



Addendum to the Health & Social Services Committee Agenda

Council Chambers
Regional Headquarters Building
605 Rossland Road East, Whitby

Thursday, December 3, 2020

9:30 AM

8. Social Services

8.1 Correspondence

- B) David Douglas, Guelph Resident re: Review of Report prepared by OrgCode Consulting Inc. re: 133 Main Street Beaverton Supportive Housing Suitability Study.

2 - 5

Recommendation: Receive for Information

A review of the report *133 Main Street Beaverton Supportive Housing Suitability Study*, prepared by OrgCode Consulting Inc., for the Regional Municipality of Durham, October 2020

INTRODUCTION

This review was commissioned by David Ellins and Jill Proctor, members of the residents' organization *Beaverton Vision* to assist them and their colleagues in their response to the decision by the Regional Municipality of Durham to approve the construction and operation of a supportive housing facility, accommodating fifty (50) persons, in the rural community of Beaverton.

The review was commissioned as an independent, professional and critical appraisal of the report prepared by OrgCode Consulting Inc., *133 Main Street Beaverton Supportive Housing Suitability Study*, for the Regional Municipality of Durham.

The review involved no independent research on the topic, and no fieldwork or primary research in the region or the community in question. The review was based on the reviewer's extensive professional, research and related experience in the field of community development, over the last four decades in various contexts across Canada, including the Region of Durham. A small amount of documentation relating to the events surrounding this contested matter, all in the public domain, was accessed, as well as some relevant reports on the topic itself in the current Ontario context.

The observations, findings and conclusions in this review are those, and solely those of the author.

FINDINGS AND CONCLUSIONS

1. The report does not make a convincing case for the suitability of the small rural community of Beaverton, as the future location of the proposed supportive housing complex.
2. For whatever reason, the analysis conducted by the consultant was insufficient to conclude that Beaverton might have been one of a number of candidate communities suitable for this social infrastructure, and its associated services. From this, the analysis was insufficient to conclude that Beaverton is the best, or optimal community for this purpose.
3. Related to the above, the consultant's response to a public concern regarding a lack of research for the proposed location (Table 7) includes an assertion that "due diligence" was completed by Regional staff. But, no evidence of a comparative locational analysis to underpin the choice of a particular rural community has been cited or presented by the consultant. Due diligence would require that (a) the requisite locational *criteria* for supportive housing would be clearly and transparently set out (e.g. access to health services, availability of community recreation facilities, low crime rate locations), (b) a

range of *candidate communities* identified and systematically assessed based on the locational criteria, (c) a *short-list* of potential communities identified as the “better” candidates, perhaps with additional screening criteria (e.g. receptivity of the community), and (d) the “*best*” host community selected based on its scoring in the locational criteria, and the availability of a suitable site(s) within it for the supportive housing complex. Without this or a similar transparent, systematic and evidence-based approach, the claim of “due diligence” is to be challenged.

4. The consultant’s conclusion that “.. the impacts on the broader community are likely to be minimal” (p.5) is an assertion without any credible basis in relevant research and analysis that is presented in the report.
5. The consultant appears to conflate the community’s concern with the *function* of this proposed development, with the scale of the residence (p.5). It is the former which is being contested, not (primarily) the latter.
6. The use of Ontario-wide averages and other statistics are irrelevant to the context specific conditions of a small rural community, such as Beaverton. This interpolation and the inferences drawn are analytically untenable (e.g. p.18). The interpolation from Canada (35 million) to Beaverton (2,800) on addiction rates (p.22) is another implausible inference.
7. Some of the report’s attempts at comparative analysis are questionable. Why a particular proportion of housing as rentals should matter at all is not explained (e.g. Table 2). Its relevance to the supportive housing question is unclear. The significance, if any, of the differences in the percentage of total housing as rentals in Beaverton (21.6%), Frankford (25.7%) and Capreol (23.3%), is a mystery. On page 19 comparisons are made with sites in Toronto and Hamilton! The sites in Azilda and Hailebury are in a significantly different geographical and socioeconomic context (i.e. Northern Ontario). Acton is around 10,000 residents. And Elora has significantly different social, cultural and economic conditions than Beaverton. With reference to the affordability of accommodation (see Table 3), again using two other “comparable” communities, the report is unclear in using the data (no dates provided). If the rental outlays of most of the prospective new residents are essentially underwritten through government programmes, relative affordability is not an issue. However, if a building site and other resources are taken out of the local Beaverton market, where there *is* a comparative affordability disadvantage demonstrated in Table 3, then there may be local negative impacts, which the report does not address. Any inferences, yet alone conclusions drawn from these attempts at a credible comparative analysis, are not tenable.
8. Another technical reservation relates to a speculative comparison of possible (but unverified) rates and types of addictions and mental illnesses in present day Beaverton with those of the prospective profile in the new residents of the supportive housing (p.22). Without any pretense of professional expertise in this field, the reviewer here intuitively would have difficulty in comparing persons challenged with substance addictions, erratic if any employment circumstances, emotional and mental disabilities, serial exposure to violent episodes, consistent and often long term reliance on government programmes and related services, and notably, an ongoing lack of reliable

accommodation, with those with some mental illness (e.g. depression, alcohol addiction) but living permanently in a community, with reliable accommodation, and other supports closer to conditions of what might be called mainstream life in this country. To infer that the supportive housing cohort is simply an add on to what is already there is, at best, speculative.

9. To address the concerns of Beaverton residents regarding the Region's decision to undertake this project the consultant refers to the prospect of "... education with existing Beaverton residents . . ." (p.6). A community development perspective would have expected that through conventional participatory process the community would have been engaged in this proposed project, from the start, some time ago, and that "education" was not the imperative here, but the development of shared understandings through transparent, collaborative process.
10. Related to the above, the consultant's response to the expressed concern regarding a lack of public consultation on this proposal (Table 7), would suggest that a distinction that is desirable here is the difference between what is *required* under legislation, regulations and associated ordinances, and what is understood to be *appropriate* policy and practice in community development. This would have been informed by a collaborative, respectful approach to decision making in the public domain, especially one so directly influencing the welfare of the community.
11. While the consultant's report incrementally addresses a number of factors relevant to the successful operation of the proposed supportive housing complex, it does not set out the explicit *criteria* for "suitability". These, presumably, would be the decisive yardsticks to determine the efficacy of any community, and any site within a community. But they are not explicitly set out, and no metrics relating to the decisive criteria are provided. Without these no credible evaluation of a proposed community, or a site within a community, can be made.
12. A central consideration in community development, and indeed the ongoing dynamics of all communities, is the question of *relationships*. Installing a supportive housing facility, with 50 residents, in any small rural community should immediately call up the matter of the prospective relationships between the housing residents, the current community members, and future members. This matter is touched upon in the report, but only in passing. It does not figure in a set of purported "principles" (pp.10-12) relating to supportive housing. What is the nature of social capitals in the community today? Are there conflictual relations that should be noted? What are the leadership conditions? What is the culture of informal sharing, reciprocity, volunteering, mutuality, adaptability and resilience, diversity, and so on? All of this relates to the community's absorptive capacity. And this capacity will be a very significant factor in community resident/supportive housing resident relationships, and in the final success of any project.
13. The report repeatedly emphasizes the absolute necessity of a suite of medical, security, counselling and other services, all on call 24/7. This provision is understood as *the* foundational or necessary condition for the success of supportive housing. So, one has to assume that the choice of Beaverton as *the* recommended reception site is predicated on the assured provision of all required supportive services. It appears that few or none of

these are currently available in the community. Correspondence between community residents and the Region stress that most are also not readily available in nearby communities. As noted in # 2 and # 3 above, there is no evidence that a spatial analysis of the current distribution of social services provision (e.g. medical, therapeutic, conflict resolution) has been undertaken, or used to generate and support this report's conclusions. So, there is no documented or empirical assurance of the current or the future time/distance/cost access to critical services that must be available 24/7 to underpin the feasibility of this proposed development. This materially undermines any argument regarding the suitability of the proposed location for supportive housing, and therefore the conclusions of the consultant's report.

It might be said that the consultant's terms of reference were restricted to ascertain the suitability (however defined) of the community of Beaverton for this supportive housing project, and only the community of Beaverton. And not to determine whether it was the *best* location among several possibilities, the second best, or otherwise. This might have been the case. However, if this was the case, the consultant's report should have said so. It should have stated unequivocally that the analysis undertaken for this report was *not* such as to be able to determine whether Beaverton was the best of all possible locations. Or how far it ranked below the best location. The consultant argued it is suitable. This review does not find this argument convincing. The major point here is that it cannot be argued that Beaverton is significantly more suitable than other options. Because these other options were not examined. So, the grounds for a rational allocation of public resources are not in place through this report.

David J.A. Douglas

Guelph

Ontario

November 9, 2020