECHNOLOGY AND PROCESSES

To strengthen the organization, we need to make a concerted effort over the next five years to focus on staff development, internal policy development, data reporting, partnerships, and the buildings and equipment we own.

Undoubtedly, our staff are our greatest asset. They remain committed to the population and the work even as the organization has gone through changes in leadership and a pandemic. Investing in staff development will help booster morale, increase staff retention, and help more of our staff see Main Street Project as a career option, not just a job. We want our work force to journey with us as we enter into the implementation of our strategic plan, and contribute their experience and expertise to fulfil the outcomes imagined. Furthermore, we want to be an employer of choice — the organization that professionals in the field choose as the place to fulfil their interests in reducing harm and ending homelessness.

Internally, there is policy development work to be done to strengthen the organization related to the goals identified in the plan. There are also measures that must be taken to take care of robust internal policies and procedures on a range of matters that historically have not received the needed attention to provide clarity to staff and community members. By focusing attention on policies and procedures, it will strengthen the organization and enhance accountability.

While we have met our reporting requirements for funders, we have not done a superb job of ensuring we are driving operational decisions through outcomes data. We know about the volumes of people accessing different services. What we know considerably less about is the difference those services are making. It is our intention to devote time and energy to the tasks required to have a useful and insightful data collection and analysis approach that allows us to track outcomes, tell the story of our work in a different way and the impact we are having, and further inform decision-making on programming and policies.

Being a better partner is important to us. We want to engage in joint planning spaces to further the work of reducing harm and ending homelessness. As discussed elsewhere in the strategic plan, we also appreciate it is necessary to be a better partner with the Indigenous community and Indigenous-led organizations that also serve the population we serve. To be a better partner, we can help do some work in tandem with other organizations, share our insights and experience when requested, and further examine whether there are any programs or initiatives that are better delivered by other organizations.

Our buildings and equipment are well used. “Normal wear and tear” with the volume of people we serve and the nature of our work is different than other buildings and equipment. Vigilance with maintenance, both preventive and reactionary, is necessary. We will put in place an approach that ensures we are doing the best we can with the resources that we have to protect our assets for years to come, maximizing the life cycle of the building or equipment, all the while appreciating the life cycle of, for example, an outreach van, a door, or a washroom with the volume of people we serve and the nature of the work, is not going to be as long as a different setting that serves less people or a different population of people.





OBJECTIVE FOUR:
STRENGTHEN THE ORGANIZATION BY IMPROVING INFRASTRUCTURE,
TECHNOLOGY AND PROCESS (continued)

Our attention for the next five years to further strengthen the organization and better protect Main Street Project assets are the following goals:

1. Further Develop the Staff Team in All Main Street Project Program Areas
2. Review existing internal policies and procedures: update and create, as necessary
3. Develop a comprehensive maintenance and replacement strategy for equipment and assets
4. Develop a capital plan for Main Street Project
5. Improve documentation, data collection, data management and outcomes reporting
6. Develop and implement a Main Street Project file management system with file standards for each type of file (paper and electronic) across Main Street Project
7. Sustain and expand partnerships and collaboration

1. Further Develop the Staff Team in All Main Street Project Program Areas

ANTICIPATED TASKS

- Reviewing job descriptions and expectations, and then align training for each program area in relation to funding requirements, evidence-informed and evidence-based practice, and main currents of thought and practice in the field
- Securing funding for training delivery and management of training requirements
- Updating training materials for each program area
- Improving and solidifying onboarding approach for new staff
- Creating and updating training on Main Street Project values and principles
- Creating and updating training on the Main Street Project service orientation
- Creating training on cultural awareness, cultural competency, cultural humility and cultural safety
- Developing a tracking mechanism for all staff on training received, training to be received, and training to be updated
- Ensuring all staff are appropriately trained on the work, service orientation and values of Main Street Project
- Outlining the process used to assist Main Street Project staff in furthering their professional development and education, as well as career advancement

Our Human Resources are our greatest asset. The dedicated people that choose to work at Main Street Project are driven by passion to make a difference. Choosing to do this work in the non-profit sector means that we must, as an organization, live our mission, vision and values so that staff feel a personal connection to

the work of Main Street Project, regardless of which program area they work.

As Main Street Project continues to evolve and improve, it is incumbent upon us to ensure that staff receive the training necessary to complete the mission and are





OBJECTIVE FOUR: **STRENGTHEN THE ORGANIZATION BY IMPROVING INFRASTRUCTURE,** **TECHNOLOGY AND PROCESS (continued)**

adequately supported in the implementation of the work. Historically, we have woefully under-invested in meaningful staff training and professional development. This must change. While it would be our preference to be part of training and professional development as a broader system of care, Main Street Project needs to be prepared to go it alone internally if there is not the appetite from other service providers to enhance training opportunities from highly qualified, subject matter experts.

The first main area of staff development is on cultural awareness, cultural safety and cultural humility. It is important not to place burden of education on people with different identities than one's own. All staff should be conversant, for example, on the key findings of the Truth and Reconciliation Commission, as well as the Missing and Murdered Indigenous Women and Girls Final Inquiry's Calls to Justice. To engage effectively in Truth and Reconciliation and anti-oppression practices, all Main Street Project employees, volunteers and Board members need to understand and acknowledge their own power and privileges, and how that influences the engagement between Main Street Project and community members that use our services.

The second main area to focus on in training and professional development pertains predominately to being more housing-focused in our service delivery. We need to develop more tools, tips and approaches to improve our work in prevention and diversion, housing navigation, and housing supports. Intense focus on performance excellence, accompanied with supervision and coaching, can help ensure that implementation of training is occurring in operations, and helping to transform the operations to be more housing-focused.

The third main area to focus on in training and professional development is on the service orientation and approaches to engagement and support: harm reduction, trauma-informed care, strengths-based engagement, goal setting, de-escalation, crisis intervention, mental health first aid, and motivational interviewing. We know these are foundational to working with our population effectively. Consistent understanding and application of these approaches and service orientation will help create a consistent culture of performance excellence.

2. Review existing internal policies and procedures: update and create, as necessary

ANTICIPATED TASKS

- Identifying and empowering an internal working group to review all existing internal policies and procedures and identifying gaps in policies and procedures
- Creating new policies and procedures to address gaps in current policies and procedures
- Seeking Board approval, as prudent, on internal policies

The size and complexity of Main Street Project requires robust, clear policies and procedures for all aspects of our operations, and internal controls and administration.

Examples of operational policies that need to be created or updated include: low-barrier shelter; cultural practices available in various Main Street Project settings; housing-focused services; diversion and rapid resolution; and harm reduction outreach, education and supplies.

Examples of Human Resources policies that need to be created or updated include: Main Street Project's approach to acknowledging and participating in

National Indigenous Peoples Day; recruiting through non-technological means for peer positions; and increasing Indigenous representation and languages spoken amongst direct service staff.

Examples of other internal policies that need to be created or updated include: data collection and quality standards; performance reporting and financial tracking by project and, asset management.





OBJECTIVE FOUR:
STRENGTHEN THE ORGANIZATION BY IMPROVING INFRASTRUCTURE,
TECHNOLOGY AND PROCESS (continued)

3. Develop a comprehensive maintenance and replacement strategy for equipment and assets

ANTICIPATED TASKS

- Creating an inventory of all equipment and assets and estimating where it is at in the life cycle
- Developing a maintenance plan for essential equipment and assets
- Examining current financial strategy for maintenance and replacement of essential equipment and assets, and planning for ongoing and future maintenance and replacement

Working with our staff involved in janitorial work and maintenance of our buildings and vehicles, as well as engaging with our staff involved in other equipment assets as well such as computers, we will create a comprehensive maintenance and replacement strategy. The intention is to provide senior leadership and the Board of Directors with a clearer sense of where buildings and equipment are at in life expectancy, the maintenance and preservation routines for existing assets and equipment, and forecast when there will be pressure points for capital upgrades, capital replacement, or equipment replacement.

4. Develop a capital plan for Main Street Project

ANTICIPATED TASKS

- Forecasting capital needs based upon where an asset is at in the life cycle
- Developing a strategy to engage with government and other funders for capital repairs and replacement required in the future

Historically, Main Street Project has not developed, utilized or sought funding for capital needs through a comprehensive, multi-year plan that examines the capital replacement costs anticipated by the organization in the future, as well as new capital projects in the event of new programming. Through the capital plan, Main Street Project will prioritize replacement or new projects in a cost-effective fashion, while keeping an eye on the need to provide continuous services. The capital plan will describe future replacement or new capital projects, the anticipated years for capital expenditures, and the proposed method of funding.





OBJECTIVE FOUR: **STRENGTHEN THE ORGANIZATION BY IMPROVING INFRASTRUCTURE,** **TECHNOLOGY AND PROCESS (continued)**

5. Improve documentation, data collection, data management and outcomes reporting

ANTICIPATED TASKS

- Developing documentation standards for each program area within the organization
- Working with End Homelessness Winnipeg to strengthen our knowledge and use of The Homeless Individuals and Families Information System (HIFIS)
- Developing an internal plan for HIFIS use: what is collected, when it is collected, how it collected and who inputs the data
- Developing and implementing a data collection and analysis plan for each program area
- Preparing suitable data dashboards for the Executive Director, Program Directors, Board of Directors, and the public
- Ensuring each program area has identified targets and intended service outcomes, and that they are adequately tracked and reported upon
- Reviewing the necessity of having a dedicated staff position for HIFIS and data management, as well as supporting reporting for various funders, the Board and external partners

Documenting activities undertaken with program participants is a necessary and important practice. Through documentation, we are accountable to program participants and funders, and increase communication across staff that may engage with the same program participant so that the program participant does not need to repeat their story over and over again to multiple staff. At the current time, there is no documentation standard applied consistently across program areas, and even within program areas there can be diversity depending upon the staff member documenting the service encounter. To improve professional practice and accountability, we see it as necessary to develop documentation standards for each program area within the organization, with an aim to have as much consistency across program areas as possible, depending upon funding and operational requirements.

Historically, we have not been a data driven organization internally. While we have always strived to meet the reporting requirements of funders, we have done little in terms of using our own data to drive organizational program change or to advocate for broader system change. Moreover, our historical focus has been on outputs rather than outcomes, and that needs to change. We lack a data-loving culture within the organization, and as such, many staff with Main Street Project see data inputs as a job demand that holds little relevance or utility for them. We need to change.

We will work with End Homelessness Winnipeg, as the lead on the local implementation of the federal Homeless Individual and Family Information System (HIFIS), to ensure our staff are effectively trained on HIFIS and know the data reporting requirements. Through this work, we intend to improve the accuracy, completeness and timeliness of our data.

We will create outcome reporting frameworks for each of our program areas. This will combine funder data requirements with data elements that we feel internally are a barometer of performance and help us better understand the effectiveness of what we are doing. We need to move away from outputs reporting, exclusively, to an approach that examines outcomes as well. We need to better answer the question: what difference do our programs and services make?

Our Communications team will be tasked with best determining how to translate our performance data into public messaging, focusing on both outputs and outcomes. We will explore ways of transparently sharing our performance data through social media and our website. We will also examine the use of data dashboards and data visualizations.





OBJECTIVE FOUR: **STRENGTHEN THE ORGANIZATION BY IMPROVING INFRASTRUCTURE,** **TECHNOLOGY AND PROCESS (continued)**

6. Develop and implement a Main Street Project file management system with file standards for each type of file (paper and electronic) across Main Street Project

ANTICIPATED TASKS

- Developing organizational operational standards for electronic and paper files, and as necessary customized for the unique requirements of specific program areas
- Training on operational file standards for all staff within Main Street Project responsible for creating a file, updating file contents, and/or closing a file
- Developing corporate standards for human resources, administrative and program files
- Training on the corporate standards for human resources, administrative and program files
- Implementing the new operational and corporate standards for files

The approach to filing within Main Street Project has developed organically over the years. Different personnel at different times have had different approaches to filing, without a standard that transcends the organization. Staff onboarded to the organization are most often taught what to do with filing from other staff, and this has also resulted in diverse approaches to filing.

Different types of files (programs, human resources, administrative) can have different requirements. It is important that each type of file has clearly understood

requirements that can be easily replicated. It is also important that files are reviewed with sufficient frequency to reinforce the new operational and corporate standards.

Whenever possible, Main Street Project will use electronic files over paper files. With proper protections in place, this can be secure, requiring fewer locked physical locations to store physical files. This should also improve the ease with which information from the file is retrieved, while cutting down on the use of paper.

7. Sustain and expand partnerships and collaboration

ANTICIPATED TASKS

- Working collaboratively with other street outreach, shelter, withdrawal management, housing and harm reduction service providers
- Working constructively with mental health, physical health, and substance use recovery programs and organizations
- Working effectively with housing providers and developers, when opportunities are presented, to advance the housing needs of community members that use Main Street Project services
- Engaging appropriately with all orders of government to advance mutual agenda items
- Being engaged and supportive of the work of End Homelessness Winnipeg
- Contributing to non-profit leadership and service excellence across the community





OBJECTIVE FOUR: **STRENGTHEN THE ORGANIZATION BY IMPROVING INFRASTRUCTURE,** **TECHNOLOGY AND PROCESS (continued)**

Main Street Project cannot, and should not, be all things to all people. People in our community living with homelessness, substance use and/or mental health challenges deserve to have meaningful choice in receiving services. Our philosophy and approach to service delivery may not be what a person chooses. Use of our services, we believe, should be informed by the service user and voluntary. When an individual we are serving wants and would benefit from engagement with another service provider in our community, we are committed to making strong referrals and seeing the strengths and opportunities that come from other service providers being engaged.

As noted previously in the strategic plan, we know our engagement with the Indigenous community has to be ongoing. This is the only way we are going to effectively improve on the delivery of culturally appropriate services. Furthermore, it will enhance our accountability in achieving the aims to improve services for Indigenous people.

We are not the only organization in the community that delivers street outreach, shelter, withdrawal management services, housing or harm reduction services. It is important that we get out of competitive mindset and into a collaborative mindset. We will communicate regularly and effectively with our allies in these sectors of service and form partnerships when there is alignment of values and services, and in the best interest of the people we support and are mandated to serve. As necessary, we will help convene and/or participate in community discussions and planning in each of any of these service areas.

We have limitations on the amount of in-house services we can or should provide to people living with compromised mental health or physical health. We do not provide longer-term substance use recovery programming. Yet we are keenly aware on a day to day basis that many of the people we serve and support benefit from and need connections to mental health supports, physical health treatment and supports, and access to longer-term substance use recovery programming. We will endeavour to strengthen our connections and relationships to these critically important health care systems.

Our services intersect with all orders of government. At the local level we serve people throughout Winnipeg. Entities like police and by-law enforcement, as well as neighbourhood issues often fall within the sphere of local government interaction. Funding and policy from the provincial government makes much of our

programming possible and influences what we are able to do. We know that we will need to continue to work with our provincial partners and advocate for changes in funding and policy to continue to be effective and relevant. Federally, not only does federal funding through Reaching Home flow into the community and our organization, but other areas of the federal government such as Health Canada will be critical to achieving some of our future goals related to establishing a safer consumption site.

End Homelessness Winnipeg is leading the system response to service investment, change and data collection related to homelessness initiatives in our community. We need to remain engaged in the planning and review work of End Homelessness Winnipeg. We need to be a strong and committed presence to help promote and achieve system-level responses that will have the greatest impact on preventing, reducing and ending homelessness.

The non-profit sector that supports people experiencing homelessness, substance use and/or compromised mental wellness needs to support existing and emerging leaders. Main Street Project, as a larger non-profit operating in this space, can help be a leader amongst leaders. This can be outward facing such as assisting with public messaging on homelessness, the response, and the outputs and outcomes experienced through the work, or participating in joint advocacy as it positively impacts our sectors of service. Within and across organizations, we can help transfer knowledge of what we have learned and do well, while better opening ourselves up to engage in meaningful dialogue and listening on ways in which we can amend and improve what we do. On top of this, we can likely engage in joint planning for training and professional development for leaders, managers and frontline staff working in the sector. If we want a sustainable, effective and innovative sector that gets meaningful results, our efforts and contributions have to be of assistance to the broader community, and not solely be inward looking.



CHAPTER FOUR:

ACCOUNTABILITY

We are accountable to the people we serve. We will execute the strategic plan to the best of our ability to improve: service delivery, consistency, and outcomes; emotional, physical and cultural safety; staff knowledge and daily practice; our ability to meet the needs of people living with substance use, mental health concerns, physical health needs, and/or, homelessness. The Lived Experience Circle is critical for providing ongoing insights, feedback and ideas from the end user perspective.

We are accountable to each other within Main Street Project. This is our strategic plan. Collectively we need to support and challenge each other respectfully to live the values and realize the mission and vision. We need to work as a team to realize many of the pursuits identified in the strategic plan.

We are accountable to the Indigenous community. We are consciously and deliberately, with the assistance of the Indigenous Leadership Circle, aiming to make all of our service delivery more culturally appropriate and improve cultural safety and cultural humility. We are aiming to improve our training and understanding of the cultures and needs of diverse Indigenous Peoples in order to ensure our services are most appropriate for Indigenous Peoples. We are aiming to improve our Indigenous representation on our Board and workforce, both direct service and management positions. We are not an Indigenous organization, but we aim to be a strong Indigenous ally.

We are accountable to other service providers. Our strategic plan, in several instances, points to the need to partner with and support other service providers. We believe there is a need to be transparent in our approach to service delivery, the way we partner with other providers, how we engage in joint initiatives, and how we work together to improve outcomes for people served.

We are accountable to government. As the primary funder of Main Street Project services, and respecting the role of government in establishing policy and frameworks for service delivery, we want government to understand both the volume of services we provide and the impact of the services we provide. We need to remain good stewards of the public funding made available to us to achieve our mission and vision while living our core values.

We are accountable to the general public. We are neighbours. We engage in both facilities that are in proximity to other businesses and residents, as well as in the broader community through the likes of our street outreach services. We have trust placed into us to achieve good results in meeting the immediate service needs and basic needs of people we serve, while focusing on permanent solutions to homelessness. The public deserves to know our progress and results in achieving our stated aims.



CHAPTER FOUR: **ACCOUNTABILITY** (continued)

We will enhance accountability in implementation in the following ways:

- **Staff reports and updates to the Board:** at a minimum, quarterly staff reports and updates will be provided to the Board of Directors on implementation and progress of realizing the objectives and goals of the strategic plan
- **Strategic Planning Committee:** this committee of the Board of Directors helps provide oversight to strategic planning implementation, and works with management to identify barriers to be resolved for implementation to be successful, and to highlight successes and learning opportunities for the Board
- **Updates to the community through the Annual General Meeting:** once per year, we will present our progress and results of our strategic plan at the Annual General Meeting
- **Continued engagement with the Indigenous Leadership Circle:** at a minimum of four times per year, we will engage with the Indigenous Leadership Circle to present our progress and challenges, and receive input on future direction
- **Development and constant engagement with the Lived Experience Circle:** at a minimum of four times per year, we will engage with the Lived Experience Circle to present our progress and challenges, and receive input on future direction
- **Forming and using the working groups identified in the strategic plan:** through the use of working groups with a cross-section of staff, and at times incorporating others through the community, we will enhance accountability to each other internally, as well as our external partners
- **Public sharing of output and outcome data:** we will begin publicly and transparently sharing information on our service volumes and results of those engagements
- **Internal monitoring:** we will continue to perform our due diligence in reviewing the performance of all Main Street Project staff involved in achieving the intended results of the strategic plan, and coach and support staff throughout the organization to be accountable, professional and effective



CONCLUSION

Main Street Project embraces the opportunities and challenges for the upcoming year to further our work in reducing harm, preventing and ending homelessness, advancing reconciliation, decolonization and anti-oppression, and, strengthening the organization. Our five decades of experience, combined with main currents of thought and best practice in the field, will propel our organization forward in practice to improve outputs and outcomes. Our renewed dedication to work more effectively with community partners, especially Indigenous Peoples and Indigenous organizations, and to create more culturally appropriate practices is important for framing and informing our work moving forward. Our renewed values make reconciliation, anti-oppression, trauma-informed care and harm reduction at the forefront of all that we do and the decisions we make about engagement, supports, policy, and processes.

The 5 Year Strategic Plan would not be possible without the contributions of people that use our services, our staff, and a broad range of community partners and government that provided input. We are very grateful to the Indigenous Leadership Circle for its contributions and guidance in this process. We trust that our 5 Year Strategic Plan reflects and honours those contributions, acknowledging that there were, at times, different perspectives on the role of Main Street Project and the role of our organization moving forward. What is certain to us is that we cannot and should not do it alone. We need a range of inputs and perspectives to challenge us to be the best practitioners we can be in the space of harm reduction, and, preventing and ending homelessness. We need true partners in the space of program design, policy development, culturally appropriate practice, training, and advancing shared interests in the community to reduce harm, and make the experience of homelessness rare, and if it does occur, brief and non-recurring.

We acknowledge we have work to do in order to improve our services and supports to Indigenous Peoples, and we also have work to do in order to strengthen our relationship with Indigenous organizations. We are not, nor do we have plans to be, an Indigenous organization. Nonetheless, we

acknowledge that the majority of people that make use of our programs and services are Indigenous. It is necessary for us to reflect on our practices and policies and amend them to be more culturally appropriate. We need to think about culture in the context of our physical space. We need to equip our staff with additional training on culturally appropriate practice, and ensure that which is learned is put into practice. We need to keep listening, reflecting and amending practice based upon input from Indigenous Peoples, Indigenous organizations, and the Indigenous Leadership Circle.

We see these next five years as the opportunity to strengthen our organization as well. As a large organization with many diverse programs and services, our internal infrastructure will benefit from reexamining, improving and creating policies and processes for our operations, business practices, technology and assets where necessary. We are committed to improving our data collection and reporting. We want to enhance the knowledge and service excellence of our staff. We want our buildings and equipment to last as long as operationally possible, and better plan for maintenance, updates, improvements and replacement through longer-term planning.

We will hold ourselves accountable implementing the objectives and realizing the goals of the plan. We hope and trust that our staff, community partners, government funders, and people that use our programs and services will also hold us accountable as well. We shall embrace continuous improvement over the next 5 years to realize our stated objectives, realize our goals, and stay true to our values. We believe that if we do so, our mission and vision can be realized. We can reduce harm. We can help prevent and end homelessness. We can improve our work in reconciliation, decolonization, and, anti-oppression. We can strengthen our organization's infrastructure, technology and processes. We can be a meaningful and impactful part of a community response system that truly makes a difference in the lives of people experiencing homelessness, helps reduce harm amongst people that use substances, and does so in a culturally appropriate manner.



APPENDICES



KEY PILLARS OF HARM REDUCTION

The key pillars of the Main Street Project philosophy and practice of harm reduction are as follows:

1. Main Street Project promotes a compassionate, non-judgmental, and non-punitive approach to all substance use, addiction, self-harm, sex work, and other stigmatized behaviours.
2. Main Street Project provides evidence-based and evidence-informed harm reduction services in supports and goal setting.
3. Main Street Project strives to meet the Calls to Action of the Truth and Reconciliation Commission of Canada by ensuring our services are informed, and where possible led by Indigenous Peoples.
4. Main Street Project commits to reducing barriers to healthcare services.
5. Main Street Project commits to reducing preventable illness and injury resulting from lack of access to harm reduction supplies and education on safer substance use and safer sex.
6. Main Street Project commits to implementing harm reduction strategies to improve quality of life.
7. Main Street Project commits to putting aside personal judgments when providing life-saving care in line with harm reduction principles.
8. Main Street Project advocates for dismantling punitive drug policy.
9. Main Street Project strives to implement international standards of harm reduction.
10. Main Street Project promotes dignity and respect in a safe environment by supporting personal choice and valuing relationships.
11. Main Street Project promotes the practice of a person's culture while integrating trauma-informed services, specifically trauma that stems from Residential Schools and Western Colonization.
12. Main Street Project strives to reduce the stigma and oppression associated with substance use and/or sex work.
13. Main Street Project actively reduces power imbalances that can exist between service providers and those seeking support.



CORE PRINCIPLES OF HOUSING FIRST

We will strive to put the five core principles of Housing First in place with our work to rehouse and support people:

Core Principle	What It Means to Main Street Project
No housing readiness requirements	We believe that every person is ready for housing, without requiring them to prove their worthiness or readiness first, appreciating that housing and support take many forms and must be customized to their strengths and presenting supporting opportunities of each person. We firmly believe people do not have to be sober, prove compliance, engage in mandatory preparatory programming or be nice in order to be deserving and worthy of housing. We believe in meeting people where they are at, and then journeying towards acquiring a suitable, safe place to live where intensive supports with matters ranging from emotional supports to basic needs customized in type, duration, frequency and intensity for each person we support.
Self-determination and participant choice	We believe in empowering people to make decisions on matters that impact their own life, because we believe people are masters of their own life and have autonomy to decide what is in her/his/ their best interest. We believe it is our job to provide people unbiased information, when necessary, teach skills of deliberation in decision-making, and then work with the person to establish a pathway forward based upon their own desires. We reject any efforts to coerce, force, bribe or bargain with people to alter their behaviour to meet our preconceived notions of what a successful service pathway may be. In line with the central tenets of Trauma Informed Care, we embrace and practice an approach that values mutuality and collaboration. We undertake work and support WITH program participants; we do not do things FOR them or TO them.
Recovery orientation	We believe in offering supports to people in a manner that promotes mental health recovery. Furthermore, we appreciate that many people we support in housing will benefit from time and assistance recovering from the such matters as the impacts of their homelessness, trauma, stigma, racism, discrimination, and, extreme economic poverty, while also being more well associated with their substance use and physical health. We see assistance with recovery as an intentional, customized, person-centred strategy.
Individualized and participant-driven supports	We believe that just as no two people are the same, no two support plans for people should be the same. As we get to know people, develop rapport and better appreciate their individual and environmental strengths and resources, we can work with people in such a way that leverages their existing knowledge and experience to progressively engage. To build people up, we must empower, appreciate and respect personal autonomy. As necessary, we must teach people skills of deliberation of options, and trust that people can acquire when necessary and use their voice to make decisions. Knowing that decisions for supports will not always work out as planned, we also believe that part of the support process is a non-punitive review of what is working and not working, and customizing adjustments to support to better increase the long-term effectiveness of housing and supports.
Social and community integration	We believe that, too often, Housing First is interpreted as “Housing Only” and that all of the follow-up supports necessary to help a person adjust to housing successfully are forgotten. Main Street Project truly sees housing as a first step, but not the only step. Key to long-term housing success is feeling of connection to others and place. In addition, we believe that increasing social and support opportunities with others that are not exclusively formerly homeless persons can help diversify natural supports to help the program participants remain housed.



DEFINITION OF INDIGENOUS HOMELESSNESS IN CANADA

Jesse Thistle's *Definition of Indigenous Homelessness in Canada*¹ is an essential document to read to gain a deeper understanding of Indigenous Homelessness in our country.

Indigenous homelessness is a human condition that describes First Nations, Métis and Inuit individuals, families or communities lacking stable, permanent, appropriate housing, or the immediate prospect, means or ability to acquire such housing. Unlike the common colonialist definition of homelessness, Indigenous homelessness is not defined as lacking a structure of habitation; rather, it is more fully described and understood through a composite lens of Indigenous worldviews. These include: individuals, families and communities isolated from their relationships to land, water, place, family, kin, each other, animals, cultures, languages and identities. Importantly, Indigenous people experiencing these kinds of homelessness cannot culturally, spiritually, emotionally or physically reconnect with their Indigeneity or lost relationships (Aboriginal Standing Committee on Housing and Homelessness, 2012).

¹ (Thistle, J. (2017.) *Indigenous Definition of Homelessness in Canada*. Toronto: Canadian Observatory on Homelessness Press.



THE 12 DIMENSIONS OF INDIGENOUS HOMELESSNESS

as articulated by Indigenous Peoples across Canada

Historic Displacement Homelessness

Indigenous communities and Nations made historically homeless after being displaced from pre-colonial Indigenous lands.

Contemporary Geographic Separation Homelessness

An Indigenous individual's or community's separation from Indigenous lands, after colonial control.

Spiritual Disconnection Homelessness

An Indigenous individual's or community's Indigenous worldviews or connection to the Creator or equivalent deity

Mental Disruption and Imbalance Homelessness

Mental homelessness, described as an imbalance of mental faculties, experienced by Indigenous individuals and communities caused by colonization's social and economic marginalization of Indigenous Peoples.

Cultural Disintegration and Loss Homelessness

Homelessness that totally dislocates or alienates Indigenous individuals and communities from their culture and from the relationship web of Indigenous society known as "All My Relations."

Overcrowding Homelessness

The number of people per dwelling in urban and rural Indigenous households that exceeds the national Canadian household average, thus contributing to and creating unsafe, unhealthy and overcrowded living spaces, in turn causing homelessness.

Relocation and Mobility Homelessness

Mobile Indigenous homeless people travelling over geographic distances between urban and rural spaces for access to work, health, education, recreation, legal and childcare services, to attend spiritual events and ceremonies, have access to affordable housing, and to see family, friends and community members.

Going Home Homelessness

An Indigenous individual or family who has grown up or lived outside their home community for a period of time, and on returning "home," are often seen as outsiders, making them unable to secure a physical structure in which to live, due to federal, provincial, territorial or municipal bureaucratic barriers, uncooperative band or community councils, hostile community and kin members, lateral violence and cultural dislocation.

Nowhere to Go Homelessness

A complete lack of access to stable shelter, housing, accommodation, shelter services or relationships; literally having nowhere to go. Escaping or Evading Harm Homelessness Indigenous persons fleeing, leaving or vacating unstable, unsafe, unhealthy or overcrowded households or homes to obtain a measure of safety or to survive. Young people, women, and 2SLGBTQ+ people are particularly vulnerable.

Escaping or Evading Harm Homelessness

Indigenous persons fleeing, leaving or vacating unstable, unsafe, unhealthy or overcrowded households or homes to obtain a measure of safety or to survive. Young people, women, and 2SLGBTQ+ people are particularly vulnerable.

Emergency Crisis Homelessness

Natural disasters, large-scale environmental manipulation and acts of human mischief and destruction, along with bureaucratic red tape, combining to cause Indigenous people to lose their homes because the system is not ready or willing to cope with an immediate demand for housing

Climatic Refugee Homelessness

Indigenous peoples whose lifestyle, subsistence patterns and food sources, relationship to animals, and connection to land and water have been greatly altered by drastic and cumulative weather shifts due to climate change. These shifts have made individuals and entire Indigenous communities homeless



