

Emergency Shelter Bans in British Columbia

prevalence and alternatives

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**An Undergraduate Research Experience Award Program (UREAP)
Final Report**

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Abstract

There is little research on banning practices in emergency shelters in British Columbia and Canada. Using critical methodology, this exploratory research surveyed emergency shelter workers in British Columbia on their banning practices and alternatives to banning. It was found that banning is understood by workers as a last resort and yet is used weekly. This frequently used last resort is influenced by systemic factors (funding constraints which undermine staffing levels, training, and time available to spend with one person/event of conflict) and is often justified by safety, though safety (and its sibling term, violence) was not defined; it appears that not every ban is for the purpose of immediate personal protection. The results of this research demonstrate the need for a BC Housing-wide reporting and review process on every shelter ban that occurs so as to better understand who is not being served by the shelter system and, therefore, amend and hold policy accountable accordingly.

Introduction

Emergency Shelter Bans in British Columbia: Prevalences and Alternatives was conducted under Thompson Rivers University's [Undergraduate Research Experience Award Program \(UREAP\)](#). This included extensive supervision and collaboration with my primary faculty mentor, Dr. Juliana West, and additional support from my secondary faculty mentor, Dr. Kathie McKinnon. I, Nathaniel Bailey, the Principal Investigator in this research, am a fourth year undergraduate social work student at Thompson Rivers University. I am also White, a cisgendered man, and while I have lived experience as a frontline shelter worker, I have no lived experience of homelessness.

My social location is provided to give you context as to where this research is coming from and, just as important, where this research is not coming from. This research should not be taken as absolute truth.

This is another middle-class White man's interpretation on a systemic issue that will almost certainly never affect him in a primary way. The lived experience of shelter bans that I do have comes from the position of a frontline worker. My experience with bans has made me critical of the broad use of the term 'safety' to justify interventions more geared toward staff burnout and retention—I see bans as something that is rarely helpful, and congruent with critical methodology make my bias transparent.

As we as a society begin to walk the walk of decolonization, I use this introduction as a reminder that any policy implemented without meaningful involvement of people with lived experience—and in a way that clusters many different people into one imposed identity—is not only colonial at heart but is also likely to miss the mark and further perpetuate the problems it intends to address.

These are not just scholastic buzzwords, the implications are people falling through the cracks of an overwhelmed system that has resorted to punity because of efficiency.

As a systemic issue that goes beyond the level of frontline workers and their power to ban or not ban, I urge policy makers, BC Housing, and shelter leaders to be accountable for the implications of efficiency over the provision of the life necessity of shelter. Heed *where this research is not coming from*, from the people facing the cold reality of bans. I urge all to take responsibility for decolonizing the shelter system and beyond performative measures—diligent reporting of bans and the creation of an auditing process is one of many places to *start*.

“These are not just scholastic buzzwords, the implications are people falling through the cracks of an overwhelmed system that has resorted to punity because of efficiency.”

Literature Review

There is a paucity of both research and transparency on banning practices in homeless shelters in Canada, yet evidence shows that banning practices are not only commonly used but also can result in harms for both service users as well as service providers. This literature review will highlight the small current body of research on shelter bans as well as offer suggestions of where further inquiry is needed to better inform service provision.

Shelter bans may be experienced by thousands of people each year in BC alone. Over 11,000 people were counted as homeless in British Columbia's 2023 point-in-time count, a figure that represents the "minimum number of people experiencing homelessness in a community" (Caspersen et al., 2024, p. 16). Shelters are commonly accessed by people experiencing homelessness,

with over half of those who participated in the point-in-time count reporting to have stayed in a shelter—over 5,000 people (Caspersen et al., 2024). While there are methods in place to record how often shelters are being used, there is less clarity on how often individuals are banned from accessing shelters. Two studies that use secondary data suggest that nearly twenty percent of people experiencing homelessness have experienced a shelter ban (Kerman et al., 2022a; Schwan et al., 2021).

People living with homelessness are more likely to be banned where replicated relations of oppression and privilege in Canadian society exist (Kerman et al., 2022b; Schwan et al., 2021). For example, individuals who are racialized, experienced child-welfare involvement, and mental illness, respectively, face a higher risk of experiencing a shelter ban (Kerman

et al., 2022b). This is consistent with research on risk-based practices in social services, and their inextricability from cultural/systemic oppression and stereotypes (Kyne, 2024; Quirouette, 2022; West 2014). This exploration is further illuminated (with some caution) by a small (n=4), pre-2020 study that found only 26.7 percent of executive directors (most of whom identified as Caucasian) of shelters surveyed had anti-racist training, protocol, or policies in place (Levesque, et al., 2021). In addition, research specific to Indigenous person's experiences of shelter bans has been difficult to find despite Indigenous people experiencing homelessness (and conflated manifestations of oppression such as overdose death and victimization) at disproportionate rates due to the impact of oppressive colonial policies and cultural racism (Infrastructure Canada, 2023; Rumboldt, 2022).

Shelter bans appear to be currently located as a for-granted, and largely unexamined part of shelter services; while common in practice, they are less common as a focus of academic inquiry. This potentially locates bans as a for-granted and unexamined part of shelter services. While there is indeed violence and harm in shelter environments (Kerman et al., 2023a), if every ban were a matter of actual safety, that would imply that around 18 percent of people experiencing homelessness are imminently dangerous (Kerman et al., 2022a; Schwan et al., 2021)—this is simply unfounded. What is known is that people experiencing homelessness are disproportionately victimized, and that higher rates of offending in homeless populations are tied to desperation and survival (McCarthy & Hogan, 2024); in other words, bans may inadvertently increase the risk of someone being both victimized and becoming an offender, neither of which address actual safety, especially at the rate at which bans appear to be occurring.

Banning practices appear to have less to do with necessity and more to do with a lack of funding and appropriate alternate service provision choices: Support for bans amongst service providers was often related to not having other real or perceived options (Kerman et al., 2022b). Thus, bans may be a systemic consequence of neoliberalism, which makes non-profit service provision dialectal in that it is both incredibly complex (and therefore expensive) and budget-constrained; though there may be further downstream implications, banning does offer an immediate solution to conflict and policy violation (Kerman et al., 2022b). Alternatives to banning require training, formal education, staff, and time—all which cost money and require public support, where both of which the shelter industry experiences in oscillating political and popular waves (Johnstone et al., 2017). This is not a fully understood correlation, but bans cannot be separated from funding constraints in the shelter-

industry.

Bans may also be popular because of societal constructions of punishment and exclusion as synonyms for justice and safety, especially when working with people who have already been labeled as criminal or deviant (Elliott, 2011).

Like other risk-based, punitive practices, such as incarceration, it appears that banning may create a ‘revolving-door’ effect, in which bans are cyclical and the root issue is not addressed (Kerman et al., 2022a); **the ‘solution’ becomes a barrier in itself.** For example, a ban may directly lead to someone being unsheltered. Being unsheltered is dangerous. Over 340 people died while experiencing homelessness in BC in 2022 (BC Coroners Service, 2022). Most of these deaths were overdoses, the likelihood of which increases when someone is unsheltered (BC Coroners Service, 2023). Being unsheltered also increases the likelihood of experiencing violence, especially for women and women who are

racialized (Kerman et al., 2022a; National Inquiry into Missing and Murdered Indigenous Women, 2019). It is not known how many of these individuals who died experienced a shelter ban, but the correlation between shelter bans and being unsheltered is noteworthy; **shelter bans are justified as a means of mitigating risk, and yet they also put people at risk** (Kerman et al., 2022). Kerman et al. (2022b) note that this double-edged sword of risk-thinking is especially concerning considering the lack of accountability and auditing protocols in place for bans. This raises the question of whether bans are justified by ideology or evidence, especially beyond the immediacy of asking someone to leave temporarily when de-escalating conflict; do we punish because it works, or because it is just what we do?

In mapping out banning practices and consequences, geography is also likely an affecting dynamic. Rural homelessness differs from an urban

experience due to fewer services and reduced anonymity (Buck-McFadyen, 2023); this may affect banning decision-making, but research on the topic appears difficult to locate.

The literature reflects that bans negatively affect workers in addition to people who are banned (Kerman et al., 2023b). The burnout arising from shelter bans may be attributed to the moral conflict that banning presents, which may suggest that indeed, not all bans are a matter of safety. Burnout due to bans may be tied to the neoliberal market economy under which the shelter industry operates: fiscal restraints place an emphasis on time/cost often at the expense of human wellness (Johnstone & Connolly, 2017; Kerman et al., 2022; Quirouette, 2022).

In summary, a common theme in this literature review has been highlighting where the small body of research orients further inquiry into bans and subsequent creation of better policy/practice: There is a clear paucity of research on shelter bans, alternatives, and how bans intersect with other experiences of oppression. Just as clear is the potential for bans—especially in their current state which appears to place them as a de-facto part of the shelter system, documented and audited only in a siloed manner—to cause further harm in the already often violent experience that is homelessness. BC Housing’s Emergency shelter program framework (2018) calls for transparency, accountability, and for funding to reflect local needs; research and industry resources suggest that strides should be made in all of these values on the topic of shelter bans.

**“...do we punish
because it works, or
because it is just what
we do?”**

Methodology

Theoretical Framework

This research follows critical methodology and the common tenets of the body of critical research. Peirce (1995, as cited in West, 2014, p. 91) highlights the following tenets:

- Critical research denies master narratives and the existence of objectivity.
- Critical research explores “the relationship between structural/macro forces and human agency for the purpose of social change” and through a lens that sees “...marginalization is produced and maintained by unequal power relations”.
- Research cannot be taken in isolation from its holistic historical context nor isolated from the subjectivity of individuals' lived experience (especially the researcher).

This has several implications for an inquiry into shelter bans. The literature supports the perspective that shelter bans are a marginalizing practice that follow other patterns of oppression (people who are racialized are disproportionately banned; people with mental illness are disproportionately banned;

banning conflates with other forms of oppression both in likelihood and potential victimization after being banned). There is a paucity of research, system-wide policy, transparent reporting, and auditing of bans—this is troubling, and the purpose of this research is to demonstrate a need for that. Bans cannot be separated from the neoliberal chokehold gripping social services (bans are cheap, sometimes currently necessary to appease funders/building providers, and are time-efficient for staff pulled in competing directions).

Banning seems to be a last resort for the majority of workers, but it also appears that the shelter industry has been constructed in such a way that last resorts are used frequently and perhaps, automatically. If bans are a structural phenomenon, rather than purely an informed outcome of a worker's assessment—this inquiry is focused on identifying those prevailing macro forces

(i.e. funding, levels of training, power dynamics, privilege & oppression etc.). This focus is to inform social change rather than the further pathologizing of either those that experience bans or those that ban individuals, perceiving it as necessary and just.

Finally, this critical inquiry is very much guided by my own subjective lived experience of bans. First, this has only been as a frontline worker, and I am not someone with lived experience of using emergency shelter. My experience has shaped my perspective into one that sees bans as marginalizing, overused, under-scrutinized, and not exclusively for the means of ‘safety’; at the same time, I have banned people and felt like I and my colleagues had no other options. A woman who was banned fatally overdosed across the street from the shelter I worked at, and no banning policy was changed let alone revisited. This tragedy and lack of

ethical organizational reflexivity and procedural reevaluation inspired this research.

This research is also guided by an Anti-Oppressive/Anti-Privilege (AOAP) framework. AOAP is a critical framework that aims to inform social work practice with theoretical and practical knowledge about oppression & privilege (like two sides of a coin, one doesn’t exist without the other) at the cultural, structural, and individual levels (Mullaly & West, 2018). Perhaps especially relevant to the context of shelter bans is AOAP’s amplification of oppression and privilege being propagated in unintentional, often invisible ways; most (hopefully all) frontline workers are not intentional oppressors. The knowledge from AOAP and other critical theories allows this to be the beginning, and not the end of conversations and hopefully, more compassionate and life affirming practices.

Shelter bans themselves are a systemic phenomenon (Kerman et

al., 2022; van den Berk-Clark, 2015) that are experienced differently depending on one's social location and conflating factors of oppression and privilege (Kerman et al., 2022)—this goes for service-users and providers. Thus, these methodologies are well aligned with the topic and a necessary compass for the immense privilege I have as a researcher and worker placing themselves in a position of authority on the topic.

Research Design

This research was primarily guided by the question **“How are shelter bans being used in BC?”** This was supported by the following secondary questions:

- How many people were banned from an emergency shelter in 2023, and what are the demographics of individuals experiencing bans?
- What are the goals and unintended consequences of banning?
- Are there alternatives to banning?
- What dynamics influence banning decisions?

Specific objectives are to capture the elements of ‘who’, ‘how many’, ‘why’, and ‘what can be done’ related to shelter bans in BC. These questions were explored using non-probability, purposeful sampling, inviting directors, managers, and frontline workers of 111 year-round emergency shelters listed on [BC Housing’s shelter directory](#) to anonymously respond to an online survey.

Inclusion Criteria

The online survey was open to anyone that self-identified as being currently employed by an agency that offers emergency shelter services in BC. This employment could be in any role, though participants were asked to identify whether they were a ‘frontline worker’, ‘manager’ ‘executive director’, or ‘other’; these selections were non-exclusive and multiple could be chosen. The survey was open to all emergency housing shelters, but recruitment efforts were limited to the 111 shelters listed as year-round emergency shelters on BC Housing’s online directory.

Since ‘emergency shelter’ is best understood as a fluid term, this directory was a pragmatic way to narrow the definition into a manageable list for the scope of this research endeavour. This directory also positioned the findings to make relevant the tie between bans and the need for the creation of a BC Housing-wide framework of best practice clear.

Participant Recruitment

Using BC Housing’s shelter directory as a master list, recruitment was conducted via email. If available on the shelter's website, the Recruitment Letter for Executive Director (see Appendix E) was sent to the agency’s executive director’s email. If this was not available, the Recruitment Letter for General Mailbox (see Appendix D) was sent to the agency’s general email address. To ensure anonymity of who did and did not participate, both recruitment letters explicitly requested no-reply to the email and to not share whether or not the agency’s staff wished to participate. Both recruitment letters asked for

the Recruitment Poster (see Appendix A) to be forwarded to all staff of the respective agency via email. The Recruitment Poster contained a link to the Informed Consent form (see Appendix B), which upon affirmed informed consent opened the survey (see Appendix C). The Recruitment Poster also contained a request that encouraged service-providers to share the poster with their colleagues and friends in the shelter industry who fit the participation criteria.

Informed Consent

Obtaining informed consent and ensuring voluntary participation was crucial to ensure that the study met ethical requirements. I received approval from the Thompson Rivers University Research Ethics Board (see Appendix G) before recruitment. Through all streams of recruitment, the survey is preceded by the Informed Consent Form (see Appendix B). The form details the purpose of the research, potential benefits and risks, the questions included in the survey, time needed

to participate, and how confidentiality and anonymity would be protected. Since bans are a known source of chronic stress/burnout, the form encourages participants to connect with the [Mobile Response Team](#) and/or other sources of support for any challenges that may arise. To access the survey, participants were asked to read the survey consent form and click “I agree” at the end of the form, which opened the survey.

Confidentiality and Anonymity

Ensuring and protecting confidentiality of participants is a central part of ethical research. The online survey was hosted by Survey Monkey, and the consent form explained that responses would be stored on a Canadian server and provided a link to [Survey Monkey's security statement](#). Capture settings were adjusted to not track respondents IP addresses. Participants were not prompted to provide their name, or any contact information. In the recruitment process, everyone invited was asked to not respond regarding their participation or non-participation.

Participants were asked to self identify their general role at their workplace, the general population size of the community they work in, and the health authority their community belonged to. There was a balance to be struck here between capturing demographic and geographic data to account for the scale of a province-wide survey and ensuring that this did not compromise anonymity. For this reason, respondents were not asked to provide any further information on their social location (gender, race, ethnicity, age, ability, etc.) to protect the anonymity of marginalized minority groups. For example, if someone responded that they worked in a one-shelter community with a population of less than 10,000 in the Vancouver Coastal Health catchment, they may very well be the only person of colour at that shelter, or the only person with a disability, or the only person over sixty, or all the above. This exclusion is not to undermine the importance/affect one's social location has on their life, working experience, and experience of shelter

bans as a worker—rather, it is a limitation prioritizing the safety of respondents.

Another confidentiality and anonymity piece to manage was my current employment at an agency that was recruited to participate. To manage this dual relationship (researcher/colleague), I first declared it to my supervisor and included it in my ethics application. I also drafted an all-staff email to declare the dual relationship to my colleagues and direct formal inquiries to the appropriate channels (see Appendix F).

The data collected was designed to be anonymous in its raw state, and was accessible to myself, and my supervisors Dr. Juliana West, and Dr. Kathie McKinnon. If participants decided to volunteer extra information that included identifiers, all identifiers were cleansed. All raw participant data by participants was deleted permanently upon project completion, with September 30, 2024, being the latest date; ultimately, an extension to October 31st, 2024, was approved.

Online Survey

In total, the survey was 32 questions (see Appendix C for the list of survey questions). Questions were organized under the following headings:

- Employment and Shelter Information
- Ban Practices
- Policy On Bans
- What Influences Bans?
- Consequences and Goals of Bans
- Alternatives To Bans
- Statistics on Shelter Bans

Every question featured a response option titled “other, or I’d like to elaborate” where respondents could manually type up to 100 characters (referred to henceforth as a qualitative response)—this limit was the max character count Survey Monkey offered. The survey was designed to take 13 minutes, and it was initially estimated that there would be between 300 and 350 respondents—about three per shelter. This was an overestimation of considerable magnitude! The survey was conducted between May 30 and July 17, 2024 and received

37 responses with a 65 percent rate of completion. Incomplete responses were accepted and included.

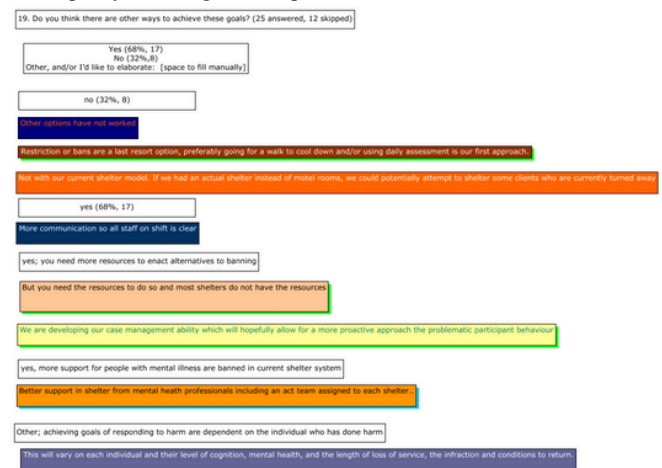
Data Organization and Analysis

Quantitative responses were analyzed using [Survey Monkey](#), which generated the response rate for each question and a percentage and numeral distribution among respective answers for each question. Survey Monkey also presents data according to individual responses—this was helpful for investigating themes related to geographic features as well as participant’s role within their shelter. Qualitative responses were analyzed and themed using [Cmap, a not-for-profit](#) electronic mapping software used to create concept maps. Unique maps were created for each respondent, question, as well as emerging themes. The qualitative responses were themed by first aligning them with the quantitative response options of the respective questions, and then creating new themes if the response was novel and/or the respondent did not select any dropdowns. By theming qualitative and quantitative responses

collectively, this avoided standalone qualitative responses receiving more weight in theming than they were due. This also gave quantitative and qualitative responses a two-way stream of context which allowed qualitative responses to be located within one’s quantitative responses.

Figure 1

Example of Theming in CMap



Trustworthiness

Any additional themes were created by me, the principal investigator, and then reviewed by my primary supervisor, Dr. Juliana West. This triangulation process included weekly meetings over Zoom where we collaboratively analyzed the data using Cmap, discussed points of disagreement on theming, and questioned what biases and blind spots we may share. Juliana also individually analyzed the themed data outside of these

meetings. As themes evolved from this triangulation process, new versions of Cmaps were created with the past versions being retained so as to create a research trail.

Limitations

Acknowledging limitations of this study is integral to de-silo the many ongoing conversations on shelter bans and widen the small body of research on the topic. This exploratory research is not designed to be a comprehensive review of shelter banning practices in British Columbia nor generate generalizable findings, rather to help to identify further areas for inquiry.

In gathering statistics on unique instances of banning, the anonymous design of the survey affords a potential overlap in responses (one shelter's statistics could be reported twice by two different respondents), as well as a lack of in-depth understanding of which shelters had employees participate in the research and which did not. Furthermore, the second part of the survey—which aimed to capture official shelter statistics on the demographics of

persons banned—received very few responses: the explicit questions on this subject only received three responses, two of which identified as frontline workers and not in a management role. This diminishes this research's contribution to understanding the intersection of bans and racialization. Combined with previously discussed limitations, this survey should not be used to replace the urgent need for an industry-wide systematic capturing of banning data. Also, the survey, and all other materials were only offered in English and communication was entirely completed online, through email and written surveys.

The largest overarching limitation was time. To honour the grant I received, Thompson Rivers University's [Undergraduate Research Experience Award Program](#), I had approximately a four-month turnaround from grant application approval and ethics approval to final report submission. This time crunch influenced a few notable exclusions that limit this research.

Notably missing is the perspective of service-users—no conversation or policy on bans is fully informed without this perspective and this research is very much limited by its absence. Furthermore, this study only examined year-round emergency shelters included on BC Housing’s Shelter Directory and did not research the banning practices of transition homes for women, emergency weather response shelters, supportive housing sites, or any other version of program-related housing or emergency shelter. Finally, the research was limited to British Columbia.

“Notably missing is the perspective of service-users—no conversation or policy on bans is fully informed without this perspective and this research is very much limited by its absence.”

Findings

Employment and Shelter Information

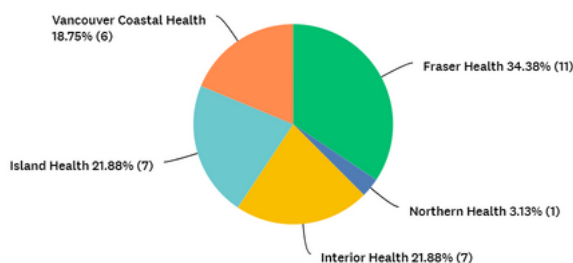
The survey was open for 48 days between May and July 2024. It received 37 responses, 65 percent (n= 24) of which were fully completed. Respondents self-reported being almost either entirely managers (30%, n= 10) or frontline workers (58%, n=1 9). Nine percent reported working in another role in their shelter (n= 3), while three percent (n=1) reported as an executive director. Responses appeared to be quite evenly distributed throughout the province's health authorities, with the exception of Northern Health, which was only chosen by one respondent.

Figure 2

Question 3

What regional health authority is your shelter located within?

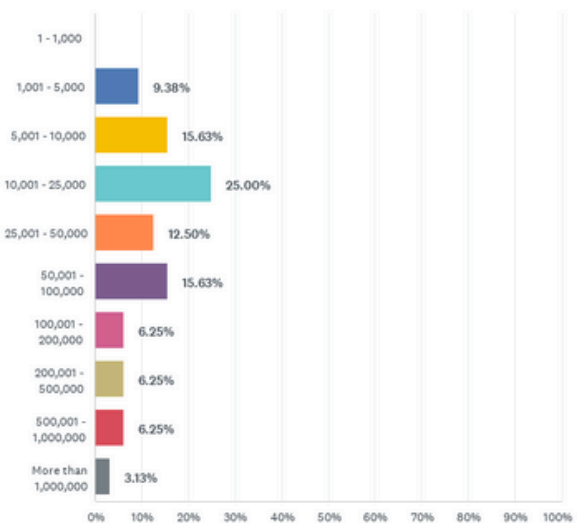
Answered: 32 Skipped: 5



Respondents appeared to be from a broad range of population centres , with 25 percent (n= 8) working in communities with a population between 10,001 and 25,000 people. 62 percent (n= 20) of respondents reported working for a shelter that employed 31 people or more.

Figure 3

Question 2: Community Population of Respondents



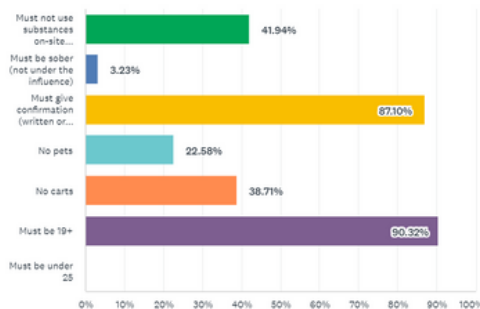
While only one respondent (3%) said their shelter required service-users to be sober, 42 percent (n=13) of respondents stated their shelter prohibited substance use (including alcohol) on site. Other common requirements for accessing shelters was confirmation that shelter

guidelines will be adhered to (n=27, 87%) and being nineteen or older (n=28, 90%).

Figure 4
Question 6

Please check all criteria that apply to accessing your shelter:

Answered: 31 Skipped: 6



All respondents reported that their shelter offers food and laundry services. The majority (63%, n=20), of respondents reported that their shelter offers supportive housing, harm reduction supplies (88%, n=28), an overdose prevention site (53%, n=17), and assistance navigating government systems (88%, n=28). 44 percent of respondents (n=14) reported their shelters offer health care and transportation services. Half of respondents (50%, n=16) reported their shelter was the only one in their community.

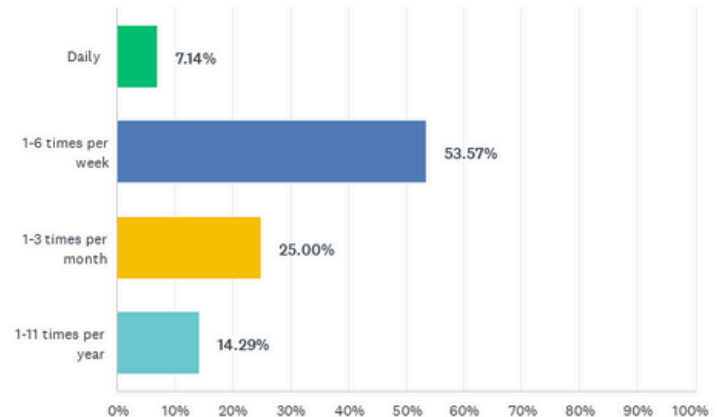
Ban Practices

All respondents reported that their shelter uses banning. Half (54%)

reported bans occur 1-6 times per week, 25 percent 1-3 times per month, 14 percent less than 12 times per year, but with seasonal fluctuations, and only 7 percent daily.

Figure 5

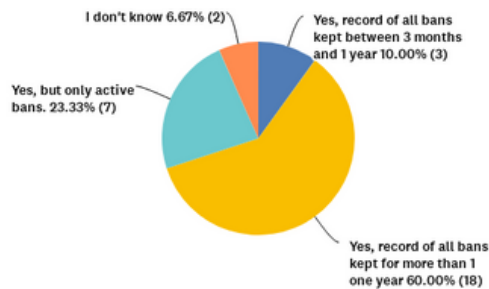
Quantitative Responses: Question 11



Six percent (n=2) did not know if their shelter kept a record of bans, and one respondent commented that record keeping was “recent practice and I’m not sure if it is kept up to date”. 23 percent (n=7) only kept records of active bans, 10 percent (n=3) kept records of all bans for between three months and one year, and the majority (60%, n=18) kept records of all bans for more than one year. Another respondent noted that compiling their records would “take a long time as records are kept in different places”.

Figure 6

Question 10: Does Your Shelter Keep a Record of Bans?



90 percent reported having existing policy, procedures or guidelines on bans with 69 percent (n=20) written and 21 percent unwritten (n=6).

And yet dynamics influencing banning decisions appears to be highly discretionary as reported by 80 percent. 60 percent also reported agency relationships with neighbours as an influencing dynamic, followed by a service user's previous ban history (52%), staff training levels (40%), and alternative community resource prevalence (36%) contributing to decision making. Violence was also mentioned by seven respondents as influencing staff decisions to ban.

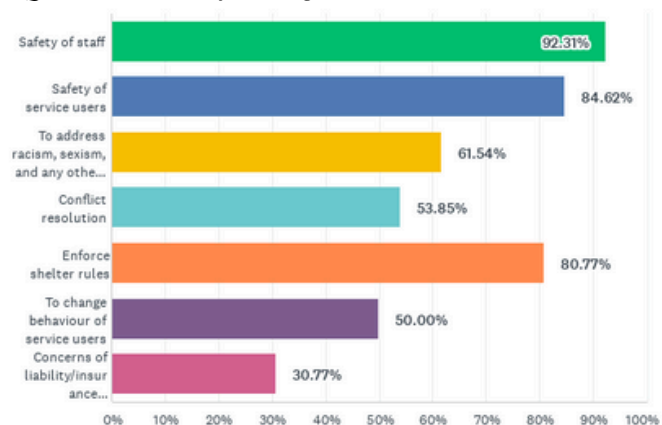
Goals of Bans

The goals of bans were primarily identified as safety of staff (94%, n=24) followed by safety of service-

users (85%, n=22), and addressing any form of discrimination (62%, n=16)—though it was commented by one respondent that staff safety rarely needs to be protected, and by another respondent that bans help give only an *illusion* (italics added) of increased safety.

Figure 7

Question 16: Goals of Banning



Other stated goals include enforcing shelter rules (81%, n=21), changing behaviour of service users (50%, n=13), and concerns of liability/insurance requirements (31%, n=8). Half (54%, n=14) thought that banning sometimes achieved these goals, 30 percent (n=8) thought they usually achieved the goals, while 12 percent (n=3) thought they rarely achieved the goals.

When asked if respondents thought there were other ways to achieve these goals besides banning, 68 percent (n=17) said yes, 32% (n=8) said no. Four people commented that more resources would be needed to achieve these goals in other ways, from more mental health professionals in shelters to one respondent's community using motels as a de-facto shelter, and thus having to offer more barriered services.

Do you think there are other ways to achieve these goals?

“[Yes] But you need the resources to do so, and most shelters do not have the resources” -Respondent 34, manager

Alternatives to Bans

When given a small drop-down list of alternatives to banning, more than 75 percent of respondents stated they used all of them already—two commented that de-escalation techniques are already used and implemented but violent situations go beyond this scope. Over 90 percent said that they would

like to see alternatives to bans used more, but one respondent commented that this would require more training and capacity from staff.

Figure 8

Question 19: What Alternatives Are Already Being Used?

ANSWER CHOICES	RESPONSES
▼ Asking someone to leave for a moment to de-escalate and inviting them back (i.e. “please go for a walk and come back”).	100.00% 23
▼ Responding to service-user’s needs that may be miscommunicated through potentially ‘bannable’ behaviour.	78.26% 18
▼ Talking through conflict with service-users.	86.96% 20
Total Respondents: 23	

“I’ve rarely seen a conflict be talked through and see needs be met. I think this sometimes can be seen as ‘favouritism’ from staff, having the time and energy to talk it out with one person, and potentially not giving another person the time due to previous incidents / biases.” - Respondent 22, Frontline Worker

“We use all of these. This isn’t as black and white as you are assuming. We all have de-escalation training but if someone is violent or threatening towards staff or other guests they will need to leave.” - Respondent 9, Manager

These themes were also common on the topic of potential benefits of alternatives to bans: it was agreed by a majority of respondents that there are many benefits to using alternatives to bans, though three respondents commented that bans

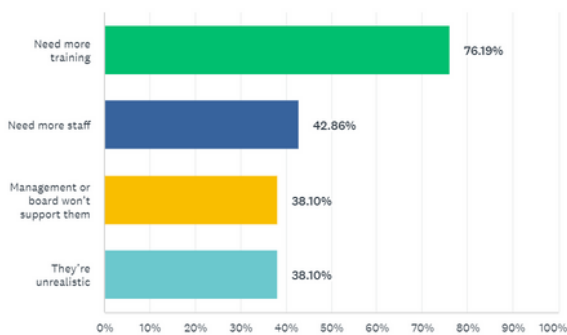
are needed to respond to violence. Barriers to implementing alternatives to bans included need for more training (76%, n= 18), need for more staff (43%, n=9), and 38% (n=8) reporting that they're unrealistic and management or board won't support them, respectively.

Figure 9

Question 21

What barriers exist to implementing these alternatives?
(Choose all that apply)

Answered: 21 Skipped: 16



Statistics on Shelter Bans

This section of the survey aimed to gather official statistics on frequency of bans, demographics of those who are banned, length of bans, and bans' relationship to mental health crises. Questions 23 (inquiring how many people were banned according to official records) and 24 (inquiring how many people banned according to race and gender [Indigenous, Racialized and Non-Racialized]

[men, women, trans, two-spirit]) were all answered by five respondents or less. One respondent from a shelter in a large population centre (population greater than 500,000) reported that their shelter banned 150 individuals in 2023. In small population centres (less than 10,000), one respondent's shelter banned six, while another's banned 20. The demographic-focused questions featured especially low engagement (three respondents) and received only estimative responses and no responses with 'real numbers.' These three respondents all estimated people who are racialized and Indigenous peoples, respectively, accounted for between zero to ten percent of people who are banned. Question 25, regarding length of bans, only received six respondents. All lengths of bans were used, with commonality of length of ban being used spread quite evenly. Only one respondent reported that bans lasting less than one week were the most commonly used, whereas other dropdown

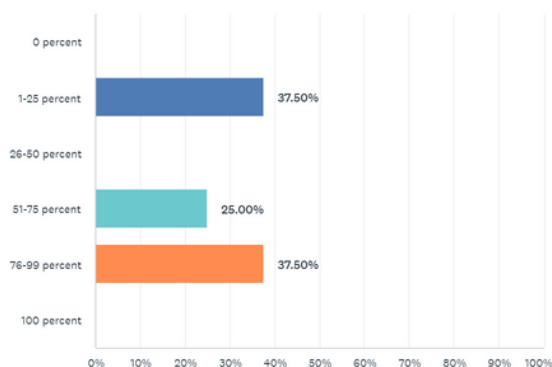
options representing longer, incremental time periods were reported as being the most commonly used by two respondents each. One respondent commented that longer lengths of bans are more common because **“typically, when situations actually escalate to the point of a ban, it’s serious. If it’s not serious enough for a ban under one week, we probably have found an alternative...”** Five respondents found that over half of all bans involved a mental health crisis or suspected mental illness—three respondents reported 1-25 percent of bans involving a mental health crises or suspected mental illness.

Figure 10

Question 26

Of the incidents that resulted in a ban, approximately how many involved a mental health crisis or suspected mental illness?

Answered: 8 Skipped: 29



Bans and Substance Use

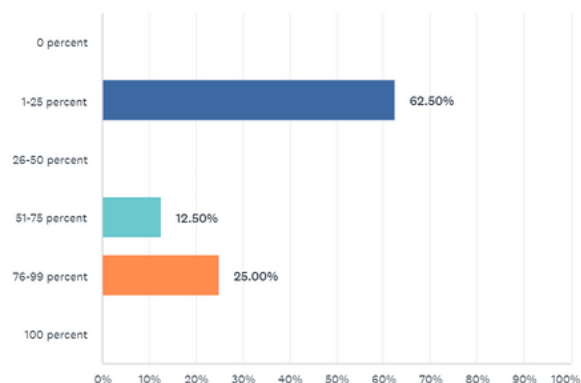
Eight respondents answered question 27, inquiring how many bans were for using substances in places service-users were not allowed to. Five respondents reported 1-25 percent of bans were for substance use, two reported 76-99 percent, and one reported 51-75 percent.

Figure 11

Question 27

Of the incidents that resulted in a ban, approximately how many were for using substances? For example, smoking in a bathroom, injecting substances in a public space, drinking alcohol in a public space.

Answered: 8 Skipped: 29



Open-ended questions

Questions 22 and 28 were the only open ended questions in the survey without drop-down response options. Question 22 asked respondents if there was anything else they would like to share about bans or alternatives to bans.

This question received 13 responses, outlined below.

Question 22: Is there anything else you would like to share about bans and/or alternatives to bans at the shelter you work at?

“There are not enough resources, qualified staff or training for staff. Too much money for harm reduction supplies and not enough for resources for people to exit addiction.” -Respondent 34, Manager

“It’s very difficult in a rural community with very limited resources.” -Respondent 33, Frontline Worker

“No.” -Respondent 32, Frontline Worker

“There is no perfect system. In my opinion, it helps to have shelters with different levels of care. Many clients prefer to be in a shelter with more structure and some thrive in the opposite. Issues are not black and white with nuances to each case and staff should respond to the individual's needs. Alternatives should always be the first approach as often situations can be de-escalated. Some frontline staff do not have the skills to assess

situations and provide the right alternative solution but this is down to many things including poor wages in the industry. I have worked in the field for a long time for service providers that have different outlooks on bans. My view is that bans are often necessary as things can turn chaotic without them. Having management with compassion, insight, and experience makes a big difference.” -

Respondent 30, Case Worker

“Our shelter is currently looking at banning people that have been there too long without movement. We don't have enough caseworkers or access to time services or enough house to place people putting them out on the street because they have not moved forward are too old or have specific health conditions is not the answer” -Respondent 26, Frontline Worker

This question received 13 responses, outlined below.

Question 22: Is there anything else you would like to share about bans and/or alternatives to bans at the shelter you work at?

“No, thank you for the survey, it was very thought provoking and interesting !” -Respondent 22,

Frontline Worker

“Discrimination is happening and the group of people deciding the bans have really warped perspectives and boundaries” -Respondent 21,

Frontline Worker

“There’s a growing number of individuals whose violent or threatening conduct, shelters cannot support. There is a phenomenal amount of violence outside the shelter among people experiencing homelessness too. Alternatives are a nice thought but not entirely realistic.” -Respondent 19, Manager

“A standard train[in]g program for all staff in the Province that provides understanding around this issue. Staff that have experience and knowledge about mental health and addictions and resources that assist in the moments of difficulty with clients.” -Respondent 18, Director

“Suspensions vary. From overnight to indefinite. It is truly on a case by case basis. Our guidelines are basic and flexible and [w]e try very hard to work with our residents to keep them safe and healthy.” -

Respondent 17, Manager

“Unfortunately each shelter provider will have a loss of service for some individuals. In my own person experience of 8+ years working as front line worker and seeing changes over the years, I have seen where shelters are not sustainable if staff are not feeling safe. The turn around of staff at some shelters that are no barrier can be difficult, exhausting, and burnt out is higher. If we do not have a good staffing network then we cannot help each other or residents in our services. If we do not have good law enforcement (back up) or health officials we tend to feel frustrated. There is a lot of systematic issues in our system...

This question received 13 responses, outlined below.

Question 22: Is there anything else you would like to share about bans and/or alternatives to bans at the shelter you work at?

(health care) that is not addressed, especially mental health. Many of these shelters are front line workers trying to help people but not having much support from the system in general. This is another issue and perhaps another survey.” -

Respondent 15, Frontline Worker

“We try to use alternatives to banning wherever possible, but fall back on bans as a last resort. Bans are always a compromise between the best interests of the person being banned and the best interests of everyone around them (staff, clients, public, etc.). When we do feel we have to move toward a ban, it's because it's the best possible balance of all the competing interests at play, but it is not a win-win solution.” -Respondent 12, Manager

“We sometimes take chances and shelter people who we have reservations about due to their current or previous behaviours” - Respondent 10, Frontline Worker

“They are a last resort. Usually for very unsuitable or unsafe behavior, not possible in a close and shared living environment.” -Respondent 6, Frontline Worker

Question 28 received three responses, outlined below.

Question 28: Is there anything else you would like to add about your shelter's use and documentation of bans?

“This would take a long time as records are kept in different places”

-Respondent 34, Manager

“We are very serious about violence and threats, weapons are included in service bans.” -Respondent 19,

Manager

“The majority of our bans (about 80%) involve physical assault, theft, or serious property damage (e.g. fire).” -Respondent 12, Manager

Discussion

To my knowledge, this is the first study in British Columbia specifically on the topic of emergency shelter bans. Informed by critical methodology, the purpose of this discussion is to make sense of the data and explore what structural/macro forces may be implied in banning practices for the purposes of social change rather than simply point out the phenomena of bans and assign blame to either the banned or the bannings. This discussion will be organized according to the original research questions: “How are shelter bans being used in BC?” as the primary research question with the following secondary research questions: **How many people were banned from an emergency shelter in 2023, and what are the demographics of these bans? What are the goals and unintended consequences of banning? What dynamics influence banning decisions? Are there alternatives to banning?**

Discussion Overview

- **Bans are used as a last resort, but also are a weekly part of shelter life in many shelters in British Columbia.**
- The very small amount of data captured in this survey potentially hints at banning numbers far higher than reported in previous literature.
- There is generally a lack of system wide record keeping and race and gender demographics of people banned appears to be not tracked.
- Violence was mentioned as the most frequent reason for banning, yet violence was not defined and may have a broad catchment of actions.
- While banning may address violence by immediately incapacitating someone from entering a space, **it appears that violence persists both inside and outside of shelters and does not appear to be deterred by bans.**

- Mitigating staff burnout is also a frequent reason for banning.
- Drug use was also a frequent reason for banning. This suggests messiness regarding the shelter industry's allyship with people who use drugs, and there is likely an overlap where shelters provide harm reduction services and also ban individuals for drug use in certain spaces.
- Banning practices are most influenced by discretion of on-shift staff, but these discretionary decisions are the result of many influences. This positions frontline workers at street-level bureaucrats determining who accesses social services. This is influenced by individual and relational factors, cultural factors (resistance or affirmation of stereotypes of service-users), systemic factors such as access to education/training, and a shelter's access to funding to attract and retain staff both in terms of numbers and education/lived experience/diverse skill sets.
- Bans are typically used begrudgingly and service-providers would like to see alternatives used more, but alternatives to bans would require change regarding staff, training, and time, all of which stems from funding and how funding is used.
- **The state of the current shelter system has created a catchment window of vulnerability to accessing emergency shelter**—the floor is likely more permeable than the ceiling, meaning, more people are falling through the cracks of the shelter system than actually 'getting back on their feet' into more permanent housing.
- There is a deep injustice illustrated in how frequently used, harmful, and yet discombobulated bans are in terms of formal system-wide tracking and auditing. Shelter bans require urgent reevaluation and tracking in the realms of transparency (a recording system), accountability

(an auditing system attached to this recording system) and for funding to reflect local needs (equipping service providers to be able to care for the most vulnerable people in their community, and adjusting/creating new services informed by service-users and providers if that is not possible).

How many people were banned from an emergency shelter in 2023, and what are the demographics of these bans?

Questions 23 (inquiring how many people were banned according to official records) and 24 (inquiring how many people banned according to race and gender [Indigenous, Racialized and Non-Racialized] [men, women, trans, two-spirit]) aimed to answer this question directly, though accuracy was limited by the design of the survey (respondents were anonymous, did not identify what shelter they worked at, and there was potential for shelters to have their statistics reported multiple times) and impacted by low levels of responses; this phenomena of frequency of bans from other parts of the survey

may shed some light on this. For example, **every respondent** that answered Question 9 (n=32, 5 skipped Question 9) reported that the shelter they work at practices banning. Only five respondents responded to Question 23—which explicitly asked how many people were banned from accessing services in 2023. In total, these five respondents (three in a management role, two frontline workers) reported a total of 312 individuals banned; none of these responses appeared to come from duplicates based on their disclosure of health authority and community population.

Furthermore, these responses came from a variety of population centres.

While this study is in no way generalizable, reported instances of bans appear to be far higher than previously captured in the literature. For example, scaling these five responses to 110 shelters (this survey was sent to 111 unique shelters in BC) this number of 312 individuals at 5 shelters, would be 6,884 people banned— or over half of total people counted as experiencing homelessness in BC in 2023

(11,352, according to Caspersen et al., 2024), a percentage considerably higher than two Canadian secondary data studies suggesting that nearly 20 percent of people experiencing homelessness have experienced a shelter ban (Kerman et al., 2022a; Schwan et al., 2021). Furthermore, 53 percent (n=15) respondents reported that banning occurs 1-6 times per week at the shelter they work at, while only 14 percent (n=4) reported that it occurred 1-11 times per year. In other words, **bans appear to be a weekly part of shelter life in many shelters in British Columbia.**

Regarding race and gender demographics for persons banned, (Question 24), the explicit questions on this subject only received three responses, two of which identified as frontline workers and not in a management role—this is not sufficient data to meaningfully contribute to this subject. These three respondents reported that people who are racialized (including Indigenous peoples) account for 0-10 percent of people banned, though

this was a selected estimation and not calculated based on actual numbers provided, no real numbers were provided.

This percentage is surprisingly low. The most recent point-in-time homeless count in BC found that 3 percent of respondents identified as Black, 2 percent as Latin American, 2 percent as South Asian, and 40% as Indigenous (Caspersen et al., 2024). If nearly 50 percent of persons living with homelessness in BC are racialized, it does not stand to reason that people of colour, who, due to structural forces of oppression, are disproportionately overrepresented in British Columbian homelessness would also be disproportionately *underrepresented* in people who are banned from homeless shelters. If, somehow, this is true and found to be consistent with future official banning data, a number of questions are raised. Namely, *what would the shelter system be doing so much better than other systems in this province?* This is as unlikely as it is optimistic. Ultimately, I regret that this research does not further

illuminate the intersection between bans and racial/cultural oppression, and I urge for more inquiry on this intersection.

Secondary Research Questions: Bans, A Last Resort Used Weekly

Consistent with Kerman et al. (2022b), this research found that bans are used as a last resort. One would typically imagine ‘last resorts’ to be infrequent events; the data from this study suggests that this is not the case. Often, systemic influences on day-to-day service provision (and maintaining life, for those receiving services) may be ambiguous, and difficult to pin down and describe. There is, however, nothing ambiguous about the findings that *bans are used weekly as a last resort; service providers feel that they have no options but to kick people out, all the time. This combination of frequency and desperation places bans as systemic shortcomings manifested.* Using the secondary questions, this will be further explored.

What are the goals and unintended consequences of banning?

The overarching goal of banning appears to be safety (which sometimes, as one respondent put it, is a perceived “sense” of safety).

Violence was consistently reported by respondents as being a precipitator of a service-user being banned, though violence was not defined and may have a broad catchment of actions. For example, one respondent said the goal of banning was safety of staff and service-users, and added “to give staff a break from certain conflicts” (Respondent 16). Another more specifically noted that “the majority of our bans involve physical assault, theft, and serious property damage e.g. fire” (Respondent 12). This illustrates the fluidity of the notions of safety and violence. These notions appear to also be affected by forces beyond an individual presenting as violent or not, and as Respondent 22 states, is often a matter of sufficient staffing: “Amount of staff on shift / busy-ness of shift. On shifts where we are at capacity, I feel that bans are more likely to be given out compared to the exact same situation occurring on a better

staffed / generally calmer shift”.

As discussed in the literature review, **this research found that though mostly being used to achieve some sense of safety, banning is not exclusively a safety measure.** Fifty percent of respondents (n=13) agreed that bans are used to try to change the behaviour of service-users. One respondent added that bans were used to “...encourage clients to work with service providers and get connected to services in the community, and find housing” (Respondent 15) though it wasn’t expanded on how or if this was effective. Two other respondents noted that bans are used when it is determined that a shelter is unable to support the needs of the service user. **Bans are used for safety, yes, but appear to also be used as a means to curb staff burnout.**

There appear to be many unintended consequences of banning. The most common, poignant consequence was summarized by Respondent 17: “It is terrible making someone homeless / sending out to our dangerous

streets, especially when they are vulnerable.” Also, 64 percent (n=16) of respondents agreed that banning does not solve the original problem in the long term. This is evident by what appears to be both a frequency of banning and a simultaneous unaffected frequency of violence—**while banning may address violence by immediately incapacitating someone from entering a space, it appears that violence persists both inside and outside of shelters and does not appear to be deterred by bans.** So, why do bans remain a default-response to harm in the shelter system? *If bans were only used for immediate purposes, why did less than half of respondent’s shelters have written policy on lifting bans?*

What Dynamics Influence Banning Decisions?

This was the verbatim language of Question 14, and, as previously discussed, twenty eight percent of respondents (n=7) directly wrote that violence was a precipitator to banning decisions. Drug use appeared to be another small(ish) precipitator according to eight

respondents, although the majority of those eight (n=5) stated 1-25 percent of bans were for drug use. One-25 percent is significant especially when considering recent provincial legislation that has left shelters as one of the few places where drug possession for personal use is legal (British Columbia, 2024). At the same time, over half (54 %, n= 17) of respondents stated their shelter operated an Overdose Prevention Site (OPS) and even more (88 %, n=28) handed out harm reduction supplies.

This suggests messiness regarding the shelter industry's allyship with people who use drugs—there is likely an overlap where shelters provide harm reduction services and also ban individuals for drug use in certain spaces (using in a bathroom vs. designated OPS, for example). While I understand the notion of bans as a last resort if someone is continuously physically harming others, I find the urgency of bans due to drug use less clear: is it staff concerns being exposed to second-hand smoke? Is it service-users that do not use drugs

concerned about being exposed to second-hand smoke? Valid, complex concerns no doubt, but it is interesting that the same tool—incapacitation, physically separating someone from continuing their behaviour in a certain space—is used for someone continuously physically hurting someone and for someone smoking fentanyl in a bathroom.

Here is what I am trying to get at: is drug use a behaviour that needs to (and can, for that matter) be immediately incapacitated, or in these cases, is a ban used as punishment with an expectation that being banned should change someone's behaviour?

If someone's ban is lifted and they continue to use drugs in the bathroom, is that a conscious choice and are they morally culpable? If this is the case, is banning someone living with addiction as a means of changing their drug-use behaviour, (which is well established as a health issue and not a moral one) aligned with evidence-based practice and providing trauma-informed services? If there is anything Canada's

criminal system has taught us, it is that punishment does not change behaviour (Elliott, 2011; Roebuck, 2008).

“is banning someone living with addiction as a means of changing their drug-use behaviour aligned with evidence-based practice and providing trauma-informed services?”

Moving on to the overarching emerging theme of this research question: **banning decisions are most influenced by discretion of on-shift staff, consistent with previous research on bans** (Kerman et al., 2022b). This is also aligned with other scholars’ findings that punitive policies are often either affirmed or resisted at the individual worker level (Quiourette, 2022; West 2014)—this is especially poignant considering that this research revealed that bans are not solely used as a means of immediate incapacitation. Given the lack of research specific to shelter bans available to guide this exploration, it may be helpful to frame frontline workers at street-level bureaucrats (Lipsky, 1980); gatekeepers of the

welfare system whose individual actions, taken collectively, create policy—this study found that shelters have and use unwritten policy for both bans and especially lifting bans.

Quiourette (2022) highlights that street-level bureaucrats “...deal with involuntary clients, contradictory roles, difficult conditions and non-availability of resources” (p. 444). This combination of contradictory roles and non-availability of resources was very prevalent in the responses of this survey: the majority of respondents appear to be hesitant to ban (their role, after all, is to provide care/services to vulnerable people) yet they also ban as a means of safety of staff, service-users, and to enforce shelter rules—in that order, according to respondents (workers also find themselves in the role of security/rule enforcer, which is contradictory in nature to care-oriented role). At the same time, workers have limited resources to care for people whose needs often go beyond these resources in terms of both numbers and complexity.

The notion that people are being banned because the shelter is ‘unable to support the individual’s needs’ is likely more accurately stated as ‘unable to support the individual’s needs and the needs of 30 others during lunchtime and make 16 beds and respond to overdoses and watch the front desk and do an intake and ...’; Shelter users’ needs are ultimately triaged, and **it appears people are banned in an attempt to serve as many people as possible with severely limited resources** in terms of number of staff as well as training levels of staff.

“unable to support individual’s needs and the needs of 30 others during lunchtime and make 16 beds and respond to overdoses and watch the front desk and do an intake and ...”

The state of the current shelter system has created a catchment window of vulnerability to accessing emergency shelter—the **floor is likely more permeable than the ceiling**, meaning, more people are falling through the cracks of the shelter system than successfully

being served and obtaining housing. This is evident by this study’s findings that more than half of bans appear to be related to a mental health crisis or suspected mental illness (one respondent called for Assertive Community Treatment teams assigned to each shelter to address this). So, yes, discretion influences banning decisions, but discretion is also influenced by individual, relational, cultural (such as resistance or affirmation of stereotypes) and systemic factors (the focus of this study) such as staff access to education and a shelter’s access to funding for ample staff both in terms of numbers and education/lived experience/diverse skill sets; remember, *banning is a frequently used last resort*.

Are There Alternatives To Banning?

In exploring this question, the survey included a list of drop-down ‘alternatives’ to banning, all of which were reported as being used by more than 75 percent of respondents. Two respondents commented that staff are trained in de-escalation techniques but this

only goes so far, and that if someone is violent, they will be banned—this could be an example where bans are a true last resort and means of safety. Consistent with previous themes in this discussion however, the use of alternatives is nuanced, not always about safety, and appears to be impacted by relationships. This implies a potential for favouritism.

Respondent 22 shared: “I’ve rarely seen a conflict be talked through and see needs be met. I think this sometimes can be seen as ‘favouritism’ from staff, having the time and energy to talk it out with one person, and potentially not giving another person the time due to previous incidents / biases.”

Ninety-one percent (n= 21) of respondents reported that they would like to see alternatives to bans used more. A few commented that they were unsure, several stressed that they were already doing everything they could to avoid banning, and several others noted that there were certain violent people that would never be able to access their shelter and that alternatives would

introduce “more chaos in shelter” (Respondent 6); another respondent noted that alternatives may be implemented inconsistently and lead to greater issues.

Respondents shared real barriers to alternatives including a need for more training and just more staff. I would also be negligent if I did not note that **nearly 40 percent (n=8) respondents thought alternatives to bans to be unrealistic**, but perhaps the responses exist in relation to one another: **would alternatives to bans be more realistic with more staff and training?** Consider the voices of a few more respondents: “We have not been able to recruit skilled staff and many of our staff are still developing the ability to provide this kind of support”, “Hardly any staff have any lived experience or education”, “Funding and time [as barriers]”; to me, this suggests that alternatives aren’t realistic *right now* in the current shelter system.

How Are Shelter Bans Being Used In BC?

In summary, it appears that bans are being used in BC for a number

of reasons. Bans appear to be used as an exclusionary means of responding to the physical safety of staff and other service-users, as well as an attempt to enforce rules and encourage compliance or change the substance user and/or mental health related behaviour of service-users. It also appears that bans are typically used begrudgingly and service-providers would like to see alternatives used more, but there is a catch: the frequent and broad use of bans is likely a symptom of a lack of resources: staff, training, time, all of which stems from funding and how funding is used.

“ bans are typically used begrudgingly...the frequent and broad use of bans is likely a symptom of a lack of resources...”

Concluding Implications

Implication: A Province-Wide Ban Recording System

This study found that bans are used weekly, and suggested extrapolated non-generalizable estimates of how many people are banned from accessing emergency shelters each year, which aligned with previous research's estimates. But these are just estimates, and **we do not know how many people are actually banned in BC.** There is a deep injustice illustrated in how taken-for-granted bans are, how insidiously normal they are that BC Housing, the provincial government, and the federal government appear to have made little effort to accurately grasp who and how many individuals are banned despite robust reporting of the numbers accessing emergency shelters in BC—the data on who is being banned and cast out is disturbingly missing.

“...the data on who is being banned and cast out is disturbingly missing.”

Many Canadian shelters currently use the [Homeless Individuals and Families Information System \(HIFIS\)](#), a tool used to track usage of emergency shelters (Infrastructure Canada, 2023). **It seems logical, practical, and ethically possible to track and audit bans**, with the primary thought of caution being that this proposed tool does not become a risk-indicator in itself used to pathologize service-users and erase the potential of a fresh start at a new shelter.

Understanding the state of shelter bans through this tracking creates the potential to direct funding toward reducing the amount of highly vulnerable people who are excluded from accessing services—particularly when bans are a frequently yet begrudgingly used last resort.

BC Housing's *Emergency shelter program framework* (2018) calls for transparency, accountability, and for funding to reflect local needs. This recording system could better inform new policies, so long as they are created collaboratively by both people who use services and people who provide them. **Shelter bans require urgent tracking** in the realms of **transparency** (a recording system), **accountability** (an auditing system attached to this recording system) **and for funding to reflect local needs** (equipping service providers to be able to care for the most vulnerable people in their community, and adjusting/creating new services informed by service-users and providers if that is not possible).

Shelter bans require...

transparency

accountability

funding that reflects local needs

a recording system

an auditing system attached to this

recording system

equipping service providers to care for the most vulnerable people in their community

As is often the case, this exploratory research has produced more questions than answers. Further inquiry is needed in a myriad of subtopics, including but not exclusive to:

- Engaging with service-users who have been banned and amplifying their realities of being banned in a variety of social locations and geographic locations (i.e. rural vs. urban)
- Implementation and analysis of a BC Housing banning database and/or conducting additional research to understand the intersectionality of rates of banning, physical violence, and service user demographics including racialization and concurrent mental health and substance use.
- Engaging with service-providers to better understand their perceptions and frameworks of justice and conflict resolution.

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APPENDIX A: RECRUITMENT POSTER

DO YOU WORK AT AN EMERGENCY HOMELESS SHELTER IN BC?

Please consider filling out a 12 minute survey on shelter bans (sometimes called breaks, service-restrictions, bars, discharges, etc.)

I am interested in your ideas and practices about...

- if, how, and why bans are used
- the goals and unintended consequences of bans
- how bans are documented
- alternatives to bans



CLICK HERE OR SCAN THE QR CODE!

Who can participate? **Anyone who currently works at a year-round emergency homeless shelter in BC.** Know someone? Please share this poster!

This an **anonymous** and **confidential** survey approved by Thompson Rivers University's Research Ethics Board.

The principal investigator is Nathaniel Bailey, a third-year social work student at Thompson Rivers University and a frontline shelter worker.

If you have any concerns regarding this research, you can reach Nathaniel Bailey, the principal investigator, at baileyn21@mytru.ca, or my supervisors, Dr. Juliana West at jwest@tru.ca and Dr. Kathie McKinnon at kmckinnon@tru.ca

LIST OF WRITTEN APPENDICES

APPENDIX B: INFORMED CONSENT SURVEY (CLICK TO VIEW)

APPENDIX C: SURVEY QUESTIONS (CLICK TO VIEW)

APPENDIX D: RECRUITMENT LETTER FOR GENERAL MAILBOX (CLICK TO VIEW)

APPENDIX E: RECRUITMENT LETTER FOR EXECUTIVE DIRECTOR (CLICK TO VIEW)

APPENDIX F: DECLARATION OF RESEARCH FOR PI'S WORKPLACE (CLICK TO VIEW)

APPENDIX G: RESEARCH ETHICS BOARD APPROVAL (CLICK TO VIEW)