

VOLUME 1 OF 5

Court File No. CV-25-00000750-0000

**ONTARIO
SUPERIOR COURT OF JUSTICE**

B E T W E E N:

THE REGIONAL MUNICIPALITY OF WATERLOO

Applicant

and

PERSONS UNKNOWN AND TO BE ASCERTAINED

Respondents

APPLICATION UNDER Rule 14.05 of the *Rules of Civil Procedure*

JOINT TRANSCRIPT BRIEF

(Application Hearing, returnable April 16, 17, and 20, 2026)

March 13, 2026

Paliare Roland Rosenberg Rothstein LLP
155 Wellington Street West, 35th Floor
Toronto ON M5V 3H1
Tel: 416.646.4300

Gordon Capern (LSO # 32169H)
Tel: 416.646.4311
Email: gordon.capern@paliareroland.com

Andrew Lokan (LSO # 31629Q)
Tel: 416.646.4324
Email: andrew.lokan@paliareroland.com

Kartiga Thavaraj (LSO # 75291D)
Tel: 416.646.6317
Email: kartiga.thavaraj@paliareroland.com

Greta Hoaken (LSO # 87903I)
Tel: 416.646.6357
Email: greta.hoaken@paliareroland.com

Lawyers for the Applicant,
The Regional Municipality of Waterloo

TO: **Waterloo Region Community Legal Services**
450 Frederick Street, Unit 101
Kitchener, ON N2H 2P5

Ashley Schuitema (LSO # 68257G)
Tel: 519.743.0254 ext. 17
Email: ashley.schuitema@wrcls.clcj.ca

Joanna Mullen (LSO # 64535V)
Tel: 519.743.0254 ext. 15
Email: joanna.mullen@wrcls.clcj.ca

Shannon K. Down (LSO # 43894D)
Email: shannonkdown@gmail.com

Lawyer for the Respondents

AND TO: **Swadron Associates**
115 Berkeley Street
Toronto, ON M5A 2W8

Jen Danch (LSO # 74520I)
Tel: 416.362.1234
Email: jdanch@swadron.com

Karen A. Steward (LSO # 58758O)
Barrister & Solicitor

Tel: 416.270.0929
Email: karenannesteward@yahoo.ca

Perez, Procope, Leinveer LLP
55 University Avenue, Suite 1100,
Toronto, ON M5J 2H7

Mercedes Perez (LSO # 48381L)
Tel: 416.320.1914
Email: mperez@pbplawyers.com

Lawyers for Intervener/*Amicus Curiae*,
the Mental Health Legal Committee

AND TO: **Ursel Phillips Fellows Hopkinson LLP**
555 Richmond St. W., Suite 1200
Toronto, Ontario M5V 3B1

Kristen Allen (LSO # 62789C)
Tel: 416.969.3502
Email: kallen@upfhlaw.ca

Simone Truemner-Caron (LSO # 82968M)
Tel: 416.642.4504
Email: struemnercaron@upfhlaw.ca

Lawyers for the Intervener,
The Canadian Civil Liberties Association

AND TO: **Falconers LLP**
10 Alcorn Avenue, Suite 204
Toronto ON M4V 3A9

Asha James (LSO # 56817K)
Email: ashaj@falconers.ca

Erin McMurray (LSO # 90874H)
Email: erinm@falconers.ca

Lawyers for the Intervener,
Aboriginal Legal Services

Aboriginal Legal Services
211 Yonge Street, Suite 500
Toronto ON M5B 1M4

Emily Hill (LSO # 46899Q)
Email: emily.hill@als.clcj.ca

Christa Big Canoe (LSO # 53203N)
Email: christa.bigcanoe@als.clcj.ca

AND TO: **Professor emerita Martha Jackman**
Faculty of Law, University of Ottawa
57 Louis Pasteur, Ottawa, ON K1N 6N5

Tel: 613.720.9233
Email: Martha.Jackman@uOttawa.ca

Lawyers for the Intervener,
The Charter Committee on Poverty Issues /
The National Right to Housing Network

AND TO: **Attorney General of Ontario**
Constitutional Law Branch
Civil Law Division
4th Floor, McMurtry-Scott Building
720 Bay Street
Toronto ON M7A 2S9

Andrea Bolieiro (LSO # 60034I)
Tel: 437.551.6263
Email: andrea.bolieiro@ontario.ca

Sara Badawi (LSO # 87480W)
Email: sara.badawi@ontario.ca

Lawyers for the Intervener,
Attorney General of Ontario

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TAB 1

Court File No. CV-25-00000750-0000

ONTARIO
SUPERIOR COURT OF JUSTICE

BETWEEN:

THE REGIONAL MUNICIPALITY OF WATERLOO

Applicant

and

PERSONS UNKNOWN AND TO BE ASCERTAINED

Respondents

APPLICATION UNDER Rule 14.05 of the *Rules of Civil Procedure*

This is the Cross-Examination of **Aaron El Sabrout** on his affidavit dated July 7, 2025, taken via Zoom videoconference on consent of the parties on July 14, 2025.

APPEARANCES:

ANDREW LOKAN, Mr. Counsel for the Applicant
GRETA HOAKEN, Ms.

SHANNON DOWN, Ms. Counsel for the Respondents
JOANNA MULLEN, Ms.

MERCEDES PEREZ, Ms. Amicus Curiae

(i)

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A. El Sabrout (Cr.-Ex.) - 3

1 July 14, 2025

2
3 AARON EL SABROUT, AFFIRMED

4 CROSS-EXAMINATION BY MR. LOKAN:

5 1. Q. Aaron, you're here to be questioned on
6 your affidavit that you affirmed on July 7th, 2025?

7 A. Okay.

8 2. Q. And do you have a copy of that
9 affidavit with you?

10 A. Yes, sir, right here.

11 3. Q. Okay. And you don't have any other
12 materials with you, do you, either on your screen or
13 printed?

14 A. No. Just my water bottle and the
15 affidavit.

16 4. Q. Okay, the water bottle is permitted.
17 My name is Andrew Lokan, I'm counsel for the Region
18 and I have some questions for you. And just a couple
19 of ground rules. First, if I ask a question and you
20 either don't hear or it's not clear what I'm asking,
21 or you don't understand, please feel free to ask me to
22 repeat or to clarify. Okay?

23 A. Okay.

24 5. Q. A second thing is that we should try
25 and avoid talking over each other because if we're
26 both talking at once, it makes it very difficult for

A. El Sabrout (Cr.-Ex.) - 4

1 the reporter on the transcript. So if that happens we
2 should probably stop. Sometimes it happens because of
3 me but we should both stop and then it is easier to
4 sort out.

5 And the other thing is that if you are
6 either agreeing or disagreeing with something that I
7 suggest to you, you should say "yes" or "no" and avoid
8 saying "Mm-hmm" or "Mm-mm" because that is ambiguous
9 on the transcript.

10 A. Understood.

11 6. Q. Okay, thank you very much. So I
12 understand, Aaron, from Paragraph 2 of your affidavit
13 that you are a member of Fight Back KW?

14 A. Yeah, I mean, we're not exactly an
15 organization, just a collective of folks. But I
16 participate among the other folks.

17 7. Q. Okay. And I'm not too concerned about
18 outside of the encampment. But I understand that for
19 the encampment, a call went out in late April or so to
20 people through the Fight Back KW Facebook page, to
21 start attending the site on a 24/7 basis.

22 A. I don't have a Facebook account.

23 8. Q. Okay, so you may not have seen that.

24 9. Q. But there is a 24/7 presence of Fight
25 Back at the encampment, is that right?

A. El Sabrout (Cr.-Ex.) - 5

1 A. Yes, that's correct.

2 10. Q. Okay. So just for the people who are
3 present at the encampment, who, other than you, is
4 part of that?

5 A. I'm not certain of all of the folks
6 involved. I know only know a couple of people.

7 11. Q. Okay, so the people you do know, can
8 you just tell me who they are?

9 A. Sure, there's like Jakob, Eddy, Brian
10 and Wren.

11 12. Q. Okay. And you may or may not know last
12 names but Jakob, that would be Jakob Stubbs, would it?

13 A. I don't know anybody's last names,
14 sorry.

15 13. Q. Okay. Wren Wombwell?

16 A. Potentially.

17 14. Q. Okay. And sometimes Jacara is with you
18 as well?

19 A. I believe I have met this person, yeah.
20 I don't know if that's the name they go by.

21 15. Q. Okay. The name, Fight Back ---

22 A. Mm-hmm.

23 16. Q. That's one of the -- it doesn't matter
24 this time but that was a "Mm-hmm," we need a yes or a
25 no.

A. El Sabrout (Cr.-Ex.) - 6

1 A. Oh, sorry.

2 17. Q. That's okay. What is your collective
3 fighting?

4 A. That's a good question. I don't think
5 that we have, you know, like fixed aims or like --
6 like line or like orientation. I would say in this
7 particular instance, we are helping to defend the
8 right of the folks who are camping at 100 Victoria to,
9 you know, survive in the fashion that they are able to
10 under the circumstances that they're in.

11 18. Q. So it's to help them remain at the
12 encampment?

13 A. I -- like I said, we don't really have
14 like a fixed set of goals or like a mission.

15 19. Q. Okay, and it's an informal collective,
16 is that fair?

17 A. Yes, exactly.

18 20. Q. Okay. I would like to pull up your
19 LinkedIn page, if we can?

20 A. Sure. I don't know if I have one of
21 those but maybe I made it during university.

22 21. Q. So you were, I understand, at Cornell
23 until fairly recently.

24 A. I graduated from Cornell Law School in
25 2019, that's correct.

A. El Sabrout (Cr.-Ex.) - 7

1 22. Q. Okay. So it doesn't look like you're
2 that active in terms of posting, "Aaron hasn't posted
3 yet." But you are listed here as being a research
4 assistant at Cornell First Amendment Clinic, August
5 18th to the present?

6 A. And that would have been a long time
7 ago but, yes, I was at the time.

8 23. Q. Okay. And you got your JD in 2019?

9 A. That's correct.

10 24. Q. Okay. So the research assistant work
11 that you did, was that while you were doing your JD?

12 A. That's correct, yes.

13 25. Q. Okay.

14 A. It was for a professor at the
15 university. Or, this one was for the clinic so it was
16 a -- it was a course that I was taking. And I also
17 worked for them on the side.

18 26. Q. Right. So, you know, you have a JD
19 from Cornell in the States but you're not qualified as
20 a lawyer in Canada, are you?

21 A. I have some understanding of Canadian
22 law but I am not currently licensed, no.

23 27. Q. Okay. And you have not studied law
24 formally in Canada?

25 A. That's correct.

A. El Sabrout (Cr.-Ex.) - 8

1 28. Q. Okay. Just in terms of the work you
2 did with the First Amendment Clinic, the First
3 Amendment is the amendment of the U.S. Constitution
4 that includes the right to free speech, is that right?

5 A. That is correct.

6 29. Q. And in the U.S. context, conduct can
7 count as speech, right?

8 A. Yes, the First Amendment also protects
9 individuals' right to freedom of assembly and to
10 freedom of association, as well as freedom of
11 religion.

12 30. Q. And free exercise of the establishment
13 clause, all of that's in the First Amendment, right?

14 A. That's correct.

15 31. Q. Okay.

16 A. I fail to see how this is relevant,
17 however.

18 32. Q. Well, you know, I am here to ask the
19 questions. So this -- what I'd ask you about is
20 "conduct of speech." There is a recognized U.S.
21 doctrine that some conduct counts as expressive
22 activity or speech protected by the First Amendment,
23 right?

24 A. Sure, such as the right to protest, for
25 the example.

A. El Sabrout (Cr.-Ex.) - 9

1 33. Q. Right.

2 A. Or the right to practice one's
3 religion.

4 34. Q. And protest can be a protected activity
5 including civil disobedience, correct?

6 A. I would have to look at the caselaw and
7 it would depend very much on what the people were
8 involved in.

9 35. Q. Okay. Burning of draft cards, for
10 example.

11 A. Sure, that's a classic case from the
12 Viet Nam war.

13 36. Q. Okay. Now you say that you were
14 present at 100 Vic for shifts of three-plus hours,
15 that's what you say in your affidavit?

16 A. Yeah.

17 37. Q. Three to four times a week? Has that
18 continued to be the case?

19 A. Yeah.

20 38. Q. And in Paragraphs 5 and 6, I'm just
21 interested in what you said here. I -- we're going to
22 pull that up and in Paragraph 5, you say:

23 "... Since the passing of the bylaw, members
24 of Fight Back have been present on-site 24/7
25 days a week. I personally have been going

A. El Sabrout (Cr.-Ex.) - 10

1 every Tuesday for at least three hours since
2 November of last year. And then Fight Back
3 has endeavoured to maintain an up-to-date
4 real-time shift log with details of all
5 region staff accessing the site as well as
6 police, medical and security incidents, to
7 the best of our ability ..."

8 So I've read that correctly, have I?

9 A. It appears so, yes.

10 39. Q. Okay. So tell me just about the way
11 this shift log works. Is there one person or some
12 people that maintain it?

13 A. So, yeah, generally speaking, the shift
14 log is a chat and we keep it up-to-date in real-time
15 when we are on-site with the person who is like
16 formally signed up to volunteer at that time.

17 As well as sporadically, like the folks who
18 are dropping off resources or there for some other
19 reason who happen to see something of note that they
20 feel is worth recording.

21 40. Q. Okay. So it's done as a chat, do you
22 mean like a WhatsApp or ---

23 A. Something like that. Yeah.

24 41. Q. Or Signal?

25 A. Mm-hmm. Like Signal.

A. El Sabrout (Cr.-Ex.) - 11

1 42. Q. You said "Mm-hmm." Sorry, that was
2 "yes" for Signal?

3 A. Yes, on Signal, that's correct.

4 43. Q. When you said "something like that," is
5 it Signal that you use for the ---

6 A. Yeah.

7 44. Q. Okay. And in Paragraph 6, you say:

8 "... Prior to the passage of the bylaw,
9 unsheltered workers ..."

10 So those are the unsheltered support
11 workers, USWs? Do you know that terminology?

12 A. Sure, yeah.

13 45. Q. "... USWs from the region were showing up
14 much less frequently in the encampment.

15 Estimating from the logs, I would say they
16 came maybe once or twice a week. Whereas
17 now, they come almost every weekday ..."

18 Do you see that?

19 A. Yes.

20 46. Q. Okay, so the logs, I take it, go back
21 to November?

22 A. Yeah, at least as long as I have been
23 around.

24 47. Q. Okay. And when did you start coming to
25 the site?

A. El Sabrout (Cr.-Ex.) - 12

1 A. November, I believe, is correct.

2 48. Q. Okay.

3 A. Of 2024, for clarification's sake.

4 49. Q. Yeah, sure. Now, I had asked for

5 production of the logs in advance of today's

6 questioning. And I did get a couple of documents.

7 And I am going to ask that we pull them up. We

8 actually marked them on earlier examination.

9 So this one was Exhibit 1 to the Jacara

10 Droog cross-examination.

11 A. Okay.

12 50. Q. And there is a second one that starts

13 April 25 and we marked that as Exhibit 2 to the Jacara

14 Droog cross-examination. Now, these are not documents

15 that you recognize as the log as such, right?

16 A. No, based on my observation, these are

17 -- like for the ones at least that are from me, which

18 are on-screen currently, there are three. This is the

19 text of what I put into the chat but it is not a

20 screenshot from the chat.

21 51. Q. Okay. So somebody has gone through,

22 and basically taken out certain communications from

23 the Signal chat.

24 A. That is what it appears to be.

25 52. Q. Right, but you weren't the one who did

1 that?

2 A. No.

3 53. Q. Okay. So when I asked for production
4 of the log, I didn't actually get the log, did I?
5 This is not ---

6 A. I am not super-tech savvy. But my
7 understanding is that because Signal is end-to-end
8 encrypted, it is not possible to explore a log of the
9 actual chats.

10 54. Q. But you can -- you can do screenshots
11 of the chats?

12 A. I imagine so, yes.

13 55. Q. Okay. Your evidence at Paragraph 6 is
14 that you say based on -- or estimating from the logs,
15 you talk about the frequency of the USW attendance on-
16 site. So I take it you went back and checked the log
17 in order to make that statement?

18 A. Yes. That's correct.

19 56. Q. So you were able to go back and consult
20 with the log for November and find evidence relevant
21 to who would be on-site and when?

22 A. Yeah.

23 57. Q. But you don't personally know why that
24 wasn't produced to me?

25 A. No, I have no clue.

A. El Sabrout (Cr.-Ex.) - 14

1 58. Q. Okay.

2 A. I assume again, it's because the Signal
3 does not allow for downloading of the chats.

4 59. Q. But you can do screenshots you think?

5 A. I believe; I am not certain.

6 60. Q. Okay.

7 A. I believe also it's worth mentioning
8 that the log contains a lot of things that are likely
9 not relevant to this litigation, such as like private
10 matters relating to residents. Also probably like a
11 large number of the entries, at least for my part, are
12 things like, "I am here." "I brought toilet paper."

13 61. Q. Okay. What I am going to ask, though,
14 is, with the assistance of counsel, you could go back
15 and produce the log going back to November, your time
16 of arrival on the site. And with redacted, anything
17 that reflects a confidential conversation with a
18 resident.

19 A. I'll consult with counsel about that,
20 sure.

21 62. Q. Okay, and I am not sure who is playing
22 goalie for the region, whether it's Ashley or Joanna.
23 Is there any objection to that by way of undertaking?

24 MS. MULLEN: I'll take it under advisement.

25 MR. LOKAN: Okay, thank you.

UNDER ADVISEMENT

1
2 BY MR. LOKAN:

3 63. Q. In your affidavit at Paragraph 11,
4 Aaron ---

5 A. Mm-hmm. Yes.

6 64. Q. --- you say, starting in the second
7 sentence, you say:

8 "... On one occasion in May, I was present
9 when a resident "G" died of what I believe
10 to be an overdosed unsheltered worker's, or
11 USWs, and a harm reduction worker had to ask
12 me for Narcan. Two security guards were
13 both standing there simply watching as the
14 harm reduction worker attempted to
15 administer the overdose reversal ..."

16 So this is referring to an incident on May
17 1st, isn't it?

18 A. I couldn't tell you the date but that
19 sounds correct.

20 65. Q. Okay. And I might be able to help you
21 with that because if we pull up the document from the
22 log that was provided to me, Exhibit 1 to the Jacara
23 Droog cross-examination, there are two entries from
24 you on May 1.

25 A. Mm-hmm.

A. El Sabrout (Cr.-Ex.) - 16

- 1 66. Q. Okay, and the first entry:
2 "... Region workers arrived about 20 minutes
3 ago ..."
4 Aaron, and that's at 12:16 p.m.?
5 A. Mm-hmm.
- 6 67. Q. Sorry, we need a "yes" or a "no."
7 A. Yes, sorry. I apologize.
- 8 68. Q. No problem. And then the second one,
9 12:44 p.m.:
10 "... Chris from the region and a bunch of
11 other new region staff are here ..."
12 Aaron, and then you put in brackets, ("Due
13 to death on-site)"
14 A. That's correct.
- 15 69. Q. Okay, does that help you in remembering
16 that's the -- what you were referring to in Paragraph
17 11 happened on May 1?
18 A. Yeah, that is correct.
- 19 70. Q. So you were there from 12:16 at least.
20 Do you know when you first got there?
21 A. Most likely I arrived at 11:00 ---
- 22 71. Q. Okay.
23 A. --- most typically the time that I am
24 there. For a while it was from 11:00 until 2:30, now
25 it's most frequently from 12:00 until 3:30 on a

A. El Sabrout (Cr.-Ex.) - 17

1 Tuesday. But, yeah, probably I arrived sometime
2 within an hour-and-a-half beforehand.

3 72. Q. Okay. And you say you were present
4 when the resident died of what you believe to be an
5 overdose.

6 A. Mm-hmm.

7 73. Q. And the language you use in the
8 affidavit is that you were -- that:

9 "... The security guards were watching as the
10 harm reduction worker attempt to administer
11 the overdose reversal ..."

12 A. That's correct.

13 74. Q. Okay. And that was, what, sometime
14 around 12:00 -- around the time that you note in your
15 logs?

16 A. It would have been sometime after the
17 region workers arrived but before the second entry, so
18 sometime between. What it says there is 12:16 and
19 12:44.

20 75. Q. Okay, and do you know when the
21 ambulance arrived on-site?

22 A. It was before 12:44.

23 76. Q. Okay. So there ---

24 A. The ambulance -- just to clarify -- was
25 not able to access the site. Security was blocking

A. El Sabrout (Cr.-Ex.) - 18

1 the entrance; they had to park on the side of Victoria
2 Street.

3 77. Q. Yeah, and you wouldn't have reviewed
4 the affidavit of Brent Wood, would you?

5 A. I don't know who that is.

6 78. Q. He's one of the paramedics who has put
7 in an affidavit explaining that the street was the
8 logical place to park and where they had parked
9 before. And that there was no delay in reaching the
10 residents.

11 A. I have familiarity with such a
12 document.

13 79. Q. Okay. But you -- were you watching
14 while the attempted revival happened?

15 A. I was not in the tent; I was outside.

16 80. Q. Okay. You were outside. So you don't
17 have any knowledge as to when the resident actually,
18 unfortunately, did pass away?

19 A. As far as I know, that was not
20 determined for the time that -- like during the time
21 when the EMTs were on-site what the time of death was.
22 My like -- is it helpful for me simply to narrate
23 what, from my perspective, happened?

24 81. Q. I think we can cut to the chase on
25 this. First of all, you said "EMTs," do you mean the

A. El Sabrout (Cr.-Ex.) - 19

1 paramedics in the ---

2 A. EMTs. Emergency medical technicians or
3 whatever they're called.

4 82. Q. EMTs, thank you. Okay.

5 A. Yeah, so from my perspective, like the
6 region worker or the harm reduction worker, I believe
7 from Aqua (ph), he called for Narcan. I was not
8 physically next to the tent when this happened.

9 83. Q. But you don't actually know who called?

10 A. But, no, I know who called, I just
11 don't know what organization he was from.

12 84. Q. So the person who called was this on-
13 site security?

14 A. No. Absolutely not.

15 85. Q. Really?

16 A. Okay, then your evidence differs then.
17 Maybe there's more than one call because on-site
18 security did call for an ambulance.

19 86. Q. Oh, I'm sorry. I'm -- just to clarify.
20 This is where I think it would be helpful simply to
21 narrate what I think happened.

22 So ---

23 87. Q. I'm sorry. I do need to know what you
24 believe and from what source. So ---

25 A. Yes, I would love to be able to narrate

A. El Sabrout (Cr.-Ex.) - 20

1 that.

2 88. Q. And we're going to do this by steps,
3 okay? Because that's the way this process works. And
4 don't worry, if there is anything that you feel that
5 you wanted to say but couldn't, that's what re-direct
6 examination is for. Okay?

7 A. Okay.

8 89. Q. So you've talked about there being a
9 call and you say that the call that you were aware of
10 was from a harm reduction worker but you don't know
11 ---

12 A. The call was for the Narcan. The harm
13 reduction worker called for Narcan. I provided it.
14 Security was simply standing around. And my
15 understanding is that the unsheltered workers, the
16 person who called for an ambulance -- I want to say
17 that it was Tiffany.

18 90. Q. Okay.

19 A. And then, please don't interrupt me. I
20 then -- it's entirely possible that security called
21 for the ambulance as well. My observation from
22 standing there was that they both were just standing,
23 watching the proceedings take place while the
24 unsheltered worker was on the phone with the
25 ambulance.

A. El Sabrout (Cr.-Ex.) - 21

1 And then it was -- yeah, when the ambulance
2 showed up, they declared that the person was dead.

3 And as far as I was aware during the duration of time
4 that the ambulance was there, and before they removed
5 him, they were not certain of his time of death.

6 91. Q. Maybe not certain of the time of death
7 but the evidence is that they quickly determined that
8 he met, unfortunately, the criteria for being deceased
9 and had been for some hours.

10 A. That is not -- I don't -- I am not
11 certain of that. That would be their determination to
12 make. I did not actually touch the body because it
13 was not for me to do.

14 92. Q. Right. And so, yeah, you weren't aware
15 of anything about the time of death?

16 A. I'm still honestly not certain.

17 93. Q. Okay. And what's recorded here on your
18 two log entries, those would be all of your log
19 entries for May 1, would they?

20 A. Most likely, yes. As I stated in the
21 affidavit, the log is maintained to the best of our
22 ability. Obviously, when something of significance is
23 happening, my instinct is not necessarily always to be
24 on my phone and typing.

25 94. Q. Okay. And for something as significant

A. El Sabrout (Cr.-Ex.) - 22

1 as a death where some people jump to the conclusion
2 that there had been delay in the paramedics seeing the
3 patient, you wouldn't have thought to document more
4 carefully that?

5 A. I believe there is video of security
6 being in the way of the paramedics that I recorded. I
7 am not sure if it was provided to you. But such a
8 thing exists.

9 95. Q. Okay, and is it Fight Back video?

10 A. It's video that I, personally,
11 recorded.

12 96. Q. Okay. Could you please produce that
13 video?

14 A. Sure. I don't if, Joanna, you're able
15 to make a note of that?

16 97. Q. Yes, via counsel. That's okay. And
17 you did not see the ambulance driver's request that
18 security move the vehicle?

19 A. I saw the ambulance drivers not able to
20 pull up on-site and that their security vehicle was
21 also blocking the access of the stretcher to access
22 the site.

23 98. Q. Right, so the simple answer to my
24 question would be, "No, I did not see the paramedics
25 ask the security vehicle to move."

1 BY MR. LOKAN:

2 103. Q. You talk about encamped residents
3 sometimes being dysregulated, Aaron?

4 A. That's correct.

5 104. Q. Okay. And you describe that as times
6 when they might be shouting or throwing things?

7 A. For example.

8 105. Q. For example, okay. And you don't
9 personally have medical training, I take it?

10 A. No, just some basic first aid training.

11 106. Q. Right. Okay.

12 A. I have done peer support in numerous
13 capacities ---

14 107. Q. Sure.

15 A. --- to incarcerated folks, to folks
16 with mental illness and folks who experience
17 homelessness for many years.

18 108. Q. Okay. That's all very interesting but
19 no medical training and you are not qualified to
20 determine if someone is, for example, having a
21 psychotic episode?

22 A. Absolutely not, no, I am not qualified
23 to determine that, other than them acting dramatically
24 out of step with how I experience them most of the
25 time or when they seem more themself.

A. El Sabrout (Re-Ex.) - 25

1 109. Q. Okay. Thank you. Those are my
2 questions in cross-examination. You may have some
3 questions from the region on re-direct.

4 MS. MULLEN: Could I have just five minutes
5 to ---

6 MR. LOKAN: Of course.

7 MS. MULLEN: Thank you very much.

8 --- BREAK

9
10 RE-EXAMINATION BY MS. MULLEN:

11 110. Q. Hi, Aaron, I'm -- I just actually have
12 a very -- few very short questions for you.

13 A. Sure.

14 111. Q. So it has to do with the document that
15 was being showed to you. I believe it was Exhibit 1,
16 from the affidavit -- for, sorry. From the cross-
17 examination of Jacara Droog. Is there any way that we
18 can pull that one back up, please?

19 So, Mr. Lokan was asking you why there was
20 nothing more fulsome in this document about the events
21 on May 1st. And I am wondering if you could look at
22 the title of the document.

23 A. It says, "Region Unsheltered Workers
24 On-Site Documentation."

25 112. Q. Okay. And so the notes, do you -- on

A. El Sabrout (Re-Ex.) - 26

1 May 1st, what does this document specifically deal
2 with?

3 A. Well, the first entry reports that the
4 unsheltered workers arrived. And then the second
5 entry reports that someone named "Chris" who I met for
6 the first time that day, who I believed to be their
7 supervisor in some capacity arrived.

8 So it's entirely possible that there might
9 have been entries that ended up in a different
10 document related to other matters that may have taken
11 place, such as security incidents or the ambulance or
12 police arriving.

13 113. Q. Okay.

14 A. And once again, I don't know the full
15 -- I am not super-familiar with the full breadth of
16 what's been provided.

17 114. Q. All right, those are all my questions.
18 Thank you.

19 MR. LOKAN: And we're now off record and
20 we're done. So thank you for that.

21
22 --- ADJOURNED
23
24
25

THIS IS TO CERTIFY that the foregoing
is a true and accurate transcription of
my recordings and notes, to the best of
my skill and ability.

BarPollard

Barbara A. Pollard
Certified Court Reporter

Photostatic copies of this transcript are not
certified and have not been paid for unless they bear
the original signature of Barbara A. Pollard, C.C.R.,
and accordingly are in direct violation of Ontario
Regulation 587/91, Courts of Justice Act, January 1,
1990.

TAB 2

Court File No. CV-25-00000750-0000

ONTARIO
SUPERIOR COURT OF JUSTICE

BETWEEN:

THE REGIONAL MUNICIPALITY OF WATERLOO

Applicant

and

PERSONS UNKNOWN AND TO BE ASCERTAINED

Respondents

APPLICATION UNDER Rule 14.05 of the *Rules of Civil Procedure*

This is the Cross-Examination of **Angela Allt** on her affidavit dated June 20, 2025, taken via Zoom videoconference on consent of the parties on July 14, 2025.

APPEARANCES:

ANDREW LOKAN, Mr. Counsel for the Applicant
GRETA HOAKEN, Ms.

ASHLEY SCHIUTEMA, Ms. Counsel for the Respondents
JOANNA MULLEN, Ms.
SHANNON DOWN, Ms.

MERCEDES PEREZ, Ms. Amicus Curiae

(i)

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1

1 July 14, 2025

2
3 ANGELA ALLT, AFFIRMED

4 CROSS-EXAMINATION BY MR. LOKAN:

5 1. Q. Good morning, Angela. My name is
6 Andrew Lokan and I am a lawyer for the Region of
7 Waterloo.

8 A. Mm-hmm.

9 2. Q. And I'm going to be asking you some
10 questions this morning. Just to confirm, I'm cross-
11 examining you on your affidavit that you affirmed on
12 June 20th of 2025?

13 A. Correct.

14 3. Q. Okay. And you have a copy of that affidavit
15 with you?

16 A. I do.

17 4. Q. Okay. And you don't have any other
18 materials with you, either on screen or in print?

19 A. What type of materials are you
20 referring to?

21 5. Q. Anything. Any other materials. Any
22 documents, articles, other affidavits. It's all
23 you've got (indiscernible)?

24 A. No.

25 6. Q. Okay. You're agreeing that all you have is

1 your own affidavit, is that right? Yeah? Thank you.

2
3 Another thing is that a transcript is being
4 taken. We live in a world of visual cues as well as
5 verbal cues. So you just held up your affidavit for
6 me. That doesn't come through on the transcript,
7 which is why I said, "Thank you," to make clear that
8 that's what you have and that's all you have.

9 A. (Indiscernible).

10 7. Q. Related to that, if I ask you a question and
11 you mean to say either "Yes," or "No," but you instead
12 say, "Mm-hmm," and nod, or "Mm-hmm," and shake your
13 head, that doesn't work on a transcript because it's
14 ambiguous.

15 A. Right, I understand that, yes.

16 8. Q. Okay, thank you. Final thing is that when
17 I'm asking you questions and you're answering, we
18 should try not to talk over each other, because that's
19 very difficult for the court reporter to make sense
20 of. So if that starts to happen, both of us should
21 stop, okay?

22 A. Yeah.

23 9. Q. So when I ask you questions, if there's
24 anything you don't hear, or don't understand, or isn't
25 clear, please feel free to ask me to repeat or

1 clarify, okay?

2 A. I will.

3 10. Q. Thank you. So I understand from your
4 affidavit Angela, that you are a registered social
5 worker?

6 A. I am.

7 11. Q. And you have experience with adults with
8 severe mental health and addiction issues?

9 A. I do.

10 12. Q. Okay. I wonder if we can go to your
11 affidavit? And we're going to pull it up on screen.
12 To paragraph 20.

13 A. Okay, yeah.

14 13. Q. So you talk in paragraph 20 about the huge
15 gap in the continuum of care that was left when the
16 province shuttered psychiatric hospitals, do you see
17 that?

18 A. I do.

19 14. Q. Okay. And that was 2014? At least for the
20 London psychiatric hospital, that was 2014?

21 A. Yeah, there was a process that had been
22 in place for a while, various hospitals across the
23 province but that one, as far as I know, was 2014.

24 15. Q. And this was part of a province-wide thing,
25 wasn't it? Where basically, similar institutions

1 across the province shut down in and around the same
2 date range?

3 A. Yes, and to be fair, it wasn't just
4 this province. It was something that happened across
5 the country.

6 16. Q. Okay. And just as I read it, it sounds like
7 you disagree with the shuttering of these facilities?

8 A. Well, there's a number of people that
9 disagree with the shuttering of those facilities. You
10 know, obviously I can't speak for the wide masses
11 here, but you know, it's pretty much agreed amongst a
12 variety of service providers that, you know, yes, it
13 left a gap.

14 17. Q. Yeah. And I'm not suggesting you're alone
15 by any means. There may be many people who would
16 agree with you, but it left it gap particularly with
17 patients who have some of the most acute problems? Is
18 that fair?

19 A. Yes.

20 18. Q. Okay. And you talk in particular about
21 patients who are suffering from psychosis?

22 A. Mm-hmm.

23 19. Q. That would have to be a "yes" or a "no."

24 A. Yeah, yes, sorry.

25 20. Q. That's okay. And psychosis can be, as you

A. Allt (Cr.-Ex.) - 7

1 point out, it can be quite temporary or episodic, or
2 it can be longer term? Hopefully not permanent, but
3 longer term, is that fair?

4 A. For the most part that would be fair,
5 but there are individuals who can have long term fixed
6 delusions about what they believe. And psychosis can
7 be present a lot of the time, particularly if somebody
8 is unmedicated.

9 21. Q. Right. And so one thing that is of high
10 importance for treatment of patients experiencing
11 psychosis is to make sure that they have access to the
12 appropriate medications, is that fair?

13 A. Absolutely.

14 22. Q. And I'm not suggesting that medications
15 always work or that you always know, but there are
16 antipsychotic medications and they play a very
17 important role, is that fair?

18 A. A huge role.

19 23. Q. And in people suffering from psychosis,
20 it could take a lot of different forms, is that also
21 fair?

22 A. Yes, I would say so.

23 24. Q. Okay. And would there be an overlap
24 between psychosis and paranoia?

25 A. Yes, yes. In some cases.

1 25. Q. Yeah, and I'm not suggesting everyone
2 who has a psychotic episode is paranoid, or that
3 everyone who's paranoid is psychotic, just that
4 there's overlap.

5 A. Good, because I was going to say that
6 one does not necessarily mean they have the other all
7 the time.

8 26. Q. Right. And as with psychosis, there's
9 different degrees, right? You can be mildly
10 paranoid; you can be acutely paranoid?

11 A. Yes.

12 27. Q. Okay. And one of the reasons why the
13 shuttering is unfortunate, from the point of view of
14 patient care, is that it can be really challenging,
15 even for experienced mental health professionals, to
16 deal with patients experiencing psychosis, is that
17 fair?

18 A. Particularly when it becomes acute.

19 28. Q. Right. And when it does become acute,
20 it can lead to conflicts in the hospital setting with
21 other patients, right?

22 A. It can cause conflicts with patients or
23 it can cause conflicts with staff.

24 29. Q. Yeah.

25 A. And of course, in a hospital setting

1 they have more tools than the community does to deal
2 with it.

3 30. Q. Right. And some of those tools --
4 absolutely not first resort -- but some of those
5 tools include being able to keep people in the
6 institutional setting for periods of time, with
7 appropriate safeguards?

8 A. Yes. I mean, you know, if you look at
9 your average psychiatric unit, you know, the tools
10 that they have if somebody has escalated to that point
11 because of their illness is they have seclusion rooms
12 that they can use so that the patient can't hurt
13 anybody else, or somebody else, or themselves, pardon
14 me.

15 31. Q. Yeah.

16 A. You know, and there's chemical
17 restraints that can be used, so yeah, those are things
18 that the community does not have available to them.

19 32. Q. Right. And there's also the form
20 system. You can form 1, where you can have somebody
21 involuntarily in an institutional setting and it
22 lasts a certain amount of time before it's got to be
23 reviewed and kept going?

24 A. Yes.

25 33. Q. That's another tool?

A. Allt (Cr.-Ex.) - 10

1 A. Yes, and I can tell you exactly what
2 all the forms are because I used to be a rights
3 advisor and that was my bread and butter.

4 34. Q. But basically, the way the scheme works
5 is that, initially, it's a short-term event and then
6 the patient is monitored and, depending on the
7 progress of the patient, it can be extended? But
8 there's always a patient advocate structure there to
9 make sure -- to attempt to make sure it doesn't
10 overreach, is that fair?

11 A. That is true.

12 35. Q. Yeah, okay. And going back to conflict
13 with other patients or with staff, if you're not
14 medically trained and if you don't quite get that
15 this person is having a psychotic episode or
16 suffering from paranoia, you may react in a way
17 that's non-constructive, would you agree?

18 A. Could you put that into a bit more
19 context for me? So like, are you talking about
20 somebody walking down the downtown street, or are you
21 talking about other service providers?

22 36. Q. Yeah, I mean I'll just keep it as a
23 hypothetical example. You've got someone who's in a
24 psychotic break and suffering from paranoia and they
25 start accusing their neighbour of things ---

1 A. Mm-hmm.

2 37. Q. Sorry, you nodded, I'd have to take
3 that as a, "Yes."

4 A. Correct.

5 38. Q. I mean, that's not an uncommon symptom
6 of psychosis with paranoia, is it? Or is it just
7 that it happens every once in a while?

8 A. It's very difficult to answer the
9 question because it is so situational.

10 39. Q. Sure.

11 A. But, you know, a scenario like you just
12 described, certainly, yes. That happens.

13 40. Q. And so somebody without mental health
14 training, they might react focusing on the
15 accusation, "I can't believe you just accused me of
16 that." They might get defensive or angry? Whereas a
17 mental health professional might recognize it for
18 what it is, which is there's a patient needing help?

19 A. Yes. A mental health professional
20 would recognize it, probably, for what it is. I would
21 also add however, that as I've said, we have had
22 situations just like you described happen in community
23 and the neighbour right away recognizes it for what it
24 is.

25 41. Q. Right. So some neighbours are better

A. Allt (Cr.-Ex.) - 12

1 than others, you'd say?

2 A. Yes. And I note those cases, I would
3 also add that more often than not -- and the reason
4 that we hear about it, our service providers, is
5 because, you know, neighbour picks up the phone and
6 calls the police.

7 42. Q. Right, okay. It's sometimes difficult,
8 is it not, to spot or figure out when somebody is
9 undergoing a psychotic episode?

10 A. Again, very situational. If it's
11 somebody who is used to working with the population,
12 they're probably going to see it quite quickly.

13 43. Q. And if they're trained? If they've got
14 proper mental health training, for example?

15 A. Yes. They're probably going to figure
16 it out quite quickly. You know, they may say, "Hmm,
17 don't know exactly what's going on, but something's
18 really off here."

19 44. Q. Yeah.

20 A. And, you know, as I know you would be
21 aware, the only people that can make an actual
22 diagnosis are the doctors.

23 45. Q. Yeah.

24 A. Right. So the rest of us, we may know
25 exactly what's going on, or we may know by history

1 what's going on with somebody.

2 46. Q. Right.

3 A. They're familiar.

4 47. Q. Right. But when you first see somebody
5 exhibiting strange behaviours or unusual behaviours,
6 you wouldn't necessarily jump to the conclusion that
7 they're psychotic? So for example, someone talking
8 to themselves, you wouldn't think, "Oh, that person's
9 psychotic?"

10 A. It would depend on what way they're
11 talking to themselves, I would think. If they're
12 doing so loudly in the middle of the street, you know,
13 that might be your first go to. If they're off in a
14 corner, kind of you know, what appeared to be mumbling
15 to themselves, no that might not be your first go to.

16 48. Q. Right. But you wouldn't expect a
17 layperson without any mental health training to be
18 able to make those (inaudible), would you?

19 A. Probably not.

20 49. Q. Okay. And so if someone's acting
21 emotionally dysregulated, could be psychosis, or it
22 could be nothing to do with psychosis?

23 A. Exactly.

24 50. Q. Okay, thank you. And if you have someone
25 who is experiencing psychosis, like you say, for a

A. Allt (Cr.-Ex.) - 14

1 community member, really the best that you can hope
2 for is that they'll get in touch with appropriate
3 authorities, and that that directs that person into
4 getting the help that they need, is that fair?

5 A. Well, that's certainly preferable to
6 them trying to intervene, yes.

7 51. Q. Okay. And that might the police, or it
8 might be calling an ambulance, or it might be
9 contacting another person with a medical background?

10 A. Yes.

11 52. Q. Okay, thank you. And one advantage of the
12 psychiatric hospital is that, I mean, you've talked
13 about the tools that you'd have such as a seclusion
14 room. You also have people around who are able to
15 respond quickly to a psychotic episode, such as for
16 example, you'd typically have registered nurses or
17 licensed practical nurses on duty, correct?

18 A. (Inaudible).

19 53. Q. And you'd have access to psychiatrists? I'm
20 not saying that they're available 24/7, but if there's
21 someone in crisis, then hopefully, sooner or later
22 they can see a psychiatrist?

23 A. Yes. If somebody's on a psychiatric
24 unit, I mean you know, like everything else 9-5,
25 right? There's somebody there. But again, like

A. Allt (Cr.-Ex.) - 15

1 almost every other medical service, you know, there's
2 somebody on call after hours.

3 54. Q. Right, okay. But none of those supports are
4 available in an encampment, are they?

5 A. They're not available in an encampment,
6 and not available in the wider community.

7 55. Q. Right. So at best what you can hope for is
8 that someone will recognize that there's a person who
9 may need treatment and contact the appropriate person,
10 whether police, or ambulance, or other mental health
11 professional?

12 A. Yes.

13 56. Q. Okay. You say that drug use can lead to
14 psychosis?

15 A. Yes.

16 57. Q. In your experience? Thank you. You also
17 say that at 100 -- sorry, that you have a caseload in
18 the Region of Waterloo?

19 A. Yes. So just to clarify the
20 understanding around this, my role covers both
21 Waterloo and Wellington counties.

22 58. Q. Right.

23 A. Because it's a, you know, bigger
24 population, I generally do have more people from
25 Waterloo County as a whole, which takes in Kitchener,

A. Allt (Cr.-Ex.) - 16

1 Waterloo, and Cambridge.

2 59. Q. Okay. So your caseload of 30 to 50, do you
3 know, are you necessarily aware whether any of those,
4 or which of those are staying at the encampment at 100
5 Vic?

6 A. The only time I would know if somebody
7 was specifically staying there is if I get a call from
8 a worker and they're looking to get some kind of
9 service or support for that person. And they would
10 tell me, you know, as part of an intake, where the
11 person is living.

12 60. Q. Okay. And when you say, "A worker," you
13 mean a worker for the Region?

14 A. It could be a worker from several
15 places. It could be workers from the Region, it could
16 be from St. John's Kitchen, sometimes CMHA will
17 contact me.

18 61. Q. That's the organization you work for?

19 A. Yes, I'm based out of Canadian Mental
20 Health Association, but I am of service to the whole
21 mental health and addiction system.

22 62. Q. Okay, right. So you don't really have any
23 reliable sense of your own caseload, how many of those
24 patients are or were at 100 Vic?

25 A. Well, I know at any given time, like if

A. Allt (Cr.-Ex.) - 17

1 the file is open, I would know if they were there.

2 63. Q. Okay. And so you would say that at any
3 given time, as far as you know, out of your 30 and 50,
4 you would have what? A few who you were aware were
5 staying at 100 Vic?

6 A. There would be times that I might have
7 two or three; there would be times that I wouldn't
8 have any.

9 64. Q. Okay. So that's not going to be enough for
10 you to be able to talk about the extent of psychosis
11 amongst residents at 100 Vic? The numbers are too
12 small?

13 A. At any given time, but if I look at it
14 cumulatively, we can certainly talk about it.

15 65. Q. Right. And in general terms, if you have an
16 unhoused population, we know that there's an
17 association with drug use, correct?

18 A. Yes, there is an association, but
19 again, it's a matter of degrees. Like, is everybody
20 who is unhoused using drugs? No, of course not. Are
21 a portion of them? Yes, of course.

22 66. Q. Right. Okay and in turn, there is something
23 known as drug-induced psychosis, so in turn of an
24 unhoused population that uses drugs, there may be some
25 who suffer from drug induced psychosis from time to

1 time?

2 A. I would say that's a fair statement.

3 67. Q. Okay. Non-drug-induced psychosis, I take
4 it, would be a bit less common? If you can't say,
5 that's fine.

6 A. If your only -- and we're just looking
7 at the unhoused population, correct?

8 68. Q. Well, let's start with the general?

9 A. Okay, so in the general population -- I
10 would probably lean towards saying that in the general
11 population it might be as common.

12 69. Q. Okay.

13 A. Within the unhoused population, I would
14 say it probably is more common that you have drug-
15 induced psychosis.

16 70. Q. Okay. And that's because of the prevalence
17 of drugs amongst the unhoused? Or drug use amongst
18 the unhoused population?

19 A. Yes.

20 71. Q. Okay. Now, in your affidavit, you do refer
21 to some issues that you have with shelters, at least
22 as they're currently, in your experience, set up. But
23 you would agree with me that shelters do provide
24 warmth in the winter and air-conditioning in the
25 summer?

A. Allt (Cr.-Ex.) - 19

1 A. I know they provide warmth in the
2 winter; I'm not sure if they all provide air
3 conditioning in the summer.

4 72. Q. Okay. And they provide a bed?

5 A. They provide a bed, yes.

6 73. Q. They provide those who are staying in them
7 with protection from the elements?

8 A. Certainly, yes.

9 74. Q. And there's also supervision by shelter
10 staff?

11 A. Yes, there is staff on site.

12 75. Q. Okay. And that's not necessarily the case
13 at an encampment, is it?

14 A. That I am aware of? No, there is not
15 staff there 24/7.

16 76. Q. Okay. You've made an assertion in your
17 affidavit that deaths from drug overdoses are more
18 frequent in motels, in your experience, than in
19 encampments. I just wonder if we could understand how
20 many cases are you aware of where there were deaths
21 from overdoses in motels?

22 A. So I think that, you know, if you -- I
23 believe that I put this in here. One of the things
24 that I often get asked for is to put people in motels,
25 to pay for a stay in a motel.

A. Allt (Cr.-Ex.) - 20

1 77. Q. I understand. And we can cut this short. I
2 understand the context of ---

3 A. Okay, just wanted to be sure, right?

4 78. Q. Sure. Some people -- and I want to make
5 sure that I put this fairly.

6 A. Yeah.

7 79. Q. Some people who have addiction issues and
8 have substance use problems, a motel may not be the
9 ideal environment for them because they have the
10 ability to go alone to their room and be away from
11 other people and that that may mean that they use
12 dangerous quantities of drugs, or laced drugs and
13 there's no one there to notice or revive them. And
14 because of that, you've said that motels can be a
15 suboptimal choice for people with addiction issues?
16 Have I put that fairly?

17 A. Yes, for some people with addiction
18 issues, it's not great because of that reason.

19 80. Q. Right. And that's some, but not all people?

20 A. Not all people, certainly.

21 81. Q. Okay. And you're aware that -- and maybe
22 you're not, but the Region in the planning it has done
23 for the closure of 100 Vic, has made additional
24 resources available to the existing residents of 100
25 Vic?

A. Allt (Cr.-Ex.) - 21

1 A. What resources would those be?

2 82. Q. So what we've heard on the evidence is that
3 there is a monetary budget, it's over \$800,000 this
4 year and over \$500,000 next year, and a part of that
5 becomes permanent, and a part is just earmarked for
6 now. And that's on the current budget projections; as
7 we know, budgets evolve over time. But the Region has
8 made additional resources available in terms of
9 shelter spaces, providing for additional shelter
10 spaces, providing for motel rooms, providing for
11 transitional housing, providing for rent supplements.

12 Were you aware of any of that?

13 A. I knew that there were some things
14 being brought onstream.

15 83. Q. Okay. Were you aware --- sorry, I just want
16 to start with what you're aware of. Were you aware
17 that the Region has a team of USWs, Unsheltered
18 Support Workers that go to the site, and I think their
19 current schedule is most days, a couple of hours?

20 A. Oh, very aware of them. I'm in touch
21 with them almost daily.

22 84. Q. Okay. And you're aware that the USWs are
23 formulating something called IHPs, Individual Housing
24 Plans, for those residents that engage with them?

25 A. Yes.

1 85. Q. Okay. I didn't mean to interrupt you; what
2 was it that you wanted to say a minute ago?

3 A. We were started talking about the
4 potential risk for some people in motels.

5 86. Q. Right.

6 A. And you had asked me, you know, how
7 many I was aware of, and what I was going to say was
8 that of people on my caseload over the past, I'm going
9 to say seven years or so, give or take, we've lost
10 four.

11 87. Q. Okay.

12 A. Due to that.

13 88. Q. Mm-hmm.

14 A. So those are ones that I'm very aware
15 of, obviously. And I've heard from some of the
16 outreach workers here and again that this has happened
17 as well.

18 89. Q. Okay. You'd be less confident about what
19 you hear from other outreach workers because you don't
20 know the casefile, you don't know whether it was in
21 particular an overdose, whether there were other
22 factors, *et cetera*, is that fair?

23 A. Well, if they tell me that one of their
24 clients passed away due to an overdose in a motel
25 room, I have no real reason to question what they're

1 telling me.

2 90. Q. Okay. And I take it you were aware there
3 have been, unfortunately, five deaths at the
4 encampment?

5 A. Yes, I had heard of -- I'd heard of two
6 of them.

7 91. Q. Okay.

8 A. The others I wasn't aware of.

9 92. Q. Okay. You say in your affidavit that, like
10 we've discussed, patients with addiction issues, you
11 will not refer them to motels in the spring and summer
12 and fall, because of the risks of them being in an
13 environment where they may overdose? Or may take
14 dangerous or laced drugs? That's what we've just
15 discussed, right?

16 A. Well, I think you misunderstood what I
17 wrote.

18 93. Q. Okay.

19 A. What I said was, I stay away from
20 putting people in the motels spring, summer, fall, as
21 I try to hold those funds for the winter.

22 94. Q. Right.

23 A. To get them off the street when it's
24 cold.

25 95. Q. Okay, so you know, we're sort of in a

A. Allt (Cr.-Ex.) - 24

1 hierarchy of needs situation here. And hierarchy of
2 needs is a concept in mental health where you've got a
3 pyramid and at one level there's your most basic
4 needs, like shelter, warmth, food, right?

5 A. Maslow.

6 96. Q. Yeah, exactly. And you go through the
7 hierarchy and then once those are taken care of, there
8 are other needs that are less basic, but nevertheless
9 real, such as social interaction, community, whatever,
10 fair?

11 A. Yes, absolutely.

12 97. Q. That's the way that model works, but in
13 terms of the hierarchy of needs, in winter there's
14 really a need for people, so that they're not on the
15 street, to be somewhere where it's warm and they're
16 not exposed to the elements?

17 A. Correct.

18 98. Q. And so you will refer people to motels for
19 the winter months?

20 A. I do quite regularly.

21 99. Q. Right. And what you'd hope though, is that
22 the risks can be mitigated, if they're going to a
23 motel with appropriate supports?

24 A. Yes. The request for motels, again,
25 comes from various organizations.

1 100. Q. Right.

2 A. Circumstances can vary depending on
3 what the need of the client is. When those requests
4 come to me, I start asking questions about, okay, well
5 you know, "Who is this person? Why do they need a
6 motel room? Is there any issues that we should be
7 aware of?" And certainly, I do ask about substance
8 use to try and screen as much as possible.

9 101. Q. Right.

10 A. To see if we are running that risk of
11 -- this is somebody that's going to go in there and
12 use heavy and maybe overdose.

13 102. Q. Right. And there may be some for --
14 even though it's winter, and even though it's
15 important to have patients off the street and not
16 exposed to the elements, where you'd really try and
17 advocate for them to go to something other than a
18 motel?

19 A. Yes. And I have.

20 103. Q. Such as a transitional housing space,
21 or if it can be worked out, independent housing with a
22 rent supplement?

23 A. Motel ask is -- comes usually in some
24 sort of a crisis situation.

25 104. Q. Okay.

1 A. So things like supportive housing or
2 such, that's not on the table at that moment.

3 105. Q. Right.

4 A. I mean, that's the long-term goal,
5 obviously, to get them somewhere where they're going
6 to be more permanently house, where they'll have
7 support but that's not what's going on at that moment.
8 This is, they have nowhere to go and there may be some
9 specific issues attached to it. So maybe for some
10 people, maybe they have been barred from going to the
11 shelter.

12 106. Q. Okay.

13 A. That happens.

14 107. Q. Do you ever advocate for people to have
15 the bars lifted?

16 A. Oh, yes. We've certainly had that
17 conversation more than once.

18 108. Q. Yeah, and sometimes you're successful,
19 right?

20 A. I can only think of like, two instances
21 where it was successful.

22 109. Q. Okay. If we're talking about Region
23 operated shelters, you would hope that one of the
24 things they could take into account in their plan
25 moving forward would be, look in light of what I've

A. Allt (Cr.-Ex.) - 27

1 said and I think about motels and the risks that for
2 some of the population motels may carry, you should be
3 more flexible in terms of bans at shelters. You
4 should make sure that people who are not appropriate
5 for motels at least have the shelter option available;
6 would that be helpful?

7 A. That would be ideal.

8 110. Q. Okay, thank you. In the way that the
9 Region has set this up, the bylaw, I think you're
10 aware, was publicly proposed on April 16th and then the
11 bylaw was passed on April 23rd. But the encampment is
12 not scheduled to close until December 1st; you're aware
13 of those dates, roughly?

14 A. Yeah, I knew it was scheduled to close
15 in December.

16 111. Q. Okay. So from date of introducing the
17 bylaw, through to scheduled closure date, that's
18 overall, a period of a bit more than seven months and
19 as we are now, it's a bit less than six months because
20 a bit of time has elapsed. Do you yourself get
21 involved in conversations with residents about their
22 options and what might be appropriate, most
23 appropriate for that, can be worked out?

24 A. Generally speaking, no, I don't. That
25 is a conversation that is with, you know, the outreach

1 workers.

2 112. Q. Right.

3 A. There have been occasions where I've
4 had a little more direct contact with the clients.
5 But, you know, as a general role, no. That's the role
6 of the worker.

7 113. Q. Okay. But the outreach workers, your
8 aware they include -- I mean, it's a team of licensed
9 professionals, right? You know that?

10 A. Some are licensed, some aren't
11 licensed.

12 114. Q. Well, the evidence of the Region is
13 that they consist of registered social workers, social
14 support workers, and a registered nurse. So all of
15 those people are licensed. Not all RSWs, but they are
16 all licensed. Is that fair?

17 A. The Region's, yes. But there are other
18 workers from other agencies who may not necessarily
19 be, although many of them are as well. There's social
20 workers, there's nurses, but there are some who aren't
21 licensed professionals. So I, you know, just wanted
22 to make that distinction clear.

23 115. Q. Okay, and that's helpful. The Region
24 came up with the estimate that six to seven months
25 would be a reasonable time to find housing

1 alternatives, or alternative arrangements for the
2 existing residents of the camp. That's part of the
3 reason why it happens in April for something that's
4 not going to close until December. You're aware of
5 that?

6 A. Pardon? Could you kind of ---

7 116. Q. So I ---

8 A. --- define the question for me? Was I
9 aware that the Region felt ---

10 117. Q. Yeah, were you aware that the Region's
11 estimates of the time necessary to make those
12 transitions to alternative arrangements was six to
13 seven months?

14 A. Yes.

15 118. Q. And you wouldn't second guess the
16 Region on that judgment, would you? That that's an
17 appropriate period?

18 A. I would need far more details in order
19 to say it's adequate, or it's not.

20 119. Q. Okay. And in the absence of those
21 details, you can't -- if it worked out that the period
22 was slightly longer, you would see that as a
23 constructive thing?

24 A. If it took a little longer to get
25 everybody housed and have appropriate housing

1 resources available, yes.

2 120. Q. I think I put it a little bit the other
3 way around. Let's say that the Region was able to
4 extend the closure so it didn't happen on say,
5 December 1, but it happened on January 1?

6 A. Okay.

7 121. Q. That extra month, that would be
8 something that you would see as helpful to the
9 population?

10 A. I would think it would be.

11 122. Q. Okay. Thank you, those are my
12 questions for you. There may be some questions from
13 other counsel. We can take down the affidavit.

14 MS. DOWN: Can we just take a short break?
15 We'll be back in four minutes and I'll let
16 you know if I have anything in reply.

17 MR. LOKAN: Sure.

18 THE WITNESS: Four minutes?

19 MS. DOWN: Five. Let's make it five.

20 THE WITNESS: Okay, seven's good.

21 MS. DOWN: I always say four and it takes
22 five, so we'll just say five.

23 THE WITNESS: Okay.

24 MS. DOWN: Thanks.

25

1 --- BREAK

2
3 RE-EXAMINATION BY MS. DOWN:

4 123. Q. Angela, my name is Shannon Down, I'm
5 part of the legal team for the homeless residents at
6 the encampment. I'm just going to be asking a few
7 questions in response to the answers that you provided
8 Mr. Lokan.

9 A. Okay.

10 124. Q. So Mr. Lokan was mentioning that the
11 Region has attached some additional funding to the
12 bylaw, and my question is, are you aware of what the
13 overall context is, in terms of the funding situation
14 with respect to getting people motel rooms, supportive
15 housing, transitional housing?

16 A. I would have to say that I have a
17 general idea, but not specific to how that money is
18 going to be used, what it's going to be put towards.

19 125. Q. Right. I guess I'm asking do you have
20 a sense of what the overall context is? Is there lots
21 of funding, is there not quite enough funding, is
22 there a gap in funding?

23 A. I'm trying to be fair in my answer
24 here. It would depend on what they are hoping to
25 accomplish with it. And I know like, across any

1 system, not even just here locally, but the idea is to
2 get people permanently housed. So without knowing how
3 much money they have to go towards trying to find
4 permanent housing, and how much towards temporary
5 housing, or how much they intend on putting towards
6 motels. I mean I know that's all kind of part of the
7 mix, but you know, it's hard to say where it's going
8 to go, how much of an impact it'll have, and
9 therefore, is it enough? Is it too much? Is it --
10 very hard for me to say. I really can't answer that
11 question.

12 126. Q. Okay, fair enough. In terms of people
13 being placed into motels, you were talking about that
14 with Mr. Lokan.

15 A. Yes.

16 127. Q. And I think the issue came up of
17 whether there's supports attached to that. Are the
18 supports that are attached to motels, in your
19 experience, are they sufficient to deter like,
20 overdoses in instances of vulnerable people being
21 placed there?

22 A. No, they're not. Because as I believe
23 I mentioned in my affidavit, the supports are coming
24 in from 9-5, business hours. I think some people, if
25 they are attached to say, an ACT team for some reason

1 they need medications over the weekend, they might get
2 a visit on a weekend. And again, that support is
3 attached to an individual. There is no one who is
4 there just to kind of keep oversight on the people who
5 have been placed there by whatever agency, whether
6 it's me, or whether it's the Region, or somebody has
7 put them in for a few nights like sometimes there's a
8 fund through Canadian Mental Health Association where,
9 in an emergency, they'll do that. You know, so you
10 get a mix, but there is no one agency who is there all
11 the time to kind of keep an eye on everybody who might
12 fall under that category.

13 128. Q. Okay, thank you. And you mentioned in
14 one of your answers you suggested that motels are
15 offered in crisis but that supportive housing would be
16 the long-term goal?

17 A. Yes.

18 129. Q. So why isn't the supportive housing
19 provided to those people instead of the motel?

20 A. Availability. We just -- we don't have
21 enough. Trying to get somebody into supportive
22 housing is -- it's a process. You know, first and
23 foremost, they've got to go through all the paperwork,
24 and interviews, and things of that nature to just get
25 on the list. And then once they get on the list, then

1 they wait for a unit to become available. And because
2 we don't have enough, it can be quite a wait.

3 130. Q. Okay, and that leads me to my next
4 question. So the six or seven months that Mr. Lokan
5 suggested the Region has determined is sufficient to
6 place people at the encampment, if someone needed
7 supportive housing, would six or seven months be
8 enough time to place someone in supportive housing?

9 A. Generally speaking, no, it would not.
10 However, the Region does have oversight and operates a
11 number of places, and if they decided that they were
12 going to prioritize someone, then that could be enough
13 time.

14 131. Q. And so if that happened, what would
15 happen to the other people on the waitlist?

16 A. Well, they just wait a little bit
17 longer. It's, you know, like anything else. It has
18 waitlists. If something becomes urgent and somebody
19 decides that, you know, somebody needs to go to the
20 head of the line, well that means everybody else is
21 just waiting longer.

22 132. Q. So I think Mr. Lokan was asking you
23 about shelters and what shelters provide. And I think
24 at some point you said shelters -- something about,
25 "Shelters would be ideal." I'm just trying to

1 understand, are shelters -- are the supports that are
2 provided for people -- your types of clients, are the
3 supports that are provided in shelters, are they
4 adequate to the needs of vulnerable people with mental
5 health requirements?

6 A. Shelters are a very difficult
7 environment for some people. And I had made mention
8 of this. And it may be due to their mental health, it
9 may be due to their addictions, there are a few other
10 things that can kind of compound things. We have
11 people who have development disabilities who end up in
12 shelters, and people with acquired brain injuries, and
13 sometimes we have a combination of those things. So
14 the supports that those folks would get, could be
15 quite difficult for them to take part in, at times,
16 due to their level of cognitive functioning, shall we
17 say. So in those cases, they wouldn't be adequate.

18 For some people who are able to fully engage
19 with the workers within the shelters, they can be very
20 helpful. But for that other subset, it doesn't do a
21 whole lot for them.

22 133. Q. Okay. And what, in your experience,
23 what are the consequences like if someone is unable to
24 engage and they're not getting the supports? What
25 happens to that person when they're in shelters?

1 A. Sometimes they end up getting
2 discharged from the shelter, and as I've mentioned,
3 some people end up getting barred from the shelter.
4 But those would be kind of the two common ones, or
5 they just cycle in and out of the shelter without
6 getting any real resolution.

7 134. Q. Okay. On the issues of barring, being
8 barred from the shelter, Mr. Lokan was suggesting that
9 because the Region funds the shelters that somehow you
10 could advocate for some leniency. In your experience,
11 who sets the rules in the shelters around like, how
12 long someone is barred and what the process is? Is it
13 the Region of Waterloo, or the shelter provider? Who
14 makes that determination?

15 A. Well, in my experience, usually the
16 shelter provider will have some guidelines that they
17 follow. Policies they follow around things and you
18 generally have a manager of the shelter, who's kind of
19 like the final arbitrator of, you know, what's going
20 to happen with any individual, particular individual.
21 And yes, they get funded by the Region and one could
22 go to either the shelter manager, or the Region at
23 times, and say, you know, "Look, we have this
24 particular situation, this person's been barred, we
25 really need to get them back in." And usually, the

1 answer is, "No, we can't." And more often than not,
2 the reason that they've done this, and I do
3 understand, is there's been violence.

4 135. Q. Okay. And are those rules or
5 processes, are they consistent across shelters that
6 are funded by the Region, or are they each
7 individually responsible for setting their own rules?

8 A. I think each shelter sets their, kind
9 of like their own rules around those things, is my
10 understanding. Because some shelters, and you know,
11 I'm going over probably the last four or five years,
12 sometimes you'll find one is a bit more lenient than
13 the other.

14 136. Q. Okay. Mr. Lokan was asking about
15 people with psychosis and paranoia, and talking about
16 interactions, confrontational interactions with other
17 people.

18 A. Mm-hmm.

19 137. Q. In your experience, are people with
20 psychosis and paranoia more likely to be the victims
21 of violence, or the perpetrators of violence?

22 A. I would say it's 50/50. They can be
23 the victim, or they can be the perpetrator.

24 138. Q. And are there circumstances that would
25 mitigate that?

1 A. I think the circ -- there's a couple
2 things that can mitigate it. First off, if we could
3 get people treated reliably, that would help. And if
4 they have ongoing adequate support because when you
5 have a client who is unwell, if they have a support
6 worker attached to them and -- be that in supportive
7 housing, or be that in community, you know, if they
8 have someone that they have developed a rapport with,
9 that can go a long way to mitigating those
10 circumstances.

11 139. Q. Those are my questions, thank you.

12 THE WITNESS: You're welcome.

13
14
15
16 --- ADJOURNED

17
18
19
20
21

THIS IS TO CERTIFY that the foregoing
is a true and accurate transcription of
my recordings and notes, to the best of
my skill and ability.

BPollard

Barbara A. Pollard
Certified Court Reporter

Photostatic copies of this transcript are not certified and have not been paid for unless they bear the original signature of Barbara A. Pollard, C.C.R., and accordingly are in direct violation of Ontario Regulation 587/91, Courts of Justice Act, January 1, 1990.

TAB 3

Court File No. CV-25-00000750-0000

ONTARIO
SUPERIOR COURT OF JUSTICE

BETWEEN:

THE REGIONAL MUNICIPALITY OF WATERLOO

Applicant

and

PERSONS UNKNOWN AND TO BE ASCERTAINED

Respondents

This is the Cross-Examination of **David Alton** on their affidavit dated June 23, 2025, taken via Zoom videoconference on consent of the parties on July 10, 202.

APPEARANCES:

ANDREW LOKAN, Mr. Counsel for the Applicant
GRETA HOAKEN, Ms.

ASHLEY SCHIUTEMA, Ms. Counsel for the Respondents
JOANNA MULLEN, Ms.

(i)

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1

1 July 10, 2025

2
3 DAVID ALTON, AFFIRMED

4 CROSS-EXAMINATION BY MR. LOKAN:

5 1. Q. So, David, you should probably leave
6 yourself on because I will be asking questions and
7 we'll need your answers and we don't want any people
8 still on mute incidents or as few as possible.

9 A. Okay.

10 2. Q. It's amazing they still happen five
11 years after the beginning of the pandemic but happens
12 every day with me. So you have before you your
13 affidavit which is affirmed on -- I'm just checking
14 the date, June 23 of this year, do you?

15 A. Yes, I have it here.

16 3. Q. Okay. And you don't have any other
17 materials in front of you, do you?

18 A. I only have my affidavit and then the
19 supplementary materials I attached to my affidavit.

20 4. Q. So those are the exhibits A, B and
21 that's -- E, yeah. No, it goes onto the further ---

22 A. I think it goes onto J.

23 5. Q. Yeah. Okay. And just so you're aware,
24 there is nothing to stop you from taking notes while I
25 question but I am entitled to see them if you do.

26 A. Oh, okay.

1 6. Q. So many witnesses prefer not to take
2 notes. And if you don't understand something about my
3 question, please feel free to ask for clarification.
4 If you don't hear me, please free to ask me to repeat
5 something. Okay?

6 A. Okay.

7 7. Q. So I'm just looking at Paragraph 2 in
8 your affidavits, David. And you say that you're an
9 employee of the Social Development Centre Waterloo
10 Region. And you've worked as the facilitator of the
11 Lived Expertise Program since January of 2022. That's
12 correct?

13 A. I have worked at the Social Development
14 Centre with Lived Expertise since January of 2022.
15 The program my -- like my title has shifted as the
16 projects have changed. But they have all been related
17 to facilitating Lived Expertise. And at the current
18 moment, I am the Lived Expertise Program Manager.

19 8. Q. So the SDC, or Social Development
20 Centre, you started with them in January of 2022?

21 A. Yes.

22 9. Q. Okay. And is the Lived Expertise
23 Program -- is that something that is formally part of
24 the SDC or is it a collaboration with -- with other
25 groups?

1 A. So the Lived Expertise Program is one
2 of the three pillars of the Social Development Centre.
3 The other two being Housing and Homelessness and then
4 Grassroots Infrastructure. So it's one of the three
5 core programs. And then we have partnered with lots
6 of different parties for the Lived Expertise Program
7 such as the region itself.

8 10. Q. Right. And is the SDC funded by the
9 region?

10 A. The -- the SDC does receive funding
11 from the region for many of our programs.

12 11. Q. So it's program specific as opposed to
13 a block grant?

14 A. Yeah, there is no operating funding
15 from the region currently. It is program specific.

16 12. Q. Okay, the Lived Expertise Program, is
17 that one of the programs that received region funding?

18 A. Yes, the Lived Expertise Program does
19 receive region funding.

20 13. Q. Okay. There's just something I want to
21 clarify in terms of documents. In Paragraph 3, you
22 talk about the plan to end chronic homelessness or
23 PECH Final Report. And then you say that the document
24 at Exhibit A is the PECH Final Report. I am
25 wondering, do you have a copy of the Exhibit A with

1 you?

2 A. Yeah, I'll just go -- pulling it up.

3 14. Q. Sure.

4 A. Yeah. I have it open ---

5 15. Q. I ---

6 A. --- you know.

7 16. Q. Thank you. There just seems to be a
8 little bit of confusion around the documents. And so
9 my question is, isn't the PECH Final Report actually
10 the longer document that's called "Navigating
11 Compulsory" -- sorry, "Navigating Complexity Together"
12 that is at Exhibit B?

13 A. No. So that is the plan document,
14 Exhibit B, but the Final Report is the staff report.
15 And it was communicated both to us and all the parties
16 -- partners -- parties we work for in the development
17 of the plan to end chronic homelessness that the Final
18 Report is the staff report and that the appendixes are
19 presented that -- the appendix is, which in this case,
20 for the record -- I know it's confusing because
21 there's different ones. But in the -- in my
22 affidavit, it's Appendix B and C.

23 But when it was presented to council, there
24 was several appendixes. Those were presented to
25 council as co-equal documents underneath this staff

1 report.

2 17. Q. Right. The only thing is, but Peter
3 Sweeney says that what's your Exhibit B is the Final
4 Report of the PECH. So -- and he works for the region
5 so I -- you seem to be disagreeing with that?

6 A. I do disagree with him. I would say
7 he's misrepresenting himself there.

8 18. Q. Okay. Well, can we ---

9 A. Or that the region has changed its
10 stance like what they communicated to us and the
11 parties that drafted and worked on the report is
12 different than what they're communicating to the court
13 right now.

14 19. Q. Would we -- I am wondering if we can do
15 a share screen and pull up Exhibit B because I want to
16 look at what -- sorry, Exhibit A. I want to look at
17 what that says.

18 And on the first page, I'm just looking
19 under Number 2, Purpose, Issue. And it says, "The
20 purpose of this report" -- so this is Exhibit A:

21 "... Is to deliver the final report of the
22 plan to end chronic homelessness:
23 'Navigating Complexity Together' ..."

24 So isn't this report, Exhibit A, the purpose
25 of Exhibit A, to deliver the Final Report at Exhibit

1 B?

2 A. So -- just let me make sure I have the
3 -- so I would say that the purpose of the staff report
4 is to present the planned document as well as the
5 supplementary materials.

6 20. Q. Thank you. And then as it says, "The
7 Final Report of the plan to end chronic homelessness:
8 Navigating Complexity Together," that's described as
9 the Final Report of the PECH, isn't it?

10 A. So it is part of it but I do not see
11 how you can separate it from the other things that
12 were presented at the same time as co-equal appendices
13 to the staff report.

14 21. Q. Well, we can go into "co-equal" in a
15 minute but you'd accept that according to what council
16 was told, the Final Report is the document at Exhibit
17 B?

18 A. No. I do not agree with that.

19 22. Q. What council was told in this written
20 report was that Exhibit B is the Final Report. Is
21 that fair?

22 A. Council was not just presented with
23 this written report, they were also presented with
24 verbal delegations and the verbal delegations also
25 affirmed that they were co-equal documents.

1 23. Q. Okay, but that doesn't appear anywhere
2 in Exhibit A.

3 A. Okay, but I -- I'm all -- from my --
4 the best of my knowledge, they were presented as co-
5 equal documents. You can read those documents how you
6 are reading them but that's how staff repeatedly
7 communicated them to us as a core partner in this.
8 And that's how my understanding of what those
9 documents are.

10 24. Q. Okay, can we go to the Page 2 of 9?
11 And under report highlights, we can just look at the
12 first sentence. This document repeats:

13 "... The plan to end chronic homelessness, the
14 PECH Final Report: Navigating Complexity
15 Together, a roadmap to functional zero by
16 2030, attached at Appendix A ..."

17 So it's saying that Appendix A to this
18 document, Navigating Complexity Together, is the plan
19 to end chronic homelessness Final Report. Do you
20 accept that?

21 A. Fine, I accept that Navigating
22 Complexity Together is Appendix A but ---

23 25. Q. And that ---

24 A. --- further in this report, it also
25 talks about Appendix B and Appendix C. So I do not

1 see how they can be separated from being presented
2 collectively as the plan to end chronic homelessness
3 Final Report.

4 26. Q. Except that this document makes clear,
5 doesn't it, which one is the Final Report?

6 A. No, I do not think that's clear. I
7 think it says that the Navigating the Complexity is
8 Appendix A. I do not think that it is saying that is
9 the -- it is the -- all the information you the
10 information you need to understand the plan to end
11 chronic homelessness Final Report.

12 27. Q. Right, so I -- so there is some
13 supplementary materials that are filed at the same
14 time, and those are the other appendices to this
15 document, is that fair?

16 A. There were lots of materials that were
17 presented at the same time and they were -- and they
18 were communicated repeatedly to the partners; they
19 were being presented as co-equal documents.

20 28. Q. Okay ---

21 A. I can name staff if that's helpful.
22 Peter Sweeney would have communicated this as well as
23 Peter Phillips who was the plan manager at that time.
24 So these are the -- these are the communication
25 (indiscernible) from my understanding of this staff

1 report.

2 29. Q. Okay. But you're saying that that's
3 all verbal whereas this is what is in writing to the
4 council?

5 A. But council as I said, did not just
6 receive written, they also received verbal.

7 30. Q. All right. Can we -- can we go down a
8 little further because you make several references to
9 the next document in your affidavit which is the Lived
10 Expertise Working Groups, Calls to Action. And that's
11 the document that's -- that is at Exhibit C of your
12 affidavit, right?

13 A. Yes.

14 31. Q. Okay. And what I am seeing on Page 2
15 is Appendix C outlines and details the Lived Expertise
16 Working Groups, Calls to Action which are attached as
17 a "For Information Report." Do you see that?

18 A. Yeah.

19 32. Q. In other words, the Calls to Action
20 from your Lived Expertise Working Group, they are for
21 information, they are not the plan itself. Isn't that
22 the case?

23 A. I do not see how "For Information" is
24 not also part of the plan. The planning includes many
25 a pieces within it that are things that are for your

1 information, including terms of definitions, history,
2 best practices from across the country. And so this
3 document, Appendix C, is for information what lived
4 experts would have been hired by the region to comment
5 directly into this process. This is their priorities
6 and it was being presented as part of the plan that
7 council knew that this is what lived experts thought.
8 And we even talked to ---

9 33. Q. Okay.

10 A. --- in the presentation about how there
11 are different definitions between Appendix C and
12 appendix -- in this case -- Appendix A and what
13 council received Appendix B and what the court is
14 receiving now, that there will be different
15 definitions but that is okay.

16 The different definitions are for their
17 information as council to understand where staff
18 recommendations are in comparison to where the Lived
19 Expertise recommendations are. So they can understand
20 that the work of the plan to end chronic homelessness
21 is ongoing work towards what people most impacted from
22 homelessness want.

23 34. Q. Okay. So if I understand what you just
24 said, your Exhibit C, the Lived Expertise Working
25 Group was presented as these are the thoughts of those

1 with lived expertise. Is that fair?

2 A. It's for them to -- these are the calls
3 to actions from people who have lived experience who
4 ---

5 35. Q. Okay.

6 A. --- you have here to provide you their
7 analysis, and that you should consider them seriously
8 as you work on the plan to end chronic homelessness.

9 36. Q. "That should be considered seriously"
10 but council never committed to take those calls to
11 action?

12 A. No, council never committed to take
13 those calls to action. Council committed to
14 understanding those calls to action and they were
15 definitely presented in a way that made sure that
16 those calls to action are directly tied to the plan to
17 end chronic homelessness.

18 And that shows up in all the work of the
19 plan to end chronic homelessness. There is the work
20 of the 30 actions in the -- the one document and
21 there's the 30-call section in the other document.
22 And they are always presented together.

23 37. Q. Okay. And by the "one document" and
24 "the other document" ---

25 A. One document is the plan document in

1 Navigating Complexity and the other document is the
2 Lived Expertise Report.

3 38. Q. Okay. And just to sort of confirm that
4 in terms of what council was told, can we go to Page 5
5 on the screen share. And there is a paragraph that
6 starts:

7 "... The Lived Expertise Working Group worked
8 alongside the co-creator group to create
9 focus areas, etcetera, etcetera ..."

10 And I am going to take this from the second
11 sentence and, Madam Reporter, we will provide copies
12 of these if you don't have them after this to assist
13 you with the transcript. Second sentence:

14 "... In addition to providing feedback to the
15 Final Report, the Lived Expertise Working
16 Group developed a stand-alone For
17 Information Report which is included as
18 Appendix C ..."

19 And that's your Exhibit C, right? Same
20 document?

21 A. Yes.

22 39. Q. And it goes on to say:

23 "... This Final Prototyping Report brings
24 forward the voices of lived and living
25 expertise ..."

1 A. Yeah.

2 40. Q. But then it continues to say:

3 "... An important note to consider when
4 reviewing the lived expertise Final
5 Prototyping Report is that this stand-alone
6 For Information document is to be viewed as
7 complementary to the Final Report. But
8 council is not being asked to adopt the
9 actions outlined in Appendix C ..."

10 Do you see that?

11 A. Yeah, the ---

12 41. Q. But you'd agree with me that council
13 was not asked to adopt the Calls to Action and the
14 Lived Expertise Working Group document that you have
15 as Exhibit C?

16 A. At no point in my affidavit did I say
17 that council was expected to adopt the actions but
18 they were expected to read and understand those
19 actions. And know that those actions were the
20 priority actions of the Lived Expertise Prototyping
21 Group as they spoke into the plan to end chronic
22 homelessness.

23 So they might not be having to adopt those
24 actions but they have to view them as part of the plan
25 to end chronic homelessness. In terms of, they are --

1 they are the actions demanded from the Lived Expertise
2 Prototyping Group and that is our understanding of how
3 they presented to my staff and how council understands
4 them.

5 Yes, you don't have to do those -- you're
6 not -- staff is not telling you to do these actions.
7 What staff is saying is that these calls to actions
8 are things that you need to consider, and are being
9 treated as part of the -- part of the plan. They are
10 complementary to the plan; they are not separate from
11 the plan; they are part of it.

12 42. Q. Well, I think the document speaks for
13 itself.

14 A. Yes, they've used the word
15 "complementary."

16 43. Q. It does use the word "complementary,"
17 it's just, like I said at the beginning, I really just
18 wanted to clarify.

19 A. Okay. Thank you.

20 44. Q. But it isn't quite accurate to say as
21 you do in Paragraph 5 that:

22 "... Both Navigating Complexity and the Lived
23 Expertise Working Group Calls to Action that
24 both were approved by council ..."

25 Because the Calls to Action were not

1 approved by council, were they?

2 A. Well, as you can see from what you just
3 shared with me, they represented to council as key
4 information they need to consider that was treated as
5 complementary and they did it through that context.
6 So for my mind, they did approve it.

7 45. Q. Okay. Your mind?

8 A. They just did not commit themselves to
9 the actions which they were never were required to
10 commit themselves to those actions. But they were
11 committing themselves to understand those calls to
12 actions.

13 46. Q. Okay. And if we can just now go to the
14 Lived Expertise Prototyping Report, that's Exhibit C
15 to your affidavit. I see from this Page 3 of this
16 report, that there is a list of acknowledgments. And
17 the Lived Expertise Prototyping Cohort, I take it that
18 this list of names are the people who added input into
19 the writing of the Calls to Action?

20 A. Yeah.

21 47. Q. And you're ---

22 A. Yes.

23 48. Q. You're listed here as a member of the
24 cohort. And then down below that, there's also a
25 reference to:

1 "... This report benefitted from the
2 contributions of Dr. Laura Pin and Brian
3 Doucet as well as input, consultations and
4 discussions with representatives from
5 Sanguen Health Centre and WRCLS, among
6 others ..."

7 Do you see that?

8 A. Yeah, that is correct.

9 49. Q. Okay. And so, you know, the -- part of
10 the function of this -- this exhibit is to advocate.
11 Isn't that fair? This is what you should do, to
12 advocate to the region that these are perspectives you
13 should adopt?

14 A. So as I said, it was framed to --
15 through the plan to end chronic homelessness as being
16 -- and the plan to end chronic homelessness has always
17 been striving to centre lived expertise. And so this
18 document was to be the portion of the plan to end
19 chronic homelessness that most centred Lived Expertise
20 in an unfiltered way. And so, this is where the --
21 yeah.

22 So that is how this document -- I would not
23 say this document is necessarily an advocacy document
24 because it exists within the plan to end chronic
25 homelessness. But it exists to be informational to

1 the nth-degree of what lived experts want in -- in a
2 way that is unconstrained by the limitations of
3 austerity and all of the other limitations that the
4 system provides. But to make sure that those needs,
5 wants and desires are most clearly articulated because
6 they include -- so that they can best influence the
7 whole process.

8 50. Q. Okay. And so, the way you just put
9 that, you say, "that's not constrained by austerity,"
10 the region itself has to work within a budget and its
11 taxation and funding envelopes and whatever it's able
12 to get from the province and the federal government.
13 And those kinds of constraints. Is that fair?

14 A. Yes, the region -- I mean, the region
15 has those constraints. It also has flexibility and
16 more options than it chooses to use.

17 51. Q. Right. And within, like any
18 government, within what it has, it does what it can.
19 But it lives in that universe and this group, you
20 describe it as kind of "from the lived expertise"
21 point of view, this is what we want. Is that fair?

22 A. Yes, that is a fair assessment.

23 52. Q. Okay. And it's in this document that
24 we find the references to maintaining the encampments
25 until functional zero homelessness is reached?

1 A. Mm-hmm.

2 53. Q. And sorry, I should have explained at
3 the beginning, when you answer a question ---

4 A. Oh, yes. Sorry, yes. I am sorry, I --
5 I forgot about that. Yes.

6 54. Q. Yes, use "yes" or "no" because "mm-hmm"
7 comes across as ambiguous.

8 A. Yes. That's fair.

9 55. Q. Okay. And if you go to Page 11 of the
10 report -- and by "report," I mean of Exhibit C under
11 "The Goal" we've got a language:

12 "... The Prototyping Cohort envisions a region
13 where no one needs to live in an encampment
14 because there are enough adequate housing
15 options available to all ..."

16 So that's kind of the end goal. Is that
17 fair?

18 A. I mean, that is -- I mean the goal is
19 two paragraphs but, yes, that is part of -- the part
20 of the goal.

21 56. Q. Okay. And just -- just to complete the
22 circle on what you just said about it being in this
23 document, we see the language about maintaining the
24 encampment, can we please go to Page 9. It might
25 actually be easier to go to Page 8 so that we see the

1 beginning of the list.

2 So on Pages 8 and 9, we've just got a list
3 of the 30 Calls to Action that Lived Expertise Working
4 Group presented to council. Do you see that?

5 A. Yes, I see it.

6 57. Q. And it's here under 19 that you have
7 the language quoted in your affidavit:

8 "... Update the plans for the transit hub to
9 ensure the continuation of 100 Victoria
10 Street as a sanctioned encampment until
11 functional zero homelessness has been
12 achieved ..."

13 A. Yes.

14 58. Q. That's what you are asking the region
15 to consider, and you're asking the region to do?

16 A. Yeah, I would just say -- I would say
17 it's not just "we" who are asking the region for this.
18 Because this document was approved by Peter Sweeney
19 before it was submitted to council. And he had the
20 opportunity to edit language and he actually vetted
21 the language in that section. So that's also I would
22 say "we" including Peter Sweeney himself.

23 59. Q. Okay. And this is essentially a
24 consultation mechanism, isn't it? That allows the
25 perspective of lived expertise -- of people with lived

1 expertise or living expertise, to have their
2 perspectives reach council.

3 A. I mean, yes. I was hired -- this whole
4 process is hired under the frame of consultation and
5 engagement.

6 60. Q. Okay. Thank you. And just so I
7 understand "functional zero homelessness," there is a
8 definition in Exhibit C and that definition we find at
9 Page 5 of the document. And the Lived Expertise
10 Working Group defines functional zero homelessness as:

11 "... When there are enough adequate housing
12 options so that no one experiences more than
13 a year of inadequate housing with adequacy
14 defined by international human rights
15 standards. And a reference to adequate
16 housing above ..."

17 And so that's what you were referring to,
18 that your group when you -- when you called for the
19 encampment to remain open until functional zero
20 homelessness is reached?

21 A. Sorry, could I just have a point of
22 clarification.

23 61. Q. Sure.

24 A. I got distracted because you keep using
25 the term "Lived Expertise Working Group."

1 62. Q. Yeah.

2 A. And that's not the correct term for
3 this document. It is -- at the start of this
4 document, they define it as the "Lived Expertise
5 Prototyping Cohort." Which is not the same as ---

6 63. Q. Okay.

7 A. --- Lived Expertise Working Group.
8 Sorry. I got distracted by that. So could you just
9 repeat the question?

10 64. Q. Okay. And I am sorry for that
11 confusion and perhaps let's clear that up, and I'll go
12 back to the question. The "group" is described in
13 your Exhibit A as the "Lived Expertise Working Group."

14 A. So the group is described by the city
15 of -- the region's staff report as the Lived Expertise
16 Working Group. And I had never had the opportunity to
17 edit that document. But if I did, I would have told
18 them that that is a -- a misrepresentation. Because
19 the Lived Expertise Working Group is a city of
20 Kitchener body and is not the same as the Lived
21 Expertise Prototyping Cohort or Prototyping Group that
22 drafted this document.

23 65. Q. Okay. So that I should be going with
24 Lived Expertise Prototyping Cohort as it says on Page
25 3?

1 A. Yes.

2 66. Q. And you talked about Peter Sweeney
3 being part of these consultations but he's not listed
4 as an author.

5 A. No, but because this was part of the
6 plan to end chronic homelessness, it has to -- it had
7 to go through a senior staff review process before
8 being presented to council. And that is where Peter
9 Sweeney, himself, did provide feedback on the language
10 and then ultimately approved it as written before it
11 was presented to council as a co-equal document.

12 67. Q. Okay. And we have your evidence on
13 what that means and we have your Exhibit A on what
14 that means.

15 But what I -- my question then was, when we
16 see Call to Action number 19, and it talks about the
17 encampment remaining open as a sanctioned encampment
18 until functional zero homelessness has been achieved.
19 I just asked that's a reference back to the Page 5
20 definition of functional zero homelessness?

21 A. Yes. That is a reference to the
22 definition as written on Page 5.

23 68. Q. Thank you. And there is -- there is a
24 little bit more elaboration and if we go to page --
25 it's at the end, Page 28 of Exhibit A?

1 A. Okay.

2 69. Q. We've got another list of the Calls to
3 Action and that's towards the end of your Exhibit A.
4 The list starts on Page 24, I think. No, I am wrong,
5 it's Page 23 and then number 19 appears on Page 28.
6 Do you see that?

7 A. Yes, I do.

8 70. Q. But here, you've got a couple of bullet
9 points explaining. Is it fair to read those bullet
10 points as supplementing or explaining what Call to
11 Action 19 is about?

12 A. Yeah, they were -- essentially this
13 section of the Calls to Action is like the expanded
14 version. The previous one was just a -- the headings
15 and this is the full -- full explanation of what those
16 headings meant.

17 71. Q. Right, so perhaps you can just explain
18 to me from your perspective, as one of the
19 participants in the Lived Expertise Prototyping
20 Cohort, the Call to Action is repeated:

21 "... Update the plans for the transit hub to
22 ensure the continuation of 100 Vic as a
23 sanctioned encampment until functional zero
24 homelessness has been achieved ..."

25 But then that's followed by two bullet

1 points and it's the second one that I am focusing on.

2 Second bullet point:

3 "... Ensure residents are provided with
4 comparable land and supports ..."

5 Do you see that?

6 A. (Indiscernible).

7 72. Q. I think I need a "yes."

8 A. Yes, sorry.

9 73. Q. Yes, okay.

10 A. Yes, I see that.

11 74. Q. Okay. And it's fair to say, isn't it,
12 that that's there because there's a recognition that
13 it may not be possible to actually keep 100 Vic open,
14 as 100 Vic, until we reach functional zero
15 homelessness. And so there is the suggestion made
16 that well maybe you could provide comparable land.

17 A. That -- that -- that kind of comparable
18 land came forward because we were already hearing of
19 the desire from the region to close -- to close the
20 encampment for the transit -- for what they are saying
21 is the transit hub corridor. And so we were -- this
22 whole Call to Action was in the context of this
23 process of eviction that the region is -- like it has
24 always been there.

25 So it was -- it was couched on that context

1 that -- not the context that we don't think that this
2 land could be there forever. But that we know that
3 there are people within the regional structure who do
4 not want this land to be open, and are using the
5 transit hub as a framing device for that.

6 And so if they are going to be trying to
7 move this land, then they need to provide comparable
8 land.

9 75. Q. Okay, I'm not sure that -- that framing
10 device is quite what we're talking about here. But
11 I'll leave that for other witnesses and for the court.
12 But just in the chronology, so this comes out, I
13 think, is it what, about April of 2024, this report?

14 A. Oh, sorry, you were asking me a ---

15 76. Q. Yeah, I ---

16 A. Yes, this report came out in -- let me
17 actually make sure I have this accurate because ---

18 77. Q. The meeting date on your Exhibit A ---

19 A. Is April 9th, yes. It came out ---

20 78. Q. April 9th?

21 A. It went to staff on April 9th.

22 79. Q. Went to staff or went to the council?

23 A. Went to council on April 9th. It went
24 to staff before that because, as I said, Peter Sweeny
25 edited it and improved this final -- the wording.

1 80. Q. All right. And you've said in your
2 affidavit that you knew as early as February of 2024
3 that it was being suggested that the encampment may be
4 -- at 100 Vic, couldn't continue because Metrolinx and
5 the region need the property for the Kitchener transit
6 central hub?

7 A. I knew as early as February that there
8 were people discussing wanting to use the site and
9 using the language of the transit hub and Metrolinx
10 for that.

11 81. Q. Yeah, and I am not asking you to agree
12 with me that those were the facts. I am just saying
13 that that suggestion was on the table from February.
14 So when your Exhibit C, when this was drafted, you
15 knew of that as a possibility, right?

16 A. I knew that that was something that
17 there were parts of the region that -- who desired
18 that. But I also knew that there were parts of the
19 region that desired some kind of human rights approach
20 because I was in negotiations with many staff about a
21 human rights approach to encampment at that time.

22 82. Q. Right.

23 A. And even though I know there was some
24 staff that were saying that they wanted to use the
25 site and that Metrolinx was the reason they said they

1 wanted to use the site, I knew there were other staff
2 who were saying, no, David, we are committed to a
3 human rights report. And, David, can you help us
4 figure out a human rights report.

5 So this comes from both contexts. The
6 context of parts of the region that were wanting to
7 violate human rights and the parts of the region that
8 were sort of telling me repeatedly, David, we are
9 committed to human rights and we want to be a part of
10 -- we want to look at collaborative options.

11 83. Q. So David, I have to ask, you yourself,
12 have never -- you don't have any legal training, do
13 you?

14 A. No, I do not have legal training.

15 84. Q. Okay.

16 A. I am an urban planner by trade.

17 85. Q. Okay, and so, you know, you have
18 opinions on what is or isn't consistent with human
19 rights. But that's for the court to determine at the
20 end of the day. I am just going to suggest that to
21 you.

22 A. No, I would say because when it comes
23 to human rights, we work -- I work repeatedly --
24 repeatedly with Leilani Farha who is the national ---

25 86. Q. Before you (indiscernible) dump on me,

1 before you try and say, oh, no, but I've spoken to a
2 special rapporteur and I have spoken to ---

3 A. No, (indiscernible) ---

4 87. Q. --- (indiscernible).

5 A. I am on the National Working Group --
6 the National Working Group on a Human Rights Approach
7 to Encampments. So I would say I have expertise in
8 speaking on the human rights approach to encampments.
9 Even though I am not a lawyer by trade, I am a social
10 planner by trade and I work very closely with Canada's
11 meeting experts on a human rights approach to
12 encampments.

13 88. Q. David, I'm just going to suggest to you
14 and then we'll move on. I am just going to suggest to
15 you that what is or isn't consistent with human rights
16 is for the court to determine. And regardless of your
17 opinions, or even my opinions, that's a legal issue
18 for the court. Okay?

19 A. I would really ask that you stop using
20 the word "opinions" for things that are, in fact, in
21 human rights code. I even have them in my affidavit.
22 I included the National Protocol to Encampments.
23 These are facts around the human rights approach to
24 encampments. They're not opinions; they are facts on
25 what is the human rights approach to encampments.

D. Alton - 31

1 So I would ask you, please refrain from
2 stating that what is fact and has been backed by
3 multiple human rights -- so I was actually -- sorry,
4 not to go on a tangent but it is in this document. We
5 even reference multiple of the international and
6 national human rights law codes that inform this.
7 This is informed by national and international human
8 rights laws. So please stop using the word "opinion"
9 for something that is facts. You are speaking to an
10 expert on human rights approaches to encampments.

11 89. Q. No, I am not speaking to an expert and
12 that will be for the court as well to determine. You
13 are not presenting to the court as an expert. There
14 are specific procedures for putting someone forward as
15 an expert. You haven't been forward as an expert and
16 there is no such thing as an expert on a question of
17 domestic law before the courts in Canada.

18 I am just advising you of that and let's
19 move on.

20 MS. SCHIUTEMA: I am just going to interject
21 and ask that we either take a break or move
22 on at this point. David, would you like a
23 break?

24 THE WITNESS: Yeah, could I grab some water?

25 MR. LOKAN: Of course.

1 THE WITNESS: I think I'll be back in one
2 moment.

3
4 --- BREAK

5
6 THE WITNESS: I am back.

7 MR. LOKAN: Thank you.

8
9 BY MR. LOKAN:

10 90. Q. I want to go back to Call to Action 19.

11 A. Okay.

12 91. Q. Your Lived Expertise Prototyping Cohort
13 put forward, as I understand it, the alternative
14 suggestion that in light of the fact that you knew
15 that within the region some thought that the land
16 might be used for development. You put forward the
17 alternative suggestion that residents be provided with
18 comparable land and supports. Correct?

19 A. Yes, we did put forward the idea that
20 residents be put forward with -- not -- that residents
21 be -- that it be required that residents have
22 comparable land and supports if a move was to happen.

23 92. Q. Okay. And that was an acceptable
24 alternative to the Lived Expertise Prototyping Cohort
25 as the time?

1 A. Yes, having comparable land and
2 supports was seen as an acceptable alternative.

3 93. Q. Okay. And you would acknowledge that
4 at least on the trajectory of the last few years, it's
5 probably going to be some time before the Region of
6 Waterloo, the geographic area Region of Waterloo,
7 reaches functional zero homelessness?

8 A. Yeah, I would agree. I was just --
9 just yesterday, regional staff shared with me the
10 latest PiT Count numbers and it said that, and
11 informed me, that Waterloo region has the second
12 highest rate of homelessness in the province.

13 94. Q. And also yesterday or maybe the day
14 before yesterday, didn't Toronto release its figures
15 on the count of homelessness in the Toronto region?

16 A. Yes. And that's where the report --
17 the -- I was using the amended information that the
18 region gave me. Original staff originally said that
19 Waterloo region had the highest rate of homelessness.
20 And now that Toronto has released theirs, we have the
21 second highest rate of homelessness.

22 95. Q. And it has the same doubling of the
23 homeless population over the last, say, approximately
24 four years. Toronto has that same set of numbers as
25 the Waterloo region. Is that fair?

1 A. I mean, I did not open up the document
2 and read all of what Toronto has said. So I can't
3 speak to what Toronto's numbers are.

4 96. Q. Okay. Does the Social Development
5 Centre have links to advocates for people experiencing
6 homelessness in other parts of the province?

7 A. We have links to lived experts and --
8 and academics from across the province, and actually
9 the country.

10 97. Q. Okay, and so there is probably
11 something of a network and you would generally keep up
12 with the developments in this area elsewhere outside
13 of the region. Is that fair?

14 A. Well, as I mentioned, I am a member of
15 the National Working Group on a Human Rights Approach
16 to Encampments. So, yes, I do talk to people from
17 across the country on what is -- what are the
18 developments in human rights approaches to
19 encampments.

20 98. Q. And would you say you are generally
21 aware of the conditions elsewhere in Ontario in the
22 area of homelessness?

23 A. I would say that my expertise in those
24 meetings is to speak from what I see on -- in
25 Waterloo. And so I would -- like my understanding of

1 what is going on in Waterloo region is far greater
2 than my understanding of what those conditions look
3 like in other municipalities. But I do hear from
4 academics, from lived experts in other municipalities.

5 So I have -- they're hearsay but I do not
6 have the same depth of understanding that I do for
7 Waterloo region.

8 99. Q. Okay, and that's fair enough. I am
9 wondering if we can go to your Exhibit B, please? So
10 this is the Navigating Complexity Together document.

11 A. Mm-hmm.

12 100. Q. And I am going to ask you to turn to
13 Page 65, please. I don't think that's the right
14 document. Exhibit B, Page 65 of the document. Here
15 we are, we have arrived. So this is part of
16 Navigating Complexity Together and I see at the bottom
17 of Page 65 a bit of a description of the resources
18 that the region has devoted to combatting
19 homelessness.

20 And it's the last sentence that I am going
21 to ask you about. The plan says, "This level" --
22 sorry, the report says:

23 "... This level of municipal commitment to
24 homelessness and affordable housing is
25 unique when compared to other regional

1 governments and system service managers in
2 Ontario ..."

3 And I take it you don't disagree with that?

4 A. I can't really comment on that. I have
5 not observed the financing of other municipalities in
6 Ontario. I can -- and the kind of feedback I'm
7 getting is not on the financing of other
8 municipalities in Ontario.

9 101. Q. Okay. If we can go to Page 66, the
10 following page. You would agree, would you, with what
11 it says in the middle of the page, just under the
12 chart:

13 "... The staggering investment needed to
14 address this growing crisis is required from
15 all sectors and levels of government. To
16 achieve an end to chronic homelessness in
17 Waterloo region, a deepening of commitment
18 and engagement is needed from all levels of
19 government, public and private sector and
20 key system partners, healthcare, mental
21 health and addictions, justice, etcetera.
22 This shared community challenge is not to be
23 owned or solved by one order of government
24 in isolation ..."

25 I mean, that's totally fair, isn't it?

1 A. I would -- I think it is definitely
2 fair to ask other levels of government to assist in
3 this problem. But I do not think that the lack of
4 funding from other governments is justification for
5 the violation of people's human rights by any level of
6 government.

7 So if the other -- even if -- in my opinion
8 -- and this is my opinion, this is not fact. My
9 opinion is that like human rights needs to be upheld
10 and if the other levels of government are not going to
11 pay, then whatever level of government, the
12 municipality has to pay it off. Because to violate
13 human rights is far worse than to pay for this.

14 So -- but I do agree that, you know, it is
15 good for the other levels of government. They all
16 share this responsibility but just because they're not
17 all needing this responsibility does not mean they all
18 don't hold it to its fullest. Like every level of
19 government, in my opinion, is responsible to pay the
20 full amount for keeping people's human rights
21 protected.

22 And it doesn't matter if different levels of
23 government are failing on that. The region still has
24 a responsibility to that full amount. It would be
25 great though if all levels of government were at that

1 same -- were all contributing to the same amount or
2 contributing to that amount.

3 102. Q. So it's your position that the region
4 has to make the staggering investment needed to
5 address the growing crisis all by itself if the other
6 governments and the other sectors don't participate?

7 A. Yeah ---

8 MS. SCHIUTEMA: I am going to object to this
9 question, Andrew. I think it's outside the
10 scope of the affidavit. And I think it's
11 beyond the relevance of what's within
12 David's affidavit.

13 MR. LOKAN: Just as a point of evidence,
14 Ashley, it's our position that you are not
15 confined to the four corners of the
16 affidavit when cross-examining. It's any
17 issue that's relevant on the motion.

18 MS. SCHIUTEMA: I think that David's
19 indicated that this is outside of the scope
20 of what -- he indicated this is his opinion.
21 This is beyond the facts that he's giving
22 evidence on today.

23 MR. LOKAN: Okay, and as I heard it, it was
24 an opinion on what human rights require. Is
25 that fair?

1 MS. SCHIUTEMA: It's an opinion that's
2 beyond what is facts that are set out in his
3 -- in their affidavit.

4 MR. LOKAN: Okay.

5
6 BY MR. LOKAN:

7 103. Q. Can we go to Page 74? And just so I
8 understand something in this report. There is a lot
9 of sidebars on the left-hand side and as I understand
10 it -- and David, I think this is consistent with what
11 you were saying earlier -- the sidebars indicate
12 points on which the Lived Expertise Prototyping Cohort
13 has had input. Is that right?

14 A. Yeah, in kind of lieu in supporting the
15 comparable, the co-equal document narrative that staff
16 framed this as to me that these bars are to show where
17 these two documents are aligned to help council
18 understand how much -- how -- where it is -- how close
19 they can get to what lived experts have put forward.

20 So this is the parts of the one appendix
21 that are supported by the other appendix.

22 104. Q. Okay. Now you would then agree then
23 with the -- in the middle of the page, the third
24 bullet point that says:

25 "... Homelessness is a wicked problem meaning

1 that it is highly complex ..."

2 A. Yes, homelessness is highly complex.

3 105. Q. And it's "a wicked problem?"

4 A. Yes, it is.

5 106. Q. Very difficult to solve; isn't that the
6 case?

7 A. Yes, it is. It is difficult to solve.

8 107. Q. Okay. You gave a presentation to the
9 council on April 23rd, the day that the bylaw was
10 passed?

11 A. Yes, I did.

12 108. Q. And I am just going to pull up the
13 minutes from April 23rd and ask you to have a look at
14 them. And what these minutes indicate is the
15 deputations that were made to the council at that
16 meeting. And if we can go to Page 4 ---

17 MS. SCHIUTEMA: Can you just clarify which
18 exhibit you're on, Andrew, please?

19 MR. LOKAN: It's not an exhibit. This is a
20 ---

21 MS. SCHIUTEMA: Okay.

22 MR. LOKAN: --- document otherwise in the
23 record.

24 MS. SCHIUTEMA: Okay.

25

1 BY MR. LOKAN:

2 109. Q. I am just going to ask you to look at
3 number 9.7 there. So you're recorded, David, as
4 saying that you appeared on behalf of the Social
5 Development Centre of Waterloo region and the Lived
6 Expertise Program, noting that they were a key partner
7 in the plan to end chronic homelessness. Do you see
8 that?

9 A. Yes, I do.

10 110. Q. And you agree that that's something
11 that you said?

12 A. I wish had been informed of this so I
13 could have had my -- because I typed up my whole
14 speech that night. But -- so I am -- I don't have my
15 written speech on record. But I definitely will say
16 that I spoke on behalf of the Lived Expertise Program
17 and that -- and I would -- did say that the Lived
18 Expertise Program is a key partner of the plan to end
19 chronic homelessness.

20 111. Q. Okay. Did you also state that 100
21 Victoria Street was identified as a priority during
22 the drafting of the plan?

23 A. That would have been one of the things
24 I said in that report -- that presentation. But it
25 was interesting because my presentation was primarily

1 actually presenting research that we had done that day
2 of -- in Cameron Residence. So the bulk of my
3 delegation that night was not about what was in the
4 plan to end chronic homelessness, that was just a
5 preamble.

6 The bulk of my delegation that night, was
7 about the direct opinions of 100 Victoria and Cameron
8 Residence upon hearing about news of the bylaw and
9 upon seeing five dumpsters and the portables set up on
10 the location.

11 That was the primary intent and the primary
12 focus of that delegation. So I am surprised that
13 staff recorded it in this way because that -- those
14 comments are only in my preamble and not the bulk of
15 what I was talking about that night.

16 112. Q. Okay. So as I understand what you just
17 said, you agree that you said the things that are
18 recorded here. But you also said other things?

19 A. Yeah, that the bulk of my presentation
20 was actually on the voices of 100 Victoria residents
21 themselves.

22 113. Q. Okay. Do you agree that you called on
23 the region to update the plans for the transit hub to
24 ensure that the site can stay as a sanctioned
25 encampment, work with Metrolinx and the province to

1 ensure that residents are provided with comparable
2 land and send it back to the PECH co-creators
3 community?

4 A. I mean, again, if I would be better to
5 -- for the exact wording, we would need the written
6 copy of my delegation which I have. But what I would
7 say is that it did not call on them. I reminded of
8 them of the Call to Action that they already saw in
9 the plan to end chronic homelessness.

10 So it wasn't even a new call, it was a
11 reminder of something that they had already seen.

12 114. Q. But you accept that you made reference
13 to providing comparable land?

14 A. Yes.

15 115. Q. Okay. Thank you. So I am going to ask
16 you, David, had you ever seen the minutes of the April
17 23rd meeting before?

18 A. No, this is the -- my first time seeing
19 the minutes.

20 116. Q. Okay. So Ashley, if you're there, I'm
21 in your hands as to whether we mark this as a lettered
22 exhibit or if we simply have the portions that I read
23 into the record that David agreed, reflect part of
24 what he said and just leave it at that?

25 MS. SCHIUTEMA: I think we put this in as

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1 our responding record. So I think it's -- I
2 don't know if we put in the minutes or the
3 agenda. Let's put in the -- what David has
4 committed to, just those portions.

5 MR. LOKAN: Okay. Well, they're on the
6 transcript so I don't think I need to make
7 this document an exhibit. But I am happy to
8 make it a lettered exhibit if that makes
9 sense to you.

10 MS. SCHIUTEMA: Sure. For ease of
11 reference, that's probably the easiest thing
12 to do.

13 MR. LOKAN: Okay, so we're going to call
14 this Exhibit A to the cross-examination,
15 Madam Reporter.

16
17 EXHIBIT NO. A: Cross-examined portions re Minutes
18 of Meeting on April 23, 2025

19
20 BY MR. LOKAN:

21 117. Q. I want to go, if I can now, David, to
22 Paragraph 8 of your affidavit.

23 A. Okay.

24 118. Q. And here is where you describe the
25 chronology we talked about a bit earlier. You say you

1 were called into a private meeting with senior region
2 staff who disclosed to you that there was a six to
3 eight-month timeline to close the encampment so
4 Metrolinx development could begin. And you told
5 region staff that you felt there was a path forward
6 for the encampment to no longer be located at 100 Vic
7 and without intense disruption from key stakeholders.
8 And you explained that an alternative location and
9 meaningful process for relocation were necessary.

10 So this is all just to remind you of what
11 you said in your affidavit, okay?

12 A. Yeah.

13 119. Q. And it sounds like you then helped
14 convene a meeting and you described that in Paragraph
15 9?

16 A. Yes, I -- I helped convene but it was
17 my understanding that the region was going to be
18 facilitating this meeting. And that this meeting
19 would be the beginning of a series of processes. But
20 there was -- I -- how do I say this? The -- so I was
21 surprised at the day of the meeting when there was --
22 the region did not come with a prepared facilitation
23 or prepared to negotiate.

24 So that's where that meeting -- I assisted
25 in the development but from my understanding, this

1 meeting was to be -- be led by the region. And it
2 felt like, at the time, that the region was like
3 defaulted a lot of the responsibilities onto me
4 without fully communicating that to me which was
5 disappointing at the time.

6 120. Q. So it was disappointing to you and it
7 sounds like it was -- it was more from the region's
8 point of view of let's hear some perspectives rather
9 than let's negotiate how we might do this. Is that
10 fair?

11 A. I am trying to think what is the
12 fairest, just the way to -- like how all of this
13 started was on the 17th they told -- informed me of
14 this. I told them that I (indiscernible) the path
15 forward was possible, but that they would need to get
16 buy-in from these five stakeholders.

17 121. Q. Okay.

18 A. And that -- but when it -- I was -- I
19 was expecting there to be more preparations before the
20 meeting actually happened.

21 122. Q. Okay, and you said ---

22 A. To clarify all of these intentions of
23 what the meeting was.

24 123. Q. Okay. And you said 17th but I think you
25 might have meant February 14th?

1 A. Yes, sorry. February 14th, sorry, I
2 misread.

3 124. Q. Yeah, no problem. Now the five key
4 stakeholders that you mention are Fight Back KW, the
5 Unsheltered Campaign, WRCLS, the Working Centre and
6 Sanguen Health Centre. And those are the groups that
7 you thought would be most helpful in having that
8 discussion?

9 A. They were the five groups that I were
10 aware of that were most present at the site and would
11 have the most credibility with the residents of that
12 site.

13 125. Q. Okay. So I -- obviously, we know who
14 the Waterloo Region Community Legal Services is. The
15 Working Centre, the Working Centre is a -- is it a
16 shelter-like facility?

17 A. No, the Working Centre is a multi-
18 service agency. But the reason I suggested them is
19 because the Working Centre has three outreach workers
20 that do go to 100 Victoria. And also the Working
21 Centre operates a building across the street from 100
22 Victoria that has (indiscernible) -- is that word,
23 ancillary, like supports.

24 126. Q. Ancillary supports.

25 A. Yeah, ancillary supports across the

1 street. So that is my -- I thought the Working Centre
2 would be appropriate to attend.

3 127. Q. Okay. And the Sanguen Health Centre is
4 a health centre that provides health services to some
5 residents?

6 A. Yeah, they are a mobile -- they are a
7 mobile health team. And they bring -- they have
8 workers that go into encampments to connect people to
9 health services.

10 128. Q. Okay. And Fight Back KW, who are they?

11 A. So Fight Back KW is a mutual aid group
12 and advocacy group that is focused on direct action
13 mutual aid supports and has been very present at the
14 encampments since it first formed.

15 129. Q. And what do you mean by "direct
16 action?"

17 A. Direct action, for example, means like
18 showing up on-site, bringing water bottles and
19 cigarettes and building those relationships with
20 people on-site. So it's like being directly on the
21 site building relationships with people directly on
22 the site. And then doing actions on the site.

23 So, for example, actions could be assisting
24 with setting up a tent or, you know, communicate --
25 acting as an intermediary between residents and like a

1 -- like the maintenance people who put a dumpster
2 there.

3 130. Q. And where do they get their name from?
4 If you don't know, that's fine.

5 A. No, I actually do know. So they --
6 well, actually, no. I know -- so there are two Fight
7 Backs that are well-known in the -- in the "activist"
8 world and the other Fight Back is very different than
9 this Fight Back. The other Fight Back is this like
10 radical, communist group thing.

11 And so this Fight Back does not associate
12 with that Fight Back. This Fight Back is focused on
13 mutual aid and direct action. And was formed
14 independently from my understanding.

15 131. Q. And that -- how many people are in what
16 you call this Fight Back, Fight Back KW?

17 A. I have no idea. I only know members of
18 Fight Back; I do not know the full membership because
19 I have never attended a Fight Back meeting.

20 132. Q. Okay, so which members do you know?

21 A. So the member that I most communicate
22 with is Wren Wombwell. Other than that -- oh, and
23 then I also know a woman who does -- I don't -- like
24 it's kind of -- this is where I don't think like an
25 organization like Fight Back from my experience as an

1 outside observer, I don't know if it has like a
2 hardline membership structure. Because like there are
3 -- I know lots of people who have done -- who had been
4 around Fight Back but it's hard to know what hat
5 they're wearing at the time. And it seems like there
6 is -- a lot of people I mostly know through face or
7 when I like show up to get -- at the -- at 100
8 Victoria to talk to lived experts that I am on the
9 look for.

10 So the one I know most is Wren, otherwise
11 it's like it's hard to know who is a member of Fight
12 Back and who is not a member of Fight Back. I'm not
13 privy to all of that information.

14 133. Q. Okay. You say in your affidavit that
15 there was a meeting and you framed this meeting --
16 this is Paragraph 10, as:

17 "... An initial meeting to begin the process
18 for discussing the conditions for removing
19 the encampment ..."

20 What were those conditions?

21 A. Well that is what -- I was not the
22 holder of what those conditions were. That was -- I
23 was literally the convenor of the meeting. So the
24 region -- I informed the region that I believed that
25 these groups themselves would have those conditions.

1 And I believed that the region themselves would have
2 had some conditions. And so that's where -- in the
3 meeting that happened on February 14th, it was my
4 understanding, you know, okay, we're going to bring
5 everyone together and we can talk about what are these
6 conditions.

7 However, on the meeting that happened on
8 March 7th, the region did not come with their
9 conditions, they came with a -- with a fully fleshed-
10 out plan. Like things that had already been decided
11 and they were not -- so then it was confusing. I can
12 -- I can reflect back some of the things that are
13 parties said if that is of your interest.

14 134. Q. It is and I am looking at Paragraph 11
15 where you say that:

16 "... At the March 7 meeting, the stakeholders
17 communicated their conditions ..."

18 A. Okay.

19 135. Q. But the conditions that you recall, you
20 were at the meeting, what conditions do you recall if
21 it (indiscernible)?

22 A. I can ---

23 136. Q. I want to be -- I do want to be fair to
24 you, David. If it helps you to look at the meeting
25 notes which are your Exhibit A, I am happy for you to

1 do that.

2 A. Oh, yes. The meeting notes. I will
3 say for sure that the first clear condition was
4 brought forward by Community Legal Services and that
5 was a condition that it would have to follow the --
6 the human rights approaches indicated by the previous
7 court case, like it would have to be compliant with
8 the previous court case.

9 And that because the -- because -- and this
10 is where it was -- it was -- it wasn't -- because the
11 region came with a predetermined decision already
12 made, like it changed the whole energy of the meeting.
13 Right? Because then stakeholders weren't like --
14 weren't able to, you know, be like, okay, if you are
15 -- as we work towards this goal, this is what we need
16 to pay -- pay in mind.

17 The region was like, this is already -- this
18 is what's happening. And so everyone that -- else was
19 like essentially being like this plan is bad. This
20 plan is not compliant with the court case; this plan
21 is not compliant with the human rights approach. And
22 that -- the people on the encampment and other
23 community partners would be resisting this direction.

24 137. Q. Okay. So you'd have to modify then
25 what you said in Paragraph 11 where you said that the

1 stakeholders communicated your conditions, what you
2 really meant is the stakeholders, other than WRCLS
3 that you've mentioned, really, they said that they
4 communicated their criticisms.

5 A. Yeah, I think that is a fair edit of
6 what is in my affidavit, that because the region did
7 not come -- as I said, I was disappointed that the
8 region did not come -- so wait.

9 But actually, sorry. The -- that sentence
10 though:

11 "... The stakeholders communicated their
12 conditions and agreed there would need to be
13 a process to negotiate it ..."

14 That was like before the meeting, like that

15 ---

16 138. Q. But what were conditions were
17 communicated before the meeting?

18 A. Well the conditions were there would
19 need to be -- this -- like a lot of things that you've
20 heard already today. They would have to be human
21 rights compliant. It would have to follow the court
22 case.

23 It'd have to -- and have meaningful
24 consultation, that the -- any housing offers would
25 have to be stable, that it would have to factor in the

1 entire homeless -- homelessness population, and that a
2 comparable -- until those other conditions are met,
3 meet, a comparable location would be required. Sorry,
4 I didn't mean to read that so fast.

5 139. Q. No, sorry, were you reading that from
6 somewhere?

7 A. No, sorry, that was from my memory.

8 140. Q. Okay. So just explain if you can that
9 point about it would have to -- it would have to be
10 for the entire homeless population.

11 A. So something -- this is something that
12 is laid out in the initial court case, is that -- or
13 in the ruling by Justice Valente. And it's also
14 something that is in compliance with pretty much every
15 human rights protocol that I am aware of, that you
16 cannot -- you should not signal, like provide targeted
17 -- provide targeted supports to just remove one
18 encampment when there are people throughout the whole
19 housing system who may need that encampment. And if
20 they are not -- just because they're not at that
21 encampment now because -- does not mean that they
22 might not need something like an encampment because
23 their needs are not met.

24 So you have to provide needs to the whole
25 population which is why the PiT Count matters so much,

1 it's why --

2 141. Q. Right.

3 A. --- this whole -- and that's something
4 that Justice Valente was also in agreement with. That
5 the region was -- is not able to just do housing
6 offers for whatever they count, a certain amount of
7 people at a certain date and that's enough.

8 The population of an encampment is dynamic
9 and there is far more people within the system who
10 need supports like encampments. And so to shut down
11 an encampment is not just in violation of those people
12 in the encampment but also everyone else within the
13 system who an encampment is a preferable option to
14 whatever dangerous conditions they are currently
15 living in.

16 142. Q. Okay, if I understand what you just
17 said, it was conveyed to the region as one of the
18 conditions that would have to be met that you would
19 have to -- before you could close the encampment, you
20 would have to provide for the entire homeless
21 population according to the most recent point in time
22 count which was approximately 2,300. Is that right?

23 A. I would say it was reminded to the
24 region because this is -- this is referencing like
25 conditions that they have already been informed with

1 from the previous court case.

2 143. Q. Right, and I understand and I know the
3 passage you were referring to the in Valente decision.
4 But I am just, factually, whether or not that, you
5 know, what the status of that is ---

6 A. That was -- oh, yes, that was conveyed
7 to the region again at that meeting as a reminder.

8 144. Q. That before you could close the
9 encampment you would need to provide for the 2,300
10 homeless population in the region?

11 A. Yes.

12 145. Q. Okay.

13 A. Or ---

14 MS. SCHIUTEMA: Just to clarify ---

15
16 BY MR. LOKAN:

17 146. Q. Or? Go ahead. Yeah, I don't want to
18 cut you off. Or...?

19 A. Or provide comparable locations, right?
20 So like that specific encampment matters not in
21 location -- but, the location matters because of its
22 proximity but what matters is the -- the -- it is a
23 space that is -- that is proximate to services that
24 people can go to.

25 So there could be a different location but

1 those principles are what matters. It's a space that
2 is proximate to services and it is a space that people
3 can go to for refuge when there is nowhere else to go.

4 147. Q. Now is that a common position of the
5 five key stakeholders that ---

6 MS. SCHIUTEMA: I'd like to make a point of
7 clarification for just a second, Andrew.
8 And you can decide whether or not it's
9 allowed. But we didn't have that 2,300
10 number at this meeting. That's the most
11 recent point in time count. But ---

12 MR. LOKAN: Okay.

13 MS. SCHIUTEMA: Okay.

14 MR. LOKAN: And you may have been working
15 with the previous which was about, what,
16 1,100?

17 MS. SCHIUTEMA: Yes.

18 MR. LOKAN: Okay. Thank you.

19
20 BY MR. LOKAN:

21 148. Q. And was that a common position in terms
22 of conditions, David, for all five of the key
23 stakeholders? Fight Back KW, Unsheltered Campaign,
24 WRCLS, Working Centre and Sanguen Health Centre?

25 A. I would say that I sensed an

1 understanding they shared that. I am actually
2 surprised a little bit that they shared a resound -- a
3 common result in -- in that meeting and in their
4 approach to the encampment.

5 149. Q. Okay. You didn't personally hear, or
6 did you hear, Mr. Sweeney called a Nazi in that
7 meeting?

8 A. Oh, I heard Mr. Sweeney called a Nazi
9 in that meeting, yes.

10 150. Q. And who was that by?

11 A. That would have been by Wren who is a
12 representative of Fight Back at that meeting.

13 151. Q. Okay, thank you. And if we go to the
14 notes of the meeting which is your Exhibit E, we have
15 a list of attendees. And I just see and hopefully
16 Madam Reporter sees this as well, that the name you
17 have been referring to, "Wren Wombwell," is spelled
18 out there. So that's the person from Fight Back KW?

19 A. Yeah, Wren was there representing Fight
20 Back KW.

21 152. Q. Were there any of others in that list
22 of names from Fight Back KW?

23 A. At that meeting, no, none of those
24 names are -- were representing Fight Back KW.

25 153. Q. And so if we look under "Discussion

1 points from community groups," the second bullet point
 2 and -- sorry, the print is pretty tiny here. I am
 3 just going to read it for the record:

4 "... Need to solve some of the core issues and
 5 have concrete plans with resources,
 6 otherwise residents won't leave and Fight
 7 Back isn't leaving either. Fight Back won't
 8 let the site be limited and will reside
 9 there themselves if they have to. Human
 10 life is more important than transit ..."

11 Is that something that Wren has said?

12 A. Well, that's not a direct quote.

13 154. Q. It's a summary of what Wren said.

14 A. Yeah, I think what Wren was
 15 communicating is that Fight Back has a commitment to
 16 -- like as I said, they're mutual aid and so they have
 17 a commitment to the residents of 100 Vic. And so as
 18 you can see, Wren is saying if you don't have concrete
 19 plans with resources, i.e., comparable land, or
 20 adequate housing for the entire homelessness
 21 population, residents won't leave. And so Fight Back
 22 is not going to leave either.

23 I do remember Wren saying to -- essentially
 24 that they would -- like, you know, they -- Fight Back
 25 would stay there as long as any residents would be

1 there.

2 155. Q. And so there's -- I mean, it goes a
3 little further than just "being there." Isn't there a
4 suggestion of civil disobedience there, they'll
5 refuse to leave even if legal measures are taken?

6 A. Well, I guess, that's kind of what we
7 -- I guess -- and that goes beyond my scope of
8 knowledge in terms of like what is and isn't
9 considered civil disobedience. And, you know, Fight
10 Back is saying that they will stay there as long as
11 residents are staying there.

12 So if the region is saying that they are
13 going to criminalize those residents, Fight Back is
14 saying we will be criminalized with them. That is the
15 region's decision to criminalize -- anyone who is on
16 the site.

17 So I don't know if that's really civil
18 disobedience in a -- or is that a choice of the region
19 to violate the human rights of residents. Like I
20 think it really depends on what perspective you are
21 coming to this situation. I am not an expert on what
22 is and isn't civil disobedience.

23 156. Q. So was the suggestion, as you
24 understood it, that they would resist leaving?

25 A. I understood that they would stay as

1 long as people would stay.

2 157. Q. Okay. Even if the police are called,
3 even if trespass notices are issued, even if there is
4 a court order?

5 A. I guess that really is dependent upon
6 the -- like these are all decisions that the region is
7 making to unsheltered community members. And so it's
8 -- like I don't -- it feels weird what you are saying.
9 You are saying if the region is choosing to violate
10 these human rights of these residents, then isn't it
11 Fight Back's like, you know -- and Fight Back's
12 resisting. Fight Back is just there with the
13 residents experiencing what the residents are
14 experiencing. It is the region that is criminalizing
15 that situation.

16 158. Q. Would you agree that civil disobedience
17 or resisting being moved out would be on brand for
18 Fight Back KW? Isn't that what they do?

19 MS. SCHIUTEMA: I think -- I don't know if
20 this is an appropriate question for David.
21 David has indicated that they're not a
22 member of Fight Back. I think maybe this is
23 a question for one of the members of Fight
24 Back that you're cross-examining, Mr. Lokan.

25 THE WITNESS: That's fair.

1 BY MR. LOKAN:

2 159. Q. In your experience, if you are able to
3 answer, if you're not, that's fine.

4 A. Yeah, I can't say what Fight Back's
5 intention were. All I know is that Fight Back is a
6 mutual aid group and they were saying that they will
7 provide mutual aid as long as there are people there.

8 160. Q. They said, the recorder is saying is
9 they won't leave as long as there are residents there.

10 A. I don't see the difference between
11 those two sentences.

12 161. Q. Okay. Thank you, David, those are my
13 questions on the cross-examination.

14 A. Okay.

15 MS. SCHIUTEMA: I might take a minute. Is
16 it okay if I just take a minute and decide
17 if I have any redirect?

18 MR. LOKAN: Sure.

19 MS. SCHIUTEMA: Thanks. Thank you, I don't
20 think we have -- we don't have any redirect
21 for David.

22 MR. LOKAN: Okay, thank you. Are we off
23 record now?

24
25 --- ADJOURNED

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THIS IS TO CERTIFY that the foregoing
is a true and accurate transcription of
my recordings and notes, to the best of
my skill and ability.



Barbara A. Pollard
Certified Court Reporter

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and accordingly are in direct violation of Ontario
Regulation 587/91, Courts of Justice Act, January 1,
1990.

EXHIBIT “A”

Regional Council Minutes

April 23, 2025, 5:30 p.m.
Council Chambers/Electronic



Members Present: K. Redman, D. Craig, J. Erb, S. Foxtton, C. Huinink, C. James, J. Liggett, D. McCabe, J. Nowak, M. Rodrigues, N. Salonen, S. Shantz, B. Vrbanovic, P. Wolf

Members Absent: M. Harris, K. Williams

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1. Call to Order

Regional Chair K. Redman called the meeting to order at 5:30 p.m.

2. Land Acknowledgement

Regional Chair K. Redman provided a land acknowledgement.

3. Motion to go into Closed Session

Regional Chair K. Redman noted that there was a need for two additional items in the closed session regarding receiving advice that is subject to solicitor-client privilege related to a by-law, and personal matters regarding an identifiable individual.

B. Vrbanovic joined the meeting at 5:33 pm.

N. Salonen joined the meeting at 5:33 pm.

Moved by J. Erb

Seconded by J. Nowak

That a closed meeting of the Council be held on April 23, 2025 at 5:35 p.m., in the Waterloo County Room, in accordance with Section 239 of the “Municipal Act, 2001”, for the purposes of considering the following subject matters:

1. Receiving advice that is subject to solicitor-client privilege related to the *Community Care and Recovery Act*; and
2. Personal matters about an identifiable individual;
3. Receiving advice that is subject to solicitor-client privilege related to a by-law;
4. Personal matters about an identifiable individual.

In Favor (13): K. Redman, D. Craig, J. Erb, S. Foxtton, C. Huinink, C. James, D. McCabe, J. Nowak, M. Rodrigues, N. Salonen, S. Shantz, B. Vrbanovic, and P. Wolf

Carried (13 to 0)

4. Motion to Reconvene into Open Session - 7:00 p.m.

J. Liggett joined the meeting at 7:05 pm.

D. McCabe left the meeting at 7:06 pm.

Moved by S. Shantz

Seconded by C. Huinink

That Council reconvene into Open Session.

In Favor (13): K. Redman, D. Craig, J. Erb, S. Foxtton, C. Huinink, C. James, J. Liggett, J. Nowak, M. Rodrigues, N. Salonen, S. Shantz, B. Vrbanovic, and P. Wolf

Carried (13 to 0)

5. Declaration of Office - Regional Councillor Matt Rodrigues

M. Rodrigues signed the declaration of office.

6. Declarations of Pecuniary Interest under the “Municipal Conflict of Interest Act”

None declared.

7. Presentations

Doug Spooner, Acting Commissioner, Transportation Services introduced a presentation, which was attached to the agenda, on the Kitchener Central Transit Hub (KCTH) noting that it is a key piece of infrastructure for integrating various

modes of transit to boost economic impact. He provided an overview of the next phase of work and explained that Metrolinx requires access to 100 Victoria Street North for construction on the rail corridor by December 1, 2025.

Peter Sweeney, Commissioner, Community Services provided an overview of the work that will be done, and additional resources that will be available, to create individual plans for the residents on the site to assist them with finding housing. Fiona McCrea, Acting Regional Solicitor, explained that a site specific by-law is being presented for Council's consideration noting that staff will be seeking approval from the court following approval of the by-law.

8. Petitions

There were no petitions.

9. Delegations

9.1 Chloe Young, Waterloo

C. Young provided a presentation, that is attached to the agenda, speaking to the Auditor General's report on the opioid crisis. She spoke in support of consumption and treatment sites, noting that they treat health issues and encouraged Council to support sending a letter to the province.

D. McCabe joined the meeting at 7:15 pm.

9.2 Anne Loeffler, New Hamburg

A. Loeffler provided a presentation, that is attached to the agenda, outlining concerns with soil erosion on the farm that was purchased by the Region in 2024 for the Wilmot land assembly. She explained that the removal of the corn crop caused soil erosion damage and stressed that this soil is getting into the river system through catch basins. She called on the Region to take immediate action to address the issue and to lead by example and protect the environment. A. Loeffler provided additional pictures of the property that are attached to the minutes.

In response to a question from Council, Rod Regier, Commissioner, Planning, Development & Legislative Services, confirmed that staff will look into the issue and follow up with Council.

9.3 Krista Straus, New Hamburg

K. Straus appeared before Council in support of farmers in Wilmot Township, noting that they are good stewards of the land and are Ontario businesses producing products for Ontario consumers. She stressed that

it is prime agricultural land and the land assembly will set a dangerous precedent for other farming areas. K. Straus encouraged Council to protect the countryside line.

9.4 Sidney MacDonald, Kitchener

K. Straus appeared before Council in support of farmers in Wilmot Township, noting that they are good stewards of the land and are Ontario businesses producing products for Ontario consumers. She stressed that it is prime agricultural land and the land assembly will set a dangerous precedent for other farming areas. K. Straus encouraged Council to protect the countryside land.

9.5 Megan Walker, Kitchener

M. Walker appeared before Council noting that people live at the 100 Victoria Street encampment because it is their only recourse. She expressed concerns with the plan to transfer people, further noting that there are not enough shelter spaces for people and a lack of transparency with the by-law.

9.6 Andrew Reeves, Kitchener

A. Reeves appeared in opposition to the site-specific by-law noting that people are using the encampment as a last resort. He highlighted that security staff on the site have already been working to enforce the by-law and it appears that decisions have already been made to bypass the Valente decision. He stressed that Council does not need to choose between human rights and transit.

9.7 David Alton, Social Development Centre of Waterloo Region

D. Alton appeared on behalf of the Social Development Centre of Waterloo Region and the Lived Expertise Program, noting that they were a key partner in the Plan to End Chronic Homelessness (PECH). D. Alton stated 100 Victoria Street was identified as a priority during the drafting of the Plan. They called on the Region to update the plans for the transit hub to ensure the site can stay as a sanctioned encampment, work with Metrolinx and the province to ensure that residents are provided with comparable land, and send it back to the PECH co-creators community.

9.8 Jacara Droog, Kitchener

J. Droog spoke in opposition to the by-law contending that it violates the Valente decision and the residents' human rights. She stressed that the

Region does not have enough shelters specifically for women, gender diverse, and disabled individuals. J. Droog encouraged Council to refer it back to the co-creators table.

9.9 Heather Majaury, Kitchener

H. Majaury spoke against the proposed by-law noting that it is not consistent with human rights or the Region's Plan to End Chronic Homelessness. She stressed that the by-law is scapegoating homeless individuals and criminalizes the most vulnerable members of the community.

9.10 Laura Pin, Wilfrid Laurier University

L. Pin appeared before Council as a researcher on municipal policy responses to encampments and a member of the co-creators table of the PECH. She raised specific concerns with the content and lack of input on the by-law from residents or organizations; and stressed that motels are a temporary solution and are difficult for some people to access. She encouraged Council to direct staff to work with the co-creators table to develop a plan that is consistent with the human rights principles of the PECH and will not harm people.

9.11 John-Lee Bannister, Waterloo

J. Bannister expressed support for unhoused individuals from the labour community. He told Council to handle this matter like their children's lives depend on it and either pay the price for housing people or decriminalize public camping.

9.12 Héline Chow, Waterloo

H. Chow spoke against the by-law noting that there are still insufficient shelter beds for unhoused individuals. She stressed that there is still a deficit of shelter beds for unhoused individuals and that motel beds are only temporary and will leave individuals without support when funding runs out. H. Chow encouraged the Region to decriminalize public camping on Regional land noting that there would be no need for people to use 100 Victoria Street if they could camp in other locations.

9.13 Lili Berescu, Waterloo

L. Berescu encouraged Council to have safe spaces for people to use drugs safely noting that twelve beds in an abstinence-based rehab are insufficient and that abstinence-based programs increase mortality. She

requested that Council support the motion to ask the provincial government to comply with the court decision.

9.14 Ashley Schuitema, Waterloo Region Community Legal Services

A. Schuitema expressed concerns with the Region's approach to bypass the court order that is in place on the site and stated that it will be a by-law passed in bad faith. She stressed that the Region has a duty to return to the court and that if anyone is evicted from the site or if anyone turned away from the site it opens the Region up to Charter damages. She recommended mediation on the issue, noting that litigation is uncertain and quite costly; and further encouraged Council to reject the by-law, offer a suitable alternative sanctioned encampment and space for the people living at 100 Victoria Street and sending it back to the PECH co-creators to move the issue forward.

9.15 Jason Paul, Kitchener

J. Paul did not appear when called.

9.16 Laura Mosher, Kitchener

L. Mosher withdrew her delegation.

9.17 Julian Ichim, Kitchener

J. Ichim appeared on behalf of the Allen Ryan People's Community Defence Brigade, noting that people are dying from drug overdoses and freezing. He stressed that there is an attack on poor people, and shutting down the only place to test drugs and closing the encampment is part of that attack. He encouraged Council to be on the right side of history.

9.18 Erin Dej, Cambridge

E. Dej noted that the PECH is the best way forward for the community, but the proposed by-law does not adhere to the PECH and fails to address the process and outcomes for addressing homelessness. She stressed that there was no consultation or communication with the co-creators table or residents in advance, which erodes trust and undermines aspects of the by-law. She noted that encampment evictions increase health risks and violence for residents, and encouraged Council to direct staff to work with the community on a plan that works in the best interests of encampment residents and the community at large.

9.19 Meagan Snyder, Unsheltered Campaign

M. Snyder appeared before Council in opposition to the by-law, noting that it was created without consultation with the residents or the co-creators table. She asked the Region to not remove the encampment and explore other ways to meet the obligations to Metrolinx, including working with the residents to find an alternative site or developing an acceptable plan with the co-creators table.

9.20 Tara Jones, Waterloo

T. Jones stated that the proposed by-law will displace residents and limit their ability to access services. She stressed that informing residents is not the same as consultation, that motel funding is temporary, and the by-law will not provide permanence. T. Jones further contended that this approach undermines the Region's commitment to homes for all in the Strategic Plan.

9.21 Martin Asling, Waterloo Region Yes in My Backyard

M. Asling appeared before Council in opposition to the proposed by-law noting that it was not preceded by the type of engagement that is outlined in the PECH and was not informed by the input of the encampment residents. He stated that the process, including the appearance of police and construction equipment on site, has been top down and not reflective of the PECH. M. Asling encouraged the Region to develop a new proposal that follows the whole of community approach and collaborates with individuals with lived experience.

9.22 Shannon Down, Waterloo

S. Down spoke to Council about the importance of taking a human rights approach to homelessness noting that residents of the encampment need to have the ability to shelter themselves from the elements. She explained that people who may turn to an encampment include people who have been chronically homeless looking for some safety and stability, newly homeless individuals who cannot turn to a shelter, couples, people with pets, and drug users that need people around them. She contended that the Region's plan does not address the needs of the individuals, and that the by-law will only result in more scattered encampments with fewer supports rather than ensuring the safety of the most vulnerable residents of the Region.

9.23 Pranav Seetharaman, Waterloo

P. Seetharaman declined his delegation.

9.24 Lynn Intini, Kitchener

L. Intini noted that she has spoken to Regional staff of the need for a Regional renovation by-law and noted that while Regional staff have been supportive of the need, the process around the by-law for 100 Victoria Street is equivalent to a bad faith eviction. She encouraged Council to vote against the by-law and to allow people to stay until truly suitable alternative accommodations which provide security of tenure and address their needs are found.

9.25 Aaron Price, Kitchener

A. Price spoke against the proposed by-law noting that he is a resident of the encampment and that it is a vibrant community where people find a sense of belonging and a community where people understand each other's rights and struggles. He noted that closing tent city without providing adequate alternatives will be traumatic and push individuals further to the margins.

9.26 Tanner Bergsma, Waterloo

T. Bergsma appeared before Council in opposition to the proposed by-law and stated that it is not about transit but a direct attack on humanity and an effort to eliminate one of the last places that unhoused individuals can exist in peace. He encouraged Council to not put power ahead of people, listen to the voices of the people, and to not approve the by-law. A copy of his written remarks is attached to the minutes.

9.27 Ashley Hynd, Kitchener

A. Hynd noted that she has been an outreach worker supporting people across the entire region and the 100 Victoria Street encampment. She advocated for Council to reject the by-law because it goes against the commitment Council made with the PECH, wastes taxpayer dollars, and negatively impacts front line workers and unhoused community members.

9.28 Chris Varga

C. Varga appeared in opposition to the by-law and stated that individuals with the least are forced into long term homelessness. C. Varga stressed that there is a lack of housing and that people that are in need of support are forced further to the margins. She stressed that shelters and motels should not be considered adequate housing.

Council recessed at 9:14 p.m. and reconvened at 9:26 p.m.

10. Minutes of Previous Meetings

C. James left the meeting at 9:26 pm.

Moved by N. Salonen

Seconded by S. Foxton

That the following minutes be approved.

In Favor (13): K. Redman, D. Craig, J. Erb, S. Foxton, C. Huinink, J. Liggett, D. McCabe, J. Nowak, M. Rodrigues, N. Salonen, S. Shantz, B. Vrbanovic, and P. Wolf

Carried (13 to 0)

10.1 Council - March 19, 2025

10.2 Closed Council - March 19, 2025

10.3 Special Council - March 28, 2025

10.4 Library Committee - April 1, 2025

10.5 Sustainability, Infrastructure, and Development Committee - April 8, 2025

10.6 Closed Committee - April 8, 2025

10.7 Administration and Finance Committee - April 8, 2025

10.8 Community and Health Services Committee - April 8, 2025

10.9 Sustainability, Infrastructure, and Development Public Input Committee - April 16, 2025

11. Communications

11.1 Council Information Package - April 16, 2025 (Distributed to Councillors Electronically)

Received for information.

11.2 Correspondence - Dr. Chris Steingart, Sanguen Health Centre

Received for information.

11.3 Correspondence - Tara Waugh

Received for information.

12. Motion to Go Into Committee of the Whole to Consider Reports

C. James joined the meeting at 9:27 pm.

Moved by M. Rodrigues

Seconded by D. McCabe

That Council go into Committee of the Whole to consider reports.

In Favor (14): K. Redman, D. Craig, J. Erb, S. Foxton, C. Huinink, C. James, J. Liggett, D. McCabe, J. Nowak, M. Rodrigues, N. Salonen, S. Shantz, B. Vrbanovic, and P. Wolf

Carried (14 to 0)

13. Reports

13.1 Committee Reports

13.1.1 Library Committee Summary - April 1, 2025

Moved by N. Salonen

Seconded by S. Foxton

The Library Committee recommends as follows:

1. That the Regional Municipality of Waterloo authorize the Manager, Library Services to enter into reciprocal borrowing arrangements with other public libraries from time to time on behalf of the Region of Waterloo Library, which forms part of the Regional Municipality of Waterloo, with such agreements to the satisfaction of the Regional Solicitor.

In Favor (14): K. Redman, D. Craig, J. Erb, S. Foxton, C. Huinink, C. James, J. Liggett, D. McCabe, J. Nowak, M. Rodrigues, N. Salonen, S. Shantz, B. Vrbanovic, and P. Wolf

Carried (14 to 0)

13.1.2 Sustainability, Infrastructure, and Development Committee Summary - April 8, 2025

B. Vrbanovic thanked staff for presenting the GRT plan to Kitchener City Council.

M. Rodrigues thanked staff for discussions on the asset management plan.

Moved by B. Vrbanovic

Seconded by M. Rodrigues

The Sustainability, Infrastructure, and Development Committee recommends as follows:

1. That the Regional Municipality of Waterloo approve the following actions regarding Duke Street West between Victoria Street North and Breithaupt Street in the City of Kitchener effective April 24, 2025 at 12:01 a.m.
 1. Pass a by-law to amend Road Consolidation By law 01 059 (Regional Road System) to add the following parts of Duke Street West to the Regional road network, as per Report TSD-TRP-25-004 dated April 8, 2025:
 - Duke Street West (between Victoria Street North and rail corridor), legally described as: Edwards Street, Plan 374, Kitchener (AKA Duke Street) lying West of Victoria Street and South of CNR, City of Kitchener.
 - Duke Street West (between rail corridor and Breithaupt Street), legally described as: Part of Edwards Street, Plan 376, being Parts 1, 2, 3 and 4 on 58R-22190, City of Kitchener.
 2. Pass a by-law to amend Traffic and Parking By-law 16-023 to:
 - Add to schedule 01 - No Parking on Duke Street West from Breithaupt Street to Victoria Street, both sides, anytime.
 - Add to schedule 04 - No Stopping on Duke Street West from Breithaupt Street to Victoria Street, both sides, 4:30 p.m. to 5:30 p.m., Monday to Friday.
2. That the Regional Municipality of Waterloo approve the following actions regarding Speedsville Road between Maple Grove Road (Regional Road 38) and Eagle Street (Regional Road 39) in the City of Cambridge effective April 24, 2025 at 12:01am.

1. Pass a by-law to amend Road Consolidation By-law 01-059 (Regional Road System) to add the following parts of Speedsville Road to the Regional Road network:
 - Part of Lots 8, 9, 10 and 11, Concession 1 Beasley's Lower Block & Part of Lots 26, 27, 28 and 29, Beasley's Broken Front Concession, being Part 1 on 58R-18565; Part of Lot 27, Beasley's Broken Front Concession, being Parts 2 and 3 on 58R-18565; Part of Lot 28, Beasley's Broken Front Concession, being Part 4 on 58R-18565, in the City of Cambridge, Regional Municipality of Waterloo;
 - Part of Lots 28 and 29, Beasley's Broken Front Concession, being Part 1 on 58R-19923; Part of Lot 29, Beasley's Broken Front Concession, being Parts 2, 3, 4, 5, 6, 7 and 8 on 58R-19923, in the City of Cambridge, Regional Municipality of Waterloo;
 - Block 1, Plan 58M620, in the City of Cambridge, Regional Municipality of Waterloo;
 - Part of Lots 6 and 7, Concession 1, Beasley's Lower Block & Part of Lots 1, 25 and 26, Beasley's Broken Front Concession & 16 Foot Widening on Registered Plan 1046 & 16 Foot Widening on Registered Plan 1174 & 10 Foot Widening on Registered Plan 1353 & Part of Lots 13 and 14 on Registered Plan 1364, being Part 1 on 58R-18569, in the City of Cambridge, Regional Municipality of Waterloo; and
 - Assign Regional Road number 82 to this segment of Speedsville Road.

2. Pass a by-law to amend the Region's Traffic and Parking By-law 16-023 as follows:
 - Add to Schedule 10, Level 2 Pedestrian Crossover, Speedsville Road (Regional Road 82), 248 meters south of Rogers Drive (Mill Run Trail);
 - Add to Schedule 11, Through Highways, Speedsville Road (Regional Road 82) from Maple Grove Road

(Regional Road 38) to Eagle Street (Regional Road 39);

- Add to Schedule 17, Rates of Speed, 60 km/h on Speedsville Road (Regional Road 82) from Highway 401 to Eagle Street (Regional Road 39); and
- Add to Schedule 19, No Heavy Trucks, Speedsville Road (Regional Road 82) from Maple Grove Road (Regional Road 38) to Eagle Street (Regional Road 39)

3. That the Regional Municipality of Waterloo:

1. Receives the Grand River Transit (GRT) Business Plan for information;
 2. Approves holding a Special Sustainability, Infrastructure, and Development Committee meeting on April 16, 2025 for the purpose of hearing public input on the GRT Business Plan; and
 3. Direct staff to present the final version of the GRT Business Plan to the Sustainability, Infrastructure, and Development Committee for a decision from the Committee, after meeting with all interested area municipalities in accordance with report TSD-TRS-25-005 dated April 8, 2025, as amended.
4. That the Regional Municipality of Waterloo endorse the Levels of Service as outlined in Appendix A of report EES-SAM-25-001, dated April 8, 2025.
5. Whereas the prevailing narrative is that road speeds should reflect what a driver would naturally expect to drive; and Whereas the two rural roads that we have reduced the school zone speed from 80 to 60 to 40 have created dangerous driving situations endangering both drivers and other road users; and Whereas the lower speed limits at rural schools are only needed during school hours; and Whereas rural roads have different traffic patterns and expectations than urban roads; That the Regional Municipality of Waterloo:
1. Prepare the requisite amending by-law(s) to lower speed limits in school zones from 80 km/h to 60 km/h (instead

of the current 40 km/h) on Lobsinger Line near King Alfred Academy and Northfield Drive near Balsam Grove Parochial School.

2. That staff be directed to investigate the installation of flashing lights in school zones that operate during school hours along side of active speed cameras as part of the rural strategy.
3. That staff be directed to work with Townships' staff to create a rural speed zone strategy

In Favor (14): K. Redman, D. Craig, J. Erb, S. Foxtan, C. Huinink, C. James, J. Liggett, D. McCabe, J. Nowak, M. Rodrigues, N. Salonen, S. Shantz, B. Vrbanovic, and P. Wolf

Carried (14 to 0)

13.1.3 Administration and Finance Committee Summary - April 8, 2025

Regional Chair K. Redman noted that item 3 will be taken separately.

Council debated the motion and the capacity for staff to support the request to assist the Fashion History Museum.

Moved by J. Liggett
Seconded by N. Salonen

The Administration and Finance Committee recommends as follows:

1. That the Regional Municipality of Waterloo take the following action with respect to 2025 property tax policies and rates as set out in Report COR-CFN-25-005 dated April 8, 2025:
 - a. Establish the following property class tax ratios for the 2025 property tax year:
 - Residential and New Multi-residential 1.000000
 - Multi-residential, Commercial and Industrial 1.950000
 - Aggregate Extraction 1.586727
 - Landfill 1.540000

- Pipeline 1.161300
 - Farmland and Managed Forest 0.250000
- b. Direct staff to prepare the necessary by-laws to establish the 2025 property class tax ratios and the resulting 2025 Regional property tax rates for Regional Council's consideration on April 23, 2025; and
 - c. Notify the Area Municipalities within Waterloo Region accordingly.
2. That the Regional Municipality of Waterloo take the following action with respect to the 2024 Plan Update and Year End Financial Results as set out in report COR-CFN-25-007 dated April 8, 2025:
- a. Receive the 2024 Plan Update that shows implementation and progress toward achieving the vision set out by Council in the Growing with Care Strategic Plan 2023-2027;
 - b. Approve the preliminary 2024 financial results for the purposes of preparing the Region's 2024 Audited Financial Statements; and
 - c. Apply the Surplus Allocation Policy to 2024 financial results.

In Favor (14): K. Redman, D. Craig, J. Erb, S. Foxton, C. Huinink, C. James, J. Liggett, D. McCabe, J. Nowak, M. Rodrigues, N. Salonen, S. Shantz, B. Vrbanovic, and P. Wolf

Carried (14 to 0)

Moved by D. Craig
Seconded by P. Wolf

The Administration and Finance Committee recommends as follows:

3. Whereas The Fashion History Museum is ceasing operation in the City of Cambridge,

And whereas its closure is a significant loss to the cultural fabric of the Regional community,

And whereas the museum carries an international reputation with a collection that ranges from ancient Egyptian cloth to important couture like Dior, Chanel and Balenciagas,
 And whereas the museum in collaboration with the Historic School of Dress in London England is designing historic costumes for the Globe Theatre in London,
 And whereas the museum is partnering with a fashion designer in Antwerp who is showcasing items from the fashion museum to be shown at the Paris Fashion Week,

Therefore be it resolved that the appropriate regional staff be requested to report on options to help promote the collection by partnering with other museums in the region and or securing space in an appropriate regional building or commenting on the possibility of a new stand-alone structure to service the whole regional community.

In Favor (6): D. Craig, J. Nowak, M. Rodrigues, S. Shantz, B. Vrbanovic, and P. Wolf

Opposed (8): K. Redman, J. Erb, S. Foxton, C. Huinink, C. James, J. Liggett, D. McCabe, and N. Salonen

Defeated (6 to 8)

13.1.4 Community and Health Services Committee Summary - April 8, 2025

In response to a question from Council, P. Sweeney stated that if changes occur to the Ontario Trillium Benefit, staff will communicate the changes to the public through appropriate channels.

Moved by N. Salonen

Seconded by M. Rodrigues

The Community and Health Services Committee recommends as follows:

1. That the Regional Municipality of Waterloo approve the proposed housekeeping amendments to the Property Tax Exemption for Affordable Housing Program as detailed in Appendix A and as outlined in report CSD-HOU-25-004, dated April 8, 2025. That the Regional Municipality of Waterloo request to the Province of Ontario and the

Canadian Revenue Agency to change the eligibility requirements for the Ontario Trillium Benefit to allow for tenants in property-tax exempt housing deemed affordable by a municipality or other government body to remain eligible for the Ontario Energy and Property Tax Credit, as outlined in report CSD-HOU-25-004, dated April 8, 2025.

In Favor (14): K. Redman, D. Craig, J. Erb, S. Foxton, C. Huinink, C. James, J. Liggett, D. McCabe, J. Nowak, M. Rodrigues, N. Salonen, S. Shantz, B. Vrbanovic, and P. Wolf

Carried (14 to 0)

13.1.5 Closed Council Summary - April 16, 2025

Moved by N. Salonen
Seconded by C. James

That the Council of the Regional Municipality of Waterloo authorizes Councillor Kari Williams, to be absent from meetings of Council until September 30, 2025, pursuant to Section 259 (1) (c) of the Municipal Act, 2001.

In Favor (14): K. Redman, D. Craig, J. Erb, S. Foxton, C. Huinink, C. James, J. Liggett, D. McCabe, J. Nowak, M. Rodrigues, N. Salonen, S. Shantz, B. Vrbanovic, and P. Wolf

Carried (14 to 0)

13.2 Board of Health

13.2.1 Board of Health Update

Dr. Hsiu-Li Wang, Commissioner, Public Health & Paramedic Services/Medical Officer of Health, noted that there has been increased measles activity locally and in the province. She encouraged residents to ensure they are up to date on vaccinations and to monitor themselves and their family for symptoms, especially when returning from international travel or areas experiencing outbreaks. Dr. H. Wang further noted that over 2000 secondary students are not up to date on vaccinations, and suspensions will begin on May 8, 2025.

Received for information.

13.3 Regional Chair

13.3.1 Appointments to Boards and Committees

Moved by S. Foxton

Seconded by J. Erb

That the Regional Municipality of Waterloo accepts Councillor Natasha Salonen's resignation from the Grand River Conservation Authority Board.

And that Regional Municipality of Waterloo makes the following appointments for the remainder of the 2022-2026 term of Regional Council:

- Councillor Joe Nowak as the Vice-Chair of the Administration and Finance Committee;
- Councillor Joe Nowak to the Audit Committee;
- Councillor Pam Wolf to the Public Art Advisory Committee; and
- Councillor Matt Rodrigues to the Grand River Conservation Authority Board.

And that the Regional Clerk be directed to take the necessary actions to implement these appointments.

In Favor (14): K. Redman, D. Craig, J. Erb, S. Foxton, C. Huinink, C. James, J. Liggett, D. McCabe, J. Nowak, M. Rodrigues, N. Salonen, S. Shantz, B. Vrbanovic, and P. Wolf

Carried (14 to 0)

14. Other Matters Under Committee Of The Whole

14.1 PDL-LEG-25-017, 100 Victoria Street, North, Kitchener – Site Specific By-law

P. Sweeney responded to questions, stating that staff are continuing to meet with the co-creators table, noting that staff had the opportunity to meet with some of the members in the previous week. He stated that the feedback from the delegations was consistent with what staff heard previously and if the by-law is passed, staff will continue with that consultation.

P. Wolf brought forward an amendment to limit the fine in the by-law to \$1000.

In response to a question from Council, F. McCrea explained that a fine amount of \$5000 is consistent with the Code of Use By-law and other regulatory by-laws. She stressed that it is a maximum fine amount and that the Justice of the Peace will consider all circumstances and is unlikely to issue a maximum fine for a first offence.

The amendment was defeated.

Responding to questions from Council, P. Sweeney explained that staff and partners in the community have been working to support residents for three years and that there have been increased visits from social workers who are focused on building relationships. He further noted that the recommended funding increase will be used as an envelope of resources to support individuals on a case-by-case basis and is in addition to the budget for housing and housing stability. P. Sweeney provided an overview of the number of individuals that are currently residing at the encampment and the increase in supports and shelter beds that are planned for the coming months.

Moved by P. Wolf
Seconded by C. James

Amendment

And that section 4 of the by-law be amended to read:
Every person who contravenes sections 2 or 3 of this By-law is guilty of an offence and on conviction is liable to a fine not exceeding \$1,000, exclusive of costs.

In Favor (3): C. James, M. Rodrigues, and P. Wolf

Opposed (11): K. Redman, D. Craig, J. Erb, S. Foxton, C. Huinink, J. Liggett, D. McCabe, J. Nowak, N. Salonen, S. Shantz, and B. Vrbanovic

Defeated (3 to 11)

Moved by C. James
Seconded by J. Nowak

That the Regional Municipality of Waterloo pass a by-law in the form attached as Appendix 'A' to this Report PDL-LEG-25-017, being a Site Specific By-law respecting the use of 100 Victoria Street, North, Kitchener (as Owned by The Regional Municipality of Waterloo) to facilitate the Kitchener Central Transit Hub (KCTH) and other transit-related development.

That the Regional Municipality of Waterloo direct staff to implement a plan for alternative accommodation for current residents of 100 Victoria Street North, Kitchener, and add \$814,333 to the 2025 regional Housing budget as outlined in this Report PDL-LEG-25-017.

In Favor (13): K. Redman, D. Craig, J. Erb, S. Foxton, C. Huinink, C. James, J. Liggett, D. McCabe, J. Nowak, M. Rodrigues, N. Salonen, S. Shantz, and B. Vrbanovic

Opposed (1): P. Wolf

Carried (13 to 1)

14.2 Notice of Motion - Councillor P. Wolf, Referred Motion

Council recessed at 10:30 p.m. and reconvened at 10:33 p.m.

P. Wolf spoke to the motion noting that the province has forced the closure of the CTS site. She noted that concerns were raised with the motion at the Committee meeting and indicated that she would like to bring forward an amended motion. There was not unanimous consent to consider the amended motion without notice.

P. Wolf brought forward a motion to waive notice to allow the amended motion. The motion was defeated.

Moved by P. Wolf

Seconded by C. James

WHEREAS the Ontario Superior Court has issued an injunction on Section 2 of the Community Care and Recovery Act, allowing Consumption and Treatment Services (CTS) sites to remain operational for 30 days beyond a Charter judgment;

AND WHEREAS the Province of Ontario has indicated it will not support the court injunction granting a suspension of CTS closures in Kitchener, Guelph, and other locations;

AND WHEREAS Waterloo Region’s only CTS site, located in Kitchener, is critical to saving lives and reducing harm among vulnerable constituents, as acknowledged by the court’s recognition of the high risk of death and injury to CTS clients should the site close;

AND WHEREAS there has been no visible community or institutional support for eliminating CTS services from local councils, advisory committees, schools, churches, health professionals, business owners, or CTS clients;

AND WHEREAS Section 3 of the Community Care and Recovery Act prohibits municipal support for consumption services without approval from the Ontario Minister of Health;

THEREFORE BE IT RESOLVED THAT:

1. Regional Council formally requests that the Province of Ontario provide **immediate funding and support** to ensure continued operation of the Kitchener CTS site during the injunction period, in compliance with the court’s decision.
2. Regional Council further requests that the Province grant **approval under Section 3 of the Community Care and Recovery Act** to allow the Regional Municipality of Waterloo to support and maintain CTS operations beyond the injunction period if necessary.
3. Regional Council directs staff to communicate this motion urgently to:
 1. The Ontario Minister of Health,
 2. Local Members of Provincial Parliament (MPPs),
 3. The Waterloo Region Drug Action Team,
 4. Relevant stakeholders advocating for harm reduction services.
4. Regional Council commits to working collaboratively with provincial authorities and community partners to ensure no disruption in life-saving services provided by CTS during this critical time.

In Favor (1): P. Wolf

Opposed (13): K. Redman, D. Craig, J. Erb, S. Foxtan, C. Huinink, C. James, J. Liggett, D. McCabe, J. Nowak, M. Rodrigues, N. Salonen, S. Shantz, and B. Vrbanovic

Defeated (1 to 13)

Moved by P. Wolf
Seconded by D. Craig

That the Regional Municipality of Waterloo waive notice of motion as per section 70 of By-law 22-051, A By-law to Provide Rules for Governing the Proceedings of Council and its Committees, and to repeal By-Law 00-031, as amended.

In Favor (6): K. Redman, D. Craig, S. Foxton, C. James, D. McCabe, and P. Wolf

Opposed (8): J. Erb, C. Huinink, J. Liggett, J. Nowak, M. Rodrigues, N. Salonen, S. Shantz, and B. Vrbanovic

Defeated (6 to 8)

15. Motion for Committee of the Whole to Rise and Council Resume

Moved by C. Huinink
Seconded by D. McCabe

That Committee of the Whole rise and Council resume.

In Favor (14): K. Redman, D. Craig, J. Erb, S. Foxton, C. Huinink, C. James, J. Liggett, D. McCabe, J. Nowak, M. Rodrigues, N. Salonen, S. Shantz, B. Vrbanovic, and P. Wolf

Carried (14 to 0)

16. Motion To Adopt Proceedings of Committee of the Whole

Moved by S. Foxton
Seconded by J. Nowak

That Council adopt the proceedings of Committee of the Whole.

In Favor (14): K. Redman, D. Craig, J. Erb, S. Foxton, C. Huinink, C. James, J. Liggett, D. McCabe, J. Nowak, M. Rodrigues, N. Salonen, S. Shantz, B. Vrbanovic, and P. Wolf

Carried (14 to 0)

17. Motions where notice has been provided

17.1 Notice of Motion - Councillor D. Craig

D. Craig spoke to the motion noting that the goal is to increase outreach and hear from other areas of the Region.

Moved by D. Craig
Seconded by N. Salonen

Whereas the regional budget is a statement of our values and the kind of regional community we are trying to build,
And whereas the budget is an all-encompassing reflection on everything from support for climate change initiatives, to concerns for homelessness to needed expansions for social services and transit,
And whereas, the regional budget defines for the coming years the priorities, commitments, and aspirations of the regional community,
And whereas, our budget deliberations have not been fully capturing the opinions of residents from Cambridge and the Townships in our public meetings over the past number of years,
Therefore, be resolved that the Region of Waterloo hold one additional budget meeting in Cambridge and one additional meeting in our northern townships to bring a wider balance of input from all our regional residents.

In Favor (14): K. Redman, D. Craig, J. Erb, S. Foxtton, C. Huinink, C. James, J. Liggett, D. McCabe, J. Nowak, M. Rodrigues, N. Salonen, S. Shantz, B. Vrbanovic, and P. Wolf

Carried (14 to 0)

Moved by S. Foxtton
Seconded by M. Rodrigues

That Council agree to extend the Council meeting to 12:00 a.m.

In Favor (11): K. Redman, D. Craig, J. Erb, S. Foxtton, C. Huinink, C. James, J. Nowak, M. Rodrigues, N. Salonen, S. Shantz, and B. Vrbanovic

Opposed (3): J. Liggett, D. McCabe, and P. Wolf

Carried (11 to 3)

18. Notice of Motion

There was no notice of future motions.

19. Unfinished Business

There was no unfinished business.

20. Other Business

C. Huinink requested information about smudging in Chambers. Regional Chair K. Redman explained that smudging in Chambers is allowed under the policy, but that the request earlier in the meeting was not made in advance, so there was not an opportunity to post signage for individuals who may have sensitivities. Council requested that staff provide an update on the current smudging policy.

21. Questions

There were no questions.

22. Enactment of By-laws – First, Second & Third Readings

Moved by J. Liggett
Seconded by S. Shantz

That the following by-laws be approved.

In Favor (14): K. Redman, D. Craig, J. Erb, S. Foxton, C. Huinink, C. James, J. Liggett, D. McCabe, J. Nowak, M. Rodrigues, N. Salonen, S. Shantz, B. Vrbanovic, and P. Wolf

Carried (14 to 0)

22.1 By-law 25-012

Moved by J. Liggett
Seconded by S. Shantz

That a By-Law to amend By-Law Number 24-052 A By-law to Establish Fees and Charges for the Regional Municipality of Waterloo and repeal By-law 23-062, as Amended, be read a first, second and third time, finally passed and numbered 25-012, be signed by the Regional Chair and Regional Clerk and sealed with the Regional Seal.

Carried

22.2 By-law 25-013

Moved by J. Liggett
Seconded by S. Shantz

That a By-law to Establish Tax Ratios for the Regional Purposes and Area Municipal Purposes for the Year 2025, be read a first, second and third time, finally passed and numbered 25-013, be signed by the Regional Chair and Regional Clerk and sealed with the Regional Seal.

Carried

22.3 By-law 25-014

Moved by J. Liggett
Seconded by S. Shantz

That a By-law to Establish and Levy Rates of Taxation for Regional Purposes for the Year 2025, be read a first, second and third time, finally passed and numbered 25-014, be signed by the Regional Chair and Regional Clerk and sealed with the Regional Seal.

Carried

22.4 By-law 25-015

Moved by J. Liggett
Seconded by S. Shantz

That a By-law to Amend By-law No. 01-059, a By-law to Consolidate all By-laws with Respect to Roads Included in the Regional Road System, as amended (Duke Street West), be read a first, second and third time, finally passed and numbered 25-015, be signed by the Regional Chair and Regional Clerk and sealed with the Regional Seal.

Carried

22.5 By-law 25-016

Moved by J. Liggett
Seconded by S. Shantz

That a By-law to Amend By-law No. 01-059, a By-law to Consolidate all By-laws with Respect to Roads Included in the Regional Road System, as amended (Speedsville Road) be read a first, second and third time, finally passed and numbered 25-016, be signed by the Regional Chair and Regional Clerk and sealed with the Regional Seal.

Carried**22.6 By-law 25-017**

Moved by J. Liggett
 Seconded by S. Shantz

That a By-law to Amend By-law 16-023, as amended, being a By-law to Regulate Traffic and Parking on Highways Under the Jurisdiction of the Regional Municipality of Waterloo (No Parking, No Stopping, Pedestrian Crossovers, Through Highways, Rates of Speed, and No Heavy Trucks), be read a first, second and third time, finally passed and numbered 25-017, be signed by the Regional Chair and Regional Clerk and sealed with the Regional Seal.

Carried**22.7 By-law 25-018**

Moved by J. Liggett
 Seconded by S. Shantz

That a By-law to Amend By-law 22-018, being A By-law to Authorize and Govern the Delegation of Signing Authority, be read a first, second and third time, finally passed and numbered 25-018, be signed by the Regional Chair and Regional Clerk and sealed with the Regional Seal.

Carried**22.8 By-law 25-019**

Moved by J. Liggett
 Seconded by S. Shantz

That a By-law to further Amend By-law 20-027, being A By-law to Provide for the Appointment of a Chief Administrative Officer, be read a first, second and third time, finally passed and numbered 25-019, be signed by the Regional Chair and Regional Clerk and sealed with the Regional Seal.

Carried**22.9 By-law 25-020**

Moved by J. Liggett
Seconded by S. Shantz

That a By law to Provide for an Acting Chair when the Chair is Absent from the Municipality, and to Repeal By law 23-001, be read a first, second and third time, finally passed and numbered 25-020, be signed by the Regional Chair and Regional Clerk and sealed with the Regional Seal.

Carried

22.10 By-law 25-021

Moved by J. Liggett
Seconded by S. Shantz

That a By-law Respecting the Use of 100 Victoria Street North, Kitchener (as Owned by the Regional Municipality of Waterloo) to facilitate the Kitchener Central Transit Hub and other Transit Development, be read a first, second and third time, finally passed and numbered 25-021, be signed by the Regional Chair and Regional Clerk and sealed with the Regional Seal.

Carried

22.11 By-law 25-022

Moved by J. Liggett
Seconded by S. Shantz

That a By-law to Confirm the Proceedings of the Council of the Regional Municipality of Waterloo at this Meeting Held on April 23, 2025 be read a first, second and third time, finally passed and numbered 25-022, be signed by the Regional Chair and Regional Clerk and sealed with the Regional Seal.

Carried

23. Adjourn

Moved by J. Nowak
Seconded by J. Liggett

That the meeting adjourn at 10:45 p.m.

In Favor (14): K. Redman, D. Craig, J. Erb, S. Foxton, C. Huinink, C. James, J. Liggett, D. McCabe, J. Nowak, M. Rodrigues, N. Salonen, S. Shantz, B. Vrbanovic, and P. Wolf

Carried (14 to 0)

Regional Clerk

Regional Chair

Good evening Chair and Councillors,

My name is Tanner Bergsma, an autistic 22 year old international social justice activist. I am the Co-Chair of the City of Kitchener's 2051 Community Working Group. But tonight, I am not speaking on behalf of that committee.

Tonight, I am speaking as someone who *used* to be homeless.

And more than that — I am speaking for **every single unhoused person in this city** whose voice you have silenced.

Whose humanity you have ignored.

Whose pain you have chosen not to see.

Because none of you — *not one of you* — have made the effort to talk to them.

And now, you are here to vote on **By-law 25-021** — a motion to repurpose 100 Victoria Street North for the Kitchener Central Transit Hub. You call it development. You call it infrastructure.

But let's stop pretending.

This is not about transit. This is a direct attack on humanity.

It is a calculated effort to eliminate one of the last places where unhoused people can exist in peace.

It offers no housing. No care. No supports.

Just **removal. Displacement. Erasure.**

This is not a plan — it's an eviction notice.

Not from a home, but from public life itself.

And it violates **Section 7 of our Canadian Charter of Rights and Freedoms** — the right to **life, liberty, and security of the person.**

So let's call it what it is:

You are voting to strip people of their **legal rights** — because their presence makes you uncomfortable.

You are voting to disappear the most vulnerable — because their pain doesn't fit your development plans.

You are voting to prioritize **property** over **people.**

You think this is safety?

You think this is progress?

This is shameful. This is cruel. This is cowardice wrapped in policy language.

I have been there. I know what it feels like to be invisible.

What I needed wasn't to be moved — it was to be seen, to be helped, to be treated as human.

Instead, you offer tents taken down, belongings confiscated, and lives destroyed — all while hiding behind a motion number and a sealed vote.

And the most horrifying part?

You didn't even ask the people this affects. You didn't talk to the community. You didn't ask the committees working on inclusion and equity. You didn't talk to a *single person living outside*.

This is not consultation. This is exclusion.

This is not leadership. This is abandonment.

This is not how a just city behaves.

The Region — and the world — is watching you.

And one day, history will ask what you chose to value.

Will it be convenience? Or courage?

Will it be silence? Or justice?

I urge you: *Do not be complicit in this erasure.*

Because if you vote in favour of this by-law you are deliberately telling the people of our region that you value profit over community, greed over integrity, and power over people

Reject By-law 25-021.

Stand up for human dignity.

Uphold the Charter.

Listen to the voices you have tried so hard not to hear.

Because tonight, I speak for them.

Thank you.

From: NOKMISONZ AKWE [REDACTED]
Sent: April 23, 2025 5:49 PM
To: Regional Clerk <RegionalClerk@regionofwaterloo.ca>
Subject:

You don't often get email from [REDACTED] [Learn why this is important](#)

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April 22, 2025

Dear Region of Waterloo Council and Regional Housing Services Staff:

RE: By-law Respecting the Use of 100 Victoria Street North

The Unsheltered Campaign is a group of local community members who are housed and unhoused, and work with people experiencing unsheltered homelessness to advocate for change.

We are writing to ask you to reject the proposed “By-law Respecting the Use of 100 Victoria Street North. Both the approach this bylaw represents, as well as the substance of the bylaw are harmful to people experiencing homelessness and sheltering at 100 Victoria and deeply concerning.

This bylaw was created in secret: it was put forward with no consultation with people living at 100 Victoria, and no engagement with service providers working with residents of 100 Victoria. Mechanisms exist for this engagement, including the Region’s own Plan to End Chronic Homelessness (PECH) Co-Creators’ table. Yet, the PECH Co-Creators table was not consulted. Nor did the Region engage directly with residents of 100 Victoria prior to developing this proposal. In fact, the bylaw was ‘announced’ to residents of 100 Victoria through the sudden deployment of police, heavy equipment and dumpsters to the site, with an absence of any communication or additional information. This is not a human-rights compliant, or trauma informed approach, and is inconsistent with the objectives of PECH, as approved by Council in Spring 2024.

The Region has also not sought direction from the courts as to the legality of this bylaw, given Justice Valente’s 2023 ruling, finding individuals had a Charter right to shelter at 100 Victoria provided that there were not sufficient and accessible shelter options. Since the court ruling, if anything the housing situation in the Region has become more dire. The limited information publicly released from the 2024 Point-in-Time (PiT) Count documented 2,371 individuals experiencing homelessness in Waterloo Region, an increase of over 1,000 since the 2021 PiT Count. In Dec 2024, Regional staff shared an estimate of 490 emergency shelter beds. Since this time, the Schwaben Club emergency shelter has closed, reducing the overall number of emergency shelter spaces locally.

There are simply not enough emergency shelter spaces to accommodate individuals. The staff report accompanying the bylaw proposes funding motel spaces for some residents of 100 Victoria, yet motels fail to offer an accessible, long-term option for housing. In this context, the bylaw likely contradicts Justice Valente's ruling and will result in an expensive, protracted court case that will erode trust, foster division and divert needed resources that could be used to meaningfully address homelessness in our community.

The approach outlined in the bylaw will not work, and will criminalize survival activities of Residents of 100 Victoria and individuals providing aid. The proposed bylaw is out of touch with how people navigate being unhoused. It prohibits anyone who was not present on April 16, 2025 from residing at 100 Victoria, a condition which is unnecessarily restrictive and will be impossible to enforce. The bylaw also proposes fines of up to \$5,000 for individuals residing at 100 Victoria who move their structures without permission to another part of the lot, say to avoid flooding or hazards, or for greater privacy (Sec. 6). The bylaw outlines a process for progressively "kettling" or fencing in 100 Victoria while people are still residing there (Sec. 8, as well as criminalizes individuals providing survival materials to 100 Victoria, as "carrying any goods, without authorization, which are offensive... inconvenience, cause discomfort or injure any person" is subject to a \$5,000 fine (Appendix B). A community member has included more information about concerns with this bylaw here.

Instead of approving this flawed and inhumane bylaw, we are asking you to consider one of the following options:

1. Do not remove the encampment from 100 Victoria and explore other ways for the Region to meet its obligations to Metrolinx.
2. Work with people at 100 Victoria to designate an alternative location for camping, that is mutually acceptable and in close proximity to necessary services, with the same legal protections as 100 Victoria.
3. Refer the issue back to the Plan to End Chronic Homelessness (PECH) Co-Creators table and direct this table, which includes people who work directly with residents of 100 Victoria and lived experts, to create an alternate plan to meet the Region's needs for the property, using the budget associated with the proposed bylaw.

As Regional Councillors you have the power to propose a better plan for 100 Victoria moving forward, and we implore you to use it.

Sincerely,

The Unsheltered Campaign and the organizations signed below:

A WOMB WITH A VIEW

CORINNE VAUTOUR VILLEMAIRE

From: [Anne Loeffler](#)
To: [Regional Chair's Office](#)
Cc: [Regional Clerk](#); [Doug Craig](#); [Sue Foxton](#); [Michael Harris](#); [Colleen James](#); [Jan Liggett](#); ["SShantz@regionofwaterloo.ca"](#); [Berry Vrbanovic](#); [Pam Wolf](#); [Jim Erb](#); [Kodie Williams](#); [Natasha Salonen](#); [Chantal Huinink](#); [Joe Nowak](#); [Dorothy McCabe](#); [Matthew Rodrigues](#)
Subject: FW: Urgent Need for Sedimentation and Erosion Control Measures on Region-Owned Property Near Bleams Road
Date: April 24, 2025 2:22:07 PM

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Dear Chair Redman and Regional Councillors,

Note to Clerk: please include in official correspondence to Council.

Thank you for the opportunity to delegate at the Council meeting last night. For your reference, I am forwarding the original email I sent last November when I first brought this issue to your attention. I am attaching a drone pic of the Bleams Rd site, taken last weekend, to provide you with another perspective of the amount of erosion damage occurring on the farm you purchased.

I was please to hear Mayor Salonen request a staff report on this matter, and I hope you'll be able to share that report with me when it gets released.

To reiterate my key points, I'm calling on the Region to take immediate corrective action to prevent further sediment entry into the catch basins. Please consider that Brantford and Six Nations water intakes pipes lie downstream of this site; all sediment and nutrient discharges increase the cost of treating drinking water in those downstream communities.

Please don't hesitate to contact me if you would like further input on this issue.

Sincerely,

Anne Loeffler M. Sc., B. Sc. (Agr.), P. Ag. (ret)
New Hamburg, ON

From: Anne Loeffler [REDACTED]
Sent: November 9, 2024 2:05 PM
To: 'Regional Chair's Office' <chair@regionofwaterloo.ca>; Doug Craig <DougCraig@regionofwaterloo.ca>; Sue Foxton <SFoxton@regionofwaterloo.ca>; Michael Harris <MHarris@regionofwaterloo.ca>; Colleen James <CJames@regionofwaterloo.ca>; Jan Liggett <JLiggett@regionofwaterloo.ca>; Sandy Shantz <SShantz@regionofwaterloo.ca>; Berry Vrbanovic <BVrbanovic@regionofwaterloo.ca>; Pam Wolf <PWolf@regionofwaterloo.ca>; Jim Erb <JErb@regionofwaterloo.ca>; KariWilliams@regionofwaterloo.ca; Robert Deutschmann <RDeutschmann@regionofwaterloo.ca>; Chantal Huinink <CHuinink@regionofwaterloo.ca>; Joe Nowak <JoNowak@regionofwaterloo.ca>; Dorothy McCabe (DMcCabe@regionofWaterloo.ca) <DMcCabe@regionofWaterloo.ca>
Cc: 'Natasha Salonen' <natasha.salonen@wilmot.ca>; 'Steven Martin' <steven.martin@wilmot.ca>; 'Stewart Cressman' <Stewart.cressman@wilmot.ca>; 'Lillianne Dunstall' <lillianne.dunstall@wilmot.ca>; 'Kris Wilkinson' <kris.wilkinson@wilmot.ca>; harvir.sidhu@wilmot.ca; 'premier@ontario.ca' <premier@ontario.ca>; mike.harrisco@pc.ola.org
Subject: Urgent Need for Sedimentation and Erosion Control Measures on Region-Owned Property Near Bleams Road

Chair Karen Redman and Waterloo Regional Council

Cc Wilmot Township Council

Premier Doug Ford

MPP Mike Harris

Daer Chair Redman and Regional Councilors:

I wish to bring to your attention a significant concern regarding sedimentation and erosion risks associated with the Region's recently acquired property located along Bleams Road. Following the destruction of the corn crop on this property, ordered by the Region for due diligence purposes related to the sale, the land has been left in a highly vulnerable state. Having been tilled multiple times, the soil is now completely exposed and susceptible to erosion, especially during severe weather events. The risks of sediment runoff from this site threaten downstream water quality and drinking water intakes, notably those serving Brantford and the Six Nations Reserve.

Upon recent visual inspection while driving along Bleams Road, it is apparent that the soil on the newly-acquired property, without sufficient ground cover, is now in a condition where it can easily be mobilized during storm runoff events. While there are no open watercourses directly on this property, publicly available aerial imagery on the Grand River Conservation Authority (GRCA) website indicates a suspected catch basin located along the west property line, approximately 250 meters north of Bleams Road.

Catch basins, as you know, are effective conduits for surface water to flow directly into drain tiles. Given this setup, there is a heightened risk that sediment from the tilled property could flow through this catch basin, enter the tile drainage system on the adjacent property, and subsequently impact the creek. This could have cumulative effects downstream, potentially degrading water quality for local and regional users.

I urge the Region to **take immediate action to mitigate these risks by implementing appropriate sedimentation and erosion control measures around this catch basin and any other identified vulnerable points on the property.** These measures might include installing silt fences, sediment traps, or similar structures designed to prevent sediment from entering the catch basin and moving downstream.

Additionally, given the recent U.S. election results and a perceived opinion that development timelines for this site are in question, I respectfully suggest that the Region establish a cover crop on this property as soon as possible. A cover crop will provide an essential layer of protection against soil erosion, particularly over the winter months, and help maintain soil integrity until such time that the future use of this property is determined.

Thank you for your attention to this urgent matter. Proactive erosion control and sediment management on this site will play a vital role in protecting our shared watershed and the health of drinking water sources for nearby communities.

Please note that these are my own personal comments and do not reflect the opinion of any former employers.

Sincerely,

Anne Loeffler M. Sc., B. Sc. (Agr), P. Ag. (ret)

[REDACTED]

173

Catch
Basins



TAB 4

Court File No. CV-25-00000750-0000

ONTARIO
SUPERIOR COURT OF JUSTICE

BETWEEN:

THE REGIONAL MUNICIPALITY OF WATERLOO

Applicant

And

PERSONS UNKNOWN AND TO BE ASCERTAINED

Respondents

This is the Cross-Examination of **Eddy Grignon** on his affidavits dated May 12, 2025 and July 7, 2025, taken via Zoom videoconference on consent of the parties on July 10, 202.

APPEARANCES:

ANDREW LOKAN, Mr. Counsel for the Applicant
GRETA HOAKEN, Ms.

ASHLEY SCHIUTEMA, Ms. Counsel for the Respondents
JOANNA MULLEN, Ms.

(i)

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1

1 July 10, 2025

2
3 EDDY GRIGNON, AFFIRMED

4 CROSS-EXAMINATION BY MR. LOKAN:

5 1. Q. Good afternoon. I'm Andrew Lokan and
6 I'm a lawyer for the Region and I have some questions
7 to ask you today. First question is how do you prefer
8 to be addressed; is it okay if I address you as Eddy?

9 A. That would be lovely, thank you very
10 much.

11 2. Q. Okay. And just a couple of ground
12 rules in case you're not used to being a witness in
13 this kind of proceeding. The first is, off record
14 you've just confirmed that you have a copy of your
15 affidavit. And we -- actually there are two
16 affidavits so I just want to check that you have both?

17 So one was sworn on May 12th of this year, do
18 you have that?

19 A. Yes, I do.

20 3. Q. And the other was sworn on July 7th of
21 this year, do you have that?

22 A. Yes, I do.

23 4. Q. Okay. And I just want to confirm, you
24 don't have any other documents in front of you, either
25 on the screen or in print?

1 A. No.

2 5. Q. Okay. Thank you. And just a couple of
3 other sort of logistical things. If I ask a question
4 and you're not quite sure what I meant, feel free to
5 ask for clarification or ask me to repeat the
6 question. Or if you don't hear, you can always ask
7 for me to ask again, okay?

8 A. Okay.

9 6. Q. And also, only of us can speak at a
10 time because there is a transcript being taken. I
11 sometimes forget that and witnesses do as well. And
12 sometimes you've got a tangle of words and we have to
13 try and make sure we don't do that. Okay?

14 A. I'll do my best.

15 7. Q. Okay. I am wondering if you can adjust
16 your sound up a bit because you're actually coming
17 through very faint or be a little closer to your
18 microphone.

19 A. Is this better?

20 8. Q. Much better, thank you very much.
21 Final thing is that if you are asked a question, you
22 want to say either "yes" or "no" or "agree" or
23 "disagree." You have to use words but not "Mm-hmm"
24 because "Mm-hmm," even if you're nodding or shaking
25 your head, it comes out ambiguous. So we always use

1 "yes" or "no" or "I agree" or "I disagree." Okay?

2 A. Okay.

3 9. Q. Thank you. In your first affidavit, so
4 this is the May 12th one, you talk about Fight Back.
5 And I just have some questions about that. So this is
6 in Paragraph 2. Do you see that?

7 A. Yes.

8 10. Q. Could you just explain to us what Fight
9 Back is?

10 A. A grassroots mutual aid group.

11 11. Q. Okay. And what does the name mean?

12 A. Right. So the name means don't -- like
13 the name means "Speak up." Don't just accept what --
14 don't just accept something that you believe to be
15 unjust or if you see, for example, someone's human
16 rights not being respected, speak up about that.

17 12. Q. Okay. And just speak up or take
18 action?

19 A. It depends what you mean by "action."

20 13. Q. Okay, so let me give an example. My
21 understanding from your affidavit and some others is
22 that when the region passed its site-specific bylaw
23 and delivered some garbage containers on the property
24 in a site trailer, that a call went out from Fight
25 Back to start being at the site 24/7. So that would

1 be an example of action.

2 A. Yes.

3 14. Q. Okay. And I mean I'm just wondering
4 about other things. Does -- I mean is Fight Back KW,
5 that's the group that you are a part of?

6 A. Yes.

7 15. Q. Okay. And I don't need to know about
8 other things in Kitchener-Waterloo but in terms of the
9 encampment, how many -- how many of you are there?

10 A. I don't know.

11 16. Q. Okay. You, on your affidavit, you say
12 you've been spending overnights and some daytime at
13 the encampment, right? Since the bylaw passed?

14 A. Yes.

15 17. Q. Okay. And I understand from your
16 affidavit that there's a Fight Back tent?

17 A. Yes.

18 18. Q. Okay, and you are trying to make sure
19 there's a Fight Back presence at the encampment 24/7,
20 right?

21 A. Yes.

22 19. Q. So who are the others that join you or
23 relieve you from your shifts or whatever who are also
24 at the encampment as part of that 24/7 effort?

25 A. I don't know everyone's name. I only

1 know the people who I speak to directly.

2 20. Q. Okay. I am just wondering if you can
3 help us with who those people are?

4 A. Are you talking about other volunteers
5 or ...?

6 21. Q. Others who identify themselves to you
7 as Fight Back people.

8 A. Right. Like specifically at the
9 encampment you're talking about, right?

10 22. Q. At the -- yeah.

11 A. So in terms of people who are -- who
12 like are with Fight Back at the encampment, there's --
13 there's -- there's a lot of people I don't know. What
14 I will say is I do know Jakob, I do know Wren; does
15 that answer your question?

16 23. Q. That's a start. So Jakob, you mean
17 Jakob Stubbs?

18 A. I don't know their last name; I am so
19 sorry.

20 24. Q. That's fine. And Wren, Wren Wombwell?

21 A. Yes.

22 25. Q. Okay. And others that you know?

23 A. I can't be sure about people's names
24 and I don't want to be wrong about that.

25 26. Q. So just give us your best effort.

1 A. I know -- so I know someone named Ryan.
2 I know -- honestly, someone named Ryan. I don't know
3 everyone's name. I wish I could tell you more.

4 27. Q. Do you know someone called David?

5 A. Are you talking about David Alton?

6 A. No, I am talking about a Fight Back
7 person called David.

8 28. Q. I don't think so, sorry.

9 A. Okay. And what's your estimate of the
10 number of people that you encountered? So leaving
11 aside names. The number of people who are on rotation
12 maintaining this 24/7 presence?

13 A. I don't know how many.

14 29. Q. I mean, you know, give us a range, more
15 than 10?

16 A. I really can't tell you and because I
17 don't think I can be accurate, I don't feel
18 comfortable giving you an answer.

19 30. Q. Okay. So in terms of your involvement,
20 you say in your affidavit, and this is in Paragraph 4,
21 that you've been coming to the encampment since
22 October of 2023?

23 A. Yes.

24 31. Q. And until the bylaw was passed, I mean
25 the site-specific bylaw, that would have been coming

1 as a -- during the days, right?

2 A. Yes.

3 32. Q. And then, once the bylaw was passed,
4 you started initially coming to the encampment five
5 nights a week?

6 A. Yes.

7 33. Q. And that was in April. So April 16th
8 the bylaw is announced and the bins and the site
9 trailer are delivered onto the site. And then April
10 23rd, the bylaw is passed. So just to sort of fix this
11 as best we can, you started spending your five nights
12 in relation to that after the bylaw passed or maybe a
13 few days before or can you ---

14 A. Before.

15 34. Q. Okay. But after the -- after the
16 dumpsters and trailer arrived?

17 A. Yes.

18 35. Q. And you're now, you say in your second
19 affidavit, you went -- you scaled back to three nights
20 and then to two nights.

21 A. Yes.

22 36. Q. Okay. You talk in your first affidavit
23 at Paragraph 6 to 10 about somebody called Vanessa.
24 And you say that security told her that new tents are
25 in violation of the bylaw. Do you recall that in your

1 affidavit?

2 A. Yes, I do.

3 37. Q. Okay. And then you say they tried to
4 prevent her from setting up. But I am just trying to
5 understand what actually happened. What security did
6 -- was this all verbal?

7 A. Yes.

8 38. Q. Okay. And so they said something along
9 the lines of, you know, there's this new bylaw, you're
10 violating the bylaw if you set up your tent.

11 A. They said someone called bylaw on you.
12 You will be kicked out, anyone with a new tent will be
13 evicted.

14 39. Q. Right, "will be" is the way -- that's
15 what you remember?

16 A. Yes.

17 40. Q. Okay, but there's nothing physical what
18 they did?

19 A. Well, no.

20 41. Q. Okay. And you say that you told
21 security that Vanessa had been staying earlier at the
22 encampment?

23 A. Yes. I had seen her earlier the day of
24 the 16th, before the announcement.

25 42. Q. Okay. But you hadn't seen her before

1 April the 16th?

2 A. I can't be sure.

3 43. Q. You have no recollection of seeing her
4 before the 16th?

5 A. That's true.

6 44. Q. Okay. In your second affidavit, you
7 set out some specific incidents. And I just want to
8 sort of give you the references. And it's not so much
9 what you say, it's kind of the way you set it up. So
10 on Paragraph 8 you talk about an incident on March 13th
11 at 9:50 p.m. Do you see that?

12 A. I am just scrolling down, sorry,
13 paragraph ...?

14 45. Q. Paragraph 8. That's actually the first
15 line, "On March 13th, 2025 at approximately 9:50 p.m.?"

16 A. Mm-hmm.

17 46. Q. That would be a "yes" or a "no." Yes?

18 A. Yes. Sorry.

19 47. Q. No problem. So you give kind of a
20 precise time there. And in Paragraph 9 you talk about
21 May 5th at 7:55 a.m.?

22 A. Yes.

23 48. Q. And another precise time. And on
24 Paragraph 13 you talk about May 9th at 4:00 a.m.?

25 A. Yes.

1 49. Q. And then the last one is Paragraph 15,
2 you say June 21st at approximately 5:20 a.m.?

3 A. Yes.

4 50. Q. Okay. And I am just wondering, I
5 understand from the evidence elsewhere that Fight Back
6 keeps a log of what happens in the encampment?

7 A. That's true.

8 51. Q. And so are these items that you
9 confirmed with the log?

10 A. Yes.

11 52. Q. Okay. And at each of these four, it
12 was -- it was -- you were personally present?

13 A. That's true.

14 53. Q. But then in Paragraph 16 you say you've
15 been advised by other members of Fight Back of at
16 least three other occasions where Fight Back supply of
17 Narcan has been used by residents to successfully
18 reverse a potentially fatal overdose without having to
19 call an ambulance.

20 A. Yes.

21 54. Q. So did you -- for those three other
22 occasions or at least three other occasions, was that
23 something that you got from the log?

24 A. No, that was an estimate on my part.

25 55. Q. Okay. And so who are the other members

1 of Fight Back that told you about these incidents?

2 A. That told me about the Narcan?

3 56. Q. Yes. That told you about what to say
4 at Paragraph 16.

5 A. I don't remember the names of the Fight
6 Back members that told me. I just remember being
7 told.

8 57. Q. Is that something that we could expect
9 to find noted in the log?

10 A. Probably.

11 58. Q. Okay. You expressed some views in
12 Paragraph 17 about people using the buddy system.

13 A. Yes, my observations, yes.

14 59. Q. So your observation is, you say that
15 people are extremely good at using the buddy system
16 when using substances. And then you say:

17 "... In general, I have observed more people
18 using substances communally than people
19 using alone ..."

20 A. Yes.

21 60. Q. But you have observed people or you
22 know of people who do use alone?

23 A. I assume that it happens but I haven't
24 seen that happen because I would have to be in -- in
25 the presence of someone to be able to know that for

1 sure. And then, you see, they wouldn't be alone.

2 61. Q. Right, okay. So when you make that
3 comparison, you are assuming there is use by people
4 alone and would that be based on conversations you
5 have with other residents or with other Fight Back
6 members?

7 A. No, that's based on my assumption that
8 it probably happens.

9 62. Q. Okay. And you're aware that there have
10 been at least five deaths at the encampment?

11 A. Yes.

12 63. Q. Okay. So either because people are
13 using alone or because the death is nothing to do with
14 substance use or because the buddy system is not
15 working, there are these tragic incidents. Right?

16 A. Well, can I ask what your question is?

17 64. Q. Yeah, I'm just asking you to agree that
18 either because people aren't using alone or it has
19 nothing to do with substance abuse or the buddy system
20 is not working, we do have some tragic incidents,
21 isn't that the case?

22 A. I don't think that that's evidence that
23 the buddy system doesn't work.

24 65. Q. Because it might be people not -- not
25 having a buddy? Is that why? Just explain your

1 answer, please.

2 A. Well, I can't say why those people
3 passed but I don't think that it's to do with the
4 buddy system not working. I think there's far more
5 evidence that the buddy system does work than there is
6 evidence that it doesn't.

7 66. Q. But you have to be using with a buddy
8 for that to work?

9 A. Well, yeah, that is what the buddy
10 system is. That's what a buddy system is.

11 67. Q. Okay. I want to ask you about a news
12 article where you were quoted.

13 A. (Indiscernible).

14 68. Q. From December 9th of 2024 and we're just
15 pulling it up on the screen. This is -- the article
16 is entitled, "Galt hosts new emergency shelter," from
17 December 9, 2024. And you are quoted in this. Do you
18 recall seeing this article?

19 A. I don't recall.

20 69. Q. So what I'll do is I'll take you to
21 what you are recorded as having said and that may help
22 or it may not help.

23 MS. SCHIUTEMA: Where was it posted, Andrew.
24 That might help, too.

25 MR. LOKAN: I was just looking for that,

1 thank you. I am told it is from a website
2 called "Community Edition."

3
4 BY MR. LOKAN:

5 70. Q. And what I want to ask you about is on
6 Page 4 of the -- 4 or 5 of the article as we have it
7 printed. And what you're recorded as saying is --
8 first of all, you're identified as, "Delegate Eddy
9 Grignon is a former client of a women's shelter." And
10 you are quoted as saying:

11 "... I left a relationship a broken person. I
12 walked into a doctor's office who gave me
13 the info for a women's shelter. The women's
14 shelter saved my life. We need the
15 infrastructure to be in place so that people
16 like me can live, Grignon said ..."

17 And this is an article about a particular
18 shelter. So, Eddy, do you recall giving a quote along
19 those lines?

20 A. Yes, I believe that was taken from a --
21 my delegation at council.

22 71. Q. Okay. At region council or was this
23 City of Cambridge or ...?

24 A. Regional council, yes.

25 72. Q. Okay, that makes sense. Do you accept

1 that that's an accurate quote of at least some of what
2 you said?

3 A. Yes, I do believe that we need women's
4 shelters.

5 73. Q. Right, and I am not going to ask you
6 about your personal circumstances but it sounds like
7 you see shelters as being a facility that can be very
8 positive in helping people either transition from an
9 abusive situation or get on their feet if they're
10 experiencing homelessness, is that fair?

11 A. Yes, they can be when they're
12 accessible.

13 74. Q. Okay. So you're not a person who is
14 yourself anti-shelters but you do have questions about
15 whether they are set up to be sufficiently accessible
16 to the full range of clients who may need them, is
17 that ---

18 A. Absolutely.

19 75. Q. Okay. So thank you, I have no further
20 questions. Oh, I did want to just suggest that
21 perhaps with that document, I don't think I need it as
22 an exhibit but I am happy to have it marked as
23 lettered exhibit if you would prefer, Ashley?

24 MS. SCHIUTEMA: Sure, let's mark it as a
25 lettered exhibit, just for clarity.

E. Grignon (Re-Ex.) - 18

1 MR. LOKAN: Okay. So Exhibit A then to the
2 cross-examination of Eddy Grignon.

3
4 EXHIBIT NO. A: Article, quoted portion re cross-
5 examination of Eddy Grignon

6
7 MS. SCHIUTEMA: And I want to ask some
8 questions about that article. Is it
9 possible to put it back up on the screen?

10 MR. LOKAN: Yeah.

11 MS. SCHIUTEMA: It looks like it was
12 delegations that were done in August of 2024
13 to Waterloo Regional Council.

14
15 RE-EXAMINATION BY MS. SCHIUTEMA:

16 76. Q. Eddy, can you tell us like the nature
17 -- if you recall the nature of why you were doing
18 those delegations?

19 A. Yes, at the time there wasn't a women's
20 shelter. The shelter at Frederick Street was closed
21 and I was advocating for what I saw as a need for
22 women's shelter in the area.

23 77. Q. So when you say the shelter at
24 Frederick Street, can you, just for the record, help
25 us understand what that shelter was?

1 A. That was Mary's Place and it was a
2 women's shelter that then closed down and from what I
3 understand, many of the women who were in that shelter
4 ended up either in other -- in unsafe situations, were
5 at 100 Vic.

6 78. Q. And is it accurate to say that at the
7 time in August when you were doing this delegation,
8 that there was no women's-only shelter in Kitchener?

9 A. That is accurate.

10 MR. LOKAN: Ashley, I am going to have to
11 ask you not to lead in re-examination. It's
12 not a cross-examination. I ---

13 MS. SCHIUTEMA: I'll rephrase the question.

14 MR. LOKAN: Well, you have the answer after
15 suggesting it to the witness. So ---

16 MS. SCHIUTEMA: Okay.

17 MR. LOKAN: You also have my objection.

18 MS. SCHIUTEMA: I don't think I have any
19 other questions. I don't think I have any
20 redirect that's needed here either. Thank
21 you, Eddy, thank you for your time.

22 THE WITNESS: Thank you.

23
24 --- ADJOURNED
25

THIS IS TO CERTIFY that the foregoing
is a true and accurate transcription of
my recordings and notes, to the best of
my skill and ability.

BarPollard

Barbara A. Pollard
Certified Court Reporter

Photostatic copies of this transcript are not
certified and have not been paid for unless they bear
the original signature of Barbara A. Pollard, C.C.R.,
and accordingly are in direct violation of Ontario
Regulation 587/91, Courts of Justice Act, January 1,
1990.

EXHIBIT “A”



CRAIG BEKER PHOTO

GALT HOSTS NEW EMERGENCY SHELTER

[Melissa Bowman](#)

December 9, 2024 * News

The closure of the YW Kitchener-Waterloo women's shelter at 84 Frederick St. in June 2024 left a gap in emergency shelters for women and gender-diverse

folks in the Waterloo Region. However, the lack of such services had been felt in Cambridge long before its closure.

There has never been an emergency shelter dedicated solely to women and gender-diverse individuals in Cambridge. While The Bridges shelter had previously operated as a co-ed space, it transitioned to a men's only shelter during the pandemic.

"Cambridge has never had a women's shelter despite continued effort from YW Cambridge. It shows a real system gap that we've had for decades. We were relying on one shelter to provide all services to all women and non-binary people in this region," Erin Dej, an associate professor of criminology at Wilfrid Laurier University, said.

"Women from Cambridge had to travel to Kitchener and leave their support systems, if they were able to even get into the shelter," Marjorie Knight, a local housing advocate, said.

"Yes, women can go into the co-ed shelter, women fleeing violence can go to the crisis shelter. But women, especially those with children, right now don't have a shelter to go to."

That is changing this month, however, as the YW Cambridge opens a temporary women's shelter at Grace Bible Chapel in Galt. The shelter will provide 20 beds, operating 24 hours a day, seven days a week.

Through the proposed operating model, the shelter is expected to support single women and gender-diverse adults, while also supporting various other demographics through on-site support.

"The proposed operating model prioritizes harm reduction, restorative justice and relational models for support. On-site supports include housing, primary and mental health, cultural, life skills, and service navigation," the Regional Council report stated.

The Project Willow report, which examined women's homelessness in the Waterloo Region, found women who are experiencing homelessness do not access local supports or services due to fear of violence, family situations involving children, or feelings of shame.

"In Cambridge, there is nowhere for a woman experiencing homelessness to go. National research bears out that women and gender-diverse individuals do not enter co-ed or male-dominated spaces," Roz Gunn, director of communications and advocacy with YW Cambridge, said.

The YW's Women's Homelessness in Cambridge report outlined several trends: women's homelessness is glossed over as a community issue, Cambridge is a service desert for women experiencing homelessness, there is a lack of a continuum of housing leaving options for women and there is a problematic reliance on services in other communities to support women.

"Historically, women's homelessness in Cambridge has been largely unacknowledged and therefore inadequately understood and addressed," the report stated.

To gain an understanding of the number of people experiencing homelessness locally, The Region of Waterloo engages in a Point in Time (PiT) count. However, since many women experiencing homelessness are largely hidden, it can be difficult to capture accurate data.

With that in mind, several local organizations such as the AIDS Committee of Cambridge, Kitchener, Waterloo & Area (ACKWAA); the Coalition of Muslim Women; and Marillac Place partnered with the YW Cambridge to intentionally address that gap in data.

"We want to help women get out of homelessness quicker and ideally prevent it from happening altogether. We're never going to get to that point if we don't have data that can support decisions and encourage funding from upper tiers of government," Jennifer Gordon, manager for advocacy and research for YWCA Cambridge, said.

Kim Decker, chief executive officer of YW Cambridge, spoke to Cambridge Council on Oct. 22, 2024, about the proposed temporary women's shelter at Grace Bible Chapel. Decker said her team has spent two years preparing for this shelter, including research and planning.

"A women's emergency homeless shelter has been so desperately needed in Cambridge. Women deserve a safe and supportive place to go when they're experiencing what's often the worst and most traumatic time of their lives," Decker said.

Adam Cooper, regional councillor for the City of Cambridge, expressed concerns about the YW shelter and that residents were not consulted. He also expects it might add to issues that he says residents are seeing at The Bridges shelter.

"We have a community that is dealing with the fallout of mismanaged shelters, and we are trying to sort that as opposed to add to it. We are going to be making things worse, despite the good goals," Cooper said.

Decker said the model for the women's shelter is very different from The Bridges shelter because of its capacity, the services and supports that it will offer, and the fact that it is open 24 hours a day, seven days per week, whereas The Bridges residents must leave the shelter during the day.

"I have spoken personally to the businesses in the area, and we did a 500-metre mail drop to folks, and in fact all we got back were positive comments and the community asking us how they can help establish the shelter," Decker said.

The shelter is expected to open this month.

Waterloo Regional Council heard from many delegations on Aug. 13, 2024, in general support of an emergency shelter dedicated to women and gender-diverse individuals.

Delegate Sidney MacDonald spoke on behalf of an individual named Krissy who shared her experience of fleeing domestic violence, living on the streets for a

period and then finding support from Anselma House.

“Though we were still very much unhoused, we felt like we were a part of a community. Women and non-binary people supporting each other is a power incomparable to anything else I have ever witnessed,” MacDonald said on behalf of Krissy.

Delegate Eddy Grignon is a former client of a women’s shelter.

“I left a relationship a broken person. I walked into a doctor’s office who gave me the info for a women’s shelter. That women’s shelter saved my life. We need the infrastructure to be in place so that people like me can live,” Grignon said.

Citizens for Cambridge, a volunteer organization advocating for “the development of a better community for all,” argues that additional supportive housing in Cambridge is also needed to improve the health and well-being of its most vulnerable members.

“In Cambridge, the gap between the availability and need for supportive housing is steadily growing. Without significant investment in supportive housing, we are failing those who need help the most,” Anne Tinker, former director of the Cambridge Shelter Corporation (The Bridges), said.

Currently, Cambridge has fewer than 25 supportive housing units—an issue that Citizens for Cambridge believes is a crisis in the making. They are calling for political leaders to recognize that the cycle of homelessness and poverty will not end without more investment in supportive housing.

“We need a concerted effort from all levels of government to fund and support the expansion of supportive housing in Cambridge. The community’s health and the well-being of its most vulnerable members depend on our ability to provide comprehensive, long-term housing solutions,” Citizens for Cambridge said.

The Women’s Homelessness in Cambridge report agrees that action is required from all levels of government and sectors.

“Realizing the human rights of women, girls and gender diverse individuals experiencing homelessness, requires deep investments, cross sectoral collaboration and policy change,” the report stated.

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Published: December 9, 2024

Filed under: News

Tags: ACKWAA, Anne Tinker, Cambridge, Cambridge Council, Cambridges Shelter corporation, citizens for cambridge, Citizens or Cambridge, CMW, Coalition of Muslim Women, Craig Becker, Craig Becker Photo, Eddy Grignon, Emergency Shelter, Erin Dej, Galt, Grace Bible Chapel, housing crisis, Jennifer Gordon, Marillac Place, Marjorie Knight, Melissa Bowman, Project willow, regional council, Roz Gunn, Sidney

TAB 5

Court File No. CV-25-00000750-0000

ONTARIO
SUPERIOR COURT OF JUSTICE

BETWEEN:

THE REGIONAL MUNICIPALITY OF WATERLOO

Applicant

and

PERSONS UNKNOWN AND TO BE ASCERTAINED

Respondents

APPLICATION UNDER Rule 14.05 of the *Rules of Civil Procedure*

This is the Cross-Examination of **Jacara Droog** on her affidavit dated June 4, 2025, taken via Zoom videoconference on consent of the parties on July 14, 2025.

APPEARANCES:

ANDREW LOKAN, Mr. Counsel for the Applicant
GRETA HOAKEN, Ms.

SHANNON DOWN, Ms. Counsel for the Respondents
JOANNA MULLEN, Ms.

MERCEDES PEREZ, Ms. Amicus Curiae

(i)

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3.	Jacara Droog's LinkedIn page (since <u>amended)</u>	17
4.	Article titled "Don't block the help: Restoring access and dignity to Kitchener encampment residents." Authored by Jacara Droog, Erin Dej, and <u>Lori Lafond</u>	23
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1 July 14, 2025

2
3 JACARA DROOG, AFFIRMED

4 CROSS-EXAMINATION BY MR. LOKAN:

5 1. Q. So, Jacara, we are here to cross-
6 examine you on your affidavit that was affirmed June 4
7 of 2025. Do you understand that?

8 A. Yeah, I understand.

9 2. Q. Okay. I'm just going to go through a
10 couple of ground rules. First of all, I'm Andrew
11 Lokan, I'm a lawyer for the Region and when I ask you
12 questions, if you are ever confused, or don't hear, or
13 miss part of it, please feel free to either ask me to
14 repeat the question, or to explain something, or
15 rephrase, okay?

16 Another thing is that you should have before
17 you your affidavit. Could I just confirm that you
18 have that?

19 A. Yes. I have it.

20 3. Q. And you shouldn't have any other materials
21 in front of you, or on your computer that you're
22 looking at, is that right?

23 A. (Indiscernible).

24 4. Q. Okay. When I'm questioning and you're
25 answering, we should both try not to talk at once

1 because it's very difficult for the court reporter to
2 take it down if voices are talking over each other.
3 And when that happens, it's sometimes my fault,
4 sometimes the witness's fault, but just to remember
5 that we should try and avoid that.

6 And finally, that if you want to agree or
7 disagree with something I've questioned you about, try
8 to use "Yes," or "No," and not "Mm-hmm." The reason
9 why is that "Mm-hmm," when you might be nodding, or
10 you might be "Mm-hmm," shaking your head, it comes
11 across ambiguous on the transcript. So in order to be
12 clear, we use "Yes," or "No."

13 You're okay with all of that?

14 A. Yeah.

15 5. Q. Thank you. We will be screen-sharing some
16 documents so that we can make sure that we're pointing
17 to the same thing.

18 A. Okay.

19 6. Q. I'd like to take you to paragraph 3 of your
20 affidavit, please.

21 A. Okay, where it starts, "From January...?"

22 7. Q. Yeah, let me just make sure I've got the
23 right -- you say from January to August '24, you were
24 consistently present as a community organizer at the
25 encampment, where you engaged regularly with

1 residents, and you returned to the encampment in
2 April, 2025, and have been present almost daily since
3 April 22.

4 When you say, "Community organizer," do you
5 mean as a member of Fight Back?

6 A. No, I mean as -- I'm a community
7 advocate as an individual. And so I sometimes
8 collaborate with Fight Back, just like I collaborate
9 with other community groups. So I meant that as I as
10 an individual, do community advocacy, and community
11 building, and community organizing. But as an
12 individual who sometimes collaborates with various
13 groups.

14 8. Q. Okay. Now Fight Back doesn't have, as far
15 as you know, any formal membership structure or -- you
16 know, there's no fee that you pay, or no document that
17 you sign to become a member, is that fair?

18 A. Not to my knowledge.

19 9. Q. Okay. And there is at least one Fight Back
20 tent on site, right?

21 A. I believe that's correct.

22 10. Q. Okay, so when you come on site, are you
23 there in the Fight Back tent from time to time, or all
24 the time, or none of the time?

25 A. Sometimes. Sometimes I access the

1 tent.

2 11. Q. Okay. And you also have access to the Fight
3 Back log, right?

4 A. Sometimes, yeah.

5 12. Q. And you've even made entries into the Fight
6 Back log?

7 A. I have.

8 13. Q. Okay. And I'm just wondering if we can show
9 to you, Jacara, two documents that were sent to us
10 last night?

11 A. Okay.

12 14. Q. The first -- and there's sort of some
13 overlapping bits here. But the first one starts with
14 an April 18th entry, and if you look down near the
15 bottom for June 26, you're noted as having made an
16 entry in the log on June 26?

17 A. I see that, yeah.

18 15. Q. And then a little bit further, you're also
19 noted as having made an entry for July 4th?

20 A. Yes.

21 16. Q. Okay. Now this isn't the actual log, as I
22 understand it. Is the log a handwritten document
23 that's kept in the tent?

24 A. Not to my knowledge, no.

25 17. Q. What is it? Is it a computer file?

1 A. I've sent messages. Like, for example,
2 I have sent an email to Fight Back on numerous
3 occasions. So I have sent an email documenting some
4 of the notable interactions on site, and I've
5 sometimes sent a text message. So the information
6 sharing can be different. I've also shared verbal
7 communication. So yeah, various modes of
8 communication.

9 18. Q. And when you do that, do you say, "This is
10 for the log?"

11 A. Yes.

12 19. Q. Okay. Not for right now, but following this
13 examination, could I please have a copy of the texts
14 or emails that you have sent to Fight Back for the log
15 since April 18th?

16 MS. DOWN: I'll take that under advisement
17 and let you know.

18 **--- UNDER ADVISEMENT**

19 MR. LOKAN: Okay. And counsel, while you're
20 here, what's been produced to me is a
21 document described as, "Related to" the
22 Fight Back log. I just wonder if I can have
23 an explanation on the record as to what that
24 means?

25 MS. DOWN: (Indiscernible).

1 MR. LOKAN: If you want to defer until after
2 the next break, I'm okay with that. But,
3 you know, just an email with a vague term
4 is, from my point of view, not sufficient.

5 MS. DOWN: Okay. I'll find out and let you
6 know. And so the text messages and email
7 communications that Ms. Droog has sent to
8 Fight Back that you're requesting, is that
9 for a specific time period?

10 MR. LOKAN: Since April 18th.

11 MS. DOWN: Since April 18th. And for any
12 purpose?

13 MR. LOKAN: Yes, actually I would like for
14 any purpose, now that you ask. That's the
15 undertaking I'm asking for.

16 MS. DOWN: Okay, we'll take that under
17 advisement.

18 MR. LOKAN: And if you're of the view that
19 that's too broad, then I would, in the
20 alternative, ask for the ones that are
21 identified as being for the log.

22 MS. DOWN: Okay.

23 MR. LOKAN: Maybe I should go back to April
24 16th, which is the day that the site-specific
25 bylaw was announced.

1 MS. DOWN: Okay.

2 --- UNDER ADVISEMENT

3 BY MR. LOKAN:

4 20. Q. And we have a second page, if we can pull
5 that up? And on the second page, down the bottom,
6 Jacara, you'll see that there are two entries
7 attributed to you: 9:53 and 9:59 p.m.?

8 A. Okay.

9 21. Q. Again, does this -- are these dates when, to
10 your recollection, you sent messages to the Fight Back
11 for inclusion in the log?

12 A. Yes.

13 22. Q. Okay. If I can just ask -- I mean I know an
14 email address can be for an organization -- for the
15 text messages, typically that's for a person, so who's
16 the person that you text when you're sending?

17 A. There's a number of folks that I've
18 sent texts to since April. I couldn't say with
19 certainty and I wouldn't want to guess.

20 23. Q. So I'm not asking you to guess, but the ones
21 that you remember, for the purposes of the log, when
22 you are saying, "This is for the Fight Back log," who
23 are those people?

24 A. Again, I can't say with certainty if it
25 was in the context of the log, so I couldn't guess.

1 24. Q. Okay, so ---

2 A. I have sent emails to the Fight Back
3 email, and that I can say with certainty.

4 25. Q. Okay, so generally then, not restricting
5 yourself to, "For the log," when you're texting does
6 it include Wren Wombwell?

7 A. No, I do not have that contact in my
8 texts.

9 26. Q. Does it include Aaron El Sabrout?

10 A. No, I don't have that number in my text
11 messages.

12 27. Q. Does it include Jacob Stubbs?

13 A. I have had communication with Jacob
14 Stubbs ---

15 28. Q. (Indiscernible).

16 A. Not over text message, but ---

17 29. Q. Okay, so who do you recall is included in
18 your text messages?

19 A. I believe I've sent a Signal message to
20 Jacob, not a text message.

21 MR. LOKAN: Okay, so I'd asked for the texts
22 and emails; I'd like to extend my requests
23 to Signal messages as well, please. So
24 that's for counsel to consider. I assume
25 that I'm going to get the same, "Under

1 advisement," on that, Shannon?

2 MS. DOWN: Yes.

3 MR. LOKAN: Okay, thank you.

4 **--- UNDER ADVISEMENT**

5 BY MR. LOKAN:

6 30. Q. Now, you say that you had been coming to the
7 site almost daily since April 22 of 2025, Jacara?

8 A. Yes, at the time that I wrote the
9 affidavit that was accurate. Now, I would say, I'm --
10 I visit the site on average two to -- two, maybe three
11 times a week now.

12 31. Q. Okay, but I take it when you started coming
13 on April 22nd it was in response to the call out from
14 Fight Back to have people come and attend the site?

15 A. I don't recall that that was the
16 reason. I believe that I was keeping -- I was keeping
17 up with the regional council meetings and that was a
18 point of concern for me, so I returned to the site to
19 check in with community members at the encampment and
20 the residents there.

21 32. Q. Okay, and you did that in your capacity as a
22 member of the Unsheltered Campaign?

23 A. Yeah, I am a part of the Unsheltered
24 Campaign and -- but also as an individual as well.
25 I'm there as an individual at the encampment.

1 MR. LOKAN: Okay. Before I forget Shannon,
2 any objection to marking the log, the two
3 pages, as exhibit 1 and exhibit 2 to this
4 cross-examination?

5 MS. DOWN: No, just it's -- that wasn't
6 produced or sorry, it wasn't authored or
7 recognized specifically by Jacara Droog,
8 just that those messages are from her,
9 correct?

10 MR. LOKAN: That may be the case, but this
11 was identified as documents related to the
12 log in response to my request for the log
13 and it came via counsel, so there shouldn't
14 be any identification issue.

15 MS. DOWN: That's fine.

16 MR. LOKAN: Okay, so we'll mark them as
17 exhibit 1 and exhibit 2. And the one that
18 starts April 18th, I'll call exhibit 1, and
19 the other one, starting April 25th, I'll call
20 exhibit 2.

21
22 EXHIBIT NO. 1: Document related to log, dated April
23 18th

24 EXHIBIT NO. 2: Document related to log, dated April
25 25th

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MR. LOKAN: And, you know, whatever the witness says about them on the record, that's her evidence, but as I say, they're exhibits.

MS. DOWN: I just wanted to make it clear that she wasn't the author of the exhibits, she's just mentioned in them.

MR. LOKAN: Okay. She's probably indirectly the author of the entries that she sent.

MS. DOWN: Right, but not the entire document.

MR. LOKAN: Okay.

BY MR. LOKAN:

33. Q. Jacara, you have a LinkedIn page, and we're going to pull that up for you.

A. Okay.

34. Q. You describe yourself at the top of the page as, "Registered social worker, counsellor, and advocate," amongst other things?

A. (Inaudible).

35. Q. Thank you. As well as, "Community organizer." When you say community organizer, do you mean with Unsheltered Campaign?

1 A. I mean as an individual who -- like I
2 said previously, I occasionally collaborate with
3 various groups when the causes or our goals align.
4 But right now, I would say mostly with the Unsheltered
5 Campaign, yes.

6 36. Q. Okay. And when you look a couple of pages
7 in at your experience, you describe yourself as a
8 "Community advocate," in the last -- in a number of
9 different recent engagements, if I can put it that
10 way?

11 A. Correct.

12 37. Q. And so you're advocating for what you see as
13 the rights of the homeless? Is that ---

14 A. Correct.

15 38. Q. Okay, thank you. Now, Unsheltered Campaign,
16 you say, "Permanent part-time." You also say is
17 unpaid?

18 A. Yes, this actually isn't up to date,
19 this page. My LinkedIn says, "Community advocate,"
20 and in parentheses, "Volunteer." So it's a part-time
21 volunteer -- LinkedIn is very limited in their options
22 of descriptors.

23 39. Q. I understand.

24 A. Yeah.

25 40. Q. I was just wanting to confirm that it is

1 unpaid.

2 A. It is unpaid, yes.

3 41. Q. But if you look at the one below that, you
4 were also a consultant of the Social Development
5 Centre for Waterloo Region?

6 A. Yes, that's correct.

7 42. Q. You took what looks like a freelance
8 engagement for the month of July with the SDC?

9 A. I received an honourarium.

10 43. Q. Okay, and that's to assist with some
11 community engagement sessions around emergency shelter
12 planning and policy development?

13 A. That's correct. It was around the 84
14 Frederick women's shelter and proposing solutions
15 around that shelter.

16 44. Q. Okay. And that's funded by the Region,
17 isn't it?

18 A. I received my honourarium from the SDC,
19 so you'd have to ask them where that money comes from.

20 45. Q. Okay. You're not aware of whether the SDC
21 is or isn't funded by the Region?

22 A. I would assume that they receive some
23 funding from the Region, but again I can't say with
24 certainty.

25 46. Q. Okay, thank you.

J. Droog (Cr.-Ex.) - 17

1 MR. LOKAN: Could we mark this as exhibit 3?
2 This is Jacara's LinkedIn page, and with the
3 qualification that it has since been amended
4 to point out in the Unsheltered Campaign,
5 that the proper description is "Volunteer,"
6 not "Permanent part-time." Is that okay,
7 Shannon?

8 MS. DOWN: That's fine with us.

9 MR. LOKAN: Okay.

10
11 EXHIBIT NO. 3: Jacara Droog's LinkedIn page (since
12 amended)

13
14 BY MR. LOKAN:

15 47. Q. And, Jacara, are there any other amendments
16 to the LinkedIn page that we should take note of?

17 A. Not to my knowledge at the moment.

18 48. Q. Okay. If you become aware of any, just let
19 us know through counsel for the WRCLS.

20 A. Okay.

21 49. Q. Now you were a co-author of an article
22 called, "Don't block the help: Restoring access and
23 dignity to Kitchener encampment residents?"

24 A. That's correct.

25 50. Q. And that's not this one, that's another one.

1 There we go. Maybe you could have that fill the
2 whole screen? So this is an article that you wrote
3 together with two others, Erin Dej, I may be
4 mispronouncing that, and Lori Lafond?

5 A. Correct.

6 51. Q. And Erin is a member, along with you, of the
7 Unsheltered Campaign?

8 A. That's correct.

9 52. Q. And if we go to the end of the article --
10 just, maybe the bottom of the page before -- we'll
11 start with your description. I take it you signed off
12 on this article, including the description that you
13 gave of yourself?

14 A. Yes.

15 53. Q. Okay. "Jacara Droog is a social worker,
16 housing advocate, member of the Unsheltered Campaign,
17 and writing in solidarity with residents at 100 Vic?"

18 A. That is correct.

19 54. Q. Okay. And Erin gave the following
20 description of the Unsheltered Campaign, "A group of
21 housed and unhoused community members who advocate for
22 year-round support, housing, and alternatives to
23 shelters for all unhoused people in Waterloo Region."
24 That was her description, do you see that?

25 A. I see that.

1 55. Q. And you don't take issue with her
2 description, do you?

3 A. I don't. Yeah.

4 56. Q. If we can go to the second page of the
5 article? The second page in, I'm looking at the
6 second paragraph -- you and your co-authors wrote:

7 "The bylaw contains some positive elements,
8 such as limited funds for rent supplements
9 and significantly more money flagged for
10 temporary motels that will expire by the end
11 of next year."

12 Now at the time that you wrote this article,
13 that's a description that you were content with,
14 correct?

15 A. I didn't write that paragraph. Is that
16 what you're asking?

17 57. Q. You co-wrote the article and you signed off
18 on the article?

19 A. Correct, yeah.

20 58. Q. So at the time that this was published you
21 didn't disagree with that statement?

22 A. That's correct. I didn't disagree with
23 that statement.

24 59. Q. Okay, thank you. If we pop down to the --
25 further on the page where it says, "Article continues

1 below," I don't know, maybe there was originally a
2 picture, but there is a sentence which says:

3 "This looks like a trailer on site for
4 residents to meet with a housing worker, but
5 it also means shrinking the space where
6 tents are allowed, blocking off the site so
7 that no new residents can pitch a tent, and
8 creating more blockades around the space."

9 I just want to ask you about the first part,
10 "This looks like a trailer on site for residents to
11 meet with a housing worker." Now, you're a registered
12 social worker, as I understand it?

13 A. Correct.

14 60. Q. And you would agree with me that
15 conversations with a resident around housing options
16 may very well bring up medical issues, is that fair?

17 A. Yes, sometimes.

18 61. Q. And may also bring up matters that are quite
19 personal to the resident?

20 A. I would agree with that.

21 62. Q. And so you're not arguing that there should
22 be -- you're not arguing against there being a place
23 where the Region's USWs can have confidential
24 conversations with residents, are you?

25 A. I'm not against the confidentiality

1 with residents. I was frustrated by the Region moving
2 in the mobile trailer before the bylaw had even been
3 passed. So that was an issue with residents because
4 residents were not informed about this and did have
5 informed consent, and were deeply distressed by it.

6 MR. LOKAN: Okay, sorry, that was me talking
7 over you for a second. Madam reporter, did
8 you get all of that? Does any of that need
9 to be repeated?

10 MS. POLLARD: I got everything. Thank you
11 so much.

12 MR. LOKAN: Thank you.

13
14 BY MR. LOKAN:

15 63. Q. So, Jacara, I want to take it one step at a
16 time, and you don't need to repeat things that are
17 already said in your affidavit.

18 A. Okay.

19 64. Q. They are on the record and you don't get any
20 points for repetition. So I understand you have an
21 objection around what residents were told when, but
22 I'm asking you about the confidential conversations.
23 It is appropriate, wouldn't you agree, for there to be
24 a space on the encampment for the USWs to talk to
25 residents confidentially?

1 A. If residents are open to that then yes,
2 I'd agree with that.

3 65. Q. Okay, thank you. If we can go to the next
4 page, just under, "Article continues below," you have
5 a sentence which says:

6 "One recent article, for example, focused on
7 service disruptions while omitting critical
8 context, including that notices lacked a
9 date and time, and that the Region attempted
10 to place dumpsters near a resident's tent
11 despite clear public health and safety
12 concerns, such as the risk of rodents or
13 dumpster fires."

14 I've read that correctly, have I?

15 A. That's correct.

16 MR. LOKAN: Okay. First of all, could we
17 mark this article as the next exhibit,
18 please? That would be exhibit 4. Shannon
19 is that ---

20 MS. DOWN: Yeah, that's fine.

21 MR. LOKAN: Thank you.

22

23 EXHIBIT NO. 4: Article titled "Don't block the help:
24 Restoring access and dignity to Kitchener encampment
25 residents." Authored by Jacara Droog, Erin Dej, and

1 Lori Lafond

2
3 BY MR. LOKAN:

4 66. Q. Now, the article that you're referring to
5 here when you say, "One recent article, for example,
6 focused on service disruptions..." that is an article
7 called, "Maintenance workers blocked from accessing
8 garbage bins at Kitchener encampment?"

9 A. Yes.

10 67. Q. Okay. And I'm going to pull that up for
11 you, if we can display that? Published on May 29th,
12 and your article, which we just marked as exhibit 4,
13 that you co-wrote, was June 10th. So do you recognize
14 this as the article that you were commenting on in
15 exhibit 4?

16 A. I believe so, yes.

17 68. Q. Okay. I wonder if we can go to the top of
18 the next page? And here is what you're complaining
19 about:

20 "Maintenance workers and bylaw officers
21 experienced some unexpected complications
22 Thursday morning when they were trying to
23 remove garbage from an encampment in
24 Kitchener."

25 Do you see that?

1 A. Yes, I see that.

2 69. Q. Okay. And that part you're not disputing,
3 right? That there were complications in removing
4 garbage from the encampment?

5 A. There were complications, yes.

6 70. Q. Okay. And the, "Removing garbage," refers
7 to removing garbage from the dumpsters on site?

8 A. I believe so.

9 71. Q. Yeah. And you say you're not there daily
10 anymore, but for a while you were there almost daily?
11 Would that include the period around May 29th?

12 A. Is May 29th this incident that this
13 article is referring to?

14 72. Q. Yes.

15 A. Then yes, I was there for that event.
16 Yes.

17 73. Q. Okay. And are you aware, generally, that
18 the Region has been emptying those dumpsters every two
19 weeks?

20 A. Recently, every two weeks. I think
21 more recently it has been more consistent. I think in
22 the past, like earlier in April, it was more
23 inconsistent. That sometimes drivers would come onto
24 the site, look in the bins and then leave.

25 74. Q. Okay, but the Region says that they're full

1 when they empty them?

2 A. In my experience that hasn't always
3 been the case.

4 75. Q. Okay. But let me just ask you about,
5 "Unexpected." Isn't it the case that when the
6 Region's workers came, there were some tents that had
7 been -- or structures that had been moved closer to
8 the dumpsters?

9 A. I have no knowledge of that.

10 76. Q. So for all you know, they could have been
11 moved, they could not have been moved, but they were
12 blocking access to the dumpsters?

13 A. It's possible. I don't know about
14 that.

15 77. Q. Okay. So you wouldn't know then of any
16 efforts to move tents close to the dumpsters in order
17 to get in the way of the maintenance work?

18 A. To my knowledge that has not been a
19 priority of anyone on site.

20 78. Q. Not a priority? But you don't dispute that
21 it could've happened?

22 A. It's possible but improbable.

23 79. Q. There are people who are against everything
24 that the Region is doing at the encampment, correct?

25 A. I would not agree with that statement.

1 80. Q. Okay. There are people who are against the
2 entire project of closing the encampment, and you're
3 one of them, right?

4 A. I'm against the displacement of people
5 that are unhoused with nowhere to go, correct.

6 81. Q. No, well, we can get into, "Nowhere to go,"
7 but there are people who just -- leaving you aside,
8 there are people that you know, who simply say, "This
9 encampment cannot close." Is that fair? "This
10 encampment should not close."

11 A. I'm not aware of people that are
12 against it not closing for any arbitrary reason. I'm
13 aware of people that are in favour of a transit hub
14 being put in place, as long as it doesn't come at the
15 displacement of people that are unhoused.

16 82. Q. So just let me understand that. So there
17 can be a transit hub, but it has to be somewhere else?
18 Is that what you're saying?

19 A. No, that's not what I'm saying. I'm in
20 favour of the transit hub that the Region has links
21 with Metrolinx that is going to be put in place, as
22 long as it doesn't come at the displacement of people
23 that are unhoused from the encampment.

24 83. Q. So the Region's evidence is that the
25 encampment property, 100 Vic, is necessary for moving

1 forward with the transit hub. So are you arguing with
2 that?

3 A. Can you repeat the question?

4 84. Q. The Region's evidence is that the 100 Vic
5 property is necessary for moving forward with the
6 transit hub. I'm just asking, are you arguing with
7 that?

8 A. I believe that that is the Region's --
9 that's what their assertion is, yes.

10 85. Q. Okay, but do you assert something different?

11 A. Do I assert that the -- sorry, can you
12 repeat what your question is? I'm not sure I'm
13 understanding.

14 86. Q. Well, you said, "I know that's what the
15 Region says," but do you say something different? Do
16 you say that 100 Vic is not necessary for the transit
17 hub?

18 A. I think that the encampment is not
19 related to the transit hub. But I think encampments
20 are a necessary part of the housing continuum.

21 87. Q. Okay, "Encampments," plural, are a necessary
22 part is what you say, but let me go to my question.
23 Are you saying that the Region does not need 100 Vic
24 for the transit hub?

25 A. I believe that the Region believes they

1 need that space for the transit hub.

2 88. Q. What do you believe?

3 A. I believe that the transit hub doesn't
4 need that space because the transit hub is slated to
5 be on the corner of, to my knowledge, Victoria and I
6 believe it's King.

7 89. Q. Okay. So you haven't, I take it, reviewed
8 the evidence filed in this proceeding by Mr. Doug
9 Spooner?

10 A. I'm not familiar with that.

11 90. Q. Okay. And what about the fact that under
12 the Region's and Metrolinx's construction plans,
13 there's going to be construction to the north of 100
14 Vic, to the west of 100 Vic, to the east of 100 Vic,
15 and to the south of 100 Vic? And that it's not going
16 to be a safe environment for the residents of 100 Vic
17 if they remain at the encampment? That's not
18 something you had any idea about, I take it?

19 A. I had heard from folks before that it
20 was their understanding that the property of 100 Vic
21 would be utilised for a parking spot for the
22 construction vehicles. That's what I had been told.

23 91. Q. It's required as a staging area. I take it
24 you don't really know anything about major
25 construction projects?

1 A. I'm not aware, no.

2 MR. LOKAN: Okay, thank you. Going back to
3 this article, you've recognized and
4 identified this article. Shannon, any
5 objection to marking this as the next
6 exhibit?

7 MS. DOWN: No.

8 MR. LOKAN: So this would be, I think,
9 exhibit 5. This is the article that's
10 called, "Maintenance workers blocked from
11 accessing garbage bins."

12
13 EXHIBIT NO. 5: Article titled, "Maintenance workers
14 blocked from accessing garbage bins." Dated May 29th
15

16 BY MR. LOKAN:

17 92. Q. The Region asserts, however, according to a
18 statement from the Region, I should say, as reported
19 in this article, "However, when they arrived, access
20 to the garbage bins was limited by tents and temporary
21 structures." Do you see that, Jacara?

22 A. I see that statement.

23 93. Q. Okay. And I think you've already told me
24 that you don't know whether that's true or not true.

25 A. The statement that you just read me?

1 94. Q. Yes.

2 A. There were tents and structures in
3 front of the bins. That's correct.

4 95. Q. Okay. And you'd been there on the previous
5 days, right?

6 A. Prior to May 29th?

7 96. Q. Yes.

8 A. Yes, I've been on site prior to May
9 29th.

10 97. Q. And you didn't notice, on those prior
11 occasions, tents and structures blocking access to the
12 garbage bins, did you?

13 A. Sometimes. Tents can sometimes --
14 sometimes folks want to move their structures around
15 to accommodate their needs.

16 98. Q. Okay. So you had noticed that people had
17 moved their tents around to block the garbage bins?

18 A. I don't think that was their intention,
19 but sometimes people put their structures down where
20 there's the only space available, which sometimes
21 happens to be in front of the bins, because there were
22 five industrial bins on site, which obstruct a lot of
23 the space.

24 99. Q. Okay, so again, I know that you have that in
25 your affidavit and you don't get points for repeating

1 it, but I'm not asking you to speculate on intention.

2 You just say that, "Yes, there had been." You noticed
3 tents moved in a way that blocked access to the
4 garbage bins?

5 A. I don't know for certain for that day,
6 for May 29th, if someone moved their tent. I'm not
7 aware of that.

8 100. Q. But you had seen people moving their
9 tents prior to May 29th?

10 A. I have occasionally seen residents,
11 since I've been back in April, move their tents around
12 site. Sometimes that's near a dumpster, but not
13 always.

14 101. Q. So, including you'd seen people move
15 their tents to a place where they blocked access to
16 the dumpster? Is that fair?

17 A. Occasionally.

18 102. Q. Okay, thank you. And you had not had
19 any conversations with anyone from Fight Back about
20 that?

21 A. About what?

22 103. Q. About people moving their tents to
23 block access to the dumpsters.

24 A. I haven't had any conversations with
25 Fight Back about that.

1 104. Q. Okay. Now, the article goes on to say:
2 ''As part of its regular site maintenance,
3 the Region and its contracted service
4 providers are on site today at 100 Vic to
5 remove garbage and service the portable
6 toilets. Advance notice was provided to
7 those at the site in preparation for this
8 cleanup,' the statement from the region
9 said."

10 Now, this is something that you comment on
11 in your subsequent article, the issue of advance
12 notice, correct?

13 A. That's correct.

14 105. Q. But you're not disputing that advance
15 notice was provided? Your complaint is that it didn't
16 say when the emptying of the bins and the servicing of
17 the toilets was going to occur, is that fair?

18 A. I would say that if there is not a
19 date or time, that that is not informed consent or
20 adequate notice. And because residents didn't know
21 when that was going to take place or when to be there
22 so they couldn't prepare themselves, or know when to
23 be on site.

24 106. Q. So are you aware of the form that the
25 notice took?

1 A. Yes, I have a copy of it.

2 107. Q. Okay, so will you please, by way of
3 undertaking, produce a copy of that notice?

4 A. Yeah.

5 --- UNDERTAKING

6 108. Q. Thank you. And that notice was posted
7 on the tents that were blocking the access to the
8 dumpsters, right?

9 A. I saw one -- at least one notice on one
10 of the tents and I did see notices that looked like
11 they had been taped, but they were facedown on the
12 ground.

13 109. Q. Okay.

14 A. I did see that.

15 110. Q. Okay. So those made clear that it was
16 coming, it just didn't say the date and time?

17 A. That's correct. It said, "Sometime
18 this week."

19 111. Q. Okay.

20 A. To my knowledge.

21 112. Q. Okay, so it actually did give a date
22 range, it just didn't say exactly when?

23 A. I don't think that's an accurate
24 representation. I think residents can't make informed
25 decisions when they don't know the exact date or time.

1 113. Q. Well, that's arguing with me about
2 whether it's informed decisions or not. That's not
3 arguing with me about how a date range was provided.

4 A. Okay.

5 114. Q. And so if you have a resident who, for
6 example, had moved their tent innocently, with no
7 thought of blocking access to the garbage bins, and
8 they got that notice, they certainly would have had an
9 opportunity to move their tent back to their original
10 site, or to a different site, correct?

11 A. Umm ---

12 MS. DOWN: I'm going to object. You're
13 asking her to speculate based on ---

14 MR. LOKAN: What am I ---

15 MS. DOWN: --- what a particular resident's
16 ability to move their tent. Like, how much
17 notice they would need.

18 MR. LOKAN: Well, the question asks if there
19 was an opportunity, if she agreed there, was
20 an opportunity.

21 MS. DOWN: That's a speculation based on was
22 the resident there when the notice was
23 posted. Like, you're asking her to
24 speculate on something that she can't
25 possibly know.

1 MR. LOKAN: Well, I don't think I was, but
2 I'll rephrase.

3
4 BY MR. LOKAN:

5 115. Q. When was it then, Jacara, that you
6 noticed these notices, some on the ground, some on the
7 tents?

8 A. I believe that day I observed it. I
9 know -- I believe the notices were only posted two
10 days in advance and I'm not sure when I saw the ones
11 on the ground, but it was around in that three-day
12 time span.

13 116. Q. Okay. So you believe that it was
14 around two days before the actual emptying? That's
15 your best recollection?

16 A. That the notices were posted? Or that
17 I observed ones on the ground?

18 117. Q. That the notices were posted.

19 A. I believe I observed it two days in
20 advance.

21 118. Q. Okay. So they could've been there
22 earlier than two days in advance?

23 A. It's possible, but not to my knowledge.

24 119. Q. Okay. And just above the statement,
25 "Encampment concerns," the Region is quoted as saying,

1 "Regular maintenance of the site is essential for the
2 health and safety of the residents at the site." And
3 you wouldn't take issue with that, would you?

4 A. Sorry, I'm just trying to find where
5 you said. Oh -- I would agree with that statement.

6 120. Q. Okay, thank you.

7 I'd like to pull up another article, if I
8 can, which is the one that was briefly displayed,
9 "Surveillance, Fences, and \$5,000 Fines." This is May
10 23rd of 2025. And this is a guest post by you,
11 introduced by a Melissa Bowman, on that date. Do you
12 recognize this?

13 A. I do.

14 121. Q. Okay. And this guest post, you
15 authored this one without any co-authors, right?

16 A. That's correct.

17 122. Q. Okay. And just above the guest post,
18 you're described as being housing advocate, member of
19 the Unsheltered Campaign, and writing in solidarity
20 with residents at 100 Vic, the same description as you
21 used on the last one we looked at? On the co-author
22 one with Erin Dej?

23 A. Yeah. Yes, that's what it says.

24 123. Q. And again, you would've had a chance to
25 look at that and sign-off on it?

1 A. On which one?

2 124. Q. The description here.

3 A. Yes, that's correct.

4 125. Q. Okay, thank you. Jacara, it's fair to
5 describe this article as an advocacy piece, isn't it?

6 A. I think that's a fair assessment.

7 126. Q. Thank you. If I can just take you to
8 the second paragraph: "Before Bylaw 25..." and that's a
9 reference to the site-specific bylaw, is it?

10 A. Yes, that's correct.

11 127. Q. "Before Bylaw 25 even passed, advocates
12 witnessed Region-contracted security guards
13 already enforcing it—telling residents they
14 were in violation of a bylaw that did not
15 yet exist, mapping tents, and warning people
16 not to put up new ones."

17 And you'd read the bylaw by the time that
18 this was written, right?

19 A. I believe so.

20 128. Q. Okay. And you understand that the way
21 that the bylaw works is that it differentiates between
22 existing residents, who were resident as of April 16th,
23 and those coming to the site after that?

24 A. I'm aware of that, yes.

25 129. Q. Okay. And so in order to potentially

1 enforce that, you would need to know who was there and
2 when, correct?

3 A. The Region would need to know?

4 130. Q. Yes.

5 A. I suppose so.

6 131. Q. So they would need to, for example,
7 know where the tents were?

8 A. That's fair to say.

9 132. Q. Okay. And warning people not to put up
10 new tents -- if the Region is going to be able to
11 enforce the bylaw, that is maintain the rights for the
12 existing residents but not, at least at some point,
13 allow new residents to come, isn't there a need to
14 warn people not to put up new tents?

15 A. Sorry, can you repeat the question?

16 133. Q. So if the Region is, at some point,
17 going to prevent new residents from coming to the
18 site, under the bylaw, wouldn't they need to warn
19 people not to put up new tents?

20 A. That the Region personnel would have to
21 warn folks not to put up new tents?

22 134. Q. Or the Region's agents.

23 A. If that's part of their bylaw, then
24 that's what I assume the Region would do.

25 135. Q. Okay. If we can go to the third page

1 of this article? Sorry, that would be the one after
2 the reference to the plan. Keep going down, please.
3 To the top of the page, "Region-hired security
4 vehicle..." Thank you.

5 Just at the bottom of that second paragraph,
6 you say:

7 "Bylaw 25 seems to be more about optics than
8 solutions. It's about clearing land and
9 making unhoused people disappear in time for
10 a new transit hub."

11 These are advocacy statements, aren't they?

12 A. They're my personal opinion.

13 136. Q. Let me put it this way: is the Region,
14 to your knowledge, trying to make people disappear?

15 A. The Region's actions have been in line
16 with that.

17 137. Q. Let me put it this way: are you aware,
18 as in the one that you co-authored, that the Region is
19 making increased resources available for displaced
20 residents of 100 Vic?

21 A. I have not seen those residents -- or,
22 those resources be available.

23 138. Q. You haven't yet seen that translate
24 into action, but you are aware that, at the time the
25 bylaw was passed, that the Region made available an

1 additional more than \$800,000 in 2025, and I think
2 \$500,000 in 2026? For ---

3 A. Uh ---

4 139. Q. You're aware of those figures?

5 A. I'm not aware of those figures,
6 exactly.

7 140. Q. So wouldn't it be necessary to
8 understand that before you write an opinion piece
9 accusing the Region of wanting to make people
10 disappear?

11 A. I was aware of the cost of the
12 temporary motel rooms, but I've also been looking at
13 the recommendations of the plan to end chronic
14 homelessness, and so I defer to them as the experts.

15 141. Q. Okay. So it's not just motel rooms
16 though, is it? There's also rent supplements,
17 transitional housing, and there is additional shelter
18 capacity being made available by the Region?

19 A. That hasn't -- that may be, but that
20 hasn't been my experience. I've called Shelterlink
21 before for residents looking for shelter space and
22 every time, I've heard that there's no beds available.

23 142. Q. Okay, but you are aware, and you
24 commented on, the Region's USWs meeting with residents
25 to go over their options, correct?

1 A. Are you -- in this article? Is this
2 what you're referring to?

3 143. Q. Not in this article, but generally,
4 you're aware that the Region has a team of USWs and
5 that they have been meeting with residents?

6 A. Yes, I'm aware of that.

7 144. Q. And that in those meetings with
8 residents they are working out something called
9 Individual Housing Plans, IHPs; you're aware of that?

10 A. I'm not privy to those conversations.

11 145. Q. Okay, but you say you've heard from
12 residents after those conversations?

13 A. I have heard from residents after those
14 conversations, but they haven't told me about that
15 plan discussed with the social workers.

16 146. Q. Okay. So that's a foreign term, then,
17 to you? IHPs, or Individual Housing Plans?

18 A. That's the first that I've heard of it,
19 yes.

20 147. Q. Okay. And so you're not aware of the
21 options the Region is offering to residents of the
22 site for when the encampment has to close?

23 A. I'm aware that the Region has said that
24 they have options, I just haven't seen those
25 materialize.

1 148. Q. You haven't seen them play out yet on
2 the site?

3 A. Correct.

4 149. Q. So you also weren't aware then that 13
5 residents who were there as of April 16th have been
6 transitioned to other arrangements?

7 A. Sorry, what's the question?

8 150. Q. Were you aware that 13 residents who
9 were there as of April 13th have been transitioned to
10 other arrangements?

11 A. I was not aware of that, no.

12 151. Q. Okay. So don't you think that's the
13 sort of thing that you should have looked into before
14 you make an incendiary statement like the one that you
15 made here? It's about ---

16 MS. DOWN: Objection. That information may
17 not be publicly available, so how would she
18 look into it?

19 MR. LOKAN: Okay.

20 MS. DOWN: I mean, that's part of the
21 Region's evidence, but I don't think, to my
22 knowledge, that hasn't been publicly made
23 available until this court proceeding.

24 MR. LOKAN: There was ---

25 MS. DOWN: So how would she know?

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BY MR. LOKAN:

152. Q. Okay. Let me go back a step then. Jacara, you were present on the April 23rd council meeting, right? You made a deputation?

A. I believe I delegated.

153. Q. Okay. And you were aware that, at the time, there was a staff report in support of the bylaw, correct?

A. A regional staff report?

154. Q. Yes.

A. I believe so, but I'd have to double check; it's been a while since then.

155. Q. Okay, but you were aware that from the discussion of council, the point was made that there are these additional resources being made available by the region for the existing residents?

A. Sorry, can you repeat the question?

156. Q. You were aware that there were these additional resources being made for the existing residents?

A. I'm aware that that's what the Region has claimed is available.

157. Q. Well, it's a bit more than a claim, isn't it? It's built into the budget process. That

1 was discussed at the council meeting, right?

2 A. I believe so.

3 158. Q. Okay. You agree with me that when you
4 say that, "It's about clearing land and making
5 unhoused people disappear," that that is an emotive
6 statement, right?

7 A. People might -- it might evoke emotions
8 for people, that's correct.

9 159. Q. This is about getting people riled up
10 and mobilizing them against the bylaw, isn't it?

11 A. I wouldn't agree with "Riled up." I
12 wrote this piece to inform the community that there
13 are gaps in the Region's approach. And I wanted
14 people to care about their unhoused neighbours, just
15 like I do, so I shared this information hoping to make
16 people more aware of the situation.

17 160. Q. And you wrote it hoping to get people
18 mobilized against the bylaw?

19 A. I wrote it so that people would be
20 aware that there is a bylaw and for -- if they object
21 to it, then to make that known to their leaders.

22 161. Q. And you're hoping also to persuade
23 people to object to it, correct?

24 A. I'm hoping to make people aware of the
25 bylaw and if they object to it, to express that.

1 162. Q. Yeah, you're not hoping to move
2 people's opinions?

3 A. I believe that people can make their
4 own decisions when they have all of the information.

5 163. Q. Of course they can, but you're hoping
6 to move people's opinions, aren't you? This is an
7 advocacy piece, you've already agreed, right?

8 A. Yeah, so if people are moved by the
9 piece -- and I'd like them to also care about their
10 unhoused neighbours, just like I do.

11 164. Q. Okay. And you'd like them to oppose
12 the bylaw, just like you do?

13 A. Like I said, I'd like for them to make
14 the decision for themselves and if they happen to
15 oppose the bylaw, then they would also agree with me.

16 165. Q. So in the previous paragraph you've
17 made a reference to the security vehicle. You say:

18 "A Region-hired security vehicle now
19 stationed directly at the entrance of 100
20 Vic, underscores the Region's use of
21 deterrence tactics. Its presence
22 discourages mutual aid drop-offs,
23 potentially slows down emergency response
24 times, and escalates tension and fear on
25 site."

1 Have I read that correctly?

2 A. Yes, you have.

3 166. Q. So the blue indicates hyperlinks, and
4 you hyperlinked this article to another one, where it
5 says, "Potentially slows down emergency response
6 times." Do you see that?

7 A. I'd see the hyperlink. I didn't
8 provide that; I believe Melissa did.

9 167. Q. Okay, but you signed off on this
10 article before it was published?

11 A. Yes.

12 168. Q. Okay. Including, you were aware that
13 it hyperlinked to another article about slowing down
14 emergency response times?

15 A. Yes.

16 MR. LOKAN: Okay. So I would like to just
17 follow that link, please. We can make it
18 the full page, please. It's been pointed
19 out that I haven't yet marked,
20 "Surveillance, Fences, and \$5,000 Fines," as
21 an exhibit. It's been identified by Jacara.
22 Shannon, any objection to marking it as an
23 exhibit?

24 MS. DOWN: No, that's fine.

25 MR. LOKAN: Okay. I think we're up to

1 exhibit 6. I may have lost track of the
2 numbers.

3
4 EXHIBIT NO. 6: Article titled, "Surveillance, Fences,
5 and \$5,000 Fines." Dated May 23, 2025

6
7 BY MR. LOKAN:

8 169. Q. Now, if we'll just follow the link
9 through to, "Legal clinic claims ambulance unable to
10 access Kitchener encampment for medical call, region
11 rejects allegation."

12 So Jacara, you must've read this article at
13 the time for you to have been happy with the hyperlink
14 to it?

15 A. I wasn't happy with the contents of the
16 article, but I agreed with the hyperlink being used.

17 170. Q. Okay. So you recognize this article?

18 A. I do.

19 MR. LOKAN: Okay. I'd like to mark this
20 article as the next exhibit, any objection?

21 MS. DOWN: That's fine.

22 MR. LOKAN: Okay.

23
24 EXHIBIT NO. 7: Article titled "Legal clinic claims
25 ambulance unable to access Kitchener encampment for

1 medical call, region rejects allegation”

2
3 BY MR. LOKAN:

4 171. Q. And Jacara, were you present on May 1st?

5 A. For this incident, I was not present.

6 172. Q. Okay.

7 A. I'm not sure if I was there later in
8 the day though.

9 173. Q. Okay. So you don't have any firsthand
10 knowledge of the circumstances?

11 A. I was there the -- I believe the
12 following day, and I talked to residents that were
13 impacted by it, but I was not there for the ambulance.

14 174. Q. So all you heard was something from
15 unnamed residents, who you say were impacted by it?

16 A. Yes.

17 175. Q. Okay. Have you had a chance to review,
18 before your cross-examination, the affidavit of Brent
19 Wood?

20 A. No, I don't believe that was shared
21 with me.

22 176. Q. Okay. So there -- one of the
23 paramedics in the ambulance crew that day says that
24 there was no delay caused by the security vehicle;
25 that the ambulance parked on the street as it

1 typically does, as it has in the past, and there was
2 no delay in responding to the call that they received.
3 Were you aware of any of those facts?

4 A. I am not aware of Brent's statements,
5 no.

6 177. Q. Were you aware of the time of death of
7 the individual who unfortunately died?

8 A. I'm not aware of that time of death.

9 178. Q. Okay. So what was the due diligence
10 that you did before you linked to this article?

11 A. I spoke with -- like I said, I spoke
12 with residents who were there and witnessed the entire
13 situation. I also spoke with community members that
14 were also on site for this.

15 179. Q. So you heard what people were saying
16 but none of them mentioned whether the individual was
17 already deceased or not at the time that the ambulance
18 came?

19 A. I don't think that was ascertained.

20 180. Q. Okay. And you didn't ask any questions
21 about where the ambulance had parked before?

22 A. I've been on site for ambulance events
23 where the ambulance was required and I remember last
24 year at the encampment, I had seen the ambulance drive
25 on site. So it is -- I thought it was noteworthy that

1 this year, the ambulance drove and parked on Victoria,
2 parallel to the encampment and didn't drive on site.

3 181. Q. Okay. So one occasion you'd seen the
4 ambulance parked actually on the property?

5 A. I've seen that on numerous occasions.

6 182. Q. Numerous occasions? How many?

7 A. I can't estimate that.

8 183. Q. Now, you also take issue with the cars
9 being not allowed access on the property, right?

10 A. Sorry, could you repeat the question?

11 184. Q. That you take issue with that fact
12 that, since April, cars have not been allowed to park
13 on the property?

14 A. I think it's odd that cars are not able
15 to drive on the property when, in the past, they had
16 been able to drop off mutual aid supplies, like water
17 and Gatorade. And so it was odd that they're
18 obstructed now with a vehicle parked at the entrance.

19 185. Q. I'm sorry, they're still allowed to
20 drop off supplies, water, Gatorade, or food, correct?

21 A. After I emailed the regional staff to
22 inquire about that, and that is what they said. But
23 it also has been -- I'm aware of it being a struggle
24 for some folks because where security is situated near
25 the entrance doesn't always allow enough room for a

1 car to pull on safely. Sometimes they're sticking out
2 into traffic, so I have seen that. And ---

3 186. Q. Could we ---

4 A. Yeah.

5 187. Q. Could I please ask for a copy of your
6 email exchange with the Region on that subject?

7 A. For sure.

8 188. Q. Thank you, I'll take that as an
9 undertaking.

10 --- **UNDERTAKING**

11 189. Q. And also, people can park at 84 Vic,
12 right?

13 A. Which address?

14 190. Q. 84 Vic. Adjacent to 100 Vic.

15 A. The parking lot adjacent?

16 191. Q. Yeah.

17 A. I've heard that -- that the Region said
18 that is allowed; however, I'm also aware of folks that
19 have received tickets for parking there.

20 192. Q. People have told you that they've
21 received tickets?

22 A. Yes, that's correct.

23 193. Q. Okay. And you don't know whether any
24 of those people have asked the Region why they got a
25 ticket? If ---

1 A. I'm not aware of that.

2 194. Q. If they actually did get tickets?

3 A. What are you asking?

4 195. Q. You yourself haven't ever seen someone
5 ticketed, have you?

6 A. I haven't, no.

7 196. Q. Thank you. Can we go to your paragraph
8 10, please? We're just going to pull up paragraph 10,
9 if we can, from the affidavit. You say, "I have also
10 noted an increase in the presence and positioning of
11 surveillance infrastructure around the encampment."
12 Do you see that?

13 A. I see that.

14 197. Q. And then you refer to five dumpsters
15 being installed on the site.

16 A. That's correct. Along with the mobile
17 office trailer.

18 198. Q. And the trailer. And so just help me
19 understand, are you saying the dumpsters are
20 surveillance infrastructure?

21 A. No, I'm saying that the dumpsters are
22 taking up space on the site, and I believe that that
23 is intentionally done, like, where the placement is.
24 Yeah.

25 199. Q. Okay. So just help me out for a

1 minute. You weren't prepared to speculate as to the
2 intentions of residents who moved their tents in front
3 of the dumpsters because how can you know their
4 intention, but you are prepared to speculate as to the
5 intention of the Region, is that fair?

6 A. I -- last year the dumpsters were
7 placed where the mobile office trailer was and that
8 had been the consistent positioning and so after the
9 -- or before the bylaw was put into effect, the five
10 industrial bins were moved in the middle of the site
11 and to myself and other residents it feels like that
12 is an intentional tactic, as I have asked for the
13 rationale and I -- from regional staff, from regional
14 councillors and I did not receive a rationale.

15 200. Q. So first of all, there were two
16 dumpsters before and then it went to five, and now I
17 understand it's four, is that right?

18 A. Yes, it's now down to four, after I
19 negotiated that.

20 201. Q. And it's also the case that there's a
21 security, sorry, there's the office trailer on site as
22 well?

23 A. Yes, the mobile trailer is on site as
24 well.

25 202. Q. Okay. And you've agreed with me that

1 it is appropriate to have a space in which residents
2 can communicate confidentially with the USWs?

3 A. If they feel comfortable doing so, yes.

4 203. Q. And that's, to your knowledge, what the
5 office trailer is used for?

6 A. I don't have confirmation of that, but
7 to my knowledge that's what it's been used for. I've
8 also seen regional staff in there during the servicing
9 of the dumpsters.

10 204. Q. Okay.

11 A. And security in there with regional
12 staff.

13 205. Q. Okay. And you say that because of the
14 movement, it feels like the Region had this intent,
15 and that you asked them for an explanation. Doesn't
16 it feel like when tents were moved to block the
17 dumpsters that that might have been intentional?

18 A. Again, I don't -- I can't speak for
19 residents and why they moved their tents.

20 206. Q. And you ---

21 A. But ---

22 207. Q. And you never asked them?

23 A. No, but they moved their tents where
24 there's the only space available on site.

25 208. Q. And they moved their tents, perhaps,

1 potentially, to get in the way as a form of civil
2 disobedience of the dumpsters being cleaned?

3 MS. DOWN: Objection. She's already
4 answered your questions on that and she did
5 not -- she specifically said the opposite of
6 that. She said that she had no knowledge of
7 any intentions.

8
9 BY MR. LOKAN:

10 209. Q. Okay. So you're prepared to impute
11 intention in one case and not the other, and that's
12 consistent with you being an advocate, isn't it,
13 Jacara?

14 A. No, I wouldn't agree with that
15 statement.

16 210. Q. Okay, I'll leave that for the Court.
17 You say that the four dumpsters now, and the five
18 previously, are out of proportion with the needs of
19 the residents? Do you recall saying that in your
20 affidavit?

21 A. I do, at the time.

22 211. Q. Okay, but you'd agree with me that the
23 residents are not the only ones who attend the site,
24 correct?

25 A. That is correct.

1 212. Q. So in addition to the residents, you've
2 got people from Fight Back there, correct?

3 A. Sometimes.

4 213. Q. And you've got other community
5 organizers, such as yourself, who say that they are
6 working sometimes with Fight Back, but are not members
7 of Fight Back?

8 A. Correct. I think there are a number of
9 community groups and volunteers, Keep Unity members
10 that are just regular citizens that come and drop off
11 mutual aid supplies at the encampment. There's also
12 security as well.

13 214. Q. Yeah, and there's the USWs and
14 security. There's a much larger population using the
15 site than just the residents, correct?

16 A. Yes, that's correct.

17 215. Q. And in fact, there's more people post
18 April 23rd than there were prior to April 23rd at the
19 encampment, also correct?

20 A. I can't say with certainty, I haven't
21 counted recently.

22 216. Q. Okay. So because you can't say with
23 certainty, you're unable to say whether the volume of
24 garbage is increased?

25 A. I wouldn't be able to make that

1 estimate. I've looked in the dumpster and there --
2 recently, I believe it was last week and they seemed
3 25% full, but that was at that point in time.

4 217. Q. Okay. So when you say that the
5 dumpsters are out of proportion with the waste needs
6 of residents, you're not able to say whether it's out
7 of proportion with the waste needs of the site
8 generally, given all of the people that can be there?

9 A. I made that statement at that time, and
10 that was to my knowledge at that time.

11 218. Q. Okay. Paragraph 14 you talk about
12 security vehicles shining bright lights directly onto
13 a resident's tent. And you say it was reported to me
14 by a community organizer who witnessed one resident
15 express their discomfort directly to security on May
16 18th? Do you see that?

17 A. Yes, I see that.

18 219. Q. Was that community organizer a member
19 of Fight Back?

20 A. I'm not sure how that community member
21 identifies.

22 220. Q. So which community member was it?

23 A. I know their name to be Ed. I don't
24 know last name.

25 221. Q. Eddie Grignon?

1 A. It's possible; I'd have to double
2 check.

3 222. Q. But you didn't get any context beyond
4 what you put in your affidavit about what happened?

5 A. They informed me that security was
6 continuously shining their LED headlights directed
7 towards residents' tents.

8 223. Q. So when you say, "Directed towards,"
9 you're taking that as intentional?

10 A. I don't know if it's intentional. I
11 don't know the security guard's intentions, but their
12 vehicle was pointed towards the resident's tent and it
13 was shining directly on the tent.

14 224. Q. Okay. And what was reported to you was
15 that at 10:56, the resident complained to security, or
16 made their displeasure known?

17 A. I believe that's what I said. I'd have
18 to, again, double check. But I know that the resident
19 -- or they reported to me that the resident whose tent
20 it was got out of their tent and went up to security
21 and asked them to stop shining their headlights on
22 their tent, and that security continued to after the
23 fact.

24 225. Q. But not at 10:56 p.m.? Not after 10:56
25 p.m.?

1 A. I believe so.

2 226. Q. Well, it's funny because you didn't
3 mention that anywhere in paragraph 14?

4 A. I believe that's what I was trying to
5 indicate. But ---

6 227. Q. So the community organizer, and this is
7 the person you know as "Ed", provided you with
8 photographic documentation of additional instances on
9 May 18 at 8:31, 9:44, 10:32, and 10:56? Seems to stop
10 at 10:56?

11 A. That's correct.

12 228. Q. And that's when the resident expressed
13 their discomfort to security?

14 MS. DOWN: Sorry, I don't think it says
15 whether it starts or stops at 10:56. It
16 just says it happened at 10:56, so it's not
17 clear. Maybe some of the wording -- whether
18 it started at that time, or stopped.

19

20 BY MR. LOKAN:

21 229. Q. Well, Jacara, this is your wording.
22 What you reported was four incidences and the last one
23 is at 10:56, do you see that?

24 A. That's the last photo that I received,
25 but that doesn't necessarily mean that that's when the

1 headlights turned off.

2 230. Q. Doesn't necessarily mean that it's when
3 it turned off, doesn't necessarily mean that they were
4 on after, either. You simply weren't there, were you?

5 A. I wasn't there for that incident, but I
6 was there for May 21st. I was also there this Thursday
7 and I witnesses this also occur.

8 231. Q. So May 21st, 9:58 p.m., security vehicle
9 has its lights on, but you didn't talk to the
10 resident?

11 A. No, I did not.

12 232. Q. And you didn't talk to the security
13 guard?

14 A. No, I did not.

15 233. Q. Okay. And the other one, just to
16 complete this, May 19th, 12:07 a.m., you say -- May
17 19th, 12:07 a.m., you're not there for that one?

18 A. No, I was not present for May 19th.

19 234. Q. Okay. So for the May 21st, since you
20 didn't talk to the security guard and you didn't talk
21 to the resident, you don't have any idea what the
22 context was?

23 A. I was walking past the encampment and I
24 noticed for -- like, from a block away that it was
25 continuously shining in the direction of residents'

1 tents for the duration of my walk past, and I also
2 remember it being extremely quiet, and it didn't seem
3 to be any distress or any events occurring.

4 235. Q. So there was no distress on the part of
5 the resident then?

6 A. To my -- from what -- from my vantage
7 point, I didn't note any.

8 236. Q. Right. You wouldn't know, for example,
9 if the resident asked security to turn their lights on
10 to help illuminate the tent so they could find
11 something?

12 A. I have no knowledge of that.

13 237. Q. Okay. And you didn't -- this is not
14 something that you thought to mention for the log?

15 A. Mention what, sorry?

16 238. Q. The incident of May 21st, when you
17 walked by, that's not something you thought to mention
18 for the log?

19 A. I believe I wrote it down in my own
20 notes. I don't know if I -- I don't know if I shared
21 it with the log.

22 239. Q. Okay. Could you please send us a copy
23 of your notes of the incident?

24 A. I could try to find that.

25 240. Q. Okay. You know what? I don't think I

1 need your notes, so I'm not asking for that.

2 Paragraph 16 ---

3 MS. DOWN: Sorry, just to clarify are you
4 saying you don't need an undertaking on
5 that?

6 MR. LOKAN: I don't.

7 MS. DOWN: Sorry, I missed part of what you
8 said. Okay.

9 MR. LOKAN: I don't need an undertaking on
10 that.

11
12 BY MR. LOKAN:

13 241. Q. Paragraph 16, you talk about what you
14 describe as surveillance of visitors, and you take
15 issue with security guards taking photos of cars that
16 drive onto the site?

17 A. Yes, I recall that happening.

18 242. Q. Okay. You're not aware of there being
19 any photos for people who park at 84 Vic, are you?

20 A. I'm not aware of that.

21 243. Q. You talk about the issue of food that's
22 donated to the residents. Are you aware that
23 sometimes food has to be thrown away?

24 A. I am aware of that.

25 244. Q. Okay, thank you. Let me just go to

1 paragraph 26. In paragraph 26, you say that since
2 you've been visiting the encampment, you've been
3 approached by residents asking if you can place them
4 in a motel, help them find out if there's shelter
5 space available, or have bus passes, and that you're
6 often mistaken for a regional USW?

7 A. That's correct.

8 245. Q. Okay. And you say, unfortunately
9 you've had to tell them you can't access those
10 resources and that in your experience there's rarely
11 any shelter beds?

12 A. That's correct.

13 246. Q. So do you -- yeah, you say when you
14 call FirstConnect, you've been told directly by
15 FirstConnect staff that they do not provide
16 transportation supports?

17 A. That's correct.

18 247. Q. So I take it one of the things that you
19 do at the site is that you call FirstConnect on behalf
20 of residents to try to set them up with a space if
21 it's available and accessible?

22 A. I've had residents ask me if I can call
23 FirstConnect, and at their -- with their consent I've
24 done it, or I've given them my phone to borrow and
25 they've made that phone call themselves.

1 248. Q. Okay. And in paragraph 27, you say
2 that the Region's USWs, it's your understanding, are
3 the only outreach staff who can directly connect
4 residents to motel placements and coordinate
5 transportation, but then you say, "The workers are not
6 consistently on site; when they are on site it doesn't
7 appear to be for long, and it's only during standard
8 business hours." Do you see that?

9 A. I see that.

10 249. Q. And then you say:
11 "When they are not present, residents are
12 expected to call them, but this is a major
13 barrier for many people who do not have a
14 phone, have limited minutes, or are unable
15 to reliably charge their phones due to a
16 lack of access to power sources."

17 Do you see that?

18 A. I see that.

19 250. Q. I take it though that, if asked, you'd
20 be prepared to lend your phone to a resident who wants
21 to get in touch with a USW?

22 A. Sometimes.

23 251. Q. And so that has happened?

24 A. Yes, that's happened. I believe not
25 since last year. I don't recall an instance of

1 someone trying to call a USW this year, but I believe
2 that happened last year.

3 252. Q. And if it were to happen in future this
4 year, you'd be willing to lend your phone or call on
5 their behalf, with their consent?

6 A. Yeah, if they have the phone number.
7 I've tried to look up the number online and haven't
8 been able to, but if they had access to their USW's
9 phone number, I would let them borrow my phone.

10 253. Q. Okay. And so in terms of
11 implementation by the Region of its efforts to
12 transition the housing for the residents as the
13 encampment closes, you'd recommend that they make that
14 information available? How to get in touch with the
15 USWs?

16 A. Sorry, could you ask that question
17 again?

18 254. Q. In terms of assisting with the
19 transition, you'd recommend that the Region make that
20 information available so that residents are able to
21 contact them?

22 A. Yes, I would agree with that. That
23 information should be accessible.

24 255. Q. Okay, but it sounds from your
25 affidavit, when you say, "When they're not present,

1 residents are expected to call them," it sounds like
2 that information has been provided to residents?

3 A. What information?

4 256. Q. How to call them. What their number
5 is.

6 A. I can't speak for if all of the USW's
7 have given out their card and information. If they
8 have, then residents may or may not still have those
9 cards on hand, so I'm not sure if they'd be able to
10 contact or not.

11 257. Q. Right.

12 A. I'm sure it would be dependant on a
13 case-by-case basis.

14 258. Q. Okay, but if that information is made
15 available so that anyone who loses the card or doesn't
16 have it can find it, that, to you, would be a helpful
17 thing?

18 A. I'm sure more information would be
19 helpful, yeah.

20 259. Q. Okay. I didn't see anything on your
21 LinkedIn profile saying that you had any legal
22 training, is that correct? You're not legally
23 trained?

24 A. With regards to what? To like ---

25 260. Q. You're not a qualified lawyer? You

1 haven't been to law school?

2 A. I have not been to law school, no.

3 261. Q. Okay, thank you. Let me just check
4 something. Thank you, I have no further questions.

5 MS. DOWN: I just need a couple of minutes
6 and then I'll let you know if I have any
7 questions in reply. May we come back in
8 about 4 minutes?

9 MR. LOKAN: Sure.

10 MS. DOWN: Thanks.

11
12 --- BREAK

13
14 RE-EXAMINATION BY MS. DOWN:

15 262. Q. Jacara? Hi, so I'm Shannon Down, I'm
16 with the Waterloo Region Community Legal Services
17 team. Just going to ask you a few questions in reply.
18 Mr. Lokan was asking you about the appropriateness of
19 the trailer for having confidential conversations with
20 the USWs and residents. Can you tell me how did
21 conversations take place prior to that? So prior to
22 the trailer being put in place in April, what was your
23 experience with that?

24 A. To my knowledge and from my experience,
25 Unsheltered Workers, USWs, were -- would go around the

1 site and have one-on-one conversations with residents,
2 to my knowledge.

3 263. Q. Okay, so those conversations were still
4 taking place pre-trailer?

5 A. Yes. To my knowledge, yeah.

6 264. Q. Okay. And in your view, is one or the
7 other more appropriate or more confidential?

8 A. I think whatever works best for the
9 residents would be up to them. But I think if the
10 residents feel like a certain space is confidential
11 enough for them then I would trust that judgment.

12 265. Q. Okay, thank you. In your experience,
13 the parking lot next door at 84 Victoria, what was --
14 prior to April, prior to, I suppose, sometime
15 recently, do you know what security's direction to
16 people was regarding that parking lot previously?

17 A. For community members dropping off
18 supplies and resources?

19 266. Q. Yeah. Like, going back to last year,
20 were people able to use that parking lot?

21 A. I believe so. I believe people were
22 able to use it. I know I've been dropped off there on
23 occasions. I didn't park long term but, to my
24 knowledge, no one received a ticket for parking there
25 and folks were able to park there temporarily, yeah.

1 267. Q. So we're talking about next door, like,
2 not on the encampment site, but the next-door
3 property?

4 A. Temporarily yes, not for extended
5 periods.

6 268. Q. Okay. And was that -- who controlled
7 that, or policed that?

8 A. Security.

9 269. Q. Okay.

10 A. The Barber-Collins security.

11 270. Q. Okay, so when you say temporarily, how
12 long were people permitted to park there for?

13 A. I'm not sure like, the duration of
14 every person's stay in the parking lot, but it was my
15 understanding that -- because I recall security
16 telling me that I could only park there temporarily to
17 put the item on the donation table and then be on my
18 way. So it was -- that was my understanding, was that
19 that was being passed to everyone, that it was
20 temporarily.

21 271. Q. Okay. So you could stop in, but you
22 couldn't like, stay there for two hours, or?

23 A. Correct. To my knowledge at least.

24 272. Q. Okay. Mr. Lokan was asking you about
25 your resume and about the work that you did with the

1 Social Development Centre as a consultant?

2 A. Yes.

3 273. Q. What was the nature of that work?

4 A. It was a number of community engagement
5 sessions with David Alton, with the Social Development
6 Centre, and I believe someone named Skyler (ph.) from
7 the Region. I believe that's their name. And with
8 people from the lived experience group, as well as the
9 PHE, and I can't remember what that acronym is for.
10 But there were a number of folks that would gather to
11 discuss 84 Frederick, which was the women's shelter
12 that, at the time, was going to be closing down, and
13 so the conversations were around advocating for that
14 space to still be used for women and gender diverse
15 folks, and to envision and propose solutions for that
16 space.

17 274. Q. What was the nature of your role in
18 those consultations?

19 A. I was there to provide my experience as
20 someone that has been in community with folks at the
21 100 Victoria encampment.

22 275. Q. Mr. Lokan was asking you about the
23 Region's plans, the additional resources and the
24 Region's plans to move people out of the encampment
25 and he said that 13 people had already been moved out.

1 Are you aware of anyone who's been moved out and then
2 moved back in?

3 A. Yes, countless individuals. There have
4 actually been a number of folks I saw just last week
5 that I remarked, I'm like, "Oh, I haven't seen you
6 since seven months ago." So these are folks that
7 previously were residents and have had to return.

8 There's also been folks that have had to
9 return on numerous occasions. They had a motel and
10 then for whatever reason that didn't work out so they
11 were back at the encampment, or they were couch-
12 surfing with a friend or with family and then -- back
13 at the encampment. So that is commonplace at the
14 encampment in my experience.

15 276. Q. Okay, and can you tell me, what are the
16 reasons why people might move tents at the encampment?

17 A. Yeah. Like, residents that are already
18 there moving their tents? A number of reasons. There
19 might be -- I've seen women move their tents because
20 they felt maybe uncomfortable, or weren't getting
21 along with someone and just wanted to move their tent
22 somewhere else. Or they were maybe feeling
23 dysregulated and or -- I can't know what they felt
24 like, but it seemed to me they were dysregulated and
25 then they moved their tent somewhere else. I've also

1 seen residents move if an area is congested to a spot
2 where there is space. There's a number of reasons why
3 folks move their tents.

4 277. Q. Okay, thank you. Can you tell me about
5 the negotiations you were talking -- Mr. Lokan had
6 asked you about the garbage bins and your statements
7 in your affidavit, and you were mentioning the
8 negotiations with the Region to reduce the number from
9 five to four. Why did they agree to do that?

10 A. Umm ---

11 MR. LOKAN: Excuse me, sorry.

12 THE WITNESS: Oh, sorry.

13 MR. LOKAN: Shannon, I think that calls for
14 speculation as to another party's
15 intentions.

16
17 BY MS. DOWN:

18 278. Q. Okay. Maybe just tell me what is your
19 understanding -- or, just tell me from your side what
20 were those negotiations and what was the Region
21 telling you?

22 A. During the event that it happened, or
23 leading up to advocating for that dumpster to be
24 moved?

25 279. Q. All of it.

1 A. Yeah, so since the dumpsters had been
2 placed, like I said, prior to the bylaw being passed,
3 residents had expressed to myself and other folks that
4 they're distressed with the dumpsters taking up space
5 on site, and that they're black metal bins, so they're
6 a heat source. They're quite hot and kind of trap
7 heat in the encampment. And people felt like -- or
8 expressed to me that they felt it was encroaching on
9 their space and trying to push them out. A number of
10 residents have said that to me, that that's how it
11 feels to them.

12 And so I had been in correspondence with
13 council members Matt Rodrigues and Colleen James
14 asking about the dumpsters. I've had phone
15 conversations, I've sent emails asking about the
16 dumpsters, and they had told me that they would get
17 back to me as to why those were there. But I hadn't
18 received meaningful responses as to a justification
19 from regional staff related to the regional
20 councillors, and I had even expressed to USWs
21 Stephanie Meek (ph.) and Tiffany, I don't know her
22 last name, that relaying that residents have expressed
23 to me that the dumpsters take up a lot of space and
24 that it's causing frustration on site, and they also
25 told me that that would be relayed information back to

1 the Region.

2 I have also talked to the regional staff
3 that were there to service the dumpster bins. I
4 believe that was May 29th, that Andrew Lokan brought
5 up, and had asked for there to be a reduction in the
6 number of dumpsters on site as they're very close to
7 some residents' tents and taking up space. And at
8 that time, it didn't seem to be -- it didn't seem like
9 that was something that was a priority.

10 And then recently, more recently, I had a
11 conversation with a member of, I believe, the
12 facilities department from the Region. And I had
13 expressed that there was a dumpster that was the
14 closest to one of the third porta-potties that was
15 very close to a resident's tent and I had advocated
16 for that -- or I had asked, "Could we move this
17 dumpster even forward, just so that it's not too close
18 to the resident's tent? Because the dumpsters create
19 a lot of heat, and also that it attracts pests and
20 rodents." And the staff from, I believe, the
21 facilities department said to me, "If we were to
22 remove one of the dumpsters on site, which would be,"
23 I believe he said, "the most helpful?" Or, "Which one
24 would it be?" And I said, "This dumpster," the one
25 that I had been advocating to be moved forward would

1 be the most helpful. And then, luckily, it was
2 removed.

3 280. Q. Okay, thank you. And Mr. Lokan had
4 asked you about your involvement with the Unsheltered
5 Campaign. And I'm just wondering if you can tell us a
6 little bit about what the Unsheltered Campaign is, and
7 what they do?

8 A. Yeah, so I'm a more recent -- I'm more
9 recently involved with the Unsheltered Campaign, since
10 I believe April of this year, and from my
11 understanding, the Unsheltered Campaign is, I believe,
12 affiliated or connected with the SDC, or at least some
13 folks who work at the SDC are involved. And it's some
14 folks that are housed and unhoused with lived
15 experience of being unhoused or precariously housed
16 are involved and advocating for the human rights of
17 unhoused folks in our community, and for advocating
18 for housing justice.

19 281. Q. Okay. And in terms of 100 Victoria,
20 what is the role of the Unsheltered Campaign, or the
21 involvement with respect to 100 Victoria Street?

22 A. I can't speak for the Unsheltered
23 Campaign, but I know that there are folks from the
24 Unsheltered Campaign that have dropped off mutual aid,
25 like water, Gatorade, supplies -- I can't say with

J. Droog (Re-Ex.) - 76

1 certainty that those were the items, but I know that
2 mutual aid has been dropped off by folks involved with
3 the Unsheltered Campaign. I know that folks with the
4 Unsheltered Campaign are involved with advocacy around
5 the encampment as well as other folks that are
6 unhoused in the Region.

7 282. Q. Okay. Thank you, those are my
8 questions.

9
10
11
12 --- ADJOURNED

13
14
15
16

THIS IS TO CERTIFY that the foregoing
is a true and accurate transcription of
my recordings and notes, to the best of
my skill and ability.



Barbara A. Pollard
Certified Court Reporter

J. Droog (Re-Ex.) - 77

Photostatic copies of this transcript are not certified and have not been paid for unless they bear the original signature of Barbara A. Pollard, C.C.R., and accordingly are in direct violation of Ontario Regulation 587/91, Courts of Justice Act, January 1, 1990.

EXHIBIT “1”

April 18 - 11:11am - 2 regional social workers on site - TJ Jones
 April 20 - 11:14am - Regional workers drop snacks - Prayas Bhatt
 April 20 - 12:12pm - Security and regional workers still on site talking to residents in the far corner - Prayas Bhatt
 April 22 - 12:32pm - Region workers (one named stephanie) arrive with security, talking to legal services - Jakob Stubbs
 April 22 - 1:13pm - Region workers and security left - Aaron El Sabrout
 April 22 - 2:29pm - A different set of region workers have arrived - Aaron El Sabrout
 April 22 - 3:15pm - Region workers leave - Ryan Murdock
 April 24 - 10:13am - Region workers on site - Ed Edwards
 April 29 - 10:23am - Conference between traverse and region workers - Aaron El Sabrout
 May 1 - 12:16pm - Region workers arrived about 20 minutes ago - Aaron El Sabrout
 May 1 - 12:44pm - Chris from the region and a bunch of other new region staff are here - Aaron El Sabrout (due to death onsite)
 May 5 - 12:25pm - Region onsite - Jude
 May 5 - 12:30pm - 2 more Region Outreach Workers onsite - Jude Veber
 May 6 - 1:05pm - Region workers onsite - Aaron El Sabrout
 May 6 - 1:56pm - They're all leaving - Aaron El Sabrout
 May 8 - 12:13pm - Region (social?) workers talk to someone in the trailer then leave - Ed Edwards
 May 13 - 12:32pm - Also sarah and nicole from the region just arrived - Aaron El Sabrout
 May 13 - 12:42pm - Security supervisor onsite, chatting with the two in the car now. the region workers did leave. - Aaron El Sabrout
 May 15 - 12:00pm - Two region workers arrive on site talking to residents - Jude Veber
 May 20 - 12:07pm - Region outreach (sarah and nicole) onsite - Aaron El Sabrout
 May 20 - 12:28pm - They just left, the nurse still onsite walking around - Aaron El Sabrout
 May 22 - 11:26am - Region outreach workers Nicole and Tiffany onsite - wren wombwell
 May 23 - 10:07am - Regional Social workers on Site (Haylee and someone I don't recognize) - TJ Jones
 May 28 - 11:06am - Regional social worker parks in adjacent lot - TJ Jones
 May 29 - all day
 June 3 - 12:28pm - Region social workers onsite - Aaron El Sabrout
 June 3 - 1:28pm - Lisa leaves, also sorry late but regional workers left about 30 minutes ago - Aaron El Sabrout
 June 4 - Late entry about 12:00pm region social workers tell me puroclean is coming tomorrow (just the workers, not the bins) - Aaron El Sabrout
 June 5 - 12:08pm - Regional social workers on site - TJ Jones
 June 6 - 10:29am - Regional social workers on site - TJ Jones
 June 10 - 12:40pm - Region social workers come onsite. - Aaron El Sabrout
 June 12 - 12:35pm - Regional social workers on site giving out sunscreen - TJ Jones
 June 17 - 12:05pm - Region social workers on site, talking to security - Ryan Murdock
 June 17 - 12:30pm - Region social workers leave - Ryan Murdock
 June 26 - 9:58am - Unsheltered Workers — Stephanie Meek. John something Facilities department manager - Jacara Droog
 June 26 - 12:30pm - Stephanie Meek Unsheltered worker left - Jacara Droog
 July 2 - 11:48am - Region unsheltered workers onsite - Stephanie Meeks & Tiffany Riel - wren wombwell
 July 4 - 10am - unsheltered workers (Tiffany) and other workers on site. - Jacara Droog

EXHIBIT “2”

April 25 - Noticed a security guard enter a business in the nearby plaza. An hour later he was ticketed for parking there. - Ed Edwards

April 30 - 12:42pm - Community member pulls onto site in spite of security mostly blocking entrance, they drop off their donation and security hassles them telling them they're not supposed to park onsite. the community member scolds them for blocking access and says they will complain to the company. - Aaron El Sabrout - *See video: "April 30 - Security Blocks Donation Drop Off"*

May 3 - 242pm - Security blocking a community member who is trying to visit a relative. they told him to park in the lot next door. - Aaron El Sabrout

May 3 - 244pm - Community member is upset by this and complains that they are in the way. - Aaron El Sabrout - *See video: "May 3 - Security Blocks Community Member"*

May 4 - 7:35pm - Community member pulls in past security and they do not like that. They say that they can park in the lot for 5 minutes or in front of their car. Community member thanks security for doing their job but refuses to move their car as they're just dropping something off. Community member drops off tape and wrap for wound care and hats. - Eddy Grignon

May 8 - 248pm- Community members struggle to manoeuvre car around security vehicle but do manage to leave - Foxsys Brunt Fozard

May 26 - 5:02pm - Community member comes up to argue with security, apparently they got a ticket in the side lot - Aaron El Sabrout

June 3 - 5:30pm - Security gives thumbs up to this writer and community member pulling into lot to donate a few skids, then the other security guard gets out and gets pissed and threatens bylaw over pulling into the lot briefly. - Jakob Stubbs

June 4 - 918pm - Security dont move when community member tries to pull in. - Eddy Grignon - *See Video.*

June 10 - 1:48pm - Security refuses to move aside for community member coming onsite - Aaron El Sabrout

July 4 - 9:53pm - Community member pulls on site. - Jacara Droog

July 4 - 9:59pm - Security takes pic of community member's vehicle on site - Jacara Droog

July 5 - 10:58pm - Security blocks community member's truck from entering - ████████

EXHIBIT “3”



Jacara Droog, BSW, MSW, RSW they/them · 3rd
Registered Social Worker | Counsellor | Advocate | Public Educator |
Community Organizer

- Unsheltered Campaign



- Toronto Metropolitan University

Kitchener, Ontario, Canada · [Contact info](#)

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About

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Registered Social Worker with 7+ years of experience in mental health, disability, harm reduction, housing insecurity, substance use support, and trauma-informed support for survivors of gender-based violence. My practice is rooted in trauma-informed, person-centred, and anti-oppressive approaches.

I'm committed to creating equitable, inclusive spaces for BIPOC, 2SLGBTQ+ folks, and other marginalized communities. Through direct service, advocacy, and mutual aid organizing, I work toward collective care and systemic change in Waterloo Region.

Always open to connecting with others working toward meaningful, inclusive and systems-informed change.



Top skills

Creative Problem Solving • Person-centred support • Trauma Informed Care • Group Facilitation • Leadership →

Services

Presentation Design • Diversity & Inclusion • Public Speaking • Team Building • Writing • Strategic Planning • Research Skills • Non-profit Consulting

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Jacara Droog, BSW, MSW, RSW reposted this ...

Waterloo Region Communit... • 3rd+

Legal Services
1mo • 🌐



Jacara Droog

Registered Social Worker
4w • 🌐

"Don't block the help: Re...
Kitchener encampment re...
Published in The Record -

287

While we welcome the commitment to public transit in this community, we cannot undertake this type of project at the expense of caring for and ...more



1/2

6 • 1 repost



I had a small role in contr alongside members of th including Erin Dej and Lo names could be included piece was shaped by experience and educ



11 • 4 reposts

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Experience

Community Advocate

Unsheltered Campaign · Permanent Part-time

Apr 2025 - Present · 4 mos

Kitchener, Ontario, Canada · Remote

Grassroots initiative creating community-led alternatives to shelter and housing in Waterloo Region.

- * Advocate for dignity, safety, and human rights alongside encampment residents
- * Coordinate public education, media advocacy, petitions, and social media outreach
- * Participate in community events and collaborative actions to resist displacement

This is an unpaid volunteer/community advocacy role.

Advocacy, Community Organizing and +2 skills

288

Lived Expert Consultant - Community Engagement Sessions

Social Development Centre Waterloo Region · Freelance

Jul 2024 - Jul 2024 · 1 mo

Kitchener, Ontario, Canada · On-site

- * Collaborated with community stakeholders on emergency shelter planning and policy development
- * Co-developed recommendations integrated into a City of Kitchener report on homelessness solutions
- * Advocated for trauma-informed, harm reduction, and inclusive shelter approaches for women, non-binary, and gender-diverse individuals

🔒 Interpersonal Relationships, Human Rights and +7 skills



Counsellor Advocate and Group Facilitator

Sexual Assault Support Centre of Waterloo Region · Internship

Jan 2022 - May 2022 · 5 mos

Kitchener, Ontario, Canada · Remote

- * Provided direct counselling and advocacy support to survivors of sexual violence and their supporters
- * Co-facilitated an 8-week closed group for survivors healing from disordered eating after trauma
- * Co-facilitated and helped plan the weekly "Alone, Together" drop-in group for survivors
- * Active member of the Anti-Racism/Anti-Oppression (ARAO) committee's Social Justice subcommittee; co-developed an agency-wide ARAO research survey
- * Co-developed and co-facilitated public education workshops, including "Neurobiology of Trauma"

🔒 Trauma Informed Care, Case Management and +6 skills



Community Service Worker

CNIB · Contract Full-time
Jun 2021 - Aug 2021 · 3 mos
Canada · Remote

* Co-facilitated national summer programming for children, youth, and young adults with sight loss ... [...see more](#)

🔒 Program Facilitation, Youth Programs and +4 skills



Direct Support Professional

Canadian Mental Health Association Huron Perth (CMHA) · Part-time
Jun 2020 - Sep 2020 · 4 mos
St Marys, Ontario, Canada · On-site

- * Responsible for supporting 8 residents in the Community Homes for Opportunities (CHO) program, a supportive housing initiative for adults with serious mental health diagnoses
- * Built rapport with residents to foster a respectful environment where self-determination was prioritized
- * Used de-escalation techniques and trauma-informed approaches
- * Supported residents in making informed choices about their care, housing, and personal goals
- * Assisted with medication management, meal prep, appointment coordination, and client-centred documentation

🔒 De-escalation, Mental Health and +4 skills

Show all 12 experiences →

Education



Toronto Metropolitan University

Master of Social Work (MSW), Social Work

Sep 2021 - Oct 2023

Grade: Graduated on the Dean's List

* Recipient of the TMU Graduate Fellowship Award

* Recipient of the TMU Graduate Development Award...

[...see more](#)

📌 Critical Theory, Qualitative Research and +3 skills



University of Waterloo

Honours Bachelor of Social Work (BSW), Social Work

2018 - 2019

Grade: Graduated on the Dean's List

* Full-time, post-graduate professional degree program

* Completed 720 practicum hours at a field placement

📌 Anti-Opressive Practice, Critical Theory and +4 skills

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Licenses & certifications

Naloxone Administration Certificate

NaloxAnon

Issued Jul 2024

📌 Naloxone Administration and Narcan Administration



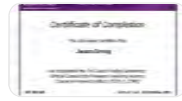
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Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans (TCPS 2: CORE-2022)

Canadian Institutes of Health Research (CIHR), Natural Sciences and Engineering Research Council of Canada (NSERC), and Social Sciences and Humanities Research Council of Canada (SSHRC)

Issued Oct 2021

Research Ethics



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Volunteering



Program Group Assistant

CNIB

Sep 2020 - Sep 2021 · 1 yr 1 mo

Social Services

- Co-facilitated a national weekly virtual drop-in social support group for young adults (ages 18-30) with sight loss... [...see more](#)



Volunteer Coordinator

Multicultural Association of Perth Huron

Sep 2017 - Sep 2018 · 1 yr 1 mo

Social Services

- Provided support to newcomers, including immigrant and refugee families, to ease their settlement and integration, assisting with document... [...see more](#)

Show all 4 volunteer experiences →

Skills

De-escalation



Direct Support Professional at Canadian Mental Health Association Huron Perth (CMHA)

Care Coordination



Direct Support Professional at Canadian Mental Health Association Huron Perth (CMHA)

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Opinion | Don't block the help: Restoring access and dignity to Kitchener encampment residents

Dignity, safety and care for people living at Victoria and Weber streets should not depend on a policy loophole. They must be the foundation of how we respond to encampment communities — starting now, advocates write.

Updated 18 hrs ago | June 10, 2025 | 3 min read



Security guards stand last month with their vehicle parked near an entrance to the encampment at Victoria and Weber streets in Kitchener.

Brent Davis/Waterloo Region Record file photo

By Erin Dej, Lori Lafond and Jacara Droog

Over the last few weeks, the status of the 100 Victoria St. encampment in Kitchener has been the subject of regional council deliberation, the newly passed PDL-LEG-25-017 bylaw, and a reshaping of supports at the site.

The purpose of the bylaw, passed by the region on April 23, is to slowly shut

294

down the encampment in advance of the Dec. 1 deadline for the space to be used to hold construction vehicles as Metrolinx gets ready to build its transit hub down the street.

The bylaw contains some positive elements, such as limited funds for rent supplements and significantly more money flagged for temporary motels that will expire by the end of next year.

However, the bylaw also contains multiple harmful elements, such as restricting the use of space between now and December and fining encampment residents and community members who come on site to support them up to \$5,000 after December.

This bylaw and its rollout was designed without input from the Co-Creators table as part of the Plan to End Chronic Homelessness, wherein more than 60 representatives from service providers across the region and people who have experienced homelessness are supposed to inform the region's response to the homelessness crisis.

Most importantly, it was done without consultation with encampment residents themselves; a gesture of disrespect similar to that of the historical and ongoing displacement of Indigenous folks on their own land.

The legality of this bylaw is questionable as the encampment was the site of the 2023 court ruling that found that without adequate shelter space, encampment evictions violate residents' Charter rights because they have nowhere else to go.

With recent data showing that the homeless population in the region has doubled in the last three years to more than 2,000 people, the situation has gotten worse.

While this legal question hangs in the air, and while the province is looking to double down on punishing people for being homeless, the region has been quick to enact the bylaw.

ARTICLE CONTINUES BELOW

This looks like a trailer on site for residents to meet with a housing worker, but it also means shrinking the space where tents are allowed, blocking off the site so that no new residents can pitch a tent, and creating more blockades around the space.

These recent developments are alarming. In the last month, access to the encampment has been confusing at best and obstructive at worst. Mutual aid providers and service organizations have received mixed messages about whether they can drive up to deliver supplies. Mutual aid supporters have seen a noticeable drop in food, clothing, and supply donations since the introduction of the bylaw.

This is more than a bureaucratic oversight. It's a systemic failure, rooted in a colonial mindset, that limits life-saving interventions and stands in the way of an organized community wraparound response to a crisis impacting our

neighbours.

Encampment residents rely on these kinds of resources to survive and they are deserving of all that it takes to move them from that place of survival to “living the good life.”

While the bylaw claims to be “human-centred and relational,” the outcome is the opposite: it creates dangerous barriers for people already struggling to meet their physical, emotional, mental and spiritual needs.

These barriers are reinforced by the way local media often echoes institutional narratives, rather than centring the lived experiences and rights of encampment residents.

ARTICLE CONTINUES BELOW

One recent article, for example, focused on service disruptions while omitting critical context, including that notices lacked a date and time, and that the region attempted to place dumpsters near a resident’s tent despite clear public health and safety concerns, such as the risk of rodents or dumpster fires. This kind of framing devalues the lives of people living in poverty, seeing them as unworthy of dignity and support.

The encampment at 100 Victoria St. is expected to remain in place until at least Dec. 1. That’s six months from now. Restricting support services during that time not only undermines the region’s Plan to End Chronic Homelessness — it disregards the humanity of the very people it’s supposed to serve. All our relations matter.

Mutual aid is not an optional extra. It is a lifeline. Whether it’s food, water, or basic hygiene products, such as toilet paper and hand wipes, these efforts are often the first and fastest form of care available. Deterring access doesn’t just inconvenience volunteers; it risks lives.

It’s time for regional leaders to make right the wrongs. Move the security vehicle back to where it has been stationed for years in the adjacent parking lot. Reaffirm that service providers and community members can access the site safely and consistently to provide support.

Dignity, safety, and care should not depend on a policy loophole. They must be the foundation of how we respond to encampment communities — starting now.

Erin Dej is a member of the Unsheltered Campaign, a group of housed and unhoused community members who advocate for year round support, housing, and alternatives to shelters for all unhoused people in Waterloo Region.

Lori Lafond is part of A Womb With A View — Finding Common Ground, a peer led, social prescription for wellness and an emerging grassroots crisis response alternative that is rooted in Indigenous ways of knowing and doing, with a leaning toward 2 Eyed Seeing for future.

Jacara Droog is a social worker, housing advocate, member of the Unsheltered

Campaign, and writing in solidarity with residents at the 100 Victoria encampment.

Opinion articles are based on the author's interpretations and judgments of facts, data and events. [More details](#)

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Jun 10, 2025

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Maintenance workers blocked from accessing garbage bins at Kitchener encampment

By [Shelby Knox](#)

Published: May 29, 2025 at 3:49PM EDT



Tents and temporary structures were seen at the Victoria Street encampment in Kitchener, Ont. on May 29, 2025. (Dave Pettitt/CTV News)



Maintenance workers and bylaw officers experienced some unexpected complications Thursday morning while they were trying to remove garbage from an encampment in Kitchener.

According to a statement from the Region of Waterloo, contracted service providers were attempting to complete regular maintenance at the 100 Victoria Street North site.

However, when they arrived, access to the garbage bins was limited by tents and temporary structures.

“As part of its regular site maintenance, the Region and its contracted service providers are on-site today at 100 Victoria to remove garbage and service the portable toilets. Advance notice was provided to those at the site in preparation for this cleanup,” the statement from the region said.

The region said the structures will need to be moved.

“Tents blocking access to the garbage bins or portable toilets will need to move to a spot that doesn’t interfere with service delivery, so that this important work can be completed,” the region said.

“Regular maintenance of the site is essential for the health and safety of the residents of the site,” the statement concluded.

Encampment concerns

[The garbage bins and a trailer were brought onto the site last month.](#) Some residents of the encampment raised concerns, telling CTV News they were unsure what was going on. However, the region said they had warned residents, and the trailer was put there to “facilitate meetings with residents.”

The changes come as the region announced they were moving forward with plans to build a new transit hub. That plan will require all the people living at the Victoria Street encampment to find somewhere else to live.

According to the region, the encampment must be cleared by Dec. 1, 2025.

To achieve this, the region is proposing a site-specific bylaw covering Victoria Street between King Street and Weber Street.

If approved by council, anyone living at 100 Victoria Street North must leave by the end of November. If new tents or shelters go up after that, they will be removed by the region.

“The bylaw does account for the current residents there as of today and provides time to facilitate their transition to new accommodation,” said Fiona McCrea, the region’s acting regional solicitor. “But the bylaw does not permit new people to come and reside at 100 Victoria Street.”

The region said in the lead up to the deadline, outreach staff will be ramping up efforts to place encampment residents in alternative housing.

“We have many options available to us that we will utilize. Specifically, we will be looking at rental supports and transitional supportive housing. It’ll be important that we add social supports for individuals,” said Peter Sweeney, the region’s commissioner of community services.”

However, advocates have raised concerns with the move.

“We know that this isn’t a solution,” Ashley Schuitema, executive director of Waterloo Region Community Legal Services, [said in an interview with CTV News last month.](#) “The amount of people experiencing homelessness in our community compared to the spaces that we have available for people, there’s a huge gap. All this will mean is people will be tenting and moving around, tenting and moving around. Which is harmful.”

Schuitema also raised legal concerns with the region’s choice.

In 2023, the region lost a bid for a court injunction to evict residents.

Justice M. Valente declined to declare that the people living there were in breach of a regional bylaw.

The ruling read, in part: “The region does not have adequate, accessible shelter spaces for its homeless population of some 1,100 individuals”.

The judge went on to say that the bylaw the region had used to enforce encampment orders “deprives the homeless residents of the encampment of life, liberty and security of the person in a manner not in accordance with the principles of fundamental justice and is not saved by section 1 of the charter.”

Schuitema said a similar legal battle could be looming.

“I think the region will have to go back to court to get permission to move forward with their plan as set out in their bylaw, which they’ve indicated that they understand they need to do,” Schuitema said. “There are some provisions in this bylaw which would violate the existing court order.”

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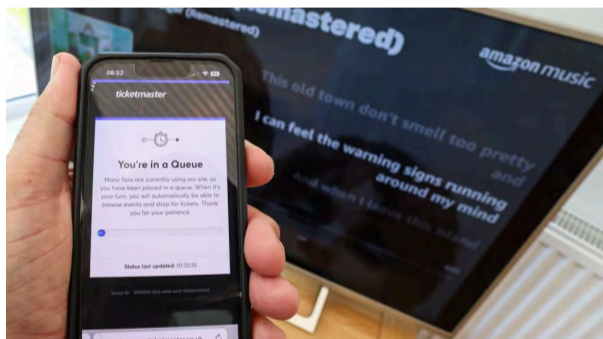
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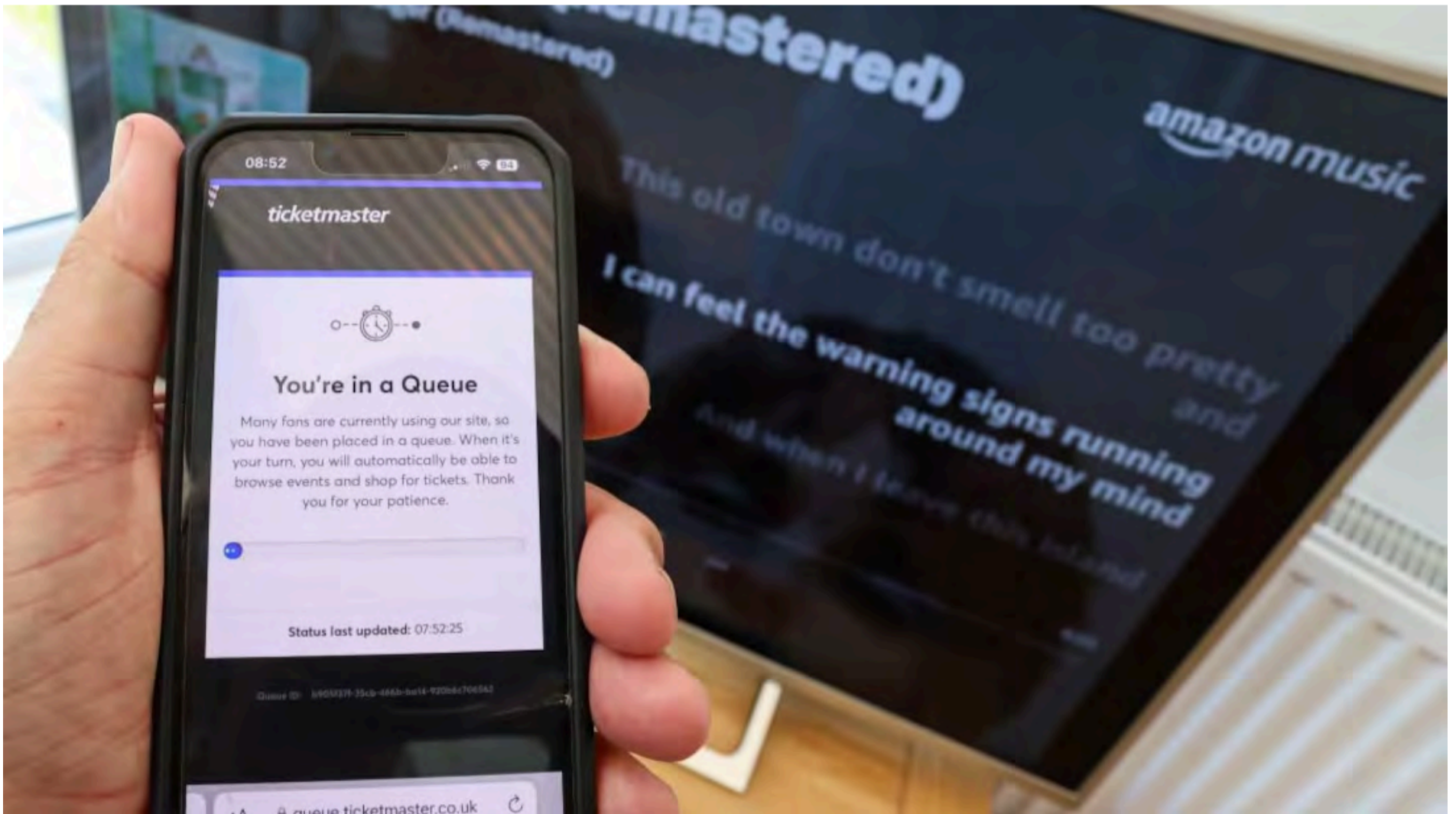


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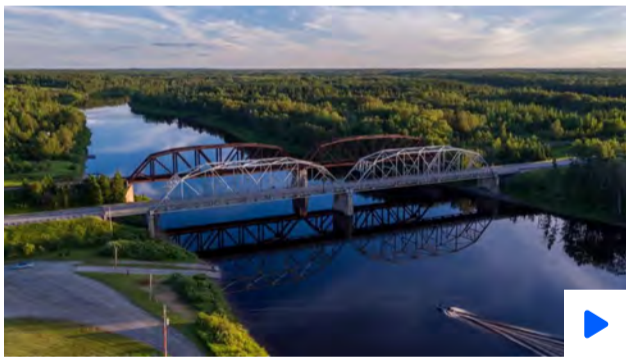
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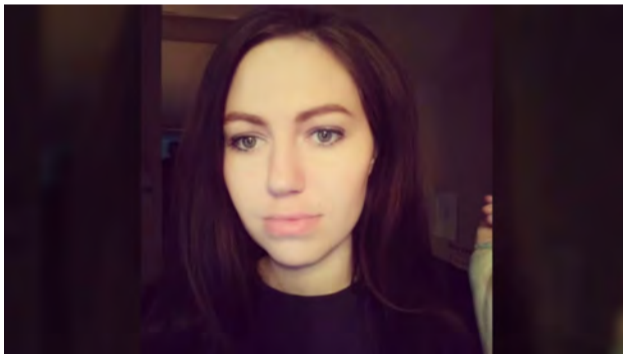


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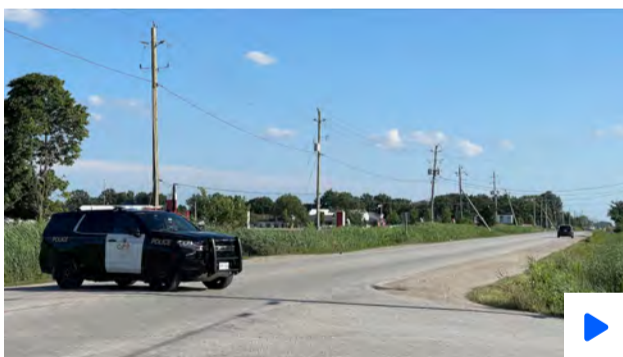
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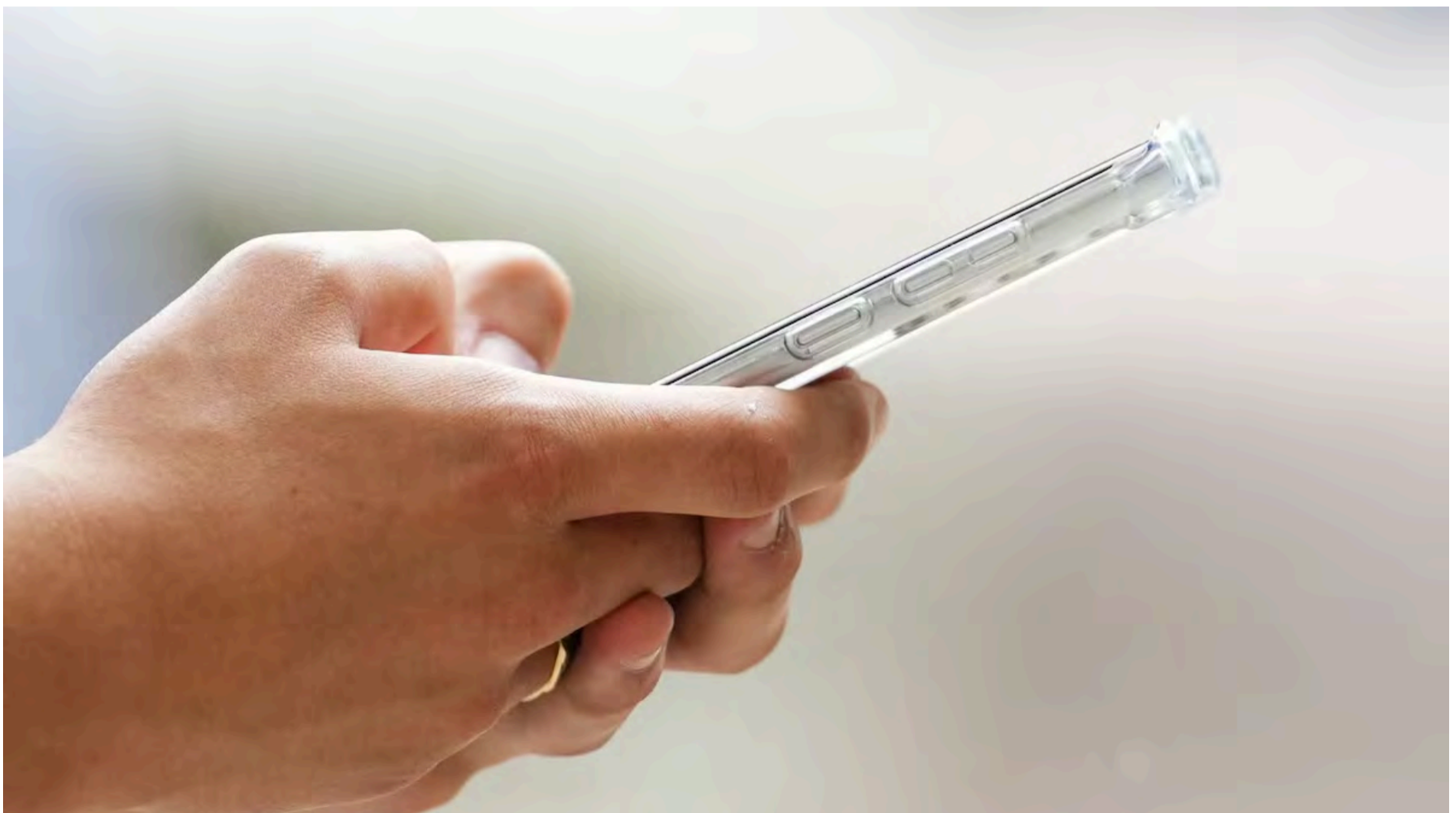
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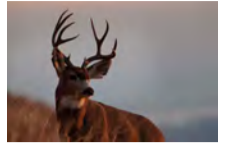


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EXHIBIT “6”

Surveillance, Fences, and \$5000 Fines

What Bylaw 25 Says About How the Region Treats Unhoused People



MELISSA BOWMAN

MAY 23, 2025



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3



2

Share

As you may have noticed in last week's post, I'm looking for contributing authors to Citified to offer additional perspectives and information on issues with which I may not be as familiar. This week, we are fortunate to have a guest contributor share more details about the Region of Waterloo's recent passing of Bylaw 25.

This week's post comes to us from Jacara Droog who is a housing advocate, member of the Unsheltered Campaign, and is writing in solidarity with residents at 100 Victoria.

Guest post by Jacara Droog

On April 23, 2025, Waterloo Regional Council passed [PDL-LEG-25-017](#) (Bylaw 25), a sweeping, punitive policy that allows the Region to fine or forcibly remove unhoused people from 100 Victoria Street (100 Vic), the largest encampment in the region. While staff and councillors have described the approach as "*human-centred and relational*," the bylaw tells a different story of evasion, surveillance, and harm.

Before Bylaw 25 even passed, advocates witnessed Region-contracted security guards already enforcing it—telling residents they were in violation of a bylaw that did not yet exist, mapping tents, and warning people not to put up new ones. Since then, five industrial dumpsters and a mobile office trailer have been moved onto the site, without notifying residents. Ostensibly placed there solely for sanitation, the dumpsters now sit in the middle of the site, blocking space for new tents and attracting rats, just metres from where people live. To residents I've spoken with, it feels like the Region sees them as both "garbage" and disposable.

Housing advocates argue the bylaw itself is [331](#) vague, carceral, and colonial. It prohibits basic survival: storing firewood, erecting tents, even moving tents and structures within the site without the Region's permission. It allows "*designated personnel*" to call police at any time. It grants the Region the ability to fence off any unoccupied space at their discretion, prevent residents from relocating or newcomers from setting up without permission. Individuals could face fines of up to \$5,000, which is more than many unhoused people on Ontario Works receive in an entire year. All of this is unfolding in a Region where more than 2,371 people are unhoused. Fewer than 60 shelter spaces exist for women and gender-diverse people. The Schwaben Club shelter, with 100 beds, closed in March. Shelters are at capacity daily. There is simply nowhere adequate or accessible for people to go.

Bylaw 25 violates the [2023 Ontario Superior Court ruling](#) that barred the Region from removing encampment residents due to a lack of shelter space, accessible and low-barrier alternatives, and the violation of the Charter. It also undermines the [National Housing Strategy Act](#), which affirms that housing is a human right in Canada. Further, it contradicts the Region's own [Plan to End Chronic Homelessness \(PECH\)](#). The people who co-created that plan—including those with lived experience—were not consulted before this bylaw was introduced.

The Plan to End Chronic Homelessness

It also seems to fail the Region's responsibilities under the [Dish With One Spoon Wampum](#), a treaty that governs this land. It also contradicts the Truth and Reconciliation Commission's (TRC) [94 Calls to Action](#), such as addressing systemic inequities in housing access. Given that Indigenous people make up roughly 12% of the Region's chronically unhoused population, this Bylaw will likely have disproportionate impacts. Criminalizing encampments appears antithetical to reconciliation efforts the Region claims to be committed to.

A Region-hired [security vehicle now stati333d](#) directly at the entrance of 100 Vic, underscores the Region's use of deterrence tactics. Its presence discourages mutual aid drop-offs, potentially [slows down emergency response times](#), and escalates tension and fear on site. For residents, it's another layer of intimidation and an ever-present reminder that they are being surveilled, policed, and pressured to leave.

If this were about health and safety, the Region would be focusing on the [PECH recommendations](#), not spending [\\$466,083 on temporary motel rooms](#), a contract set to expire by 2026. They'd be building relationships, not building fear. Bylaw 25 seems to be more about optics than solutions. It's about clearing land and making unhoused people disappear in time for a new transit hub.

Residents at 100 Vic are not obstacles to progress, nor are they expendable. They are our neighbours. A transit hub cannot come at the expense of displacing people. If the Region is serious about ending chronic homelessness, it must begin by listening to people with lived experience and expertise, to housing advocates, to Indigenous leaders, and community members already showing up in solidarity. In the meantime, residents need protection, not punishment, and our community's support and action.

If you're reading this, I invite you to show up. Listen. [Contact your regional councillors](#) and tell them to repeal Bylaw 25. [Sign the petition](#). Visit the encampment. Bring water, food, or other mutual aid resources. Because our collective liberation is inextricably linked, and what we build in this moment matters.

Be ready to learn and be honest with yourself about what you're stepping into, because while this work can be deeply rewarding, it also asks a lot of us. At 100 Vic, you might encounter someone in crisis—someone who is grieving, having a mental health crisis, overdosed, or wounded. That is the reality of surviving without shelter or safety, and barriers to healthcare. Carry Naloxone/Narcan and learn how to use it. Know that someone may react unpredictably when revived—not out of ingratitude, but because they are human. Learn how to clean a wound or bandage a leg. Come with solidarity, not saviourism. Ask what's needed. Shadow someone with experience. Reflect, regroup, and return only if it is right for you. Because no one can do everything, but all

of us can do something. And right now, ~~that~~ something might mean bearing witness, building trust, or refusing to look away.

Jacara notes that *“This piece is grounded in firsthand observation, lived experience, and available public data as of May 2025. While shelter capacities and conditions may vary over time, the realities described reflect what many unhoused people in Waterloo Region are currently facing: a lack of safe, accessible, and adequate housing options. Statements are offered in good faith to inform and advocate, not to misrepresent.”*

A huge thank-you to Jacara for sharing this piece with us! You can read more on this issue with the following links:

- Ontario court rules [Waterloo Region can't evict homeless encampment](#) due to lack of shelter space
- A [Summary of the Waterloo Encampment Decision](#)
- [Legal clinic claims ambulance unable to access Kitchener encampment for medical call](#)
- [Region calls claim about delayed response to overdose at encampment 'unfounded'](#)
- [Kitchener encampment needs to be cleared by Dec. 1](#) ahead of transit hub construction
- 'Where will they go?' [Kitchener encampment residents react to region's plan to move them from current site](#)
- Raised tracks and a new platform: [What it will take to build Waterloo region's new transit hub?](#)
- [Bylaw passes to clear Kitchener encampment](#) gradually with housing supports
- [Region to clear Victoria Street encampment](#) despite passionate opposition from delegates
- 'They won't disappear': [Residents of encampment react to new bylaw](#)

EXHIBIT “7”

[Kitchener](#) | News

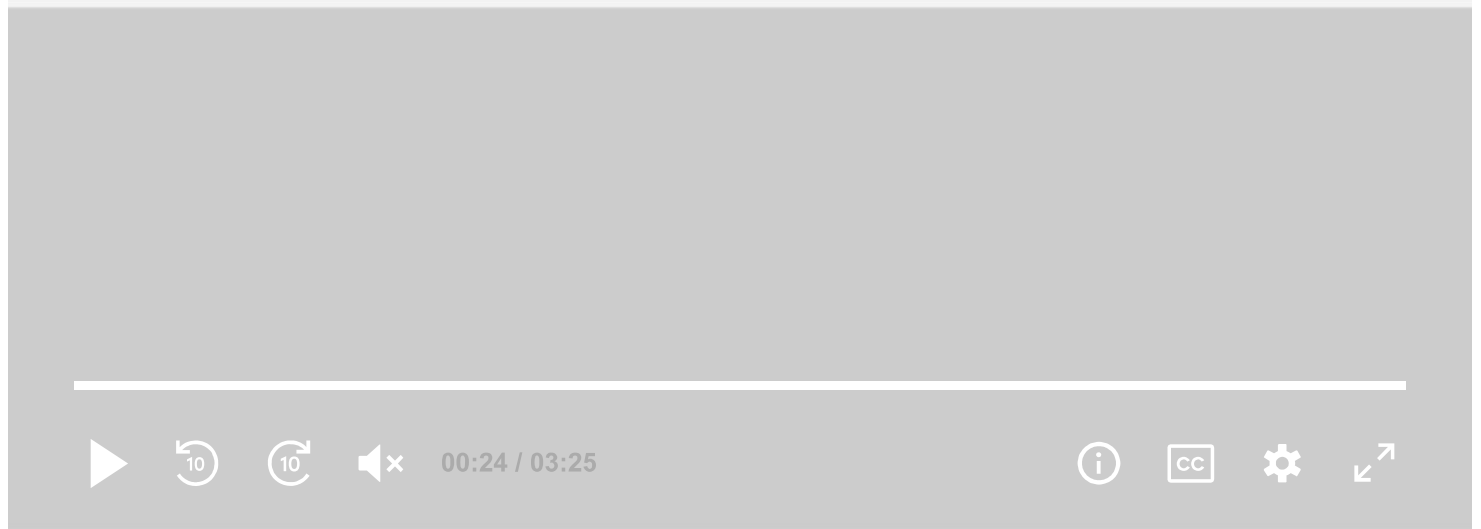
Legal clinic claims ambulance unable to access Kitchener encampment for medical call, region rejects allegation

By [Jennifer K. Baker](#)

Published: May 02, 2025 at 12:42PM EDT

Emergency at a Kitchener encampment raises questions

An advocate for residents at a Kitchener encampment says a security vehicle blocked an EMS vehicle during an emergency. CTV's Alexandra Holyk explains.



An advocate for residents at a Kitchener encampment says a security vehicle blocked an EMS vehicle during an emergency. CTV's Alexandra Holyk explains.

Waterloo Region Community Legal Services alleges first responders were delayed in responding to an urgent medical call at Kitchener's biggest homeless encampment because they were blocked by a security vehicle.

The Region of Waterloo, however, disputes their version of events.

Waterloo Region Community Legal Services, or WRCLS, is a non-profit organization providing free legal services to low-income individuals. They said paramedics were called to 100 Victoria Street North on Thursday for a drug poisoning.



Homeless encampment at 100 Victoria Street in Kitchener, Ont. on May 2, 2025. (Alexandra Holyk/CTV News)

“In situations like this, minutes count,” WRCLS said in a media release. “Tragically, emergency treatment was delayed because access to the encampment was blocked by the on-site security services vehicle, forcing EMS to park in the road.”

People living at the encampment also told CTV News they asked security officers to move the vehicle before emergency crews arrived on scene.

WRCLS said the resident did get first aid but, ultimately, died.

The incident raised serious concerns for the organization.

“The blocking of the driveway entrance to the encampment is a recent change,” they alleged. “Previously, it was the long-term practice of security services to park in the parking lot directly west of the encampment.”



Homeless encampment at 100 Victoria Street in Kitchener, Ont. on May 2, 2025. (Alexandra Holyk/CTV News)

Region responds

CTV News reached out to the Region of Waterloo for comment.

They denied the claims made by WRCLS.

“While we cannot share confidential health information related to an individual, we can confirm that paramedic services provided an immediate response to the call and were able to access the site with no delay, as has always been the case,” they said in an email to CTV News. “False allegations made in a misleading statement issued by Waterloo Region Community Legal Services earlier today are serious, harmful and unfounded. The Region of Waterloo is reviewing all options to prevent misinformation.”

Waterloo Regional Police also responded to the drug poisoning call but said, out of respect for those involved, they would not share any further details.



Homeless encampment at 100 Victoria Street in Kitchener, Ont. on May 2, 2025. (Alexandra Holyk/CTV News)

Encampment residents speak out

Residents at the encampment were still coming to terms with the death on Friday.

"It sucks that we have to deal with this," said Aaron Price.

"The sorrow that was here on-site yesterday was just palpable. People were very, very upset, including the person's partner," explained WRCLS Executive Director Ashley Schuitema. "There were lots of people here that are feeling very frustrated that the EMS couldn't get into the lot because the entryway was blocked."



Homeless encampment at 100 Victoria Street in Kitchener, Ont. on May 2, 2025. (Alexandra Holyk/CTV News)

Price has lived at the encampment for several years.

He said what happened Thursday was not an isolated incident.

“Any medical emergency that happens here, they don’t let them on site,” Price claimed.

Regional council [passed a bylaw last month that allowed them to clear the encampment by Dec. 1 so work could begin on its planned transit hub.](#)

- [MORE: How Waterloo Region and Guelph dealt with the homelessness issue in 2024](#)

“The vehicle used to be parked in the lot beside but the since the bylaw has passed, security has been physically blocking the space,” Schuitema alleged.



Homeless encampment at 100 Victoria Street in Kitchener, Ont. on May 2, 2025. (Alexandra Holyk/CTV News)

“People can’t get in with vehicles or anything on site with water, food, clothing or tents,” said Price.

As for Schuitema’s concerns, they stretch beyond Thursday’s incident.

“I think what happened yesterday is certainly linked to the closure of the CTS site,” she said. “I think it’s unfortunate and something that we’re going to see happening more frequently.”

In the meantime, [WRCLS promised it would keep pushing for change](#).

“I’m asking people to write to their councillors and ask that this vehicle be moved, because vehicle access to this site is essential for many, many reasons,” Schuitema said.

TAB 6

Court File No. CV-25-00000750-0000

ONTARIO
SUPERIOR COURT OF JUSTICE

BETWEEN:

THE REGIONAL MUNICIPALITY OF WATERLOO

Applicant

And

PERSONS UNKNOWN AND TO BE ASCERTAINED

Respondents

This is the Cross-Examination of **Jakob Stubbs** on his affidavit dated June 23, 2025, taken via Zoom videoconference on consent of the parties on July 10, 202.

APPEARANCES:

ANDREW LOKAN, Mr. Counsel for the Applicant
GRETA HOAKEN, Ms.

ASHLEY SCHIUTEMA, Ms. Counsel for the Respondents
JOANNA MULLEN, Ms.

(i)

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1

1 July 10, 2025

2
3 JAKOB STUBBS, AFFIRMED

4 CROSS-EXAMINATION BY MR. LOKAN:

5 1. Q. Good afternoon, Mr. Stubbs. My name is
6 Andrew Lokan and I'm a lawyer for the Region and I
7 have some questions for you this afternoon. And my
8 questions are going to be about matters relating to
9 your affidavit.

10 A. Mm-hmm.

11 2. Q. And your affidavit was sworn on June --
12 sorry, affirmed on June 23rd of this year?

13 A. I believe so. I actually have one
14 correction that I'd like to make, if that's all right?

15 3. Q. Sure. Go ahead.

16 A. So I don't see the exact area where I

17 ---

18 MS. SCHIUTEMA: Paragraph 13.

19 THE WITNESS: Oh, it is? Okay.

20 MS. SCHIUTEMA: Yeah.

21 THE WITNESS: Yeah, I'll read it just to be
22 accurate here. Yeah, so there was a time
23 where I -- it's pretty simple. There's a
24 move that I had. I think at the time I
25 thought it was May that I moved from one
26 place to the other but it was actually just

1 in April. So it was just a month earlier.
2 But I had a mix-up at the time when I was in
3 the affidavit earlier, so that's about it.
4 Yeah.

5
6 BY MR. LOKAN:

7 4. Q. At the first line at Paragraph 13, that
8 should say from October '24 to May '25, you were
9 renting a room from the landlord at ---

10 A. It should say April 2025, yeah.

11 5. Q. April, thank you.

12 A. Yeah, no problem.

13 6. Q. Okay, I am just going to give a couple
14 of instructions to make ---

15 A. Yeah.

16 7. Q. --- sure that this goes smoothly. If I
17 ask a question that you're not quite sure what I mean,
18 you can ask me to explain and you could ask me to
19 repeat the question. If we both start talking at
20 once, which sometimes happens, it's very difficult for
21 the court reporter ---

22 A. Mm-hmm.

23 8. Q. --- to get it down. So she may
24 intervene to stop us doing that. And I'll try also to
25 make sure that that doesn't happen. But just so you

1 know they can only record one thing at once.

2 A. Mm-hmm.

3 9. Q. And just a -- while we're at it,
4 another little thing. What you just said, "Mm-hmm,"
5 while nodding your head, that doesn't come through on
6 a transcript because it could be "yes" or it could be
7 "no." So if you could try to say "yes" or "no," and I
8 might have to ask you to say yes or no if you say Mm-
9 hmm.

10 A. Of course, yeah. Yeah, I -- also I'll
11 try to -- I might as well just like mute myself when I
12 am not giving, you know, actual answers like that.
13 So, you know, once I'm done talking, I'm going to do
14 that so nobody will hear me.

15 10. Q. Actually, Jakob, I am going to suggest
16 that you keep it on because ---

17 A. Okay, fair enough.

18 11. Q. --- we all have Zoom fails ---

19 A. Okay.

20 12. Q. --- while forgetting to unmute
21 themselves. Okay. Are you okay with me calling you
22 Jakob?

23 A. Yeah.

24 13. Q. Okay.

25 A. Yeah.

1 14. Q. So in Paragraph 8 of your affidavit,
2 you say you volunteer with an organization that acts
3 as advocates for the residents. Do you see that?

4 A. Yes, sorry, I'm just getting it up
5 here. Yeah.

6 15. Q. And I just wanted to check. Obviously,
7 you've got your affidavit in front of you.

8 A. Mm-hmm.

9 16. Q. I'll take that as a "yes."

10 A. Sorry.

11 17. Q. You don't ---

12 A. Sorry, yes.

13 18. Q. No problem. You don't have any other
14 documents there with you, do you?

15 A. No.

16 19. Q. Either on screen or in print?

17 A. No.

18 20. Q. Just the affidavit.

19 A. Yeah.

20 21. Q. Okay, thank you. The organization you
21 refer to is that Fight Back KW?

22 A. Yeah, yes.

23 22. Q. Any reason why you didn't mention the
24 name of the organization in the affidavit?

25 A. I don't think particularly. I think --

1 I think I was like being asked about like -- it wasn't
2 like anything super-specific down the line. It ended
3 up being just like "What kind of work do you do around
4 here?" or like "What kinds of things do you do?" It
5 ended up being just like, oh, you know, like I do some
6 volunteering and stuff like that and I don't think I
7 was like asked particularly about those kinds of
8 things.

9 23. Q. Okay. So ---

10 A. That I remember.

11 24. Q. What is Fight Back?

12 A. I'd say Fight Back is like kind of a --
13 it's hard to describe. Like mostly just like an
14 informal local group that do like a lot of, you know,
15 kind of mutual aid work in the area. It doesn't tend
16 to like associate with, you know, like the government.
17 It's not like a non-profit or anything.

18 And I don't know, it's like pretty loose and
19 I don't know, just like a bunch of people with like
20 similar values that, you know, are in the area that
21 come together to just help people that we see needing
22 help in the area.

23 I don't know, like -- that's like a simple
24 answer I could give, I guess. But, yeah, that's kind
25 of how I see it anyway.

1 25. Q. Okay. And just in terms of involvement
2 at the encampment, how many of you are there that get
3 involved at the encampment?

4 A. I actually like just don't know. Yeah.
5 Yeah, like I know of like a handful of people with us
6 but, yeah, I couldn't really like -- yeah, I wouldn't
7 really have any idea to give like a number at all, I'd
8 say.

9 But it's more than like a few us, I'd say.
10 But, yeah, it's hard to say and I don't really know
11 like everything that like, yeah, I don't know. I'm
12 like one person in it and it's not like I know
13 everyone that's involved in it. And ---

14 26. Q. So who are the ---

15 A. --- that's the answer.

16 27. Q. Who are the others that you know that
17 come to the encampment?

18 A. Hmm. I mean, I think like -- sorry,
19 I'm just thinking. Like I feel like it's -- really,
20 like I tend to -- when it comes to things at the
21 encampment, whether it's someone like bringing like,
22 you know, even just like charity, stuff like that or
23 anything. I tend to let like be like conscious of
24 other people's like identities and stuff like that.

25 But like I can definitely say like there's a

1 handful of people, again, Fight Back come regularly to
2 the encampment. But I just -- like it'd be like up
3 to, you know, individuals themselves whether they
4 don't want like to be identified or not there. It
5 kind of varies. Like even like residents don't like
6 names being given out or whatever. And so, it's just
7 been like a default for me to like, you know, to
8 respect people's like, identities and stuff like that.

9 But like, yeah, like if you have anything
10 like a bit more specific like ---

11 28. Q. Yeah, I actually -- and I am not asking
12 about names of residents. I actually would like you
13 to tell me the names of other Fight Back members
14 because I believe that to be relevant to the
15 application. And I'm happy to coordinate with counsel
16 for WRCLS about the way of handling that in terms of
17 the court. But ---

18 MS. SCHIUTEMA: I wonder if like does it
19 make sense for you to suggest names, Andrew,
20 and then Jakob can confirm his understanding
21 if that's a member. Like I think that might
22 be more appropriate.

23 THE WITNESS: That would be helpful.

24 MR. LOKAN: I'm not really in a position to
25 do that. So if you can just give the list.

1 And I understand what you say about people
2 prefer to not disclose their identities.
3 But there is some relevance to this
4 application.

5 MS. SCHIUTEMA: So can Jakob speak to
6 whether somebody else is a member of Fight
7 Back? Maybe you can ask ---

8 MR. LOKAN: I'll ask it this way.

9
10 BY MR. LOKAN:

11 29. Q. Other people that you encounter at the
12 camp who identify themselves to you as being
13 associated with Fight Back?

14 A. I mean it would be like the same
15 answer, I'd say, right? Like I'd say it's like up to
16 other people to like identify themselves. Right?
17 Like ---

18 30. Q. No, I know you don't want to answer the
19 question and I am saying, I'm pressing that I do want
20 the answer to the question. And unless there is a
21 legal objection, then it is the duty of the witness to
22 answer the question.

23 MS. SCHIUTEMA: Well, I mean, I think you're
24 asking -- can you repeat the question,
25 Andrew, so that Jakob understands what

1 you're asking? Because Jakob can't speak to
2 the member -- other people's beliefs and to
3 whether or not they're in a certain group, I
4 guess.

5
6 BY MR. LOKAN:

7 31. Q. I understand, so my question was at the
8 encampment, those that you've encountered who identify
9 themselves to you as being associated with Fight Back.

10 A. Yeah, I mean, from my memory like none
11 of those people like only Wren and ---

12 32. Q. That's Wren Wombwell?

13 A. I don't know anyone's like last names.
14 Like it's just like first names. But there was that
15 and there's like somebody like Eddy that comes around.
16 You know, there's I believe like ---

17 33. Q. What was that name, sorry?

18 A. Eddy.

19 34. Q. Eddy? Okay.

20 A. There is who else? Like so I know a
21 name TJ. Other than that, like I don't know like
22 there's -- there's not many people that like come
23 around that really like identify with everybody. Like
24 there's people that I know that like, you know, come
25 to -- at different like frequencies and stuff. There

1 might be like a name that I like can -- who else?

2 There's someone named like Ryan, for example.

3 35. Q. Do you know a David?

4 A. David? It doesn't sound -- well,
5 actually it does sound familiar but, okay, one thing I
6 will say is there's people that I know and there's
7 names that I know. But I can't -- I'm actually
8 generally bad with names. Is this like -- it's not
9 someone that I see very frequently that I know named
10 David. I will say that, at the encampment.

11 36. Q. But there might be someone that you see
12 occasionally named David?

13 A. I would actually ---

14 MS. SCHIUTEMA: Associated with --
15 associated with Fight Back?

16 MR. LOKAN: Yeah.

17 MS. SCHIUTEMA: Or are you talking about
18 someone that comes ---

19 THE WITNESS: If they are associate --
20 sorry.

21 MS. SCHIUTEMA: I am just asking for
22 clarification so it's clear for Jakob what
23 the question is, Andrew.

1 BY MR. LOKAN:

2 37. Q. So there is someone you see
3 infrequently that identifies themselves as associated
4 with Fight Back called David?

5 A. I don't think so, actually. Like if I
6 do see someone named David, I don't think they would
7 be with Fight Back. Yeah.

8 38. Q. Just another activist, do you mean?

9 A. I actually just don't know. Yeah. If
10 I did know -- like I feel like I would know that
11 they're in Fight Back, you know? Because I would see
12 them frequently and they'd be working with us a bit
13 more.

14 And -- but if this is someone that I like
15 don't know very well and they don't come very
16 frequently, it doesn't sound like they're someone that
17 is like directly associated with us, that I know of,
18 anyway.

19 I'd say that it's unlikely that they are,
20 you know, in Fight Back. You know. But it's possible
21 that they come to the encampment, yeah, I just don't
22 -- I don't remember who this person is actually. Like
23 genuinely that's my -- that's my answer, yeah.

24 39. Q. I just want to understand the
25 chronology you set out.

1 A. Mm-hmm.

2 40. Q. You say you began overnight shifts
3 volunteering with Fight Back around April of 2025 when
4 the region passed the bylaw and put out the garbage
5 bins. So you started coming for overnight shifts.
6 Are we talking about then late April? The garbage
7 bins arrived ---

8 A. Mm-hmm.

9 41. Q. --- April 16th and the ---

10 A. Mm-hmm.

11 42. Q. --- bylaw was passed April 23rd. So if
12 that helps.

13 A. Yeah, sorry, could you give me the
14 dates again?

15 43. Q. Sure.

16 A. Thank you.

17 44. Q. The garbage bins ---

18 A. Mm-hmm.

19 45. Q. --- dropped off on April 16th. And
20 that's the day that public notice on the internet was
21 given about the bylaw. And the bylaw passed on April
22 23rd.

23 A. Mm-hmm. Yeah.

24 46. Q. (Indiscernible) the dates that you
25 start coming to overnight?

1 A. I believe it was before the bylaw was
2 passed, actually. It was after the bins were there
3 but before the bylaw was passed.

4 47. Q. Okay.

5 A. Yeah.

6 48. Q. So a call went out for people to come
7 and start being at the site 24/7?

8 A. That did happen but, yeah, yeah. No,
9 that did happen, yeah.

10 49. Q. And it's your recollection that you
11 sort of responded to that call or did you hear from an
12 acquaintance or what?

13 A. So it wasn't like a call out, if you're
14 referring to like, you know, on the Internet or like
15 to the broader community, I -- I generally like don't
16 really use most social media. So like I -- I couldn't
17 speak to that.

18 But it probably would have been like
19 directly word of mouth that it happened. But, you
20 know, I did respond in some sense to, you know, the
21 actions being done there to stay and start doing
22 overnights after the dumpsters arrived there.

23 50. Q. Okay. And so for when you started
24 doing overnights and you say that that was about half
25 your nights ---

1 A. Roughly, yeah.

2 51. Q. --- has there been a -- from what
3 you've seen, a 24/7 Fight Back presence?

4 A. Yes.

5 52. Q. Okay. And in your case, you say in
6 Paragraph 13 that you began experiencing homelessness
7 in June of 2025?

8 A. Yeah, yes.

9 53. Q. And so since June of 2025, you've been
10 fulltime at the encampment?

11 A. Yeah, yeah. I'd say so.

12 54. Q. Okay. Now I know you're -- you just
13 told us that you're not a great one for social media.
14 But you do have a LinkedIn page, right? Maybe ---

15 A. I guess I do, yeah. It probably would
16 have -- I've actually never properly used it. I
17 think, you know, like the Yes Program, it was like
18 Youth Employment Services, they get you to make a
19 LinkedIn page. That's probably when I made it. I
20 actually don't -- I've never properly used it,
21 certainly without any consistency. But, sorry, was
22 there like anything you wanted to ask about that, or
23 ...?

24 55. Q. Yeah, and we're actually going to pull
25 it up because I do have a couple of questions ---

1 A. Okay.

2 56. Q. --- about it.

3 A. I'm not seeing it yet. There we are.

4 57. Q. Are you able -- I know it's tiny print.
5 Are you able to see that?

6 A. All good. I think so, yeah.

7 58. Q. Okay. So you put this up when you were
8 working with a program where they ask you to put up a
9 LinkedIn page. Do you remember approximately when
10 that was?

11 A. Oh, boy.

12 59. Q. Year is good enough, I don't need, you
13 know, I'm not ---

14 A. Yeah, no. Yeah, I -- dates, like I'm
15 pretty bad. I've got to think for a second. I'm
16 trying to think of things like backwards. I -- okay.
17 It would have been right before I think -- if my
18 memory is right, it would have been right before I
19 started working at Cactus Club.

20 60. Q. Okay.

21 A. Let me think here. I don't even know
22 if I would have edited -- I must have edited it after
23 because I updated when I was working there. From my
24 best memory is 2022, probably would have went up.

25 61. Q. Okay.

1 A. Yeah.

2 62. Q. And Cactus Club, that's a café chain,
3 right?

4 A. Yeah.

5 63. Q. And I don't think they've got one in
6 Waterloo, do they?

7 A. Not that I know of. I was in Toronto
8 doing that though, so ...

9 64. Q. So there was a period when you were
10 living in Toronto around 2022?

11 A. Yeah.

12 65. Q. Okay. And you were working fulltime at
13 Cactus Club at that time?

14 A. I guess like it depends on what you
15 define as fulltime. Like -- like the hours were
16 pretty inconsistent. Like I was a food expo and like
17 sometimes I get hours, sometimes not. I guess it
18 depends like what you consider fulltime. Like -- I am
19 not trying to like ---

20 66. Q. Yeah, no, no.

21 A. --- split hairs. Yeah, I'm not ---

22 67. Q. You know, people -- things end up on
23 LinkedIn profiles maybe that have prefilled categories
24 or whatever. I was just taking that from -- on the
25 second page it says ---

1 A. No. Fair enough, yeah.

2 68. Q. --- working fulltime.

3 A. Yeah. I am not trying to split hairs
4 or anything. I'm just like, yeah, trying to be
5 accurate, but, yeah.

6 69. Q. Okay. And what's a food expediter?

7 A. Basically, like -- so if there's like a
8 kitchen at the back, right, and then there's like the
9 servers, you know.

10 70. Q. Right.

11 A. We're kind of in between those so, you
12 know, food would come out on the counter and we would
13 put any final touches there, check for allergies,
14 anything like that. And sometimes we did a little bit
15 of serving but mostly we would just kind of organize
16 the food to make it easier for the servers to bring
17 out. And tons of like side jobs and stuff like that.

18 71. Q. Okay.

19 A. Yeah.

20 72. Q. So just looking at your profile, you
21 talk about having a career break and dedicating
22 yourself to learning much of what I've described in my
23 About section, particularly about extreme examples of
24 abusive power structures.

25 A. Okay.

1 73. Q. And you talk about reading books about
2 diagnosing what fascism is at its core. And you give
3 an example and about first-hand experiences living
4 within it.

5 So you've spent a fair bit of time reading
6 about fascism?

7 A. Yeah, to some degree. Like, I mean,
8 yeah, there was a lot about it. But, you know, I find
9 it's, you know, an important thing to learn about it.
10 So one of my interests. Certainly not, you know, in
11 the sense that I like fascism but, yeah, no, I -- it's
12 an interest of mine, and I found it's important and,
13 yeah.

14 74. Q. And I mean I get the impression that --
15 sorry, certainly not that you're for fascism, you're
16 actually ---

17 A. Like I don't -- yeah.

18 75. Q. You've sort of positioned yourself as
19 anti-fascism, is that fair?

20 A. I would say, yeah.

21 76. Q. Okay. And if you go to the first part
22 of your page, you have a bit more description.

23 A. Okay.

24 77. Q. And you say:

25 "... This had led me to learning how power is

1 structured is granted in the world, where it
2 derives from and how the way it is
3 structured influences inefficiency,
4 divisiveness, unity and general problems in
5 society. I study and read about fascism in
6 my own time and I am interested in
7 simultaneously radical and pragmatic
8 diagnosis and treatment for the way things
9 are done in society ..."

10 Do you see that?

11 A. Yeah.

12 78. Q. Yeah, so I mean, you -- would you
13 describe yourself as anti-fascist?

14 A. Yeah, absolutely.

15 79. Q. And you are very concerned with power
16 structures in society?

17 A. Yeah. Yeah.

18 80. Q. And that's true of some of the other
19 people in Fight Back as well, right, that you speak
20 to?

21 A. Yeah. Yeah, for sure.

22 MS. SCHIUTEMA: Well, wait a second, I am
23 going to object to that question because I
24 don't think Jakob can talk to like the
25 beliefs of other people in the group.

1 MR. LOKAN: As ---

2 MS. SCHIUTEMA: He can talk to his own
3 beliefs.

4

5 BY MR. LOKAN:

6 81. Q. As expressed to you in conversations
7 with other members of Fight Back, that'd be true of
8 them, right, Jakob?

9 A. I would say some of the members in
10 Fight Back would agree that they are anti-fascist.
11 Yes.

12 82. Q. All right. And you referred to it
13 earlier being a loose collective of people with
14 similar values. And that's one of those similar
15 values?

16 A. To some degree.

17 83. Q. To some degree that's one of those
18 similar values, isn't it?

19 A. Yeah, for sure.

20 84. Q. Okay.

21 A. Being anti-fascist.

22 85. Q. Thank you. Do you regard your advocacy
23 activities for Fight Back KW as being anti-fascist?

24 A. Hard to say, like again, like, I hope I
25 don't sound like I'm splitting hairs here. But like

1 -- or like not trying to delve into philosophy here,
2 right? But I don't know, like I consider a lot of
3 things that -- I am just going to take a second here.

4 A lot of things that -- a lot of values and
5 actions that might be considered, you know, anti-
6 fascist, don't necessarily have to do with like, you
7 know, directly, you know, opposing someone you would
8 literally call a fascist. Sometimes it does.

9 But it's not always like directly, literally
10 about that all the time, I guess. It's like, I don't
11 know it's like feeding the homeless, anti-fascist.
12 Right? I mean like, I would say, yeah, right?

13 But like, you know, it's kind of getting
14 into like philosophy here. I don't know, I am not
15 trying to split hairs again here but maybe it's like
16 is there something more specific I could get through a
17 little bit better?

18 86. Q. So one of the things that you talk
19 about in your affidavit, and this is at Paragraph 24,
20 you talk about security on the site since April?

21 A. Let me just get to it here.

22 87. Q. So we pulled it up on screen, but it's,
23 yeah, Paragraph 24 I was talking about.

24 A. Paragraph 24, okay. Right, gotcha.

25 Sorry could you repeat what you're ---

1 88. Q. I was just asking you to have a look at
2 Paragraph 24.

3 A. Okay, yeah, yeah.

4 89. Q. And then what you say about security at
5 the site in your last sentence is that:

6 "... They are more concerned with justifying
7 their authority rather than actually helping
8 ..."

9 A. That's been my experience, yeah.

10 90. Q. And so do you -- would you regard them
11 as having fascist tendencies in security?

12 MS. SCHIUTEMA: I am going to object to that
13 question. I don't know if that's relevant
14 to any of this, Andrew.

15 MR. LOKAN: Okay, so your objection is on
16 record and what I suggest we get the answer
17 and then as with other issues, we leave it
18 to the court date.

19 MS. SCHIUTEMA: So you'll probably need to
20 repeat the question for Jakob then.

21

22 BY MR. LOKAN:

23 91. Q. Do you regard -- when you talk about
24 the security on-site as being more concerned with:

25 "... Justifying their authority rather than

1 actually helping ..."

2 Do you regard security on-site as having
3 fascist tendencies?

4 A. It depends from what angle you are like
5 referring to fascism, right? Like ---

6 92. Q. But it's your words.

7 A. Yeah, but ---

8 93. Q. You're the one ---

9 A. Right, there's different ways to talk
10 about fascism, right?

11 94. Q. Yeah.

12 A. Like is it -- again, is it anti-fascist
13 when -- only when someone is literally like "I am a
14 fascist and I am doing fascist actions" and openly
15 doing that and you oppose them. I mean, most would
16 call that anti-fascist.

17 But what if, I don't know, if someone is
18 otherwise complex but does certain, you know, fascist-
19 like actions and you oppose them. Like there are many
20 angles to like ---

21 95. Q. So do the ---

22 A. It's hard to -- it's hard to answer
23 that, you know, the ---

24 96. Q. Do the security guards engage in
25 fascistic actions?

1 A. Yeah, to some degree, I'd say.

2 97. Q. Okay. And you talk about -- in your
3 LinkedIn post you talk about abusive authority
4 structures.

5 A. Mm-hmm.

6 98. Q. Are they an abusive authority
7 structure?

8 A. I would say largely, yeah.

9 99. Q. And you would extend that to the region
10 as well?

11 A. Yeah, to a large extent. It's not like
12 black and white. But I'd say, yeah, a lot -- a lot of
13 what the region does I'd say is abusive, yeah.

14 100. Q. And also that it has fascist
15 tendencies?

16 A. Fascist tendencies. I'd say like --
17 just to be clear, there's like a difference in saying
18 something is fascist and ---

19 101. Q. Yeah.

20 A. --- saying something is doing something
21 that is fascistic. Right? Like ---

22 102. Q. Okay.

23 A. --- you know, I'm not under the
24 impression that Canada is literally a fascist state.
25 You know? But it's like, you know, some authoritarian

1 things happen and, you know, some power structures are
2 authoritarian to some degree, right. And I'd say
3 that, you know, to whatever degree that is the case,
4 that -- to that degree there is some overlap with some
5 fascistic tendencies. That's how I would answer that.
6 The most accurate way that I can.

7 103. Q. Okay. So in terms of what the region
8 has done, you'd say there is overlap with fascistic
9 tendencies?

10 A. Yeah, to some degree.

11 104. Q. Okay. And have you ever used that term
12 yourself when talking with representatives of the
13 region? Have you ever said ---

14 A. I don't believe so.

15 105. Q. You don't believe so. But you've heard
16 other Fight Back people use that term?

17 A. Use the term "fascist?"

18 106. Q. In relation to the region, you heard
19 that, right?

20 A. I believe so, yeah.

21 MS. SCHIUTEMA: Do you mean like, sorry, do
22 you mean in conversations with Jakob or do
23 you mean in conversations to like an agent
24 of the region?
25

1 BY MR. LOKAN:

2 107. Q. When somebody from the region is
3 present, you've heard other Fight Back people refer to
4 them as fascists, right?

5 A. I believe so, yeah.

6 108. Q. Okay, thank you. Now I understand that
7 in your case, you first came to the encampment as a
8 volunteer for Fight Back. And how many tents are
9 there on-site that are used by Fight Back?

10 A. Used by us? I'd just say one.

11 109. Q. Okay, there's one which is sort of the
12 Fight Back tent. And do you have your own tent that's
13 separate from that because you're now a resident as I
14 understand it?

15 A. No. The tent that I use is not
16 separate from like usage also from people on Fight
17 Back, I'd say. Like, you know, people in Fight Back
18 also, you know, store, you know, some harm reduction
19 supplies and other things that we distribute to people
20 and, you know, come and go from it.

21 But it also serves as, you know, the place
22 that I live for now for the most part.

23 110. Q. Okay. So it's the one tent and you
24 overnight there, sometimes others overnight there.
25 But it's also where, generally, Fight Back keeps its

1 supplies and hangs out. Is that accurate?

2 A. Yeah, I'd say it's mostly accurate,
3 yeah.

4 111. Q. Okay. In your case, have you spoken to
5 the region's unhoused shelter workers about your own
6 options for housing? If or when (indiscernible)?

7 A. Yeah, so I actually hadn't until
8 literally like before this meeting today. I believe
9 there's been a lot of different workers so sometimes
10 like the terms of what one person is called from the
11 region versus another. Like what area they're from, I
12 might forget.

13 But up until literally today, that didn't
14 happen but today I did briefly talk to someone who
15 just like asked me how I was doing. And then I ended
16 up saying like, oh, yeah, like I've been spending most
17 nights here. And then they asked if I wanted -- I
18 forget exactly what it was about.

19 But they ended up giving me a sheet, like to
20 fill out. And, you know, I'll probably talk to them
21 about -- further about that. But, yeah, it basically
22 didn't go farther than that but that's like the first
23 conversation about my housing situation that I've had
24 with -- from what I remember -- anyone from the
25 region. So, yeah.

1 112. Q. And you have said in the affidavit --
2 and this is at your Paragraph 22 ---

3 A. Mm-hmm.

4 113. Q. --- that you would accept a motel if it
5 were offered to you by the region. You prefer the
6 motel to be close to supportive resources you're
7 familiar with and frequently access. For example, you
8 would not want to be set up in Cambridge. That's your
9 ---

10 A. Yeah.

11 114. Q. Do you see that?

12 A. Yeah. There's like complications with
13 it, too, right? Like accepting -- like potentially I
14 would accept a motel. Right? But like, you know, if
15 there was other risks involved like who knows, it
16 might be -- if it was a worse situation off, you know,
17 I'd have to like see what the offer was. And talk --
18 talk about it or everything but I am potentially open
19 to it, you know?

20 115. Q. Yeah. You would have to work out a
21 plan with -- we refer to the unhoused shelter workers
22 as USWs, you're familiar with that term. But you'd
23 have to work out a plan with the USWs if you were
24 going to go to a motel. Is that right?

25 A. Right.

1 116. Q. And you've said, you know, Cambridge
2 would be difficult for you but there are -- there is a
3 motel in Kitchener, right, that's used. Are you aware
4 of that?

5 A. I believe so, yeah. Yeah.

6 117. Q. Okay. And you'd want to make sure that
7 you -- that you had supports if you were at the -- at
8 a motel, right?

9 A. Yeah. Yeah, that's one of the most
10 important things for me, right, like I -- you know,
11 I've lived in many abusive situations, housed and
12 unhoused and everything, right? And one of the most
13 important things for me has been having good people
14 around me that are supportive of me truly and all
15 these things.

16 So, yeah, that's a big factor for me. And
17 not being isolated in some hole that I didn't know of
18 -- where I was disconnected is a big thing for me, I
19 would say. You know?

20 118. Q. Right. So if the way it works out is
21 that the encampment closes, it would work for you --
22 and I am just trying to summarize here -- to be in a
23 motel, maybe not forever but maybe transitional. As
24 long as you had the supports, as long as you're not in
25 Cambridge and as long as you have reasonable access to

1 the facilities you're used to using. Is that a fair
2 summary?

3 A. Potentially. Like I'd -- there's also
4 like just factors about -- to like the motel but I
5 don't -- that I wouldn't know about. Like -- like --
6 like I'm open-minded. Like I'm definitely like
7 willing to consider it, right? It's just like who
8 knows, maybe there's like a danger at the motel that I
9 wouldn't know of or even like to ask about, right?

10 I haven't been in a situation where it's
11 like had the opportunity to talk about what is
12 available and all these things. But, yeah, sorry, I
13 am not trying to split hairs or anything but for the
14 most part, I would say that's accurate. It's just
15 like ---

16 119. Q. Of course.

17 A. --- you know, what if there's factors
18 that I don't know about. But, yeah, for the most part
19 I'd say that's true.

20 120. Q. Okay. Thank you, I have no further
21 questions.

22 MS. SCHIUTEMA: I am going to take a minute
23 and see if I want to redirect on anything.

1 RE-EXAMINATION BY MS. SCHIUTEMA:

2 121. Q. Okay, Jakob, I want to ask you about
3 your current period of homelessness. Can you tell us
4 like what happened, so in June of 2025?

5 A. Yeah, so basically not to give the
6 whole life story but I had been basically my entire
7 life, jumping from, you know, abusive household to
8 abusive household to, you know, precarious living
9 situations and, you know, very chaotic situations
10 basically my whole life.

11 And in the last, you know, place that I was
12 living at, it turned out to be that it was yet another
13 abusive situation, unfortunately. And I -- it was
14 already a situation where like I was unable to afford
15 like almost any, you know, place in the area. And,
16 you know, it -- I -- yeah, it was kind of on a whim
17 that I had to go.

18 Basically, to flee that and, yeah, so I --
19 I've -- I was just like sick of jumping from abusive
20 situation to another over and over and over again.

21 And being unable to afford, you know,
22 basically any place that I am aware of. All these
23 things combined it led to basically, you know, going
24 properly homeless. Ended up being in the situation
25 that I was in.

1 And so, having already spent some time at
2 the encampment and knowing that, you know, there was
3 people who were supportive there and even like knowing
4 some of the people that are supportive there.

5 And just knowing that I was like relatively
6 safe there, counter-intuitively. Like I -- yeah, I
7 felt like that was basically my best option and so I
8 ended up staying there as my living situation
9 fulltime, in June, so ...

10 122. Q. And your personal philosophy is, that
11 Mr. Lokan was asking you about, do they have anything
12 to do with why you are currently living at the
13 encampment?

14 A. I mean, there's like overlap. But I
15 think it would have happened regardless. Like I don't
16 think that was the -- you know, the primary, like --
17 there's definitely overlap. Yeah, I'd say.

18 But I don't -- I think there's a good chance
19 that it would have happened anyway. The only thing is
20 just like it helps that because of, you know, the
21 volunteering that I've done, I've been aware of being
22 (indiscernible) and I knew it well. So it also made
23 it more comfortable for me to go there and having
24 already known the place, you know, for a handful of
25 months. And so, you know, for that reason, it helps

1 me feel more comfortable about being there as well.

2 123. Q. Okay. I don't have any further
3 questions.

4 MR. LOKAN: So we're done then. Off record.
5
6
7

8 --- ADJOURNED
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THIS IS TO CERTIFY that the foregoing
is a true and accurate transcription of
my recordings and notes, to the best of
my skill and ability.

BarPollard

Barbara A. Pollard
Certified Court Reporter

Photostatic copies of this transcript are not
certified and have not been paid for unless they bear
the original signature of Barbara A. Pollard, C.C.R.,
and accordingly are in direct violation of Ontario
Regulation 587/91, Courts of Justice Act, January 1,
1990.

TAB 7

Court File No. CV-25-00000750-0000

ONTARIO
SUPERIOR COURT OF JUSTICE

BETWEEN:

THE REGIONAL MUNICIPALITY OF WATERLOO

Applicant

and

PERSONS UNKNOWN AND TO BE ASCERTAINED

Respondents

APPLICATION UNDER Rule 14.05 of the *Rules of Civil Procedure*

This is the Cross-Examination of **Sara Escobar** on her affidavits dated June 23, 2025, and July 7, 2025, taken via Zoom videoconference on consent of the parties on July 11, 2025.

APPEARANCES:

ANDREW LOKAN, Mr. Counsel for the Applicant
GRETA HOAKEN, Ms.

ASHLEY SCHIUTEMA, Ms. Counsel for the Respondents
JOANNA MULLEN, Ms.
SHANNON DOWN, Ms.

MERCEDES PEREZ, Ms. Amicus Curiae

(i)

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1

1 July 11, 2025

2
3 SARA ESCOBAR, AFFIRMED

4 CROSS-EXAMINATION BY MR. LOKAN:

5 1. Q. Good morning, Ms. Escobar.

6 A. Good morning.

7 2. Q. I am Andrew Lokan, I'm counsel for the
8 Region. And I have some questions for you this
9 morning. And first, how would you like me to address
10 you, is Sara okay?

11 A. Sara or Ms. Escobar is fine.

12 3. Q. A couple of just logistical things.
13 One is when I ask a question, if you don't hear or
14 don't quite understand what I'm asking, please free to
15 ask me to repeat or to clarify.

16 A. Okay.

17 4. Q. And another is that we shouldn't both
18 be talking at once if we can avoid it because it makes
19 it very hard for the court reporter.

20 A. Okay.

21 5. Q. And we get a muddled transcript. And
22 the last thing is that when the answer to a question
23 is "yes" or "no," you shouldn't use "Mm-hmm," because
24 that's ambiguous on the transcript.

25 A. Yes.

1 6. Q. Thank you. So I am going to be asking
2 you about two affidavits. You affirmed an affidavit
3 on June 23rd of 2025 and you affirmed a second
4 affidavit on July 7th of 2025. Do you have those
5 affidavits with you?

6 A. I do.

7 7. Q. And just to check, you don't have any
8 other materials with you?

9 A. I do not.

10 8. Q. And I am talking both virtually and
11 print copies, so just the two affidavits?

12 A. Yes.

13 9. Q. Okay. So I understand you are
14 currently employed by the women's shelter at the YWCA
15 in Cambridge, is that right?

16 A. Correct.

17 10. Q. And that is fully-funded by the Region?

18 A. Yeah, correct.

19 11. Q. Okay. But the affidavits you've
20 provided, those are in your private capacity?

21 A. Correct.

22 12. Q. Okay. I am going to pull up your
23 LinkedIn page and we'll use screenshare so that you
24 can see that.

25 A. Sure.

1 13. Q. And if we can just look at the second
2 page of that under "About," there we go. You describe
3 yourself on LinkedIn as a social justice worker with
4 over 25 years of experience. And then you say you're
5 an authentic self-aware leader and advocate. Do you
6 see that?

7 A. I do.

8 14. Q. Yeah. So you would agree that you
9 advocate for the rights and interests of unhoused
10 people?

11 A. Within my roles, yes.

12 15. Q. Okay. And what does "social justice
13 worker" mean?

14 A. In this case, I describe myself as a
15 social justice worker in search of -- making sure that
16 people's human rights and social justices are being
17 adhered to.

18 16. Q. Okay. So you advocate for people's
19 human rights and social justice, as you understand it?

20 A. People's human rights, exactly.

21 17. Q. Okay, a little further down on the
22 LinkedIn page, there is a reference to the "Working
23 Centre." And it may be that the dates suggested there
24 are not quite right. So a little further down. Yeah.

25 So with the Working Centre, it first says 11

1 years, 5 months but then says "Emergency Shelter
2 Support Housing Outreach Worker," one year. How long
3 were you at the Working Centre?

4 A. I was at the Working Centre for I think
5 13 -- it was more than 10 years.

6 18. Q. Okay.

7 A. I've honestly lost track but it was
8 about 13 years.

9 19. Q. Okay. And can you just tell us what
10 the Working Centre is?

11 A. I can tell you what the Working Centre
12 was when I was working for the Working Centre. I
13 can't tell you what it is now; I don't work there
14 anymore.

15 20. Q. Okay, so your knowledge of that centre
16 is through until approximately what year?

17 A. My direct personal knowledge of that
18 space is while I was working there. I now know it as
19 a community partner.

20 21. Q. Okay. But when did your direct
21 personal experience with it end?

22 A. What year was Covid? That year started
23 -- that Covid started, yeah.

24 22. Q. Started in 2020.

25 A. 2000 -- 2020, yeah.

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1 23. Q. And at least while you were there, it's
2 an agency that offers service to unhoused individuals?

3 A. It was one of the services that we
4 offered, yes.

5 24. Q. Okay. And what kind of services?

6 A. Services that I was directly linked to
7 which was many years ago at this point, with a
8 different leader, as well with a different coordinator
9 where I was directly supporting folks who were using
10 St. John's Community Kitchen and the space for lunch,
11 showers, personal hygienes, connection to other
12 community services.

13 I was directly involved in street outreach
14 and connecting with folks who were not connecting to
15 services in any other way. And so going out into
16 community and finding folks wherever they would be. I
17 was also supporting folks in attending appointments,
18 whether it was legal appointments, medical
19 appointments, personal appointments, people who needed
20 supports in doing laundry. And this was a social
21 inclusive sort of programming so that folks felt safer
22 while being accompanied by a friendly worker.

23 25. Q. Okay.

24 A. To do whatever things they needed to
25 do.

1 26. Q. And the St. John's Centre, that's
2 directly across from 100 Vic?

3 A. The St. John's Kitchen is a program of
4 the Working Centre.

5 27. Q. Oh, I see. Okay.

6 A. And it's located at the -- on Victoria
7 Street across from 100 Victoria, yes.

8 28. Q. Okay.

9 A. Or it was. I do not know how they're
10 running that program now.

11 29. Q. Right. So you probably know Joe
12 Mancini?

13 A. I was familiar with Joe Mancini because
14 he was the executive director while I was working at
15 the Working Centre. Yes.

16 30. Q. Okay. But first of all, can we agree
17 to mark this LinkedIn page as Exhibit 1?

18 MS. DOWN: Yes.

19 MR. LOKAN: Thank you.

20

21 EXHIBIT NO. 1: LinkedIn page of Sara Escobar

22

23 BY MR. LOKAN:

24 31. Q. I am going to pull up a news article
25 dated April 24. I believe this was CTV but I may have

1 to check that. Okay, yes, CTV. Or sorry, City News.
2 There's some quotations attributed to Joe Mancini.
3 And I wonder if we can just have a look at that.

4 So you'll see about a third of the way down
5 the page:

6 "... Joe Mancini, director of the Working
7 Centre in Kitchener told 570 News Radio this
8 move by the region shouldn't come as a
9 surprise. It's been some time now and the
10 region has warned that the encampment would
11 be ending. So it is reasonable if the
12 region works with those individuals and has
13 planned for each individual to find an
14 alternative arrangement ..."

15 Do you see that?

16 A. I do see it.

17 32. Q. And were you aware of this article at
18 the time when it came out?

19 A. I heard about the article and then I
20 did read it, yes.

21 33. Q. Okay. Thank you. And if we can go
22 down to the bottom of the page. He's also quoted as
23 saying:

24 "... Mancini admits that these encampments can
25 become makeshift communities but they are

S. Escobar (Cr.-Ex.) - 10

1 harsh communities. So finding alternate
2 places to stay will be a positive in the
3 end. The alternatives maybe are never
4 perfect but they do afford individuals new
5 accommodations, new opportunities. Yes, the
6 community that's established gets disrupted
7 but then new opportunities also develop ..."
8 And then it -- going onto the top of the
9 next page, he said:

10 "... Providing access to additional services
11 for supporting housing or temporary hotels
12 might be the touchpoint some individuals
13 need to break the cycle of homelessness.
14 Mancini points out the move won't happen all
15 at once. The region is creating a process
16 that is going to be over six months. That
17 does create time to create these
18 alternatives. The idea is that there is 36
19 individuals there right now and that group
20 will be offered these kinds of opportunities
21 ..."

22 So when you read this, you would have taken
23 note of those comments?

24 A. I read the comments; I didn't
25 necessarily take note.

1 34. Q. Okay. And I'm not suggesting you
2 necessarily agreed with them. But I want to sort of
3 go through where you -- it sounds like you probably
4 disagree and where you might agree. You would
5 certainly acknowledge that a shelter is or can be a
6 less harsh environment than an encampment?

7 A. Are you talking specifically about
8 somebody or are you talking the larger population of
9 people experiencing homelessness ---

10 35. Q. I'm talking ---

11 A. --- to (indiscernible) ---

12 36. Q. I'm talking for an individual.

13 A. It can vary depending on the person's
14 needs and the person's difficulties, experiencing
15 difficulties in that moment.

16 37. Q. But at a basic level, in your second
17 affidavit, the July 7th one at Paragraph 7 ---

18 A. Mm-hmm.

19 38. Q. --- you have said -- I'll make sure
20 I've got the right language -- those were the
21 (indiscernible) but it didn't matter because we're
22 just finding it a part of your affidavit.

23 A. Mm-hmm.

24 39. Q. The third sentence under Paragraph 7,
25 you say:

S. Escobar (Cr.-Ex.) - 12

1 "... A shelter is staffed to support the needs
2 of people using that space. People have
3 food, running water, a bed to sleep in, air
4 conditioning and access to staff ..."

5 You don't always have those things at an
6 encampment, do you?

7 A. Are we talking specifically about that
8 statement, number 7?

9 40. Q. Yes.

10 A. And the fact that we were -- like we
11 are talking about the discharge process or the -- that
12 period or phase, well, that's what I was addressing in
13 that.

14 41. Q. Okay, but let me ask the more basic
15 question. A shelter can be a less harsh environment
16 in terms of just these basic needs, correct?

17 A. Sure, for some folks.

18 42. Q. Okay. Now, Mr. Mancini seems to think
19 that a six-month transition period for residents and
20 the region to find alternative arrangements, is a
21 reasonable period according to what's been -- he's
22 said or what's attributed to him.

23 And I take from your affidavit that you
24 think that that's not long enough?

25 A. I think that if it was going to only

1 take six months, the region would have been completed
2 -- would have completed already the process of finding
3 housing for everybody at 100 Victora.

4 43. Q. And I'm having a little difficulty
5 understanding that, "if it was going to take only six
6 months." You're aware that the population, all 100
7 Vic, that's had people leaving, people coming in over
8 time. Correct?

9 A. Correct.

10 44. Q. Okay. So once a date is determined by
11 which the property is needed, and that that date under
12 the bylaw is December 1 according to the region's --
13 the region's evidence, the region announces that in
14 seven-month's time, the encampment is going to be
15 closed and then it starts engaging with the residents.

16 And you say that that process should take
17 longer than six months?

18 A. My question was why did the region wait
19 until they announced at the bylaw to commit to working
20 with the residents of 100 Victoria to find alternative
21 housing?

22 45. Q. So I'm not sure that that is actually
23 the case or not but I am not here to give evidence.
24 And you're not here to ask questions. But what I am
25 asking you is if the region doesn't know the date

1 until, let's say, March/April, and then leaves a six
2 or seven-month runway to work with the residents to
3 find alternative arrangements for them, is that six or
4 seven months enough?

5 A. I don't -- I -- I wouldn't be able to
6 say that. I am not the one working directly with
7 everybody. At 100 Victoria I do know that it's with
8 the lengthy waitlists for housing that is available in
9 our region ---

10 46. Q. Yeah.

11 A. --- it is nearly -- it's going to be
12 nearly impossible. The cost of individual apartments
13 in our region is continuing to rise and so even with
14 the subsidies that we are currently receiving as
15 frontline workers, it is difficult to find housing for
16 folks.

17 47. Q. Right. But you understand -- maybe you
18 don't -- you understand the region together with
19 passing the bylaw has made additional resources
20 available for the existing residents in order to be
21 able to place them?

22 A. Can you repeat that?

23 48. Q. You understand that the region has made
24 additional resources available? So it added to its
25 budgets to accommodate the existing residents.

1 A. I have heard the region say that they
2 will be committing more money and resources to be able
3 to support folks at 100 Victoria. A lot of the things
4 we've seen, for example, the day that the garbage bins
5 were dropped, it's not -- it -- we are concerned about
6 the way that the region is moving forward.

7 And we're really concerned in wanting to
8 ensure that the 100 Vitoria residents' human rights
9 are being adhered to and respected.

10 49. Q. Okay, so, Sara, you're not a lawyer,
11 are you?

12 A. I am not.

13 50. Q. Okay. And this has come up with
14 others. It will be for the courts to determine what
15 those rights are.

16 A. Correct.

17 51. Q. My question, I think, is a little
18 different. Can we go to Paragraph 11 of your second
19 affidavit? The very last sentence you say:

20 "... The approach taken by the region to
21 require the encampment to close by December
22 1, does not allow the USWs [and that stands
23 for Unhoused Shelter Workers] to
24 meaningfully engage with the residents about
25 their choices or options ..."

1 And we just talked about how it was seven
2 months in advance. So are you saying in this
3 paragraph or are you suggesting that it just takes
4 longer than seven months?

5 A. I am suggesting that it can take longer
6 depending on personals -- people's personal needs and
7 difficulties.

8 52. Q. Okay. And Mr. Mancini suggested that a
9 six-month period was reasonable. What would you say
10 is a reasonable runway to be able to work out
11 individual housing plans with the residents and place
12 them elsewhere?

13 A. I think that -- in my personal
14 experience, without being able to slow down and take
15 count for all of the difficulties that everybody in
16 that space is experiencing ---

17 53. Q. Yeah.

18 A. --- and if we try to tailor a one-way
19 approach to support all of that -- that entire group
20 of folks, we're going to miss a few folks. And the
21 approaches that are ---

22 54. Q. Okay. If I can just cut in for a
23 moment. You said "one-way approach." It's my
24 understanding from the region's evidence that they're
25 talking about individual housing plans with a range of

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1 options and essentially tailoring for each individual
2 resident which of the options works best for them, and
3 under what conditions. So it's not a one-size fits
4 all.

5 But I -- but if I can take you back to your
6 answer then. How long do you say would be a
7 reasonable run-way for this process?

8 A. I think without knowing what
9 difficulties people are having in that certain space,
10 it would be nearly impossible for me to name a time.
11 But it will take -- it -- so what I'm saying in that
12 statement is that with each individual, it will have
13 an individual time needed. Depending on the
14 difficulties that that person is presenting with and
15 the limitations that they already have within the --
16 this region.

17 So whether they have rent arrears with a
18 regional housing provider, that means that they would
19 be disqualified from that regional housing provider.
20 If they are restricted from any specific shelters,
21 there are folks that are restricted from motels.
22 There are folks who have behavioural difficulties that
23 will exclude them from lots of the shelters that are
24 being provided right now through regional funding.

25 And so that is -- that is what I am stating.

1 That is what I am directing that to.

2 55. Q. That it's there's a variety of
3 individual circumstances and that may affect the
4 length of time required to engage with each individual
5 resident. Is that fair?

6 A. There's a variety of difficulties,
7 correct.

8 56. Q. Okay. And you're also aware that the
9 region's USW team, it's comprised of social workers,
10 social support workers, registered nurse, they are all
11 no less professionals. Are you aware of that?

12 A. Yes.

13 57. Q. Okay. And so it would be for the USW
14 team working with the individual residents to work out
15 those difficulties. Fair enough?

16 A. What's your question?

17 58. Q. It would be for them; it's their job
18 because -- so if the region has come to an estimation
19 that a six or seven-month period is enough time for
20 this process, with the benefit of its USW team, you
21 don't have any reason to say that that's wrong, do
22 you?

23 A. I have reasons to question the validity
24 of that time limit set. According to the history of
25 what we have experienced here in this region, with the

1 limited access that folks have to shelters, to motels,
2 with their arrears at rentals with a 10 to 15-year
3 waitlists that we currently have for supportive and
4 affordable housing, that is -- that is my only -- I
5 question the validity of that time.

6 59. Q. You question but you're not able to
7 offer any alternative time?

8 A. I mean, if I -- so for me, it would be
9 totally inappropriate for me to give you a specific
10 time.

11 60. Q. Okay. So would it be more helpful if
12 it was eight months?

13 A. It would be very helpful if this was
14 not a time-limited occurrence. It would be helpful if
15 folks did not feel like they were being given an
16 ultimatum.

17 61. Q. Right.

18 A. Either work with the USWs to find
19 housing within the next six months, eight months or
20 you live whatever fate comes then at that point. If
21 you don't accept whatever we're giving you within this
22 time limit; that feels like an ultimatum to me.

23 62. Q. Okay, and ---

24 A. That reads like an ultimatum to me.

25 63. Q. You have mentioned ultimatum in your

1 Paragraph 11.

2 A. Mm-hmm.

3 64. Q. So just to circle back, you're not able
4 to say, based on your own knowledge, what a reasonable
5 period would be. And you question but you are not
6 able to say. But independently of that, you're saying
7 you don't think there should be an ultimatum?

8 A. I don't think there should be a time-
9 limit, right. Because it -- it presents as an
10 ultimatum, yes.

11 65. Q. Okay. So if there is a construction
12 project that's got to start some time, what is the
13 solution you're offering? Are you saying that you
14 talk and engage with the residents for just as long as
15 it takes. And then the construction project has to
16 wait to start until after that process is finished?

17 A. I don't know what the legalities are

18 ---

19 66. Q. It's a ---

20 A. The legal -- like so I think that if
21 the region knew that they were time-limited, I think
22 that this direct support that they are now giving,
23 that they say they're giving to the residents of 100
24 Victoria, should have started before the bylaw was
25 introduced.

1 67. Q. Okay, so that's retrospective. That's
2 looking back and you say they should have done
3 something else previously. But we are where we are.

4 A. Okay.

5 68. Q. And are you saying that the region now
6 has to engage and talk with the residents and try and
7 work out IHPs, individual housing plans, until the
8 last resident has agreed to leave. And only then can
9 the region start construction?

10 A. I think that if any other way of doing
11 it hinders in the human rights of folks that are
12 currently living at 100 Victoria, then it would, yes.

13 Like it has to be that way ---

14 69. Q. So ---

15 A. --- otherwise ---

16 70. Q. And then so your solution is just as
17 long as it takes, whether it's six months, a year or
18 two years, three years?

19 A. It wouldn't take very -- like it
20 wouldn't take three years, if ---

21 71. Q. Why not?

22 A. --- we're dedicated to supporting folks
23 and finding equal or alternative housing to 100
24 Victoria.

25 MS. SCHIUTEMA: I am going to object to this

1 line of questioning, Andrew. I think you're
2 asking Sara to speculate on things that
3 aren't set out in her affidavit.

4 MR. LOKAN: No, I am trying to understand
5 what is said by "It's wrong to have an
6 ultimatum." So I am entitled to probe with
7 respect.

8
9 BY MR. LOKAN:

10 72. Q. If an ultimatum -- if a set date
11 doesn't work, what is it that works?

12 A. Treating people -- yeah, sure.
13 Treating people with a dignity, being able to give
14 people information with transparency about timelines.
15 Folks were not warned that there would be garbage bins
16 and a portable dropped off in their front lawns. It
17 was traumatizing to them.

18 And so ---

19 73. Q. I appreciate that you have ---

20 A. You know ---

21 74. Q. --- (indiscernible) of what was done.

22 So looking forward -- so I think we've established you
23 don't think it needs to be three years. Because you
24 think that with engagement, it's going to happen more
25 quickly than that?

1 A. Correct.

2 75. Q. But what if it doesn't? What if there
3 are some people who say "I am not moving?" Do you say
4 the construction can never happen?

5 A. I would question what the work that is
6 being done with that group folks, if they are choosing
7 not to move. What options are they being given that
8 they are choosing not to move from there?

9 76. Q. Okay. So you can question that but at
10 the end of the day, doesn't there need to be an end to
11 this process ---

12 A. (Indiscernible), yeah.

13 77. Q. It might work ---

14 A. (Indiscernible) to question it to find
15 an alternative that people will accept as appropriate
16 housing.

17 78. Q. Okay, so -- and this really gets back
18 to your -- the way you frame yourself, you're an
19 advocate. You are pushing for the best possible
20 outcome for each unhoused resident?

21 A. I am going to push for whatever the
22 person is asking for me to push for. I am not going
23 to push from -- or without the person. I am going to
24 -- and it's not "pushing."

25 Advocating is being able to communicate and

1 support the person with whatever it is that they want
2 to do. We call it "advocating" because there are
3 folks who need the support to go and talk to into the
4 doctor's office so that they're heard. Especially if
5 they're living with an addiction of some sort and
6 they're going to be named "drug-seeking."

7 So we advocate for that person to make sure
8 that they get whatever needs they need met. Whether
9 it's medical, whether it's legal, whether it's, you
10 know, finishing to do laundry, we'll advocate with you
11 to be able to use a laundromat if that's the need.

12 79. Q. Okay.

13 A. Advocating means doing whatever --
14 representing the person in whatever way they need us
15 to so they can get their needs met.

16 80. Q. And would you ---

17 A. That's been my role.

18 81. Q. Okay. Would you accept that reasonable
19 people can differ on how this process should go? So,
20 for example, your opinion might be different from Joe
21 Mancini's?

22 A. Do I agree that Joe -- like that are --
23 our opinions can differ? Yes.

24 82. Q. And they can both be reasonable
25 opinions? I mean, your -- you have your perspective,

1 he has his. Is that fair?

2 MS. SCHIUTEMA: I am going to object to this
3 line of questioning, Andrew, because Sara is
4 a fact witness, giving facts. Sara is not
5 here to give her opinion.

6 MR. LOKAN: Well, she doesn't seem to have
7 restrained herself in the affidavit from
8 saying we can't have ultimatums.

9 MS. SCHIUTEMA: Well, that's within the
10 basis of her experience, she's giving a fact
11 of -- she is delivering fact in that case.

12
13 BY MR. LOKAN:

14 83. Q. Reasonable people can differ in terms
15 of what they think is the optimum way of addressing
16 the move-out process. I'll put it that way. Will you
17 agree with that?

18 A. Reasonable people will differ in all
19 kinds of ways ---

20 84. Q. Okay.

21 A. --- including with this one.

22 85. Q. Including this one? Thank you. Could
23 we mark the article I've quoted from as Exhibit 2. It
24 was identified by the witness as something she's read.

25 MS. SCHIUTEMA: Yes.

1 MR. LOKAN: Thank you.

2
3 EXHIBIT NO. 2: City News article, April 24, 2025

4
5 BY MR. LOKAN:

6 86. Q. You say in Paragraph 11, that you
7 recently became aware of the Federal Housing
8 Advocate's new report and then you attach that report
9 as Exhibit C?

10 A. Correct.

11 87. Q. When did you become aware of that
12 report?

13 A. I read this report -- I think it was
14 about -- I think when it first came out. So I am
15 trying to think of when that first was because I'm
16 trying to think of what office was sitting at when I
17 read it.

18 88. Q. Okay, just a rough time of year or --
19 it's February of 2024, I think. So ---

20 A. Yeah, I think it was -- that was at my
21 old job the first time that I -- I -- I heard of it
22 and then the -- it was a few months after that that we
23 actually had time to sit and read it.

24 89. Q. Okay.

25 A. Yeah, so just a while ago.

1 90. Q. Certainly, it was before your first
2 affidavit?

3 A. Maybe to have read it fully through but
4 I was aware of it. That's part of my job to be aware
5 of these.

6 91. Q. Okay. Were you provided this by
7 counsel?

8 A. They -- they asked me if I was aware of
9 this.

10 92. Q. Okay. There is a document that is
11 linked to this report which talks more specifically
12 about municipalities. And I am just going to see if
13 we can show how this works. If you go to -- I think
14 it's in the first footnotes. Yeah. Sorry, second
15 footnote. On the document that you put in, so it's
16 the bottom of Page 3. Footnote 2 says:

17 "... A full list of recommendations for
18 municipalities is available at this link.
19 And for provinces and territories at this
20 link ..."

21 Were you aware that this linked to more
22 specific recommendations for municipalities?

23 A. Sorry, I'm having trouble finding where
24 you're reading from.

25 93. Q. Okay, so we'll go back to Footnote

1 number 2 on Page 3 of your Exhibit C: ---

2 A. Okay, yeah. I see it.

3 94. Q. ---

4 "... A full list of recommendations for
5 municipalities is available at this link ..."
6 And that actually links to another document,
7 "... Fact Sheet Recommendations for
8 Municipalities Implementing the Housing
9 Advocate's Report on Homeless Encampments ..."
10 Were you aware of this document?

11 A. Yeah. I have seen it.

12 95. Q. Okay. And this, in turn, if you follow
13 what it says, one of its recommendations is -- sorry,
14 it will just take me a minute to -- yeah, Page 4 of
15 this document just under the heading:

16 "... Municipalities must commit to a human
17 rights-based approach to address the needs
18 of encampment residents ..."

19 And maybe we can blow that up a little bit.

20 And it suggests that:

21 "... The municipalities should integrate the
22 human rights principles and guidance set out
23 in the national protocol ..."

24 And then in a second document called

25 "Homeless Encampments Municipal Engagement Guidance."

1 So you, I take it, were also aware of Homeless
2 Encampments Municipal Engagement Guidance?

3 A. Yes.

4 96. Q. Okay, so we're going to go to that
5 document. This is a document you are aware of as
6 well?

7 A. Yeah. Yes.

8 97. Q. Okay. I'm going to ask that we mark
9 this document as the next numbered exhibit.

10 MS. SCHIUTEMA: Okay.

11
12 EXHIBIT NO. 3: Document, "Homeless Encampments
13 Municipal Engagement Guidance"

14
15 BY MR. LOKAN:

16 98. Q. And just a couple of things that are
17 said in this document. Page 2 of this document --
18 sorry, would we -- I think we're up to Exhibit No. 3,
19 is that right?

20 MS. SCHIUTEMA: Yes, I think so.

21 MR. LOKAN: Okay. I just want to make sure
22 that for the record it's clear.

23
24 BY MR. LOKAN:

25 99. Q. So when I say "this document" I'm

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1 talking about Exhibit 3 and that is Homeless
2 Encampments Municipal Engagement Guidance. I'm sorry.
3 Homeless Encampments Municipal Engagement Guidance
4 which we've made -- marked as Exhibit 3. And I want
5 to go to Page 2 of the document.

6 So what I want to first ask you about, this
7 document says it's a guidance note and the last
8 sentence above the base principles says:

9 "... It acknowledges the responsibility for
10 addressing homelessness rests with the three
11 orders of government which must act
12 collaboratively and with a shared sense of
13 urgency in the interest of those who are
14 unhoused or at risk of becoming unhoused ..."

15 So you are aware of the document. Do you
16 agree with the statement?

17 A. In what way?

18 100. Q. Well, do you agree or disagree?

19 A. I have to be clear just because I am
20 sitting in the hotseat that I am. And so I just want
21 to make sure that you and I are going to agree on the
22 same thing. So what is it that you're wanting me to
23 agree on?

24 101. Q. The responsibility for addressing
25 homelessness rests with the three orders of government

1 which must act collaboratively.

2 A. Sure, the frontline worker I understand
3 are the three levels of government have three
4 different responsibilities.

5 102. Q. And they must work ---

6 A. Together, sure.

7 103. Q. And under ---

8 A. The recommendation is that they should
9 be working together ---

10 104. Q. (Indiscernible).

11 A. --- is what I'm understanding from
12 this.

13 105. Q. And fair enough. This is a set of
14 recommendations.

15 A. Correct.

16 106. Q. And under basic principles, there is a
17 suggested principle at the top:

18 "... Homeless encampments will rarely satisfy
19 the requirement of the human rights to
20 housing and thus should not be understood as
21 a solution to homelessness and should not be
22 permanent ..."

23 Do you agree with that?

24 A. Sure. Yes.

25 107. Q. And if you skip down to the third

1 bullet point:

2 "... Municipalities do not always have the
3 jurisdiction, capacity, and resources to
4 ensure unhoused people have affordable,
5 secure and dignified housing. Significant
6 support and intervention from other orders
7 of government is required ..."

8 Do you agree with that?

9 A. So I agree that what they're saying is
10 that the region of Waterloo then, the accommodations
11 would be that the region of Waterloo would actively be
12 working right now with the two other levels of
13 government to be able to provide alternative housing
14 for folks at 100 Victoria. That's what I understand
15 from this.

16 108. Q. But do you also understand that the
17 region, municipality -- the region as a municipality
18 -- doesn't have the jurisdiction, capacity, and
19 resources to ensure unhoused people have affordable,
20 secure and dignified housing, that they need the
21 support of other governments to be able to make that
22 happen?

23 A. Again, what I'm reading is that it is
24 recommended that they work together with the other two
25 government entities.

1 109. Q. So you don't acknowledge ---

2 A. And it would be up to them to go and
3 search out and actively get involved with the two
4 other levels of government ---

5 110. Q. And ---

6 A. --- so that they can then provide
7 suitable alternative housing.

8 111. Q. And what if the other governments just
9 are not contributing what they should?

10 A. I mean, I am not a political person and
11 am not here to answer that question.

12 112. Q. Okay, but do you acknowledge that
13 municipalities have limits on their jurisdiction,
14 capacity, and resources?

15 A. I don't know what that limit would be
16 when it comes to them directly connecting to the two
17 other levels of government so that they can provide
18 alternative housing for folks at 100 Victoria.

19 113. Q. But they can't do it alone, can they?

20 A. That's not what is being recommended
21 here. It's recommended that the two levels of
22 government. So I don't know what steps the Region of
23 Waterloo has taken to involve the other two levels of
24 government at this point.

25 And so, it would be the responsibility of

1 all three of them to work together.

2 114. Q. But just ---

3 A. That's not for me to say go to that.

4 115. Q. I understand, but they can't do it
5 alone, can they? They just don't have either the
6 resources, jurisdiction or capacity.

7 A. I'd like ---

8 116. Q. --- to solve the problem on their own.
9 (Indiscernible).

10 A. It's not appropriate for me to answer
11 that question like that. No.

12 117. Q. Okay, we did both talk over each other
13 so what I would suggest, it is the region can't do it
14 alone and you said it's inappropriate for you to
15 answer?

16 A. Correct.

17 118. Q. Thank you. There's also under the
18 basic principles down at the bottom that:

19 "... Residents who neighbour encampments have
20 legitimate experiences and concerns that
21 require consideration ..."

22 Do you agree with that?

23 A. Sorry, can you repeat that? Which one?

24 119. Q. The bottom bullet point on the page:

25 "... Residents who neighbour encampments have

1 legitimate experiences and concerns that
2 require consideration ...”

3 A. I would assume if they’re naming
4 concerns, they’re legitimate. If resident -- are you
5 talking neighbours, direct neighbours to 100 Victoria?
6 Is that what you mean?

7 120. Q. I’m asking the general proposition:
8 “... Residents who neighbour encampments have
9 legitimate experiences and concerns that
10 require consideration ...”

11 Do you agree with that general proposition?

12 A. Yeah, sure they can have.

13 121. Q. Okay. And if we can go to the next
14 page.

15 A. Can I just add something?

16 122. Q. (Indiscernible).

17 A. So can we just go back up to that last
18 paragraph?

19 123. Q. Yeah.

20 A. It doesn’t mean that those legitimate
21 experiences or concerns will be negative, extremely
22 negative. Or things that support workers wouldn’t be
23 able to support neighbours with as well or other
24 community partners or police services.

25 124. Q. Okay.

1 A. I just want to be able to name that not
2 everything is going to be negative.

3 125. Q. Okay. Fair enough. And if we can go
4 to the following page, point 3 and there is some --
5 again, these are recommendations or guidelines being
6 offered to municipalities as you pointed out. The
7 recommendation here is -- starts with:

8 "... While homeless encampments should not be
9 permanent, every effort should be taken to
10 avoid forced removal of encampments ..."

11 So I take it you agree with that?

12 A. Yes.

13 126. Q. And then in the next paragraph:

14 "... Meaningful engagement with encampment
15 residents, good faith dialogue and the offer
16 of reasonable alternative housing options,
17 e.g., rent supplements, tiny homes, hotel
18 rooms, modular units, will dramatically
19 reduce the need to remove people
20 involuntarily from encampments ..."

21 You agree with that?

22 A. Yeah, yes. Those -- those could be
23 examples of alternative housing offered to folks ---

24 127. Q. And ---

25 A. --- who are living at encampments.

1 128. Q. And the region ---

2 A. Not the only, right? These are
3 examples of, not the only alternatives?

4 Q. Exactly. And the region does have each
5 of the four that are cited, right? Rent supplements,
6 tiny homes, motel rooms, modular units.

7 A. Right, all have long waitlists
8 currently.

9 129. Q. Got that. I do understand that. And
10 we have -- I mean, you are aware, I think, of the
11 point-in-time counts and the fact that between 2021,
12 despite the region more than doubling its budget for
13 assisted housing and for services for people
14 experiencing homelessness, went up from about 1,100 to
15 2,300.

16 A. I'm aware that that experience has been
17 the same in -- across the country.

18 130. Q. Yes.

19 A. Mm-hmm.

20 131. Q. Okay. And it goes on to recommend
21 that:

22 "... Issuing trespass notices, enforcing
23 prohibitive bylaws or otherwise coercing
24 people in the encampments into housing
25 should be considered a last resort ..."

1 Do you agree with that?

2 A. I'm agreeing that they wrote that.

3 132. Q. But do you agree with that
4 recommendation?

5 A. And do they expand on any of these
6 recommendations anywhere else in this document?
7 Because I think I am agreeing to just the short
8 summaries of things. I don't know what else they say
9 further down.

10 133. Q. They don't say anything more on this
11 particular subject.

12 A. Okay. Or do they expand in any of the
13 other documents? So I would want to be able -- if --
14 if I am answering questions, I would need to detail
15 you like sit down and review each of these documents
16 if you want answers from each of these documents.

17 134. Q. Okay, so I'm not asking you to opine on
18 the document as a whole. But I am putting to you a
19 proposition that is expressed in this document.

20 A. Mm-hmm.

21 135. Q. And that proposition is that:
22 "... Issuing trespass notices, enforcing
23 prohibitive bylaws or otherwise coercing
24 people in encampments into housing should be
25 considered a last resort ..."

1 And look, you can disagree with that or you
2 can agree or you can say something in between. Is
3 that a recommendation that you agree with?

4 A. I think it should definitely be a last
5 resort. I think the -- we need to come up with what a
6 last resort actually means and when is it considered a
7 last resort. Which is why I am asking if there is an
8 explanation anywhere else in this document that "last
9 resort" is described. What does that mean?

10 136. Q. Well, I have to tell you that it isn't
11 and you'll have to trust me on that. And I do have an
12 obligation if I am saying what the evidence is, to
13 represent it fairly. So I'm ---

14 A. (Indiscernible) clarifying that was
15 where the question was coming from.

16 137. Q. Okay, sure. But this recommendation, I
17 mean, it does foresee that you might have to do it at
18 the end of the day, right? You might have to ---

19 A. But you're speculating of all kinds of
20 things at that point.

21 138. Q. The recommendation, does it not say
22 that it's a last resort?

23 A. I am agreeing that that is what the
24 recommendation says, yes.

25 139. Q. But it's still a resort, isn't it?

1 A. Last resort?

2 140. Q. Yeah.

3 A. Right. We just don't have the same
4 definition of what "last resort" is. That's all.

5 141. Q. Okay, and what's your definition of
6 "last resort?"

7 A. It means that everything has been
8 exhausted. All kinds and types of different housing
9 options have been exhausted and have been offered to
10 folks in different ways.

11 142. Q. Okay, and over a period of minimum six
12 or seven months it seems but, potentially, longer.

13 A. Where does it say that?

14 143. Q. I'm just going to (indiscernible) you.
15 It's when we were talking before about this
16 encampment.

17 A. Yeah, I remember I said that I think
18 it's inappropriate for me to say how long it would
19 take to re-house this particular group of folks
20 because I am not individually working with all of
21 those folks.

22 144. Q. Okay. The final recommendation here on
23 this page is:

24 "... Where an encampment is erected in a
25 dangerous, e.g., construction site or

1 inappropriate, e.g., cemetery, playground,
2 school, daycare location, the municipality
3 should engage those in the encampment to
4 relocate to a more suitable site, even if it
5 is an alternate tenting site ..."

6 You understand that the encampment is on a
7 site which is proposed to be a construction site,
8 right?

9 A. I understand that. Yeah, yes.

10 145. Q. And I am not asking you to be
11 knowledgeable on this but it stands to reason that if
12 it's a construction site, it's not really going to
13 work for an encampment at the same time?

14 A. It shouldn't, no.

15 146. Q. Okay.

16 A. People should not have to be living
17 next door to heavy equipment.

18 147. Q. And where that's going to happen the
19 municipality should engage those in the encampment to
20 relocate to a more suitable site. And that could be
21 on an individual basis so that each individual is
22 offered a suitable alternative accommodation
23 arrangement.

24 A. Or an alternate tenting site.

25 148. Q. So ---

1 A. I think as long as we're including all
2 of it and not just certain bits of it.

3 149. Q. Okay. So -- but the region ---

4 A. Does the region have an alternate site?
5 I mean, it would be interesting to know whether the
6 region has an alternate tent site for folks that do
7 not qualify or fit into any of the other housing that
8 they will be offering.

9 150. Q. The region's proposal is to address the
10 needs of the existing residents through alternative
11 housing arrangements and not through another
12 encampment. And that's in the evidence and they've
13 given their explanation for why that is.

14 But you would accept that if it is going to
15 be a construction site, people are going to have to
16 move somewhere. Is that fair?

17 A. People need to be given equal or better
18 housing options.

19 151. Q. That's what you would advocate for?

20 A. Yes.

21 152. Q. Okay.

22 A. Safe.

23 153. Q. Safe, equal or better?

24 A. And better.

25 154. Q. Is what you would advocate for?

1 A. It is what I would support, yes.

2 155. Q. Okay. I am going to suggest to you
3 that that's exactly what the region is doing with
4 sending its USW team on-site to work out IHPs with
5 each existing resident. Do you disagree with that?

6 A. I think they're trying their best with
7 the USWs. I think that the behaviour that we've seen
8 from the region, especially when the garbage bins and
9 the portable were dropped off, caused harm.

10 156. Q. Okay, and I understand what you said
11 about that. And, you know, again, the region has its
12 explanation for those steps. But -- but just at a
13 basic level, isn't it exactly what the region is doing
14 is trying to arrange adequate, alternative housing for
15 people in lieu of a property that is going to be a
16 construction site?

17 A. The region is acting as if there is
18 housing to offer the folks at 100 Victoria within a
19 limited time.

20 157. Q. Yes.

21 A. There is no realistic housing options
22 that will open up within six months, especially with
23 folks who have other difficulties or limitations, like
24 rent -- behind on rent for regional properties, if
25 they are restricted from regional properties, if

1 they're restricted from motels, if they have
2 behavioural issues that would limit their access to
3 other community services.

4 158. Q. So, once again, if you say it can't
5 happen within six months, what would be a more
6 reasonable and perhaps extendable timeframe?

7 A. I think it needs -- you know, I think
8 that -- I think putting a time limit constraint on
9 working with some of the folks and some of the
10 difficulties, that we will find in this group of
11 folks, is -- is not putting the person first.

12 If we are putting -- if we are being human-
13 centered and taking a human-centered approach, we are
14 putting in the needs and the requirements and the
15 limitations of that person in the center of the work
16 that we are doing. Which means that we are not going
17 to time-pressure that person or limit the options that
18 that person might have.

19 159. Q. So no deadline ever, is that -- that's
20 what your view is?

21 MS. SCHIUTEMA: I think Sara has already
22 answered this question before. You asked
23 her about a time period, she said it's
24 inappropriate to say how long it would take
25 because she is not supporting those people

1 individually.

2 MR. LOKAN: Okay, well I'll move on from
3 that.

4
5 BY MR. LOKAN:

6 160. Q. Is there any reason that, Sara, why you
7 didn't include this document in your second affidavit,
8 if it's one you were aware of?

9 A. There's lots of documents that I read
10 on a regular basis that I could have included in here.
11 And, I mean, I -- how many -- I -- I -- no, I didn't
12 even think of it. There's lots of documents that
13 could potentially be included.

14 161. Q. So you included Exhibit C which is not
15 specific to the municipalities but you didn't include
16 this one which is recommendations to municipalities
17 specifically?

18 A. No, I did not.

19 162. Q. Okay. Thank you, those are my
20 questions.

21 MS. DOWN: If I can just take maybe a short
22 break and be back at 11:45 and I may have
23 some questions in reply. Thanks.

24
25 --- BREAK

1 MS. DOWN: Hi. Can we go back on the
2 record? Just I have a couple of questions
3 in reply.
4

5 RE-EXAMINATION BY MS. DOWN:

6 163. Q. Okay, Sara, you were asked about the
7 newspaper article that had Joe Mancini's comments
8 about the region's plan. Do you know who funds the
9 Working Centre?

10 A. It's a variety of sources but they have
11 -- it's most -- I think a lot of it is still
12 personal/private funding.

13 164. Q. Okay. Do you know if they receive any
14 funding from the region?

15 A. I am not clear as to all the funding
16 that is received by them from the region.

17 165. Q. Okay. That's fine. I am going to ask
18 about the timeline. So you were asked how long it
19 would take, like what length of engagement. And I
20 wanted to ask you, so, you know, he mentions
21 waitlists. How long in your experience does it take
22 for someone to, you know, needs to say to be in
23 interim housing or transitional housing, how long does
24 it take for them to get into that?

25 A. I believe that the current list sits

1 anywhere between 10 and 15 years, depending on the
2 specific type of housing, and the buildings that you
3 choose.

4 166. Q. Okay. And what about -- what about,
5 like transitional housing, let's say something like
6 the Erbs Road or Shelter Care (ph), things like that?

7 A. For -- so they all will have their own
8 individual intake processes, depending on the agency
9 that's providing the services. And it -- the
10 waitlists for those spaces depends on openings, and if
11 the person qualifies said behaviours can actually
12 adhere to the requirements of those services.

13 167. Q. Okay, but do you know, like just
14 generally, would it be days, weeks, months?

15 A. To be honest with Erbs Road, I -- it --
16 I'm not sure how long it would take to get anybody
17 into Erbs Road. It sounds like it's a fairly lengthy,
18 complicated process to get folks into that space. And
19 House of Friendship -- is that what your -- Shelter
20 Care ---

21 168. Q. Mm-hmm.

22 A. --- House of Friendship? I would
23 assume that for them, it's how many beds they have
24 open on each given time. But I think that men aren't
25 -- I don't -- I mean, men are able to stay as long as

1 they need to in that space, and so I'm not sure how
2 often they have beds opening up.

3 169. Q. And where would people exit to other
4 than those options?

5 A. I think those would be considered some
6 of the last resort sort of options for a lot of folks.
7 Shelter systems, shelters within our system that have
8 less requirements. So, for example, spaces where
9 folks are allowed to use drugs would be more
10 frequented for people. Spaces where you're allowed to
11 stay 24 hours a day would also be busier.

12 170. Q. Yeah, I'm -- I'm thinking of more in a
13 sense of like the timelines. Like so -- like for
14 people to move either in through these, like shelter
15 or ---

16 A. Yeah.

17 171. Q. --- maybe out of them, into something
18 else. Like what's the exit because like my
19 understanding of the emergency shelter system is that
20 it's a short-term thing.

21 A. Yeah, I can be a short-term thing and
22 it -- that's what the shelter system was designed to
23 be is a short-term stay for a lot of folks. That has
24 shifted and changed in the last few years, especially
25 since after the pandemic when the number of folks

1 experiencing homelessness in our region exploded.

2 And so you see a variety of people coming in
3 and out of those services. Depending on the service
4 -- so it's tricky and very unpredictable. It's
5 probably the easiest way to describe the shelter
6 system at this point.

7 So to try and anticipate that you can get a
8 group of people housed within a limited time is
9 difficult without creating exceptions for that group
10 of people, and bypassing waitlists.

11 172. Q. Okay, and does that happen?

12 A. It has happened. Yes.

13 173. Q. Okay, so when you say "creating
14 exceptions" can you just provide like a little bit
15 more detail?

16 A. Yes, so if there is new spaces opening
17 up -- I am going to see if I can explain this in a
18 less convoluted way.

19 So if a shelter is -- we have had
20 approximately -- I think it's somewhere between 14 and
21 17 shelters open and close since the pandemic started.
22 And each opening of a shelter is because there is
23 another one that's closed. So one closes and another
24 one opens to try to -- to try to cover the beds that
25 were just lost by the closing of a shelter.

1 So another one opens, and then that closes
2 and then another one opens to try to replace the one
3 that closes. And this is -- this is where we've been
4 -- this is how we've been living in this region. I
5 can't speak for any other spaces but in this region,
6 this is what the reality has been.

7 And so at any given point, you don't know
8 what shelter beds are actually going to be available
9 within six months, a year, two years. To be able to
10 predict that is nearly impossible for us.

11 174. Q. And then so what would -- like ---

12 A. Just for example, like -- sorry. For
13 example, the YW closing, closes beds for women. When
14 King Street closed, that was a hundred beds that were
15 lost. And I am not sure how many beds they're saying
16 have been replaced, and so by the opening of another
17 shelter.

18 175. Q. Installment of an IHP or an individual
19 housing plan, how does that -- how does that affect
20 the amount of time it's going to take for you to get a
21 shelter bed or transitional housing or permanent
22 housing?

23 A. So it would depend on how able the
24 person is to sit, the individual person that's being
25 supported, what their ability is to actually sit with

1 a frontline worker and start to give history or fill
2 out forms. Part of all of that requirement is making
3 sure that folks have the proper ID, that they're on
4 waitlists.

5 And so that -- that all takes -- it's going
6 to take time to go in, build the relationship, build
7 trust so that folks can actually come to that worker
8 and connect for the needs that they have. And then
9 it's -- and then the housing search after that.

10 176. Q. Does just having an IHP guarantee you a
11 -- somewhere to go at the end of six months?

12 A. Just because you completed an IHP
13 doesn't -- it means that you've completed the
14 paperwork. That you have been able to sit and
15 complete the paperwork required by that worker. I
16 don't -- I don't know how it guarantee -- I don't know
17 how it would guarantee you housing at six months.

18 177. Q. Okay. And the bylaw -- the site-
19 specific bylaw divides people at the encampment into
20 existing residents, that the region is committed to
21 the -- these resources to help them find those housing
22 options at the end. And non-exist -- non-existing
23 residents, so other residents, like what would happen
24 to them in your experience?

25 A. According to the bylaw or according to

1 just not being engaged?

2 178. Q. You were talking about -- like I guess
3 maybe compare it to like when a shelter is closing.

4 A. Yeah, so the folks that -- sorry, I'm
5 just trying to ---

6 179. Q. You talked about people getting
7 prioritized.

8 A. Yes.

9 180. Q. And people -- and other people.

10 A. Right. So the folks that are being
11 included as the existing residents of 100 Victoria, my
12 understanding of what the system looks like right now.
13 For them to be housed within the next six months, they
14 would have to be prioritized for housing that has long
15 waitlists, and lots of people ahead of them.

16 The non-residents, we are really concerned
17 about anybody that's considered a non-resident.
18 Because no options will be given to them and so we are
19 concerned about what would happen to those residents
20 living in that space who are not considered to be
21 permanent residents of 100 Victoria.

22 181. Q. Okay, thank you. Those are the
23 questions.

24

25 --- ADJOURNED

THIS IS TO CERTIFY that the foregoing
is a true and accurate transcription of
my recordings and notes, to the best of
my skill and ability.

BarPollard

Barbara A. Pollard
Certified Court Reporter

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EXHIBIT “1”

434



Sara Escobar She/Her · 3rd

Peregrine Outreach Waterloo Region, Co-founder

- Peregrine Outreach Waterloo Region



- University of Waterloo

Kitchener, Ontario, Canada · [Contact info](#)

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About

Social Justice Worker with over 25 years of experience, specializing in street outreach and peer development.

An authentic, self-aware leader and advocate - committed to sharing knowledge, removing barriers, as well as developing solutions from an upstream approach; improving the health and safety of the street-involved community and the workers who support them.

Co-founder of Peregrine Outreach Waterloo, trusted in providing invaluable insight and guidance to fellow outreach partners and multiple levels of local government officials.

Featured

Link



'We've never been here before,' say Waterloo Region outreach...
therecord.com

Jesse Burt, of The AIDS Committee of Cambridge, Kitchener, Waterloo and Area (ACCKWA) and I sat down with Record reporter, Paige Desmond to talk about what street outreach workers face in...

Link



Episode 10: People in My Hood - A Philosophical Podcast
YouTube

Conversation with MPP Laura Mae Lindo, surrounding homelessness and the opioid crisis in Waterloo Region and what steps can be taken to support the vulnerable community members in Kitchene...

Link



Her Name
YouTube
Waterloo Region
presented with
Name of the System
on the system

Activity

359 followers

Sara hasn't posted yet

Recent posts Sara shares will be displayed here.

Show all activity →

Experience

Co-Founder

Peregrine Outreach Waterloo Region
Jan 2021 - Present · 4 yrs 7 mos
Kitchener, Ontario, Canada

Peregrine Outreach Waterloo Region, is a collective of outreach workers with decades of experience in the field of social support services.

As a worker-led initiative, we aim to support the street-involved community and front line staff who serve them.

Visit us on Facebook for current and upcoming initiatives.



Peregrine Outreach Waterloo Region

**Emergency Shelter Support Worker**

House of Friendship
Feb 2021 - Sep 2022 · 1 yr 8 mos
Kitchener, Ontario, Canada

Working with and supporting men accessing shelter services using a housing first approach following the ShelterCare model.

- Performs intake for those accessing the shelter
- Connect with, support and engaging participants in meaningful support relationships, creating individual plans to achieve the goal of obtaining housing and wellbeing stability.
- Builds rapport with individuals and de-escalates conflicts while addressing behavioural concerns to ensure a safe environment for staff and participants
- Acts as a first responder to medical emergencies/crisis to ensure participant well being and navigates emergency services to respond.

The Working Centre

11 yrs 5 mos
Kitchener, Ontario, Canada

Emergency Shelter/Supportive Housing Outreach Worker

2019 - 2020 · 1 yr

Supported the unique and complex needs of people who are residents of shelters or supportive housing programs who were at risk of restriction and/or eviction

- Provided support to individuals with complex situations in supporting

437

housing locations within the Region of Waterloo.

- Provided supportive care to individuals in need in tandem with a nurse

Community Dental Clinic Coordinator

2015 - 2020 · 5 yrs

Designed and oversaw the launch of the free dental care clinic.

...

...see more

Street Outreach Worker

Sep 2008 - Aug 2015 · 7 yrs

Developed and nurtured relationships to support individuals in the Region of Waterloo who experienced homelessness, individuals who used drugs and those living with mental health illnesses (diagnosed or undiagnosed).

- Collaborated with other teams in the Region, including but not limited to SOS Kitchener, St. John's clinic, Waterloo Regional Police, Grand River Hospital, OSDP, OW, and KDCHC to support individual needs as they arise.
- Built and maintained relationships with businesses and residents in the downtown core.

oneRoof

10 yrs 1 mo

Kitchener, Ontario, Canada

Youth Street Outreach Worker

2002 - 2008 · 6 yrs

Providing for immediate needs of youth in the community, connecting them to services (oneROOF or others) available in the community. ...

...see more

Evening Drop-In Shift Supervisor

1998 - 2002 · 4 yrs

Oversaw daily programming which included one-to-one support meetings, essential needs (meals, laundry, showers, etc.), life skills training, substance abuse and prevention, etc.

- Completed review and kept up to date shift notes
- Briefed and de-briefed my team at the start and end of each shift
- Delivered programming for centre's youth drop-ins
- Responded to immediate needs or crisis which arose during shifts with staff, volunteers, or youth

438

Education



University of Waterloo
Psychology

◆ Collaborative Problem Solving and Communication

Skills

Bilingual Communications



1 endorsement

Project Planning

Show all 19 skills →

Interests

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Newsletters

Schools



Kitchener Waterloo Community Foundation

1,760 followers

+ Follow



University of Waterloo

369,379 followers

+ Follow

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EXHIBIT “2”

A bylaw to clear Kitchener encampment may come with a silver lining



X f r e

By **Matt Hutcheson**

Posted Apr 24, 2025 04:24:32 PM.

Last Updated Apr 24, 2025 04:28:33 PM.

The Region of Waterloo has **passed a motion** to create a bylaw to allow for the removal of the homeless encampment at 100 Victoria St. N.

Nineteen delegates addressed council prior to the vote on Wednesday night, advocating the region find another solution, but the motion passed with one vote in opposition.

The region has been trying to clear the encampment for years, to make way for the construction of a massive new transit hub. But earlier efforts were found to be in violation of the residents' charter rights. That ruling was handed down in 2023 by the **Ontario Superior Court**.

Joe Mancini, Director, **The Working Centre** in Kitchener, told 570 NewsRadio this move by the region shouldn't come as a surprise.

"It's been some time now, and the region has warned that the encampment would be ending. So, it is reasonable that the region works with those individuals and has a plan for each individual to find an alternative arrangement."

A plan was included in the bylaw stating the region would help find a place for the residents in either supportive housing or in a temporary motel. The motion included a request for \$800,000 in funding for the initiative.

Related:

- **Advocates call on region not to evict those at Victoria Street encampment**
- **Final decision in sight for potential Victoria Street encampment bylaw**
- **Regional council approves land purchase as part of downtown transit hub development plan**
- **Region will not appeal court decision rejecting Victoria Street encampment eviction (update)**

Mancini admits that these encampments can become make-shift communities, but they are harsh communities, so finding alternate places to stay will be a positive in the end.

"The alternatives, maybe, are never perfect, but they do afford individuals new accommodations, new opportunities. Yes, the community that's established gets disrupted, but then new opportunities also develop."

He said providing access to additional services through supportive housing or temporary hotels might be the touchpoint some individuals need to break the cycle of homelessness.

Mancini points out, the move won't happen all at once.

“The region is creating a process that is going to be over six months. That does create time to create these alternatives. The idea is that there is 36 individuals there right now and that group will be offered these kinds of opportunities.”

The region has set a deadline of Dec. 1 this year for the encampment to be cleared.

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EXHIBIT “3”

HOMELESS ENCAMPMENTS:

Municipal Engagement Guidance

National Working Group on Homeless Encampments

A NOTE TO THE READER

The National Working Group on Homeless Encampments (NWG-HE) – convened by The Shift since January 2023 – presents a Municipal Engagement Guidance. This Guidance is intended to support municipalities in engaging homeless encampments in a constructive and peaceful manner. The Guidance is not a road map to solving homelessness. It is an effort to establish national standards, based in human rights, for municipal government engagement with encampments across the country. It is intended to help ensure the best outcomes for those living in encampments and their communities in the short term, while establishing a foundation for longer-term solutions.

The Municipal Guidance was drafted through discussions and with the input of the NWG-HE whose members include the Chair and Vice-Chair of the Big City Mayors caucus – Mayor Savage (Halifax) and Mayor Clark (Saskatoon), respectively – as well as Indigenous representatives, people with lived expertise, social medicine doctors, front line harm reduction workers, academics, and advocates. Representatives of federal and city governments and human rights institutions also participated as observers. The list of formal participants is at the close of the document. The Municipal Guidance was shared at the Big City Mayors Caucus in May 2023. It was also shared with the Federal Housing Advocate to inform her review of homeless encampments, expected to be concluded in early 2024.

THE SH/FT
#RIGHT2HOUSING



We would like to live in a Canada in which everyone is safely and adequately housed.

Homeless encampments are increasingly appearing in communities across Canada, whereby individuals erect tents or informal structures on public or private lands, including unceded territory, to provide themselves with shelter. Those residing in encampments live in very difficult circumstances and are often there because shelter spaces and appropriate long-term supportive housing options are either unavailable and/or do not provide adequate protections and supports for their specific needs.

This Guidance note is intended as a high-level road map to assist municipal governments in addressing homeless encampments by first advocating for appropriate long term supportive housing and in the absence of that, ensuring encampments support the human rights and dignity of those in them, in a manner that respects human rights and promotes human well-being and safe communities. It acknowledges that responsibility for addressing homelessness rests with the three orders of government which must act collaboratively and with a shared sense of urgency in the interest of those who are unhoused or at risk of becoming unhoused.

BASIC PRINCIPLES

The following basic principles should inform the approach:

- Homeless encampments will rarely satisfy the requirements of the human right to housing, and thus should not be understood as a solution to homelessness and should not be permanent.
- Residents of homeless encampments must be treated in a dignified, empathetic and culturally appropriate manner and are entitled to the necessities of life, including affordable, secure, and dignified housing.
- Municipalities do not always have the jurisdiction, capacity, and resources to ensure unhoused people have affordable, secure, and dignified housing. Significant support and intervention from other orders of government is required.
- Indigenous Peoples are dramatically overrepresented in homeless populations in many cities across the country, including in many encampments. Policies and approaches on encampments must be consistent with Truth and Reconciliation and the National Inquiry on Missing and Murdered Indigenous Women Calls to Action and Justice.
- Many encampment residents have complex mental and/or physical health needs that require an integrated approach with healthcare supports.
- Residents who neighbour encampments have legitimate experiences and concerns that require consideration.

WAYS FOR MUNICIPALITIES TO PREVENT HOMELESSNESS, ADDRESS ENCAMPMENTS AND SUPPORT PEOPLE WHO LIVE IN THEM

1. **Solicit Provincial and Federal Government Support**

Coordinated, long-term financial and policy supports of federal and provincial governments are required for homeless encampments to be resolved. Municipalities should collectively escalate the issue on provincial and national political agendas as an urgent matter of fundamental human rights, for example by calling for an inter-governmental action-table on homelessness that includes Indigenous, civil society and lived-expertise participation. The focus should be twofold: preventing homelessness and addressing homeless encampments.

2. **Meaningfully Engage with those Living in Encampments**

Better, more peaceful outcomes will be achieved if people living in homeless encampments and the individuals and organizations they choose to support them, are meaningfully engaged and have the capacity to shape and co-create solutions with the aim of closing the encampment. Successful meaningful engagement can be a long process often taking months and requires consistency and patience.

Municipal governments, working with Indigenous partners, must consult with Indigenous residents of encampments and their representatives where appropriate, securing their free, prior, and informed consent with respect to any decision or measure that will impact them.

All engagement must be culturally appropriate.

See Appendix for the elements of successful meaningful engagement.

3. **Explore all viable alternatives to encampment eviction or removal**

While homeless encampments should not be permanent, every effort should be taken to avoid forced removal of encampments, recognizing court rulings in British Columbia and Ontario indicating that in some circumstances to do so violates the Charter of Rights and Freedoms.

Meaningful engagement with encampment residents (see below), good faith dialogue, and the offer of reasonable alternative housing options (eg: rent supplements; tiny homes; hotel rooms; modular units) will dramatically reduce the need to remove people involuntarily from encampments.

Issuing trespass notices, enforcing prohibitive bylaws, or otherwise coercing people in encampments into housing should be considered a last resort after all viable alternatives are exhausted.

Where an encampment is erected in a dangerous (eg: construction site) or inappropriate (eg: cemetery, playground, school, daycare) location, the municipality should engage those in the encampment to relocate to a more suitable site, even if it is an alternate tenting site.

4. Essential Services for Encampment Residents

Homeless encampments do not satisfy the requirements of the right to housing. However, where they exist, municipalities, working with their government and community partners, should ensure that to the greatest extent possible encampments meet the basic needs for survival of those living there. This will make encampments safer for those residing therein, as well as for neighbouring homes and businesses.

See Appendix for examples of essential services.

5. Encampments and Safety

People who reside in encampments must always be safe as must those living near encampments. Safety within an encampment is more likely if trusting relationships are built between residents (alongside those they rely upon for support), and municipal officials (including fire departments, emergency responders and police) healthcare providers, outreach workers and others supporting the encampment. Indigenous-led supports are critical to the safety of Indigenous persons living in encampments, and foundational to trust-building.

Municipalities should work with the above and other actors as appropriate to develop an encampment safety protocol, taking into consideration relevant power imbalances. This protocol should outline under what circumstances police and security personnel should be called into the encampment community and by whom. It should also include measures to address sexual assault, physical assault, and exploitation of vulnerable groups, such as women, gender-diverse populations, minors, and racialized populations.

People living in encampments should be provided training in safety procedures including with respect to potentially hazardous equipment and materials.

Personal belongings of encampment residents should always be treated with care, regardless of the security issue at hand, except in the case of an emergency, i.e. fire, extreme weather event.

APPENDIX

MUNICIPAL ENGAGEMENT WITH THOSE LIVING IN ENCAMPMENTS WILL BE MOST SUCCESSFUL IF IT:

I. INCLUDES TRAINING FOR ENCAMPMENT RESIDENTS WITH RESPECT TO THEIR HUMAN RIGHTS, AND SAFETY PROTOCOLS AND REQUIREMENTS;

II. INCLUDES THE INDIVIDUALS AND ORGANIZATIONS ENCAMPMENT RESIDENTS RELY UPON FOR SUPPORT IF SO REQUESTED;

III. IS IMMEDIATE, REGULAR AND ONGOING;

IV. IS PRACTICED IN GOOD FAITH;

V. IS INCLUSIVE, CULTURALLY APPROPRIATE AND NON-DISCRIMINATORY;

VI. OCCURS AT APPROPRIATE AND ACCESSIBLE TIMES AND LOCATIONS;

VII. PROVIDES AN OPPORTUNITY FOR ENCAMPMENT RESIDENTS TO RAISE CONCERNS AND ISSUES AND TO RECEIVE IMMEDIATE FEEDBACK AND/OR A COMMITMENT TO RETURN WITH INFORMATION AT A SPECIFIED TIME; AND

VIII. IS BASED ON THE UNDERSTANDING THAT ENCAMPMENT RESIDENTS ARE NOT HOMOGENOUS AND WILL ACCEPT AND REQUIRE DIFFERENT SOLUTIONS.

ESSENTIAL SERVICES

In consultation with those living in encampments, municipalities, working with other orders of government and community partners, should ensure the following are available on-site or within reasonable proximity to encampments:

- Durable tents or building code compliant structures that are fire retardant + can withstand inclement weather, that provide privacy, cots to sleep on, and bedding
- Access to safe and clean drinking water
- Access to warming/cooling areas
- Access to sufficient and appropriate quality clothing
- Resources and supports to ensure fire safety (eg: training on fire safety for those living on site)
- Assistance for those living in encampments to develop social protocols. For example: zero-violence policy; anti-racism and harassment policy for encampment residents as well as other users and abutters of public spaces where encampments exist.
- Access to hygiene and sanitation facilities
- Waste management systems including for drug-use related waste (needles, pipes).
- Power sources
- Facilities and resources that support access to healthy food supply and its storage
- Garbage facilities
- Proximate safe and secure storage facilities for personal belongings
- Rodent and pest deterrence
- Resources to support harm reduction
- Creation of safe areas where women, LGBTQ2S+ and others at risk of violence and exploitation may reside

NATIONAL WORKING GROUP ON HOMELESS ENCAMPMENT PARTICIPANT LIST

Dr. Alexandra Flynn	Associate Professor, Peter A. Allard School of Law, The University of British Columbia
Dr. Andrew Bond	Medical Director at Inner City Health Associates (ICHA)
Dr. Andrew Boozary	Executive Director, Population Health & Social Medicine at UHN
BC Human Rights Commission Observer	Office of the BC Human Rights Commissioner
Caroline Leblanc	Professor and PhD Candidate, Sherbrooke University
Celeste Hayward	Director, Operations, Aboriginal Housing Management Association (AHMA)
Charlene Lee	Lived Expert, Kitchener
Mayor Charlie Clark	Mayor, Saskatoon
Infrastructure Canada Observer	Infrastructure Canada
Derek Cook	Director, Canadian Poverty Institute
Diana Chan McNally	Community & Crisis Worker, All Saints Toronto Sessional Instructor, George Brown College
Jaimee Gaunce	Director of Policy, Ontario Aboriginal Housing Services (OAHS)
Justin Marchand	Chief Executive Officer, Ontario Aboriginal Housing Services (OAHS)
Dr. Kaitlin Schwan	Executive Director, Women's National Housing & Homelessness Network (WNHHN)
Leilani Farha	Global Director of The Shift
City of Kitchener Observer	City of Kitchener
Mayor Michael Savage	Mayor, Halifax Regional Municipality
Stephanie Lowe	Senior Housing Policy Analyst, Aboriginal Housing Management Association (AHMA)

TAB 8

Court File No. CV-25-00000750-0000

ONTARIO
SUPERIOR COURT OF JUSTICE

BETWEEN:

THE REGIONAL MUNICIPALITY OF WATERLOO

Applicant

and

PERSONS UNKNOWN AND TO BE ASCERTAINED

Respondents

APPLICATION UNDER Rule 14.05 of the *Rules of Civil Procedure*

This is the Cross-Examination of **Dr. Stephen Hwang** on his affidavit dated May 6, 2025, taken via Zoom videoconference on consent of the parties on July 11, 2025.

APPEARANCES:

ANDREW LOKAN, Mr. Counsel for the Applicant
GRETA HOAKEN, Ms.

ASHLEY SCHIUTEMA, Ms. Counsel for the Respondents
JOANNA MULLEN, Ms.
SHANNON DOWN, Ms.

MERCEDES PEREZ, Ms. Amicus Counsel

(i)

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1

1 July 11, 2025

2
3 DR. STEPHEN HWANG, AFFIRMED

4 CROSS-EXAMINATION BY MR. LOKAN:

5 1. Q. Good morning, Dr. Hwang. My name is
6 Andrew Lokan and I am a lawyer for the Region, the
7 Regional Municipality of Kitchener-Waterloo.

8 And so I have some questions for you on your
9 affidavit, which is dated May 6th, 2025.

10 So just for a couple of logistical things,
11 do you have that affidavit in front of you?

12 A. I do.

13 2. Q. And do you have any other materials in
14 front of you, not counting the exhibits.

15 A. No.

16 3. Q. Okay, that's good. And I'm aware
17 you've been cross-examined before so you probably know
18 the ground rules. But just to go over a couple of
19 things. If you don't understand a question that I'm
20 asking, please feel free to ask me to clarify or to
21 repeat the question.

22 Also we should avoid both talking at once
23 because it's very hard for the court reporter to
24 figure that out on the transcripts. So I'm sometimes
25 guilty of doing that but we'll try to make sure that

1 it doesn't happen.

2 And the final thing is that if you are
3 trying to say "yes" or "no" but it comes out "mm-hmm,"
4 that doesn't work on a transcript because that doesn't
5 pick up nodding or shaking your head or body language.
6 So you have to use "yes" or "no" instead of "mm-hmm."
7 So you've got all of that?

8 A. Yes.

9 4. Q. Thank you, I was waiting for the "Mm-
10 hmm." So Dr. Hwang, you understand that you've been
11 tendered as an expert in these proceedings?

12 A. Yes.

13 5. Q. And you have at the back of your
14 affidavit an acknowledgement of your duty -- and I
15 just want to go through this. You have a duty to
16 provide opinion evidence that is fair, objective and
17 non-partisan, you understand that?

18 A. Yes.

19 6. Q. And also within your area of expertise?

20 A. Yes.

21 7. Q. Okay. If I can ask you to look at
22 Paragraph 3 of your affidavit, are you able to read
23 that?

24 A. Yes.

25 8. Q. You describe your expertise as being on

1 -- okay, I guess we're screen-sharing this. No
2 problem:

3 "... The health impacts of being homeless and
4 interventions to improve the health of
5 people experiencing homelessness ..."

6 Do I have that right?

7 A. Yes.

8 9. Q. Okay. You are, I take it, not aware of
9 the specific circumstances at the encampment at 100
10 Victoria Street North in Kitchner?

11 A. I am aware of just some basic
12 information about what's going on there.

13 10. Q. Right. And that basic information, I
14 am going to suggest to you, is you know that there is
15 an encampment, you know that there is a proposal to
16 close the encampment via a bylaw. You may know the
17 rough size of the encampment. Is that all accurate?

18 A. Yes.

19 11. Q. And the rough size, what have you been
20 told or read about that?

21 A. I've seen the encampment on Google
22 Maps. I understand that there are perhaps in the
23 range of 30 or so people on the encampment but I don't
24 have the exact number from the media.

25 12. Q. Okay, and it may be a little more

1 because some people left and some people have joined
2 and it may be sort of more like between 40 and 50.
3 But that's in the ballpark. You haven't yourself ever
4 attended the encampment?

5 A. I have not.

6 13. Q. And you've never treated any of the
7 residents of that encampment or reviewed their medical
8 records?

9 A. I have not.

10 14. Q. Okay. You provided an expert affidavit
11 in a case called *Heegsma* a couple of years ago. That
12 was about a City of Hamilton bylaw, do you remember
13 that?

14 A. Yes.

15 15. Q. Okay. And you were cross-examined on
16 your affidavit in those proceedings as well. Do you
17 recall being cross-examined?

18 A. Yes.

19 16. Q. Okay. I just want to confirm that a
20 couple of things remain true that you said at the
21 time. You were directed in that cross-examination to
22 a book chapter that you authored, included in a book
23 that you edited, called, "Finding Harm."

24 Do you -- is this ringing a bell for you? I
25 can give the full title if that helps.

1 A. I -- I am -- I recall the book. I
2 don't recall the exact discussion during the
3 examination.

4 17. Q. Yeah, okay. And I am not asking you to
5 have a photographic memory. I'm just going to take
6 you to a specific passage in that book chapter. The
7 chapter is Chapter 2.1 of the relationship between
8 homelessness and health, an overview of research in
9 Canada.

10 A. Yes.

11 18. Q. And you recognize that as a chapter
12 that you co-wrote with two other authors?

13 A. Yes.

14 19. Q. Okay, and what was put to you before
15 and what I am going to put to you again, is on Page 5,
16 there is a paragraph and it's at the top. We can blow
17 it up if you have difficulty reading it but just ---

18 A. There is nothing being screen-shared at
19 the moment.

20 20. Q. It sometimes takes a minute to come
21 through. I am looking at it but has it shown up yet?

22 A. Not on my screen.

23 21. Q. Okay. We're going to take it down and
24 then put it up again. That usually does the trick.
25 Is that any better?

1 A. Yes.

2 22. Q. Okay, so it's the first paragraph on
3 the page that I wanted to take you to:

4 "... There is no single pathway to
5 homelessness. Homelessness is the result of
6 a complex interaction of factors. At the
7 individual level, such as adverse childhood
8 experiences, low educational attainment,
9 lack of job skills, family breakdown, mental
10 illness and substance abuse [With a couple
11 of citation.] And at the societal level,
12 such as poverty, high housing costs, labour
13 market conditions, decreased public benefits
14 and racism and discrimination ..."

15 And I just ask you to confirm that that
16 remains true today?

17 A. Yes, it absolutely does.

18 23. Q. Okay. And I am going to ask, since you
19 have identified this as a document you recognize and
20 co-authored, that we mark this as Exhibit 1 on the
21 cross-examination. Ashley, is that okay with you?

22 MS. SCHIUTEMA: Yes, that's fine.

23 MR. LOKAN: Thank you.

24

25 EXHIBIT NO. 1: Page 5 excerpt from "Finding Harm"

1 BY MR. LOKAN:

2 24. Q. And I take it that you would also
3 acknowledge that solutions to homelessness are also
4 complex?

5 A. Yes.

6 25. Q. You were asked about another book
7 chapter in your cross-examination in the *Heegsma* case.
8 And that's another book chapter that you co-authored
9 in something called, "The Handbook of Urban Health"
10 which was published in 2005. You are aware of that
11 book?

12 A. Yes, of course.

13 26. Q. And your chapter was called, "Homeless
14 People."

15 A. Yes.

16 27. Q. And I am going to ask that we pull up a
17 particular passage on that. First of all, if I can
18 show you the -- it's Chapter 2, Stephen W. Hwang and
19 James R. Dunn. And that will take you to the
20 particular page. This is Exhibit C to the previous
21 affidavits.

22 All used to go more smoothly in person.
23 Give us a minute, please. And what we are currently
24 displaying is the title of the book and it's Chapter 2
25 where you are the co-author?

1 A. Yes.

2 28. Q. Do you recognize this chapter?

3 A. Yes.

4 29. Q. And what I would like to take you to is
5 Page 27 on the top-right. And it's down under the
6 heading, "Social Welfare System." And again, this
7 passage was put to you in your previous cross-
8 examination in the *Heegsma* case.

9 The first two sentences, you and your co-
10 author write:

11 "... Social welfare systems in urban centers
12 have a major impact on both the prevalence
13 of homelessness and the health of homeless
14 people. However, these systems are usually
15 governed at the state or national level,
16 rather than at the municipal level ..."

17 Now it looks like you were writing that from
18 a U.S. perspective and aimed at a U.S. audience. But
19 that would also be true for Canada, would it not?

20 A. Yes, it would.

21 30. Q. Okay. And it's true in Ontario where,
22 for example, Ontario Works and Ontario Disability
23 Support Program are provincial programs.

24 A. Yes. That is correct.

25 31. Q. Okay. And I'd like to, if I can, mark

1 this as Exhibit 2 to the cross-examination. Ashley,
2 any objection?

3 MS. SCHIUTEMA: No objection.

4
5 EXHIBIT NO. 2: Excerpt, Chapter 2, Page 27,
6 "Homeless People"

7
8 BY MR. LOKAN:

9 32. Q. So you told me, Dr. Hwang, a few
10 minutes ago that solutions to homelessness are
11 complex. But I am going to suggest to you and ask you
12 to acknowledge that not only are they complex, they
13 require cooperation of all three levels of government?

14 A. I would say that definitive systematic
15 solutions require the cooperation of all three levels
16 of government. There are things that each level of
17 government can do on their own that can help address
18 the problem.

19 33. Q. Okay. You would agree, Dr. Hwang, that
20 in the last few years, we've seen a substantial
21 increase in the homeless population in Ontario, not
22 just in the Waterloo Region?

23 A. Yes, that is correct.

24 34. Q. Okay. And you are based in Toronto, I
25 understand, is that right?

1 A. Yes.

2 35. Q. I am going to pull up an article from
3 the Globe & Mail just from a couple of days ago, July
4 8. And the Globe & Mail reported that the Toronto
5 homeless population had more than doubled between 2021
6 and 2024. You probably read this article, did you?

7 A. I did. And I actually participated in
8 the survey that was conducted in 2024 that resulted in
9 these findings.

10 36. Q. Okay. And so because you read this and
11 you're in a position then to vouch for the accuracy of
12 those figures that are reported in this article?

13 A. Yes, I am.

14 37. Q. Okay. And what this reports, I think,
15 is from between seven and eight thousand in 2021, it's
16 gone up to over 15,000 in 2024?

17 A. That is correct.

18 38. Q. Okay. I would like to mark this
19 article as Exhibit 3 to the cross-examination.

20 MS. SCHIUTEMA: Okay.

21

22 EXHIBIT NO. 3: Globe & Mail article, July 8

23

24 BY MR. LOKAN:

25 39. Q. If we can go back to your affidavit, I

1 would like to turn to Paragraph 9. I'm sorry, just
2 before we get there. Paragraph 3, still on Paragraph
3 3. I just want to make sure I understand something.

4 You say:

5 "... I refer to homeless persons as those who
6 live in emergency shelters, transitional
7 shelters or places not intended for human
8 habitation such as parks, abandoned
9 buildings and bus or train stations ..."

10 So, Dr. Hwang, in that definition you would
11 include in your definition of homeless persons, those
12 who are residing at an encampment?

13 A. Yes.

14 40. Q. Okay, thank you. We can now go to
15 Paragraph 9. You opine in Paragraph 9 on the dangers
16 for homeless people:

17 "... Who are being prohibited from erecting
18 even rudimentary shelter from the elements
19 such as tents, tarps or cardboard barriers.
20 [And you speak about] the clear direct
21 adverse impacts on their health ..."

22 Have I read that accurately?

23 A. Yes.

24 41. Q. Okay. You're not aware of the
25 specifics of the Region of Waterloo bylaw, are you?

1 A. No, I am not.

2 42. Q. Okay. You haven't read it, for
3 example?

4 A. No, I have not.

5 43. Q. So you have no understanding that -- as
6 to whether it's a general for the region like the one
7 that was in *Heegsma* or whether it's specific to the
8 encampment site?

9 A. I have been informed that it is
10 specific to the encampment site.

11 44. Q. Okay. Are you aware of the context
12 that that site is going to become a construction site;
13 it's intended to become a construction site in
14 approximately six months?

15 A. Yes, I am aware of that.

16 45. Q. So are you also aware that the bylaw is
17 about transitioning residents to other facilities over
18 the space of several months?

19 A. Yes, I am -- I've been told that.

20 46. Q. Okay. So it isn't really about
21 prohibiting people from erecting tents at all. It's
22 about taking a population at that site and
23 transitioning them into other facilities. That's your
24 understand ---

25 MS. DOWN: I am going to object to that

1 because, I mean, you've already established
2 that he is not aware of the specifics of the
3 bylaw.

4 MR. LOKAN: No, no, but he has a general
5 understanding. So, I mean, I'm just ---
6

7 BY MR. LOKAN:

8 47. Q. Is it part of your general
9 understanding, Dr. Hwang, that it's not about
10 prohibiting tents, generally, it's about transitioning
11 a particular population to other facilities?

12 A. Yes, but I, again, would just clarify
13 that I have not read the bylaw.

14 48. Q. Okay. You have three paragraphs at the
15 end of your affidavit, Paragraphs 11, 12 and 13 in
16 which you talk about adverse effects of forced
17 encampment evictions.

18 And if you want a moment to re-read what you
19 affirmed, we're happy to give you that moment.

20 A. I have reviewed my affidavit already.

21 49. Q. Okay. Thank you. Now, in these three
22 paragraphs you only refer to one study and that's the
23 study at Exhibit J to your affidavit.

24 A. Yes.

25 50. Q. And you certainly don't refer to any of

1 your own research. And so I take it you don't have
2 your own direct research on adverse effects of forced
3 encampment evictions.

4 A. I would clarify that I am an expert in
5 area of homelessness and health and I am very familiar
6 with the literature in this area. My expertise is
7 based not only on the research that I have done
8 personally but the research that has been done by
9 others in the field.

10 51. Q. And I understand. I am just asking you
11 to clarify, you, personally, have not done or
12 participated in any research on the adverse effects of
13 forced encampment evictions?

14 A. That is correct.

15 52. Q. Okay. So you're relying on the
16 literature for that?

17 A. Yes.

18 53. Q. And the only literature that you
19 reference is the article at Exhibit J?

20 A. That article was selected because it is
21 the best and most representative article. There are
22 other articles on this topic which I did not choose to
23 cite in the affidavit.

24 54. Q. I see. And I take it you read Exhibit
25 J carefully before relying on it?

1 A. Yes, I did.

2 55. Q. Okay. I do want to spend a bit of time
3 looking at Exhibit J. So can you please -- we'll pull
4 it up by screenshare. And we're going to look
5 starting with the abstract. Now this is an article,
6 as I understand it, coming out of the U.S., out of
7 California?

8 A. Yes, that is correct.

9 56. Q. And the 29 subjects that were reported
10 on here were in Santa Clara County, California?

11 A. Yes.

12 57. Q. Okay.

13 A. It's very difficult to read it above
14 because it's so small. I don't know if you can ---

15 58. Q. Yeah.

16 A. --- make it larger?

17 59. Q. I certainly feel your pain. We are
18 going to do our best to expand it, if necessary,
19 highlight some passages to help you read them.

20 So there is an abstract at the beginning.
21 And I just want to confirm what this actually -- this
22 article is actually about. The introduction, first
23 sentence, says, and I am going to read it:

24 "... Abatements or sweeps are key instruments
25 used by local governments to address

1 increasing number of homeless encampments
2 but they are controversial, under-documented
3 and under-studied ..."

4 First of all, you understand that in this
5 article, abatements and sweeps are used as synonymous
6 terms?

7 A. Yes.

8 60. Q. And you would also agree that
9 abatements or sweeps are under-documented and under-
10 studied?

11 A. I would say that there is -- there is a
12 small literature on the topic.

13 61. Q. Okay. If we go down to the
14 introduction, all still on the first page, we have the
15 third sentence and I will just read it out, talking
16 about encampments:

17 "... A key battleground in this struggle is
18 the encampment. Encampments are the tents,
19 wooden pallets, tarps, cars, bands or other
20 materials set up by unhoused people in order
21 to survive without shelter ..."

22 And then, at the next paragraph, just at the
23 very bottom of the page on the left:

24 "... Essential apparatus in this struggle is
25 the sweep. The definition of a sweep, i.e.,

1 encampment sweep, abatement, move-along
2 order, is varied. But in general, the term
3 refers to authorities removing one or more
4 persons from a location in adherence to
5 ordinances that ban staying on a wide range
6 of public or private spaces. If an
7 individual refuses or cannot move, they are
8 subject to citation or potential arrest and
9 their belongings can be confiscated, and
10 discarded ..."

11 Do you see that?

12 A. Yes.

13 62. Q. So that's what we're talking about in
14 this article, that's what the authors are talking
15 about. And I just wanted to make sure that we had
16 those definitions. And I would like to ask you about
17 a couple of passages on Page 2.

18 At the bottom of the first full paragraph
19 that starts, "Beyond legality," so about three-
20 quarters of the way through, there is a sentence
21 starting, "During abatements," just after the Craven
22 reference?

23 A. Yes.

24 63. Q. Okay. So what the authors here report:
25 "... During abatements, unhoused people are

1 rarely introduced to viable shelter or
2 housing options. In San Francisco,
3 California, the vast majority, 91 percent of
4 unhoused people remained outdoors following
5 an abatement and relocation into housing was
6 rare. In Denver, Colorado, unhoused survey
7 respondents reported that in over 80 percent
8 of move-along encounters with police, they
9 were forced to move without receiving any
10 information about supportive services ...”

11 So that’s the context of this article and
12 its conclusions. Is that fair?

13 A. That’s the context of the state of
14 affairs prior to the publication of the article, yes.

15 64. Q. Right. And so when this article talks
16 about adverse health effects, it’s talking about this
17 context of not being introduced to viable shelter or
18 housing options and not being receiving any
19 information about supportive services. Is that fair?

20 A. Yes.

21 65. Q. Now, you may not have been told this or
22 understand this, and it remains subject to some
23 dispute on the evidence. But the region’s evidence
24 here is that there is something called “individual
25 housing plans.” Are you aware of that term,

1 "individual housing plans" or IHPs?

2 A. I am not familiar with that specific
3 term in the context of the -- your region but I am
4 certainly familiar with the concept.

5 66. Q. Right. Okay. It's the region's
6 evidence that for the residents of this encampment,
7 first of all, bylaw was passed April 23rd and the date
8 by which people need to vacate is December 1. So
9 that's over a 7-month period. Were you aware of that
10 context?

11 A. Yes.

12 67. Q. Okay. And part of the context also,
13 the region's evidence, is that they have a team of
14 unsheltered -- sorry, unhoused shelter workers,
15 referred to as USWs, that are going onto the site and
16 meeting with the residents, and providing them
17 information. Is that something you were aware of?

18 A. I've been informed that there are
19 efforts being made but I am not personally aware of
20 the extent or nature of those interactions.

21 68. Q. Okay, well the -- and we're -- to be
22 fair, we're early into the six-month or seven-month
23 period. But it's the region's evidence that that team
24 is going onto the site, meeting with the residents.
25 And over the six or seven-month period, developing

1 IHPs or individual housing plans for each and every
2 one of those residents.

3 And part of the IHPs is to keep them
4 connected with supportive services and to find
5 appropriate alternative arrangements. Were you aware
6 of any of that?

7 MS. DOWN: Sorry, can I just clarify. I
8 think you are misstating the actual -- the
9 bylaw, because it doesn't say that "every
10 resident." It just says, "the people, the
11 existing residents."

12 MR. LOKAN: The existing ---

13 MS. DOWN: (Indiscernible).

14 MR. LOKAN: The existing residents as of the
15 date the bylaw was passed. The evidence is
16 that IHPs or individual housing plans are to
17 be developed with each and every one of
18 those.

19
20 BY MR. LOKAN:

21 69. Q. Was that something you were aware of,
22 Dr. Hwang?

23 A. No, I would just clarify that I am not
24 an expert in the nature or the adequacy of the efforts
25 that are being made on the ground.

1 70. Q. And fair enough. But you'd agree that,
2 if that is the evidence, that is a far cry from what's
3 described here in this sentence that I just read into
4 the record, of people not being given information
5 about alternatives. And not being given information
6 about supportive services. It's a totally different
7 context, right?

8 A. I would say that there are different
9 approaches to trying to close encampments or move
10 people out of encampments. And there is a spectrum
11 from the police-enforced sweep on a single day versus
12 a prolonged period of engagement.

13 71. Q. And ---

14 A. That's certainly correct.

15 72. Q. And you simply can't extrapolate from
16 one to the other if they are markedly different, can
17 you?

18 A. I would say that there is evidence that
19 forced displacement of people against their will from
20 a site does result in adverse effects for those
21 individuals.

22 73. Q. That's what is reported in the article
23 that you rely on is talking about: no information, no
24 alternatives or rarely information, rarely
25 alternatives.

1 Versus this situation which is six or seven
2 months individual housing plans. And plenty of
3 consultation with the existing residents to provide
4 alternative housing. It's chalk and cheese, isn't it?

5 A. I think you're asking me to opine on
6 this adequacy of services which I have not reviewed.

7 74. Q. No, I am not ---

8 A. I don't think that's appropriate.

9 75. Q. I'm not actually, I am just asking you
10 to assume that what I say is correct. You couldn't
11 carry over -- because it's elsewhere in the evidence
12 and, you know, you're here to provide opinion evidence
13 on assumed facts.

14 And whether you treat is as a hypothetical
15 or, you know, whether I establish that before the
16 court through other means, for now, assume that what I
17 say is accurate. If it's accurate, you can't
18 necessarily extrapolate from this study, can you?

19 A. I would say that the studies -- this
20 study and other studies have examined the impact of
21 forced or involuntary removal of people from
22 encampment sites and to the -- and that -- those
23 findings are generalizable. The -- I think that the
24 -- what you are asking me to opine on is that one can
25 certainly reduce the harms or reduce the number of

1 people that actually are forcibly removed through a
2 period of engagement and offering of options.

3 So certainly, the offering of options would,
4 presumably -- and I have experience with this, like in
5 terms with working with the City of Toronto on this --
6 that engagement with individuals in encampments will
7 be successful in some cases and they will agree to
8 move to -- into other options. But in general, not
9 all will.

10 76. Q. Okay. Certainly, for those that do,
11 there is the avoidance of harm if they agree to leave
12 and for those who want to hold out, at the very least
13 there is a long period of engagement. And they know
14 the option is open to them. And so that might be a
15 harm reduction. Is that fair?

16 A. Yes, I think that is a fair statement.

17 77. Q. Okay. And just another point on Page
18 2. If we can drop down to the following paragraph,
19 there is a sentence that says -- I am trying find it
20 on the page. It says:

21 "... Researchers have shown that abatements
22 result in the loss or destruction of
23 people's property ..."

24 Here we go. We'll see if we can just
25 highlight that for you.

1 A. Yes, I see that.

2 78. Q. Okay. So when we're talking about a
3 particular kind of sweep or abatements in which people
4 lose or have property destroyed, that costs -- that
5 causes cost and stress for those living unsheltered.
6 Do you see that?

7 A. Yes.

8 79. Q. And that again is part of the context
9 of this study. But that's not necessarily the case
10 that we're talking about a six or seven-month efforts
11 to re-house people in other arrangements, is it?

12 A. I would say that for people who accept
13 efforts to move them into either shelter or housing
14 prior to the elimination of the encampment, then that
15 would allow for them to preserve their belongings.

16 But for anyone who is required to move or
17 forced to move without a destination, that will likely
18 result in the loss of belongings and the attendant
19 adverse effects.

20 80. Q. Well, it may or may not. I mean,
21 belongings could be checked for safekeeping, for
22 example. So there would be mechanisms to, again,
23 mitigate that harm, wouldn't there?

24 A. It is correct that a municipality could
25 employ methods that would reduce this harm.

1 81. Q. Okay, thank you. On Page 2 of the
2 study, we've got a heading called, "Materials and
3 Methods." So we're still on the same page that's on
4 the right-hand side. And the description -- and I am
5 just looking at the second sentence:

6 "... The data used for this manuscript are a
7 subset of an ongoing qualitative study
8 investigating our local policies surrounding
9 abatements, shape people's health in the San
10 Francisco Bay area ..."

11 And there is a reference to interviews
12 conducted with 29 people recruited between 2018 and
13 2020. Do you see that?

14 A. Yes.

15 82. Q. Okay. And I am just asking you to
16 assist the court around what it means to have a
17 "qualitative study." So there's a distinction between
18 qualitative and quantitative, correct?

19 A. Yes.

20 83. Q. And qualitative is based on what the
21 participants in the study report. And it's not
22 necessarily something that would be shared by all
23 residents of encampments, for example?

24 A. Well, I would just -- I would say that
25 qualitative studies rely on what people report but so

1 do quantitative studies often as well. So a
2 quantitative study of a person's wellbeing or their
3 use of drugs would also rely often on self-report.

4 So I think the main difference is whether
5 the outcomes are counted ---

6 84. Q. Yes.

7 A. --- analyzed numerically or are
8 narrative in nature and are analyzed for themes and
9 meaning and connections.

10 85. Q. Right.

11 A. Some methods are -- both methods are
12 recognized as valid approaches to understanding a
13 phenomenon.

14 86. Q. Right. And I am not suggesting that
15 there is anything invalid about a qualitative study.
16 It was just to assist the court in understanding the
17 difference.

18 So because you're not counting, you don't
19 know to -- it's more difficult to generalize because
20 you're not counting. You can't say 70 percent of
21 residents reported the following. You can say there
22 are common themes, you can say that here were the
23 connections that were made but you can't necessarily
24 generalize to an entire population. Is that fair?

25 A. I would actually disagree with that.

1 The question of generalizability for -- is an issue
2 for both quantitative and qualitative studies. And
3 therefore, would be equally applicable to any research
4 that is done in any population.

5 87. Q. Right.

6 A. So things that -- one would have to
7 consider that for any study not just this one because
8 it's (indiscernible).

9 88. Q. Of course, and there's a whole world on
10 how reliable quantitative measures are and what
11 factors go into that reliability. And I understand
12 all of that. But it would still be fair to say that
13 quantitative studies attempt to give you numbers from
14 which you can draw general conclusions in a way that
15 qualitative studies do not.

16 A. Actually, I would disagree with that
17 characterization.

18 89. Q. So how do you put -- how would you say
19 -- what is the advantage of a quantitative study, if I
20 can put it that way?

21 A. A quantitative study is best -- is the
22 best design when the outcome of the interest is
23 clearly -- can be clearly translated into numerical
24 data. So if, for example, the outcome were the number
25 of emergency department visits or overdoses subsequent

1 to an encampment clearance, then a quantitative design
2 would be preferable.

3 But if one wants to understand what are the
4 human impacts and what are the kinds of impacts of an
5 encampment clearance, a qualitative study would likely
6 be better. The question of generalizability would
7 probably relate more to whether the population and the
8 setting is similar to the one that you seek to
9 generalize to.

10 So, for example, one would be hesitant to
11 take a study of a clearance of a favela or a -- you
12 know, an illegal encampment in a -- you know, in a --
13 in a city in a developing country to the clearance of
14 an encampment in a North American city.

15 But one would probably be more able to
16 generalize the results of a quantitative or a
17 qualitative study of encampment clearances in a North
18 American city to other North American cities.

19 90. Q. Okay. If we can go to Page 3 at the
20 top of the right-hand side. This is now under the
21 section of "Results," and it's the very top sentence
22 that I'd like to draw your attention to:

23 "... Although protocols and practices involved
24 vary, in general, unhoused people are
25 required to remove themselves and their

1 property from a location within 72 hours
2 following notification getting posted.
3 Abatement workers are typically accompanied
4 by law enforcement who have the authority to
5 seize and discard belongings, issue
6 citations or even arrest people who do not
7 comply with orders to move ..."

8 So it's acknowledged that practices vary but
9 the generalization here from the authors is that it's
10 typically 72 hours that they're looking at. Do you
11 see that?

12 A. Yes, they're speaking to that type of
13 clearance with relatively short notice.

14 91. Q. Right. And again, that is very
15 different from the situation here where it's six or
16 seven months from notice through to the date by which
17 a resident might be compelled to leave if they haven't
18 already agreed to leave.

19 A. I would say that, yes, it does make a
20 difference, the duration of notice given.

21 92. Q. Right. And again, given that
22 difference, you can't necessarily draw the same
23 conclusions about the adverse health impacts.

24 A. Based on what others have reported,
25 certainly we know that moving people against their

1 will, even with notice, can have adverse impacts. But
2 it is not possible for me to quantify the degree of
3 adverse effect in a setting where notice is given with
4 -- and within a matter of days versus a matter of
5 months.

6 93. Q. Okay. And again, if we look at Page 3
7 further down just below the 3.1 heading, I think we
8 may have already dealt with this point. But this
9 article talked about, at a basic level:

10 "... Abatements harmed the physical and
11 emotional health of unhoused people by
12 dispossessing them of the belongings they
13 need to survive outdoors, belongings that
14 were often painstakingly procured.

15 Participants reported that during sweeps,
16 their personal belongings of all kinds were
17 taken and discarded by authorities ..."

18 And we've already talked about how that's
19 not necessarily the case here, right?

20 A. I don't think that I should opine on
21 how these individuals will be treated when they're
22 ultimately removed.

23 94. Q. And I am not asking you to do that.
24 But I am asking you to say it makes a difference,
25 doesn't it? If there is no dispossession of property.

1 A. It would make a difference if that is
2 done but I don't -- I don't think that I am qualified
3 or in a position to state what will or will not
4 happen.

5 95. Q. And again, Dr. Hwang, I am not asking
6 you to state what will or won't happen. That is for
7 other evidence and that's for the court's findings on
8 the other evidence. What I am asking you is your
9 opinion, it makes a difference, doesn't it, if there
10 is no dispossession of property?

11 A. That is -- that would be beneficial if
12 there is no dispossession of property. But there are
13 other effects of being moved or evicted from a site
14 that are separate from whether or not property is lost
15 or not.

16 96. Q. Right, and I'm not arguing with you
17 about that. But you've said it's beneficial if there
18 is no dispossession, so I take it you agree with me,
19 it makes a difference if that feature is not there?

20 A. It makes a difference. I guess I would
21 agree that, yes, it does make a difference in that one
22 component of the -- of the eviction from the site.

23 97. Q. Thank you. Just on the matter of what
24 the 29 people in this cohort reported, if we can go to
25 Page 4 and after the picture of the truck, I just want

1 to draw your attention to this paragraph, "Beyond
2 Causing Material Losses."

3 "... Beyond causing material losses,
4 psychological distress and emotional trauma,
5 encampment sweeps, disrupted social
6 connections, encampments are frequently
7 depicted as nuisances or dangerous spaces.
8 But participants were clear that in the
9 absence of alternatives, their encampment
10 site was the safest place available to them
11 ..."

12 So what's being reported by these 29 people
13 in the cohort, is "in the absence of alternatives."
14 So if we're talking about a situation where there
15 isn't an absence of alternatives where there are, in
16 fact, alternatives, it isn't necessarily the case that
17 the encampment is the safest place available.
18 Correct?

19 A. So I guess I would just clarify that
20 the alternatives that are -- it very much depends on
21 what the -- what alternatives are available.

22 98. Q. Right.

23 A. In many jurisdictions, there is not
24 adequate shelter space for people to be housed in.
25 And as well in many jurisdictions, the shelter spaces

1 that are available have significant -- raise
2 significant concerns in terms of personal safety,
3 security of possessions, cleanliness, health factors,
4 etcetera.

5 99. Q. Right.

6 A. I would say that the -- it is not
7 simply true that any alternative is better. It is --
8 one has to consider the nature of the alternatives
9 that are being offered.

10 100. Q. So this would be a matter that you
11 would recommend should be discussed between residents
12 and region representatives as part of devising
13 individual housing plans, IHPS?

14 A. Yes, I would strongly recommend that
15 because often people in encampments are offered a
16 single option that they -- that is -- often has
17 significant -- raises significant concerns.

18 So, for example, if someone is offered the
19 option of a shelter bed, a bed at only a single
20 shelter that has, you know, known concerns, that would
21 be an issue. So I guess that, yes, it is important to
22 keep in mind options and offer appropriate
23 alternatives.

24 101. Q. Okay. You mentioned though that one of
25 the issues with some alternatives is physical danger.

1 That's also an issue at encampments, isn't it?

2 A. Yes, it can be an issue in both
3 encampments and in shelters.

4 102. Q. And indeed, this study talks about what
5 happens when trust in authorities is lost as a result
6 of sweeps. Do you recall that?

7 A. Yes.

8 103. Q. And that one thing that can happen is
9 that the residents of an encampment resorts to self-
10 policing. And I can take you to a specific passage,
11 if that helps.

12 A. You don't have to take me to that
13 passage. It is certainly a known phenomenon. Yes.

14 104. Q. And self-policing can lead to an
15 increase in violence?

16 A. The term usually refers to actually
17 behaviour that reduces or constrains behaviours.

18 105. Q. Okay. If we can go to Section 3.4 on
19 Page 8 of the study. You'll see there is a whole
20 section on distrust in law enforcement, increased
21 self-policing and interpersonal violence in unhoused
22 communities. So doesn't this study find a link
23 between increased self-policing and interpersonal
24 violence?

25 A. You know what, I would have to look in

1 more detail to see if that -- your claim is, in fact,
2 made in the paper.

3 106. Q. Okay. Perhaps I can refer you then to
4 Page 9 and the very end of this section which
5 summarizes -- this is at the end of that 3.4, just
6 above "Discussion":

7 "... With no formal ways to pursue justice,
8 these conditions, that is distrust in law
9 enforcement, entangled some unhoused people
10 into cyclical entrenched forms of violence
11 with serious health outcomes for these
12 individuals, encampment sweeps were an
13 upstream fundamental cause of downstream
14 interpersonal violence, injury and death ..."

15 A. So, you know what, that would be a
16 conclusion of this particular research study in that
17 context.

18 107. Q. Right.

19 A. I guess, I would say that we have not
20 -- I would not say that that is a common observation
21 in the Canadian context.

22 108. Q. Okay, so this is one of the areas where
23 qualitative study may make it less reliable because
24 it's based on what perhaps are some individualized
25 reports.

1 A. No, I wouldn't say that. I would say
2 that one has to be cautious in making generalizations
3 especially from U.S. studies to Canadian studies in
4 relation to violent crime, and the causes of violence.
5 Because -- well, in terms of the specifics of violent
6 crime due to, you know, significant differences in the
7 societal structures and nature of crime and the
8 availability of guns in the U.S. versus in -- in
9 Ontario.

10 109. Q. Okay. Were you aware or did anyone
11 report to you, that there were a number of reports of
12 violence between residents at this encampment at 100
13 Vic?

14 A. No one has informed me of that and I am
15 not aware of any such reports.

16 110. Q. Okay. And did anyone tell you that
17 there had been five deaths at the encampment?

18 A. No, no one has told me that.

19 111. Q. Okay, and I am not suggesting that
20 those deaths can be either attributed or not
21 attributed to inter-resident violence because, as we
22 know, substance use is strongly associated with --
23 with homelessness. Correct?

24 A. I would say that the prevalence of
25 substance use is higher among people experiencing

1 homeless than among people in the general
2 population.

3 112. Q. Right, okay. And there is also
4 evidence of an attempted murder, not at this
5 encampment, but another one within the region. And I
6 take it nobody told you about that?

7 A. No.

8 113. Q. Okay. So you don't actually know
9 whether the U.S. and Canada is all that different in
10 terms of encampment violence. You just mentioned a
11 couple of factors which say you can't necessarily
12 extrapolate from the U.S. to Canada. Is that a fair
13 summary of your point?

14 A. Yes.

15 114. Q. Okay, thank you. Dr. Hwang, thank you
16 very much, those are my questions.

17 MS. DOWN: You can just take a short break.

18 I think I am going to have some questions in
19 reply.

20 THE WITNESS: Okay.

21 MS. DOWN: So if we just maybe come back in
22 about four minutes?

23 THE WITNESS: Sure.

24 MR. LOKAN: Sure.

25 MS. DOWN: Thanks.

1 --- BREAK

2
3 MS. DOWN: Hello, Dr. Hwang?

4 THE WITNESS: Hi, I am back.

5
6 RE-EXAMINATION BY MS. DOWN:

7 115. Q. All right, I just have a couple of
8 questions for you just in response to some of the
9 questions that Mr. Lokan had for you.

10 So he was asking you to compare the
11 situation where someone is not given any information
12 about housing options versus what the region is
13 proposing with the existing residents of the
14 individualized housing plan.

15 Is the important part of that equation that
16 people are given information if -- like if there's no
17 options, if there is no housing available at the end
18 of the day, what value is the information?

19 A. It is extremely important that what is
20 offered and discussed with residents of encampments is
21 not just information but actual options, including
22 shelter or permanent housing options in order to
23 achieve a successful transition out of the encampment.
24 Otherwise, the likelihood is that the person will
25 simply move to another site and just re-establish an

1 encampment at a different site.

2 Q. All right. So if you have a situation
3 like the region of Waterloo where we have a point-in-
4 time count says that there is 2,370-odd people who are
5 unhoused, and there aren't enough shelter beds to
6 provide for those people. So is there -- so what is
7 -- what would be the benefit of having a housing plan
8 or getting information if there is no outlet at the
9 end?

10 A. Well, as I -- as I just said, it's
11 important to not just have a theoretical offer or a
12 theoretical location a person can go to or just simply
13 information. But actually, an actual destination that
14 the person can go to with that, you know, within a --
15 within a short period of time, typically days. And
16 also that is appropriate for their needs.

17 I guess that if I can just say that, you
18 know, the City of Toronto has a system where one can
19 call at any time to request a shelter bed. And in
20 theory that sounds great but 150 people or so are told
21 that there is no bed available every day. So I think
22 that it is very important to have not just simply
23 information but an actual destination and location for
24 the person to go to.

25 116. Q. But the harms that the study that we

1 were just going through with you, the study from the
2 States, are those harms -- do you think the harms are
3 related to like the provision of information or the
4 lack of information or the harms relate about
5 something else?

6 A. I would say that the harms related to
7 encampment clearance or forced removal of people from
8 encampments relates to both the way in which it is
9 done and also ultimately, whether or not the
10 displacement is forced.

11 So I would say that the ultimate I think
12 determinate is how the person is actually moved at the
13 end of the day. It is not how much information or
14 engagement is done prior to the move. It is really
15 what actually happens at the point of the -- of the
16 displacement or move, as the case may be.

17 117. Q. Okay.

18 A. And that is only determined at the --
19 you know, that is hard to -- it is -- you can't
20 predict how that will occur simply because there is
21 engagement prior to the clearance.

22 118. Q. Thank you. And in terms of the notice
23 given to people, like the -- Mr. Lokan was drawing a
24 distinction between an encampment sweep or an eviction
25 where there is 72-hours notice versus when were there

1 is a six-month's notice. Is the amount of notice --
2 like does it matter how much notice someone is given
3 if, again, at the end of the day, there is no
4 available housing at the -- like once they -- in this
5 particular encampment, December 1st rolls around,
6 that's the date where the property needs to be vacant.

7 So does it matter whether someone has 72
8 hours of that or six months, if on that date, there is
9 no available shelter bed, interim housing, motel
10 space?

11 A. But yeah, it is correct. As I just
12 stated, the key factor here is not how much -- the
13 duration of engagement prior to the move or the
14 displacement. It is what actually happens on the date
15 of the displacement. I think that, if I can just say,
16 that the real -- like one -- one can assess the
17 adverse impact by how many people agree to a voluntary
18 move to an appropriate destination, a shelter bed or
19 permanent housing prior to the deadline.

20 That is a key factor that cannot be -- that
21 is dependent on the actual -- what is actually offered
22 to people and what is made available.

23 119. Q. Okay. And in the current case, the
24 reasons the bylaw makes a distinction between existing
25 residents as being someone who was at the encampment

1 on a specific date, April 16th, 2025 and non-exiting
2 residents and it treats them differently. So the non-
3 existing residents are subject to the enforcement
4 procedures of the bylaw which could allow the Region
5 to (indiscernible) who tries to set up a tent
6 (indiscernible).

7 So what -- like in terms of the information
8 and your opinion in your affidavit, how would this
9 situation -- how would the harm for that person be
10 different from the harms of the existing resident who
11 is going to have this individual housing plan?

12 A. The -- well, my understanding of what
13 is proposed is that it creates two groups of people.
14 One group of whom -- one group who is provided with
15 engagement and potentially options and another group
16 that either will not or may not receive those same
17 options.

18 And so it seems to me quite clear that those
19 are not provided options would be much more likely to
20 experience adverse effects and harms when they are
21 removed from the site. Presumably, after not being
22 offered the same options that the other group was.

23 120. Q. Thank you. Those are my questions. I
24 don't know if Amicus, if Mercedes, do you have any
25 reply questions?

1 MR. LOKAN: I am not sure that we have any
2 provision for that but it may be moot.

3 MS. PEREZ: I don't have any questions in
4 any event.

5 MR. LOKAN: So thank you, Dr. Hwang. If we
6 can go off record.

7

8

9 --- ADJOURNED

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THIS IS TO CERTIFY that the foregoing
is a true and accurate transcription of
my recordings and notes, to the best of
my skill and ability.

BarPollard

Barbara A. Pollard
Certified Court Reporter

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EXHIBIT “1”

Ex # 1 m/d/y 08/28/2024 Pg 1 of 21Exam of Dr. Stephen HwangHeegsma et al v City of Hamilton*Nimigan Mihailovich Reporting Inc.*

Chapter 2.1

The Relationship Between Homelessness and Health: An Overview of Research in Canada

C. JAMES FRANKISH, STEPHEN W. HWANG,
AND DARRYL QUANTZ

Canada has long had an international reputation for high quality of life. For a growing number of Canadians, homelessness has become a grim reality and obtaining shelter part of a daily struggle (Begin et al., 1999). Research on homelessness is essential for policy-makers, program planners, service providers, and community groups. This knowledge can play an important role in public education and awareness campaigns, policy decisions, resource allocation, program development, and program or policy evaluation (Quantz & Frankish, 2002). The identification of needs and priorities for research on homelessness is, therefore, a valuable undertaking.

The two primary goals of this article are to provide an overview of previous research on homelessness and the relationship between homelessness and health (with a main focus on Canada), and to spur discussion regarding strategic directions for future research. The National Homelessness Initiative has called for a comprehensive Canadian research agenda to “lay the foundation for understanding the root causes of homelessness, support policy development and serve as a resource for

accountability and reporting.” Development of this agenda will require active engagement by a wide range of stakeholders, including homeless people, those at risk of becoming homeless, service providers and advocates for homeless people, government representatives, researchers and research funding agencies.

Literature review

A variety of strategies were used to identify literature on homelessness that reflected diversity in both geographical and topical focus. This was deemed essential considering that many important sources of information are found in reports from government and community agencies, in addition to the peer-reviewed academic literature. This article is not a comprehensive review of the literature on homelessness in Canada, but rather an effort to frame the different types and areas of research for the purpose of developing future work.

An initial search strategy involved the use of electronic databases, including major social sciences, health and humanities databases. A second strategy sought out examples of literature from government, community, advocacy and service websites. Examples of homelessness research, program descriptions and policy documents were collected. Canadian literature was the primary target of these searches, but review papers from international sources were also included for comparison purposes and to provide additional examples of interventions. Only documents that identified homelessness as a major focus were collected. Papers and reports on housing policy and programs were only included if they focused on homelessness. General reports on housing policy and programs were excluded. Only literature and reports published since 1990 in English were reviewed.

Collected documents were reviewed and categorized. Research was defined broadly to include the systematic generation of new knowledge through a variety of means, including descriptive reports. A more restrictive definition (for example, one based on specific methods such as controlled trials) would have excluded a large proportion of the literature on homelessness in Canada. Research within the following categories were included:

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- conceptual research (examining the definition/meaning of homelessness);
- environmental scans (documenting the extent of homelessness and health and social issues related to homelessness);
- methods research (focusing on the development of new tools for studying homelessness);
- needs assessments (focusing on the needs of the homeless as expressed by the homeless and service providers);
- evaluation research (describing the process and outcomes of programs and policies);
- intervention research (examining the effectiveness of programs and services).

The scope of homelessness in Canada

Many efforts have focused on obtaining a clearer understanding of the nature and extent of homelessness in Canada. Canada's first efforts to provide an estimate of the homeless population began in 1987 through the work of the Canadian Council on Social Development (Begin et al., 1999). Further efforts at measuring homelessness have been undertaken by Statistics Canada. Data from the 2001 Census indicated that over 14,000 individuals were homeless in this country (Statistics Canada, 2002). Most advocates and researchers, however, believe that these numbers vastly under-represent the problem, and new strategies are necessary to accurately capture usable information. Other strategies include the development of the Homeless Individuals and Families Information System (HIFIS) that focuses on capturing more complete information on shelter users in cities across Canada (Canada Mortgage and Housing Corporation, 1999). Specific cities in Canada have also initiated local homelessness counts in an attempt to measure the numbers of homeless and at-risk persons in their jurisdictions.

Examples from large urban areas include a report on homeless and at-risk persons in the Greater Vancouver region (Woodward et al., 2002), the Toronto Report Card on Homelessness (City of Toronto, 2000), and the City of Calgary Homeless Count (Stroik, 2004). A number of smaller cities and regions have produced similar reports.

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The challenges associated with obtaining a clear picture of the scope of homelessness in Canada included the lack of a consistent definition of homelessness, difficulty in identifying homeless persons, the transient nature of homelessness, difficulty in communicating with homeless persons, and lack of participation by local agencies (Bentley, 1995). The definition of homelessness is particularly important. Homelessness can be viewed along a continuum, with those living outdoors and in other places not intended for human habitation at the extreme, followed by those living in shelters. These individuals are referred to as being absolutely homeless. Homelessness also includes people who are staying with friends or family on a temporary basis, often referred to as “couch surfing” or being “doubled up.” Those at risk of being homeless include persons who are living in substandard or unsafe housing and persons who are spending a very large proportion of their monthly income on housing. The definition of homelessness is not trivial. It can have profound consequences for policy, resource allocation, and parameters used to evaluate the success of homelessness initiatives. This article focuses on research and interventions related to absolute homelessness. Much of this information has implications for those who are at risk.

Other important aspects of homelessness in Canada are the impact of urbanization, the heterogeneity of the homeless population, and the complexity of the causes of homelessness. Canada is experiencing a rapid and continuing trend towards urbanization, as indicated by the fact that almost 80 percent of Canadians now live in cities with populations of 10,000 or more. Although homelessness is a problem in rural areas of Canada, it has become an obvious crisis in large urban areas, where availability of affordable housing is limited due to a loss of rental units and a shortage of social housing (Woodward et al., 2002).

Heterogeneity within the homeless population is important to recognize. Homelessness affects single men and women, street youth, families with children, people of all races and ethnicities, lifelong Canadians, immigrants and refugees, and these groups often face different health issues (Hwang, 2001). For most individuals, homelessness represents a transient one-time crisis or an episodic problem; for a distinctly different subgroup of individuals, homelessness is a chronic condition (Kuhn & Culhane, 1998).

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There is no single pathway to homelessness. Homelessness is the result of a complex interaction of factors at the individual level such as adverse childhood experiences, low educational attainment, lack of job skills, family breakdown, mental illness and substance abuse (Herman et al., 1997; Koegel et al., 1995; Susser et al., 1993) and at the societal level, such as poverty, high housing costs, labour market conditions, decreased public benefits, and racism and discrimination (Jencks, 1994; O'Flaherty, 1996; Schwartz & Carpenter, 1999) (see Figure 1).

Research on homelessness has often reflected disciplinary traditions, with health researchers focusing on individual risk factors and social scientists looking at marginalization, exclusion and economic forces. This is important because the formulation of the causes of homelessness can become highly politicized and can influence public perceptions and policies related to homelessness.

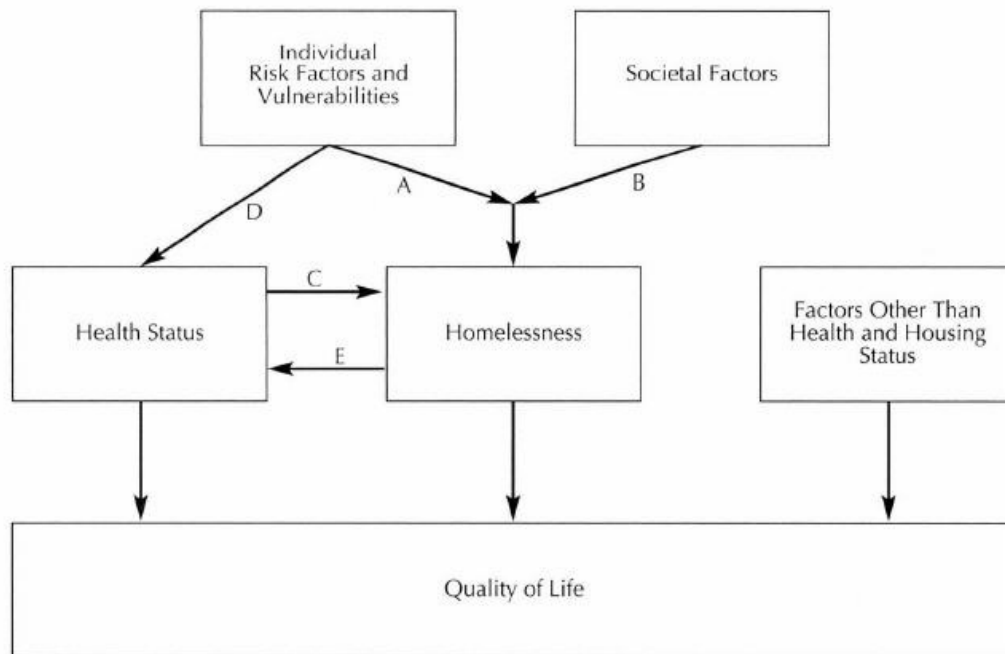


Figure 1. Causal pathways relating homelessness, health, and quality of life.

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The health status of homeless persons

Causal Pathways

Homelessness is clearly associated with poor health. In reviewing the research in this area, a schema of causal pathways underlying this association may be useful. Homelessness has a direct adverse impact on health (Figure 1, arrow C). Crowded shelter conditions can result in exposure to tuberculosis or infestations with scabies and lice, and long periods of walking and standing and prolonged exposure of the feet to moisture and cold can lead to cellulitis, venous stasis and fungal infections (Stratigos & Katsambas, 2003). However, the relationship between homelessness and ill health is far more complex (Hwang, 2002). Many risk factors for homelessness, such as poverty and substance use (Figure 1, arrow A), are also strong independent risk factors for ill health (Figure 1, arrow D). Many people who are homeless remain at risk for poor health even if they obtain stable housing. In addition, certain health conditions (particularly mental illness) may contribute to the onset of homelessness and then in turn be exacerbated by the homeless state (Figure 1, arrows C and E). Finally, improved health and adequate housing are means of achieving the ultimate goal of improved quality of life. Researchers are now recognizing the need to understand and measure the impact of interventions on quality of life, in addition to housing and health outcomes (Lehman et al., 1995).

Specific Health Conditions

Homeless people are at greatly increased risk of death. Mortality rates among street youths in Montreal are nine times higher for males and 31 times higher for females, compared to the general population (Roy et al., 1998a). Men using homeless shelters in Toronto are two to eight times more likely to die than their counterparts in the general population (Hwang, 2000, 2002).

The prevalence of mental illness and substance abuse is much higher among homeless adults than in the general population. Contrary to popular misconceptions, only a small proportion of the homeless population suffers from schizophrenia. The lifetime prevalence of schizophre-

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nia is only 6 percent among Toronto's homeless (Canadian Mental Health Association, 1998). Affective disorders are more common, with lifetime prevalence rates of 20-40 percent (Fischer & Breakey, 1991; Sussner et al., 1993). Alcohol use disorders are widespread, with lifetime prevalence rates of about 60 percent in homeless men (Fischer & Breakey, 1991). Cocaine and marijuana are the illicit drugs most often used by homeless Canadians (Smart & Adlaf, 1991). Patterns of substance abuse and mental illness vary across subgroups of homeless people: single women are more likely to have mental illness and less likely to have substance use disorders than single men (Fischer & Breakey, 1991). Female heads of homeless families have far lower rates of both substance abuse and mental illness than other homeless people (Shinn et al., 1998).

Homeless people are at increased risk of tuberculosis (TB) due to alcoholism, poor nutritional status and AIDS (Advisory Council for the Elimination of Tuberculosis, 1992). In addition, the likelihood of exposure to TB is high in shelters due to crowding, large transient populations, and inadequate ventilation (Nolan et al., 1991). Canadian data on the incidence and molecular epidemiology of TB among homeless people are lacking. In the United States, more than half of TB cases among homeless people represent clusters of primary tuberculosis, rather than reactivation of old disease (Barnes et al., 1996). Treatment of active TB in the homeless is complicated by loss to follow-up, non-adherence to therapy, prolonged infectivity and drug resistance (Pablos-Mendez et al., 1997). Directly observed therapy results in higher cure rates and fewer relapses (Advisory Council for the Elimination of Tuberculosis, 1992). Homeless persons with positive skin tests without active TB may be considered for directly observed prophylaxis (Nazar-Stewart & Nolan, 1992).

Among homeless youth in Canada, risk factors for HIV infection include survival sex, multiple sexual partners, inconsistent use of condoms and injection drug use (Roy et al., 1999). Infection rates were 2.2 percent and 11.3 percent among homeless youths seeking HIV testing at two clinics in Vancouver in 1988 (Manzon et al., 1992). In contrast, the prevalence of HIV infection was only 0.6 percent in a group of homeless youths surveyed in Toronto in 1990 (Wang et al., 1991). In a 1997 study of homeless adults in Toronto, the HIV infection rate was 1.8 percent,

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with increased risk observed among individuals with a history of using IV drugs or crack cocaine (Goering et al., 2002). A study of homeless adults and runaway youth in 14 US cities in 1989–92 found HIV infection rates ranging from 0 to 21 percent with a median of 3.3 percent (Allen et al., 1994).

Sexual and reproductive health are major issues for street youth. Studies of street-involved youth in Montreal have documented high rates of involvement in survival sex, sexually transmitted diseases and unplanned pregnancy (Roy et al., 1998b, 1999, 2003). Anecdotal reports suggest that pregnancy is common among street youths in Canada; in the US, 10 percent of homeless female youths aged 14–17 years are currently pregnant (Greene & Ringwalt, 1998).

Injuries and assaults are a serious threat to the health of homeless people. In Toronto, 40 percent of homeless persons have been assaulted and 21 percent of homeless women have been raped in the past year (Crowe & Hardill, 1993). Unintentional injuries due to falls or being struck by a vehicle, as well as drug overdoses, are leading causes of mortality among homeless men in Toronto (Roy et al., 1998a).

Homeless adults suffer from a wide range of chronic medical conditions, including seizures, chronic obstructive pulmonary disease and musculoskeletal disorders (Crowe & Hardill, 1993). Hypertension and diabetes are often inadequately controlled (Hwang & Bugeja, 2000; Kinchen & Wright, 1991). Homeless people in their forties and fifties often develop health disabilities that are commonly seen in persons who are decades older (Gelberg et al., 1990). Oral and dental health is poor (Gibson et al., 2003; Lee et al., 1994; Pizem et al., 1994).

Homeless people face many barriers that impair their access to health care, even under the Canadian system of universal health insurance. Many homeless persons do not have a health card, are unable to make or keep appointments, or lack continuity of care due to their transience (i.e., no permanent address or telephone). Homelessness entails a daily struggle for the essentials of life. Competing priorities may impede homeless people from obtaining needed health services (Gelberg et al., 1997). Access to mental health care and substance abuse treatment remains a crucial issue (Wasylenki et al., 1993). Obtaining prescription medications can be problematic and adhering to medical recommenda-

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tions regarding rest or dietary modification is often impossible (Hwang & Bugeja, 2000; Hwang & Gottlieb, 1999). Studies from the United States have shown that homeless adults have high levels of health-care utilization and often obtain care in emergency departments (Kushel et al., 2002; Kushel et al., 2001). Homeless people are hospitalized up to five times more often than the general public (Martell et al., 1992) and stay in the hospital longer than other low-income patients (Salit et al., 1998).

Interventions to reduce homelessness and improve the health of homeless persons

This section provides an overview of the wide array of interventions reported within the literature that have attempted to decrease the prevalence of homelessness and improve the health of homeless people. We have classified these interventions into four clusters using a taxonomy derived from the literature, theory and past experience:

- biomedical and health care strategies;
- educational and behavioural strategies;
- environmental strategies;
- policy and legislative strategies.

For each cluster, we provide a brief description, examples of interventions of that type, and a summary of research gaps and opportunities within that cluster. These clusters are not mutually exclusive; some interventions may fit under more than one cluster.

Biomedical and Health Care Strategies

This cluster of strategies focuses on medical interventions to improve health status and includes primary health-care programs, clinical services through outreach programs, psychiatric treatment teams and substance abuse treatment. Interventions that are purely biomedical, however, may improve the health of homeless people but fail to address their homelessness. Thus, interventions that combine health care with housing and other social services need to be considered.

Only a small number of studies have examined the effectiveness of biomedical or health care interventions for homeless people using a rigorous controlled design. Most of these studies have focused on homeless

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persons with mental illness or substance abuse. For example, studies have confirmed the effectiveness of the Assertive Community Treatment (ACT) model for homeless people with severe mental illness. ACT involves a team of psychiatrists, nurses, and social workers that follows a small caseload of clients in the community and provides high-intensity treatment and case management (Lehman et al., 1997; Wasylenki et al., 1993). Compared to usual care, patients receiving ACT have fewer psychiatric in-patient days, more days in community housing, and greater symptom improvement.

A recent example of a combined housing and health service program is the New York City Housing Initiative (Metraux et al., 2003). This program made resources available to create 3,300 housing units and social services support for mentally ill homeless persons. Over two years, people in the program stayed in shelters an average of 128 days fewer than similar people in a control group. The treatment of substance abuse in homeless persons has been the subject of a number of studies; a recent review of the literature is available (Zerger, 2002).

Gaps in this area include a lack of research on interventions for homeless youth or families with children, limited research on interventions to address health problems other than mental illness or substance abuse, and little or no data on the effectiveness of various models of primary care delivery for the homeless. Opportunities for future research include a focus on “harm-reduction” programs that seek to minimize adverse health impacts among homeless substance users rather than focusing exclusively on abstinence. Examples include “safe injection sites” for drug users and shelter-based controlled drinking programs in which residents are provided with alcohol on a metered schedule.

Educational and Behavioural Strategies

This cluster of strategies seeks to prevent homelessness or improve the health status of homeless persons through educational programs and behavioural change. Educational programs may focus on homeless people, individuals at risk of homelessness, or the general public. Efforts to promote behavioural change in the homeless include harm-reduction programs, counselling, and referral services. Education of health care workers, shelter workers, and service providers is included in these

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strategies. For example, the Streethealth Coalition in Ottawa provides prevention and education on infectious diseases and health conditions often found in the homeless (Canada Mortgage and Housing Corporation, 1995). The Federation of Non-Profit Housing Organizations of Montreal promotes education on a range of basic life skills. Ontario's Urban Aboriginal homelessness strategy includes culturally appropriate programs, such as cultural counselling and programs, and employment services.

Examples of programs targeting homeless or at-risk individuals include tenants' rights organizations, eviction prevention services, and groups such as the Safe Homes for Youth in Ottawa, which provides education and support for high-risk youth (Canada Mortgage and Housing Corporation, 1995). Alternatively, educational initiatives may focus on increasing public and government awareness of homelessness issues. Examples include a public awareness campaign in Ontario to aid the public in assisting homeless persons (Provincial Task Force on Homelessness, 1998) and efforts by advocacy groups such as the Canadian Housing and Renewal Association, the Centre for Equality Rights in Accommodation and the Housing and Homelessness Network in Ontario to promote changes in government policy related to homelessness.

Very little evaluation research has been undertaken on health education programs for the homeless (May & Evans, 1994). This constitutes a major research gap. Reports of educational and behavioural interventions have often been limited to basic program information. More in-depth descriptions of development and implementation processes are needed; such information could provide a valuable resource for service providers seeking to begin similar initiatives. Opportunities for future research include a need for conceptual research on educational and behavioural interventions for homeless people, studies on how to make these interventions more accessible and appealing for the homeless population, and rigorous studies to evaluate the outcomes of such programs. Such efforts could benefit from attention to three key factors: motivation of individuals toward change through altered knowledge, attitudes, beliefs and values; enabling individuals to take action through skill building and availability and accessibility of supportive resources; and reward or reinforcement of positive action (Green & Kreuter, 1999).

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Environmental Strategies

Environmental strategies are attempts to alter the social, economic, or physical environment in a specific setting to create a supportive environment that enables and facilitates behaviour change. This approach recognizes that the environment or context in which homelessness occurs may be altered to enhance desired behaviours or limit undesirable actions. The environment or context may vary in scale from a single program (e.g., a supportive housing site or outreach program) to a specific neighbourhood to an entire city, province, or country.

Examples of environmental strategies at the program level are Street City in Toronto, which provided services to homeless persons in an environment designed to engage individuals unaccustomed to living indoors (Canada Mortgage and Housing Corporation, 1995), and the Lookout Emergency Aid Society in Vancouver, which provided both short-term shelter as well as long-term supportive housing for adult men and women who were unable independently to meet basic daily needs (Canada Mortgage and Housing Corporation, 1999). A macro-level example is the federal government's Supporting Community Partnerships Initiative (SCPI), which seeks to promote cooperation and coordination at a local level and to provide "communities with the tools and resources needed to set their own course of action" to respond to homelessness in their community.

Research undertaken in environmental strategies has largely taken the form of environmental scans and needs assessments. Two reviews have documented and categorized a number of Canadian programs/projects that included environmental strategies (Canada Mortgage and Housing Corporation, 1995, 1999). A number of projects have provided examples of community development processes in the homeless population. Researchers have outlined lessons learned while conducting community-based research on homelessness in Toronto (Boydell et al., 2000). Others have looked at factors that restrict or facilitate community participation by disadvantaged persons (Boyce, 2001). Opportunities for research include conceptual work to organize and frame these efforts, in-depth evaluations to ensure that programs have measurable

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outcomes, and translation of information into a form useful for planning (Quantz & Frankish, 2002).

Policy and Legislative Strategies

This cluster includes efforts to reduce homelessness through policies and legislation related to poverty and its amelioration, social housing, public health, immigration and law enforcement. Recognizing that a variety of policy, regulatory, legislative and political factors create a climate that has an enormous impact on homelessness and its management, these strategies focus on the creation of “healthy public policies.”

Examples of current initiatives include the government of Alberta’s framework outlining policy responses to homelessness with respect to housing and support services, local capacity development and governmental coordination (Alberta Community Development, 2000). The 1999 Vancouver Agreement is an example of collaboration at the federal, provincial and municipal levels to focus on economic, social and community development in the Downtown Eastside neighbourhood, where homelessness is a major issue. Examples of public health policies that have been implemented or considered include safe-injection sites, needle exchange programs and other harm reduction policies.

These strategies are foundational to all others, because the absence of a strong policy-legislative approach to homelessness will seriously limit and undermine efforts in other areas. There is a need for work to examine the impact of various health and social policies on the lives of homeless people. Particularly vital (Classer et al., 1999) areas include welfare policy as it affects adults and families with children, policies that impact young women (Novac et al., 2002), and practices in the child welfare system that may contribute to youth homelessness (Appathurai, 1991; Kufeldt, 1991). Comparing policies in different jurisdictions and their impact on homelessness can provide important insights (Classer et al., 1999; Eberle et al., 2001). Government frameworks on homelessness call for efforts to ensure accountability in reaching specific targets and goals. But, there has been relatively little work on policy evaluation in this area. Future research has the potential to provide essential information to guide future policy-making.

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Strategic Directions for Future Research on Homelessness

Based on our review, we conclude that Canadian research in the area of homelessness and health faces important challenges. First, the complexity of the issue of homelessness requires the involvement of a wide range of stakeholders, including all levels of government, service providers, health professionals, biomedical/social science researchers, community groups and homeless people themselves. Both horizontal integration (across various sectors such as health, law, housing, social services) and vertical integration (across federal, provincial, territorial, and local governments, and within communities) are needed.

Second, the diversity of values, beliefs and perspectives on homelessness must be acknowledged, and public discourse is needed on the causes of homelessness in Canada and the appropriate response to this problem.

Third, consensus needs to be reached on the definition of homelessness and the measures by which efforts to reduce homelessness or improve the quality of life of homeless people will be judged.

Fourth, researchers need to design and conduct studies on homelessness that are policy-relevant and develop strategies to translate their research into policy and practice. There has been little research evaluating the effects of policy on homelessness or quality of life among the homeless and the vast majority of programs for homeless people have not been evaluated. Many of the evaluations that have been conducted are of modest quality, but at the present time, the resources and expertise that would allow for a robust evaluation are often not available at the local level.

These challenges should not deter or diminish current interests and efforts around research on homelessness and health in Canada. Rather, they call for renewed commitment, strategic planning and wise investment of human and fiscal resources. Within all six categories of research there is significant need for further development. Conceptual research on the definition and meaning of homelessness can provide greater clarity in ongoing discussions of homelessness among advocacy groups and policy-makers. Environmental scans that document the extent of homelessness and the health problems of homeless people are useful, but they

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remain primarily descriptive in nature. There is a need to move from this understanding to outcome measures and interventions. Methods research could make significant contributions through the development of valid/precise measures of quality of life in homeless people and individuals at risk. Needs assessment research needs to be systematically linked to objectives and interventions. Finally, more high-quality evaluation and intervention research is urgently needed.

Community involvement is vital in any work on homelessness and its conceptualization, measurement or change. While this may seem self-evident, the reality is that many groups often have limited capacity for engagement in these efforts. Concrete efforts are needed to ensure that communities are able to contribute to, and participate effectively in, the study of homelessness and use of research findings. The primary need is capacity-building to allow communities to initiate projects in equitable partnerships with government and academia. Resources must be made available to both promote research by various community groups and to teach research skills such as proposal writing and research design. Potential strategies include workshops, access to research courses at academic institutions, the development of easy-to-use research information, and financial support to allow community members to participate in these activities.

The issue of dissemination remains a key challenge in homelessness research. The question is how we can best communicate the lessons, experiences and best practices of dealing with homelessness. How can this information be communicated in a variety of forms and media that are appropriate to their target audiences? Significant barriers exist, including time, personnel, research capacity and resources.

We suggest three strategic priorities towards a better understanding of homelessness and the implementation and evaluation of efforts to reduce homelessness and improve the lives and quality of life among the homeless. The first priority is a nationwide effort to achieve a core, consensus definition and set of indicators related to the definition and extent of homelessness. Second, we need clear definitions and measures for a) the health status of homeless (and at-risk) groups; b) the use of the health and social services by homeless people; and c) relations between homelessness and broader, non-medical determinants of health (e.g., income,

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education, employment, social support, gender, culture, etc.). This effort to create a common dataset would not preclude communities from collecting additional data of local interest and value.

A third priority must be the development of research infrastructure. This effort would include the development of demonstration projects or surveillance systems that could reliably collect data on the indicators of homelessness. Government-funded projects that purport to address either the processes or outcomes of homelessness should be subjected to an “evaluability” assessment. Groups such as the Canadian Consortium for Health Promotion Research could assist all levels of government in determining whether current projects/programs are in fact, evaluable. We suspect that many projects and programs presently lack the necessary and sufficient conditions to be fairly evaluated. This effort could move research toward a model of program evaluation that sets realistic expectations in terms of measurement of focused aspects of homelessness, and one that provides sufficient time and resources to allow for appropriate assessment of homelessness interventions and their effects.

We encourage investment of the needed resources toward the science and application of research on homelessness. Building on its traditions in health promotion and its strengths in population health research, Canada is well placed to be a world leader in intervention research on homelessness. This can be a vehicle for building community health. These efforts may generate additional benefits, including commitment to reducing health disparities, new partnerships across academic disciplines, and intersectoral work on the determinants of health.

C. James Frankish is with the Institute of Health Promotion Research, University of British Columbia. Stephen W. Hwang and Darryl Quantz are at the Centre for Research on Inner City Health, St. Michael's Hospital; Faculty of Medicine, University of Toronto.

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Populations, Methods, and
Practice

Edited by

Sandro Galea

*Center for Urban Epidemiologic Studies, New York Academy of Medicine
Department of Epidemiology, Mailman School of Public Health, Columbia University
New York, New York*

and

David Vlahov

*Center for Urban Epidemiologic Studies, New York Academy of Medicine
Department of Epidemiology, Mailman School of Public Health, Columbia University
New York, New York*



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Chapter 2

Homeless People

Stephen W. Hwang and James R. Dunn

1.0. INTRODUCTION

Over the last quarter century, homelessness has become one of the symbols of urban blight. Regardless of the accuracy of this perception, homelessness is indeed a serious issue in many cities. More than 800,000 Americans are homeless in a given week, and 3.5 million are homeless over the course of a year (Burt, 2001). About 2-3% of the U.S. population, or 5-8 million people, have experienced at least one night of homelessness in the past five years (Link, *et al.*, 1994). About 70% of homeless people in the U.S. live in urban areas (Burt, 2001). Within the countries of the European Union, estimates of the number of homeless people in 1997 were 580,000 in Germany, 166,000 in the United Kingdom, 30,000 to 40,000 in the Netherlands, 10,000 in Finland, 8,000 in Sweden, and 6,000 in Norway (Menke, *et al.*, 2003).

Contrary to stereotypes, a broad range of people experience homelessness, including not only single men, but also single women, runaway adolescents, and families with young children. In the U.S., these subgroups represent about 60%, 16%, 9%, and 15% of the homeless population, respectively (Burt, 2001). In the European Union, substantial numbers of homeless families with children are found only in Germany and the United Kingdom (Menke, *et al.*, 2003). Here and throughout this chapter, we define homeless people as individuals who lack a fixed, regular, and adequate night-time residence, including those who are living in emergency or transitional shelters, in motels or hotels due to lack of alternative adequate accommodations, or in private or public places not intended for human habitation (such as cars, parks, public spaces, abandoned buildings, or bus or train stations).

The health of the homeless and the role of cities in their health present an important challenge. The relationship between urban living and the health of the homeless raises two intertwined questions. First, how does the urban environment influence the creation and perpetuation of homelessness, especially among (but not limited to) individuals with pre-existing health problems such as mental illness and substance abuse? Second, how does the urban environment affect the health of people after they have become homeless? At first glance, these two questions appear almost identical in terms of the specific characteristics and attributes of the urban

environment that warrant scrutiny. For example, both questions will lead to a consideration of the availability of low-cost housing and the ability of the health care system to care for patients with severe mental illness. However, the distinction between these two questions is important as they distinguish factors associated with the likelihood of being homeless due to health reasons versus the likelihood of consequences given homelessness. At another level, it is also important to distinguish if outcomes and their associated factors vary between cities, both in terms of the structural factors that generate homelessness and (given homelessness) health of those who are homeless. These questions frame the issue of the impact of the urban environment on the health of disadvantaged populations.

In the course of such discussions, disagreement often arises as to whether homelessness should be considered primarily the consequence of individual vulnerabilities and failings, or the result of structural inequities in the social, economic, housing, and health care systems. Rather than creating an either/or distinction, we will approach homelessness as the result of a complex interaction between individual vulnerabilities and structural forces in the urban environment. In most cases, the relative importance of these factors in determining the health of homeless people and the prevalence of homelessness remains the subject of ongoing debate.

2.0. KEY HEALTH ISSUES FOR HOMELESS PEOPLE

The burden of illness and disease is extremely high among homeless people (Levy and O'Connell, 2004). However, any consideration of the common health problems of homeless people must first recognize the large degree of heterogeneity among people who are homeless. Among street youth, single men, single women, and mothers with children, the patterns of illness differ notably. Adolescents suffer from high rates of suicide attempts, sexually transmitted diseases, and pregnancy (Greene and Ringwalt, 1996; Greene and Ringwalt, 1998; Greene, *et al.*, 1999; Feldmann and Middleman, 2003). Female heads of homeless families tend to have far fewer health problems than single homeless women, although their health is poorer than their counterparts in the housed general population (Robertson and Winkleby, 1996). Homeless single men have a higher prevalence of alcohol abuse and drug abuse, whereas single women have a higher prevalence of serious mental illness (Fischer and Breakey, 1991).

Health status also tends to be correlated with a person's history of homelessness. Individuals with severe mental illness, substance abuse, and medical conditions are overrepresented among the chronically homeless, whereas those who are homeless for a transient period lasting only a few weeks or months are more likely to be relatively healthy (Kuhn and Culhane, 1998). Although chronically homeless people make up only about 10% of all individuals who experience homelessness in a given year, they account for a disproportionately large share of the demand for shelter beds and health care services for homeless people (Burt, 2001). In addition, the public's perception of homeless people often reflects a stereotyped image of this highly visible subgroup.

Cross-national comparisons of disease patterns among homeless people reveal the strong effect of social factors within each country. Among homeless men in Tokyo, Japan, morbidity due to alcohol dependence (but not drug use) is common, as are musculoskeletal injuries incurred doing construction work (Takano, *et al.*, 1999b). In contrast, 60% of homeless people in Amsterdam, the Netherlands, suffer from drug abuse or dependence (primarily heroin), and most are chronically homeless (Slegers, 2000c).

2.1. Mental Illness and Substance Abuse

The prevalence of serious mental illness and substance abuse is high among homeless persons. In a nationwide U.S. survey of homeless people, 39% had mental health problems, 50% had an alcohol and/or drug problem, and 23% had concurrent mental health and substance use problems (Burt, 2001). Common psychiatric diagnoses among homeless people include major depression, bipolar disorder, schizophrenia, and personality disorders. A systematic review of the prevalence of schizophrenia in homeless persons found rates ranging from 4 to 16% and a weighted average of 11% in the ten methodologically strongest studies (Folsom and Jeste, 2002). Characteristics associated with a higher prevalence of schizophrenia were younger age, female sex, and chronic homelessness. Marked cross-national variation is seen in the prevalence of schizophrenia, with prevalence rates of 23-46% reported among homeless people in Sydney, Australia (Teesson, *et al.*, 2004).

The prevalence of substance abuse is extremely high among homeless single adults. In a study from St. Louis, Missouri, large increases were seen in the prevalence of drug use among homeless men and women between 1980 and 2000. In 2000, 84% of men and 58% of women had an alcohol or drug use disorder (North, *et al.*, 2004). In another study, about three-quarters of homeless adults met criteria for substance abuse or dependence (O'Toole, *et al.*, 2004). Homelessness increases the risk of adverse health outcomes among substance abusers: in five Canadian cities, the risk of a non-fatal overdose was twice as high among illicit opiate users who were homeless compared to those who were housed (Fischer, *et al.*, 2004).

Homeless adolescents also have very high rates of mental health problems and substance abuse. In a study from Seattle, 83% of street youths had been physically and/or sexually victimized after leaving home, and 18% met criteria for post-traumatic stress disorder (Stewart, *et al.*, 2004). Across the U.S., 55% of street youth and 34% of shelter youth had used illicit drugs other than marijuana since leaving home, in comparison to 13% of youth who had never been runaway or homeless (Greene, *et al.*, 1997). Street youth use a wide range of drugs, including hallucinogens, amphetamines, sedative/tranquilizers, inhalants, cocaine, and opiates. Unfortunately, the initiation of injection drug use is quite common, with an incidence rate of 8.2 per 100 person-years among street youth in Montreal (Roy, *et al.*, 2003).

2.2. Infectious Diseases

Infectious diseases are a common cause of health problems in homeless people (Raoult, *et al.*, 2001). The most serious of these infections include tuberculosis (TB), human immunodeficiency virus (HIV) infection, viral hepatitis, and other sexually transmitted infections. Outbreaks of TB among homeless people have been reported frequently, especially in individuals co-infected with HIV (Barnes, *et al.*, 1999; McElroy, *et al.*, 2003; Morrow, *et al.*, 2003). The incidence of active TB in a cohort of homeless people in San Francisco between 1992 to 1996 was 270 per 100,000, or 40 times higher than that seen in the U.S. general population in 1998 (Moss, *et al.*, 2000). Homeless people with TB require more hospital-based care than non-homeless people with TB, resulting in average hospital costs that are higher by \$2,000 per patient. (Marks, *et al.*, 2000) Contact tracing in the homeless population is difficult, and in one study only 44% of identified contacts completed treatment for latent TB infection (Yun, *et al.*, 2003). Among street youth, latent tuberculosis is more common than in the general population, but probably

less prevalent than among homeless adults. In a study conducted in Sydney, Australia, 9% of homeless young people aged 12-25 years had latent TB infection (Kang, *et al.*, 2000).

Homeless people are at increased risk of HIV infection. Data from an older U.S. survey conducted from 1989 to 1992 in 14 cities found median HIV seroprevalence rates of 4.0% in adult men, 1.8% in adult women, and 2.3% in youths (Allen, *et al.*, 1994). In more recent studies, HIV seroprevalence was 10.5% among homeless and marginally housed adults in San Francisco in 1996, a rate five times higher than in San Francisco generally (Robertson, *et al.*, 2004). HIV infection was present in 1.8% of homeless veterans admitted to residential programs from 1995-2000 (Cheung, *et al.*, 2002). Female street youth and young homeless women who are involved in prostitution are at increased risk of HIV infection, due to both injection drug use and risky sexual behaviors (Weber, *et al.*, 2002). In one study of homeless adolescents, the HIV infection rate was alarmingly high at 16% (Beech, *et al.*, 2003). Among substance users, homelessness is associated with higher rates of HIV seroprevalence (Surratt and Inciardi, 2004; Smereck and Hockman, 1998). Among HIV-infected persons, those who are unstably housed (homeless or temporarily staying with friends or family) are less likely to receive adequate health care than those who are stably housed (Smith, *et al.*, 2000).

Homeless people are at increased risk of viral hepatitis, primarily due to high rates of injection drug use. Infection with hepatitis C was found in 22% of homeless men in Los Angeles (Nyamathi, *et al.*, 2002), 32% of individuals using a mobile medical van in New York City (Rosenblum, *et al.*, 2001), and 27% of homeless persons in Oxford, England (Sherriff and Mayon-White, 2003). In a Veterans Affairs population, the prevalence of anti-hepatitis C virus antibody was 41.7% and the prevalence of hepatitis B surface antigen was 1.2% (Cheung, *et al.*, 2002). Among street youth, the prevalence of these markers of infection was also high: 12.6% and 1.6%, respectively, in Montreal (Roy, *et al.*, 1999; 2001) and 5.0% and 3.6%, respectively, in a northwestern U.S. city (Noell, *et al.*, 2001b).

Sexually transmitted diseases (STDs) are a particularly serious problem among street youth. In a longitudinal study of homeless adolescents, the annual incidence of *Chlamydia trachomatis* infection was 12.1% in females and 7.4% in males; the annual incidence of herpes simplex virus type 2 was 25.4% in females and 11.7% in males. (Noell, *et al.*, 2001) A study of street youth and sex workers in Quebec City, Canada found that 13% of women less than 20 years old were infected with *Chlamydia trachomatis* and 1.7% had *Neisseria gonorrhoeae* (Poulin, *et al.*, 2001). Newer urine-based screening tests make it easier to screen homeless youth for STDs in outreach settings (Van Leeuwen, *et al.*, 2002).

2.3. Chronic Diseases

Common chronic diseases, including hypertension, diabetes, chronic obstructive pulmonary disease (COPD), seizures, and musculoskeletal disorders, are often undiagnosed or inadequately treated in homeless adults. Relatively little research has focused on these medical conditions in the homeless population. The prevalence of hypertension was higher among homeless clinic patients than among non-homeless patients at an inner-city primary care clinic (65% vs. 52%) (Szerlip and Szerlip, 2002). The prevalence of diabetes is similar in homeless and non-homeless individuals, but homeless people with diabetes face a number of serious barriers to appropriate disease management, including lack of access to a suitable diet and dif-

difficulties coordinating medication administration with meal times (Hwang and Bugeja, 2000b). Glycemic control was found to be inadequate in 44% of homeless diabetics in Toronto (Hwang and Bugeja, 2000b).

Smoking rates are extremely high (about 70%) among homeless people (Connor, *et al.*, 2002). As a result, COPD is a common health problem among older adults. In a study of shelter residents in San Francisco, the prevalence of COPD based on spirometry was 15%, or more than twice the prevalence in the general population (Snyder and Eisner, 2004). Smoking also contributes to the high risk of cancer, especially among homeless single men. In a study from Scotland that adjusted for age and socioeconomic deprivation, the incidence of cancer of the oral cavity and pharynx, larynx, esophagus, and lung in homeless men was 139%, 87%, 61%, and 23% higher than expected, respectively (Lamont, *et al.*, 1997). Homeless people are also less likely to receive recommended cancer screening than the general population: among homeless women age 40 and over in Los Angeles County, only 55% had undergone a Pap smear and only 32% had undergone a mammogram within the last year (Chau, *et al.*, 2002). Thus, interventions such as smoking cessation treatment and routine preventive health services may provide significant benefit.

Although it is not surprising that homeless people with mental illness often receive inadequate care for medical comorbidities, the adequacy of care differs according to type of mental illness. Homeless people with schizophrenia receive less detailed physical examinations, fewer primary care visits, and less preventive health services than homeless people with major depression (Folsom, *et al.*, 2002). While it is unknown if these differences are due to patient factors, provider factors, or both, careful attention clearly needs to be paid to the physical health needs of homeless people with psychoses.

2.4. Trauma and Injuries

Trauma and injuries are significant hazards associated with life on the street (Staats, *et al.*, 2002). In a sample of homeless and marginally housed people in San Francisco, 32% of the women and 27% of the men had been sexually or physically assaulted in the last year (Kushel, *et al.*, 2003). Among women, being homeless (compared to being marginally housed) was associated with a more than 3-fold increase in the risk of sexual assault. In Sydney, Australia, 58% of shelter residents reported experiencing a serious physical assault in their lifetime, and half of the women reported having been raped (Buhrich, *et al.*, 2000). Among homeless youth in Los Angeles, reported exposure to violence was found to be equally high among males and females (Kipke, *et al.*, 1997).

2.5. Other Health Conditions

Foot problems are very common among homeless adults due to prolonged standing, long-term exposure to cold and damp, ill-fitting footwear, and inadequate foot hygiene. Problems can range in severity from mild blisters and fungal infections to debilitating chronic venous stasis ulcers, cellulitis, diabetic foot infections, and frostbite. Other common skin problems include sunburn and bites due to infestations by head lice, body lice, scabies, or bedbugs (Stratigos and Katsambas, 2003). The prevalence of serious dermatologic conditions, while probably quite high among street-dwellers, appears to be relatively low among homeless people

living in shelters that provide adequate clothing, laundry facilities, bathing facilities, and medical care. In a study of men staying at such a shelter in Boston, the majority of individuals had relatively normal findings on skin examinations (Stratigos, *et al.*, 1999).

Dental problems are an extremely prevalent and troubling but often-neglected problem for many homeless people. Common conditions include advanced caries, periodontal disease, and ill-fitting or missing dentures. These problems may be related to poverty, lack of access to dental care, and substance use, rather than homelessness *per se*. In a study comparing homeless and domiciled veterans in Veterans Affairs rehabilitation programs for substance abusers, the two groups had similarly poor oral health (Gibson, *et al.*, 2003).

2.6. Mortality

Given the high prevalence of illness among homeless people and the adverse health effects of homelessness itself, it is not surprising that homeless people have very high mortality rates. Men using homeless shelters are 2 to 8 times more likely to die than age-matched men in the general population (Barrow, *et al.*, 1999; Hwang, 2000a). Homeless women 18-44 years of age have mortality rates that are 5 to 31 times higher than in the general population (Cheung and Hwang, 2004). Common causes of death among homeless people under the age of 45 are unintentional injuries, drug overdoses, AIDS, suicide, and homicide (Hwang, *et al.*, 1997; 2000a). In a longitudinal cohort study of street youth in Montreal, the standardized mortality ratio was 11.4; HIV infection, daily alcohol use in the last month, homelessness in the last 6 months, drug injection in the last 6 months, and male sex were independent predictors of mortality (Roy, *et al.*, 2004).

2.7. Pregnancy

Among homeless women, major barriers to contraception include cost, fear of side effects or potential health risks, and the partner's dislike of contraception (Gelberg, *et al.*, 2002). Pregnancy is particularly common among homeless adolescents. In a U.S. survey of runaway females age 14-17 years, 12% of street-dwelling youths and 10% of those residing in shelters were currently pregnant (Greene and Ringwalt, 1998). In a group of pregnant homeless women, the risk of low birth weight (less than 2,500 gm) was 17%, compared to the national average of 6% (Stein, *et al.*, 2000). Lack of prenatal care and severity of homelessness (homelessness in the first trimester of pregnancy, number of times homeless, and percentage of life spent homeless) were independent risk factors for low birth weight.

2.8. Children in Homeless Families

The health of children in homeless families has been the focus of relatively little research. Some but not all studies of these children have found an increased prevalence of behavioral and mental health problems compared to children in housed low-income families (Bassuk, *et al.*, 1997; Vostanis, *et al.*, 1998). Infectious diseases are a significant concern in these children (Ligon, 2000). Up to 40% of children in homeless families in New York City suffer from asthma, a rate six times higher than the national rate in children (McLean, *et al.*, 2004c).

3.0. DIMENSIONS OF THE URBAN ENVIRONMENT THAT AFFECT THE PREVALENCE OF HOMELESSNESS AND THE HEALTH OF HOMELESS PEOPLE

The medical literature has usually examined health problems from the perspective of the individual homeless person, and has given relatively little attention to the urban environment within which these health problems arise and must be ameliorated. This section addresses this gap by highlighting dimensions of the urban environment that affect, through interaction with individual vulnerabilities, the prevalence of homelessness and/or the health of homeless people. The following is not intended to be a comprehensive listing, but rather a selection of important determinants about which at least some information is available. These determinants have been grouped into categories encompassing the demographic and physical characteristics of urban centers (population and climate), their socioeconomic and service-delivery structures (income and poverty, social welfare systems, and health care systems), and their spatial and political organization (urban geography and urban governance). Although these dimensions may have differential effects on the health of various subgroups of homeless people (e.g., youths, single adults, and families), these differences are not discussed in depth here.

3.1. Population Size and Migration

Homelessness is a problem in cities across the U.S., as demonstrated by the fact that federally-funded Health Care for the Homeless Programs exist in 161 cities in all 50 states, the District of Columbia, and Puerto Rico (Health Care for the Homeless Information Resource Center). There is limited information on the relationship between population size and prevalence of homelessness in different urban centers. One reason for this paucity of data is the logistical difficulty of conducting an accurate count of homeless persons, particularly those living on the street. Another reason is that point-prevalence counts of the homeless population cannot be used to determine how many individuals are homeless in a city over an entire year, especially given seasonal fluctuations in the homeless population and the fact that homelessness is a transient state.

Counts of shelter users are particularly informative when all shelters contribute to a common administrative database, because this makes it possible to determine the total number of individuals who use shelters in a particular city over the course of a year, rather than simply the number of shelter users at a single point in time (Metraux, *et al.*, 2001). In 1992, an estimated 1.0% of the 1.5 million residents of Philadelphia and 1.2% of the 7.2 million inhabitants of New York City stayed at a homeless shelter at least once (Culhane, *et al.*, 1994). In Toronto, Canada, 1.3% of the city's total population of 2.5 million used a homeless shelter during 2002. These figures are remarkably similar and strikingly high. Thus, homelessness is quite common in large urban centers, although for many individuals the duration of homelessness is quite brief. In a U.S. survey of homeless people, 28% had been homeless for only 3 months or less, 26% had been homeless for 4-12 months, and 46% had been homeless for more than one year (Burt, 2001).

Cross-sectional counts of the number of shelter residents provide an important but somewhat less accurate picture of the homeless population. The maximum size of a city's shelter population is obviously determined by the number of available shelter beds. In a city with few shelters, this can create the illusion of a smaller

homeless population than is actually the case. In addition, shelter beds may be less widely available in cities that do not experience severe cold weather in the winter. In the nine largest metropolitan areas in Canada, the number of shelter beds per capita ranges more than four-fold, from 21 to 97 per 100,000 population (Hwang, 2001). The number of shelter beds per capita is not significantly correlated with population size. Interestingly, the lowest number of shelter beds per capita in Canada was observed in Vancouver, a city with a very mild climate, and the highest figure was seen in Calgary, a city with extremely cold winters. Overall, this evidence suggests that episodes of homelessness are quite common among residents of major urban centers, but there is significant variation in the prevalence of homelessness across cities that does not necessarily correlate with population size.

A related question is the role of migration in determining the size of the homeless population in urban centers. Whereas some homeless people are migrants who were homeless before or upon their arrival in the city, others are local residents who have become homeless. In a nationwide U.S. survey, 56% of homeless people reported living in the same city where they became homeless (Burt, 2001). Among the 44% of individuals who had moved from one location to another during their current episode of homelessness, the most common pattern was a net flux from urban fringes and medium-sized cities into large central cities. The most commonly cited reasons for these moves were lack of available jobs, lack of affordable housing, and eviction (Burt, 2001).

3.2. Climate

Climate is an interesting example of a characteristic of the urban environment that affects both the prevalence of homelessness and the health of homeless people. Certain cities in warm regions may become a preferred destination for people who are homeless or at high risk for homelessness. As noted above, in cities with warmer climates, a larger proportion of the homeless population is likely to be found on the street rather than in shelters. People living on the street are more likely to be disengaged from the health care and social service systems, and typically these individuals have poorer health than shelter-dwelling homeless people (Cousineau, 1997). In colder climates, exposure to the elements has an obvious adverse impact on the health of homeless people, who face serious risks from trench foot, frostbite, and injury or death from hypothermia (Tanaka and Tokudome, 1991). Conversely, in hot weather, homeless people may experience severe sunburn, heat exhaustion, or heat stroke.

3.3. Income and Housing

The prevalence of severe poverty among the residents of an urban area is certainly an important factor affecting the prevalence of homelessness. Poverty alone, however, does not necessarily lead to homelessness. Data from nine U.S. cities demonstrate wide variation in the proportion of a city's poor residents that stays at a homeless shelter over the course of one year, ranging from a low of 1.3% to a high of 10.2% (Metraux, *et al.*, 2001). Some have argued, based on historical data, that an increase in the number of unmarried men with very low income is a particularly important explanatory factor for adult homelessness (Jencks, 1994). During the latter half of the twentieth century, the earning potential of men with limited education was greatly diminished by the decline of manufacturing jobs in urban centers (Wilson, 1987; 1996). At the same time, the availability of open-market sources of

low-cost housing such as single-room occupancy hotels and rooming houses shrank steadily due to gentrification and urban renewal (Hasson and Ley, 1994). In this setting, the level of government support for subsidized rental housing plays a key role in determining the availability of units that a low-income individual or family can afford; the 1980's saw a decline in this support in both the U.S. and the United Kingdom (Cohen, 1994).

Some have suggested that income distribution, specifically the ratio of middle-income to low-income households within a given city, is an important determinant of homelessness among both single adults and families (O'Flaherty, 1996). O'Flaherty argues that because the construction of new rental housing for low-income individuals is economically unattractive, the main source of housing for poor people is deteriorating housing stock that has been vacated by middle-income people. O'Flaherty theorized that cities with fewer middle-class people relative to the number of poor people have higher rents at the bottom of the market (because middle-income housing is not being "handed down" to the poor), resulting in higher rates of homelessness.

Members of ethnic and racial minorities are disproportionately represented in the homeless population (e.g., blacks and latinos in the U.S., and Aboriginal people in Canada) (Burt, 2001; Hwang, 2001). The higher prevalence of poverty in these disadvantaged groups may explain this observation. However, other race-related factors in the urban environment may contribute to the excess risk of homelessness among people of color, including discrimination in the housing market and segregation of low-income minorities in neighborhoods with fewer economic opportunities than neighborhoods in which low-income whites reside.

Any discussion of the role that urban poverty plays in causing homelessness also raises questions about nature of the causal relationship between homelessness and poor health. Poverty is consistently and strongly associated with poor health (Marmot, *et al.*, 1997). Thus, the poor health observed among homeless people may be explained in large part by the fact that they experience extreme poverty and deprivation, rather than the fact that they happen to be homeless at the present time. This is particularly likely to be the case for individuals who have only recently become homeless, and less so for the chronically homeless, who have been subjected to the adverse health effects of lack of housing for a lengthy period. To extend this concept further, homelessness is a marker for severe poverty in the urban environment, and it may be this level of poverty, rather than the negative impact of homelessness itself, that has the greatest effect on population health in urban centers. This issue is discussed further in section 4 of this chapter.

3.4 Social Welfare System

Social welfare systems in urban centers have a major impact on both the prevalence of homelessness and the health of homeless people. However, these systems are usually governed at the state or national level, rather than at the municipal level. Wide variation is seen in the scope of social welfare programs, with more generous benefits typically seen in countries or regions that have less tolerance for high levels of income inequality and place a higher value on social cohesion (Slegers, 2000b).

For example, eligibility criteria for welfare benefits in the U.S. vary significantly from state to state. Some states allow single men to collect welfare, whereas others exclude them. These policies would likely affect the risk of homelessness among low-income single men living in any city within a given state. In addition,

U.S. federal funds may not be used to provide Temporary Aid to Needy Families (TANF) if an adult in the family has received assistance for more than 60 months, but individual states may elect to continue providing assistance to these families using state funds (State Policy Documentation Project). In coming years, as families that are unable to become self-supporting begin reaching the 60-month federal time limits on benefits, their risk of becoming homeless may be greatly affected by the policies of the state in which they live. In contrast, most European Union countries have extensive social welfare and public housing systems that make family homelessness less common.

One area of controversy is whether the provision of cash entitlements or disability benefits has significant effects on the health of homeless people. On one hand, the health of homeless people should improve if public benefits allow them to obtain food, housing, and other essentials of life. On the other hand, increased income could be detrimental to health if the money is used to purchase alcohol or drugs. One of the few studies on this issue examined 173 homeless mentally ill veterans who applied for Social Security Disability Insurance (SSDI) or Supplemental Security Income (SSI). The 50 individuals who were eventually awarded benefits did not differ in their past history of substance use from the 123 individuals who were eventually denied benefits. Three months after the decision to award or deny benefits, the group that was awarded benefits had significantly higher average total income (by \$277 per month) and higher quality of life than the group that was denied benefits. There was no evidence of increased alcohol or drug use or deterioration in psychiatric status among those who received benefits (Rosenheck, *et al.*, 2000).

Most homeless people depend on their city's shelter system for housing, food, and other social services, and these shelters can therefore have a significant impact on the health of homeless people. The availability and quality of homeless shelters vary greatly. As noted previously, homeless people in cities with few shelter beds are more likely to live on the street or other places not intended for human habitation, with potentially adverse health effects. In addition, the staff at homeless shelters can play an important role in connecting homeless people to social services, job training, housing applications, and substance abuse treatment. The quantity and quality of food provided at shelters determines to a large extent the nutritional value of homeless people's diets, with potential downstream health effects (Dachner and Tarasuk, 2002). Finally, the physical environments at shelters range from extremely crowded, poorly ventilated, and unsanitary facilities to modern, clean, and well-run establishments. Adverse shelter conditions have an impact on the transmission of tuberculosis and viral respiratory infections and the prevalence of health conditions such as skin infestations and asthma exacerbations. Shelter conditions could also plausibly have an effect on mental and emotional well-being among residents. To date, however, little research has examined the effects of the physical shelter environment on the health of homeless persons, with the exception of the relationship between crowding and poor ventilation in shelters and the transmission of tuberculosis (Advisory Council for the Elimination of Tuberculosis, 1992b).

3.5. Health Care System

The organization and financing of the urban health care system has an enormous impact on the health of homeless people, and to some extent on the prevalence of homelessness as well. In the U.S., 55% of homeless people lack health insurance,

creating a significant barrier to obtaining care (Kushel, *et al.*, 2001). These individuals are dependent on state- or city-based systems designed to provide care for the indigent. In many large urban centers in the U.S., a designated public, county, or charity hospital provides the majority of hospital-based health care for homeless people. Some cities have free-care clinics or community health centers that provide ambulatory services for homeless persons as well as other low-income residents. In 161 U.S. cities, federally-funded Health Care for the Homeless Programs have established multidisciplinary teams of physicians, nurses, social workers, and outreach workers that provide care to homeless people on the street and in shelters. This limited set of health care providers is typically the only source of care available to homeless people in urban areas in the U.S., and the local funding and staffing level of these organizations is a critical determinant of access to health care. For homeless veterans, the proximity and availability of Veterans Health Administration services is also an important factor.

In countries such as Canada and the United Kingdom that have systems of universal health insurance, homeless people still face non-financial barriers to care. Many access problems stem from the fact that a health care system designed to meet the needs of the general population may not accommodate the unique requirements of homeless people (Crane and Warnes, 2001; Hwang and Bugeja, 2000a, 2000b). For example, the provision of universal health insurance does not necessarily result in the establishment of outreach programs for homeless people, appropriate treatment programs for homeless persons with mental illness or substance abuse, or an adequate supply of health care providers who are willing, able, and trained to work with this challenging population (Buchanan, *et al.*, 2004). In the United Kingdom, individuals must register with a general practitioner to obtain primary care, and some physicians are reluctant to accept homeless people into their practice because of their complex needs and the extra workload entailed (Wood, *et al.*, 1997). Health insurance does not protect against the fragmentation and discontinuity of care that homeless people often experience, nor does it eliminate the daily struggle to meet basic survival needs that may cause homeless people to place a lower priority on seeking health care (Gelberg, *et al.*, 1997).

Inadequate access to primary health care may result in uncontrolled disease progression and frequent emergency department visits and hospitalizations (Han and Wells, 2003). Emergency department visits by homeless people should be seen as an indicator of high levels of unmet health needs, rather than inappropriate health care utilization (Kushel, *et al.*, 2002). About 50% of homeless children with severe persistent asthma have had at least one emergency department visit in the last year, a finding indicative of inadequate access to health care and undertreatment of their disease (McLean, *et al.*, 2004).

Because individuals with severe mental illness who do not receive appropriate health care are at high risk of becoming homeless, the health care system can have a direct impact on the prevalence of homelessness. The role of deinstitutionalization in contributing to the problem of homelessness has been discussed extensively. Beginning in the 1960's and 1970's, the advent of effective anti-psychotic medications to treat schizophrenia and an understandable desire to move people out of chronic mental hospitals, where conditions were sometimes horrendous, led to the discharge of tens of thousands of long-term psychiatric patients (Dear and Wolch, 1987; Jencks, 1994). The number of beds at psychiatric institutions fell precipitously. In theory, these patients were supposed to receive mental health care and social support in the community. In reality, many of these patients received little if

any services and ended up swelling the ranks of the homeless population in the 1970's and 1980's.

Today, many decades after these events took place, "deinstitutionalization" is no longer the major cause of homelessness among people with serious mental illness. It is now uncommon for people with psychiatric disorders to have ever been institutionalized for an extended period, and any admissions tend to be quite brief. Not surprisingly, individuals with severe illness, few social supports, and/or inadequate access to appropriate outpatient psychiatric care often become homeless. In a sense, homeless shelters have assumed the role that was played by chronic psychiatric hospitals fifty years ago.

For these homeless people with severe mental illness, the delivery of appropriate health care is challenging but essential to improving their health and housing status. The Assertive Community Treatment (ACT) model attempts to address this problem through a team of psychiatrists, nurses, and social workers who follow a small caseload of homeless mentally ill clients, seeking them out in the community to provide high-intensity mental health treatment and case management. Studies have found that mentally ill homeless people receiving ACT spend fewer days hospitalized as a psychiatric inpatient and have somewhat greater improvement in symptoms than those receiving usual care (Lehman, *et al.*, 1997). However, ACT is labor-intensive and costly, and its availability is often quite limited.

The availability and type of addictive substances in the urban environment have an important effect on the prevalence of homelessness and on the health of homeless people (Munoz, *et al.*, 1998). The advent of crack cocaine has been clearly implicated in the rise of homelessness in the U.S. in the 1980's (Jencks, 1994). In Japan, alcoholism is the predominant addiction contributing to homelessness and morbidity among homeless people, whereas in the Netherlands, homelessness is closely linked to chronic heroin addiction (Takano, *et al.*, 1999a; Slegers, 2000a).

Access to addiction treatment is therefore a vital issue for a large proportion of homeless people. A number of treatment modalities for adults have been shown to be effective in controlled studies: admission to a post-detoxification stabilization program results in longer periods of abstinence than direct release into the shelter system (Kertesz, *et al.*, 2003), and abstinence-contingent work therapy in a long-term residential setting has been shown to improve outcomes (Milby, *et al.*, 2000). Studies have examined the effectiveness of case management for homeless people with addictions, with mixed results (Morse, 1999).

3.6. Urban Geography

The forces underlying the urban geography of homelessness are aptly described in the seminal work of Dear and Wolch (Dear, *et al.*, 1987). They examined how deinstitutionalization, rollbacks in entitlements to social assistance, and changes in the global economy in the late 1970s and early 1980s combined to create complex problems of poverty, inequality, and homelessness in North American cities that persist to this day. Dear and Wolch (1987) argued that these problems manifested themselves in the specific urban form of the "service-dependent ghetto," which refers to the spatial concentration in the inner city of service-dependent populations (such as people with mental illness, physical handicaps, addictions, or recent incarceration) and the organizations that assist them. While on one hand these can be characterized as areas of "urban blight," Dear and Wolch (1987) argued that they serve as a supportive environment and adaptive coping mechanism that can have a positive

effect on the health and well-being of residents who have few other options. Service-dependent ghettos are often the object of antagonism from surrounding communities. Paradoxically, however, these more affluent communities often perpetuate the forces that create the service-dependent ghetto and entrench processes of inner-city decay through citizen resistance to housing and services for low-income people and exclusionary land use policies and zoning practices (Dear and Taylor, 1982).

In some cities, the tendency has been to isolate high-poverty urban neighborhoods rather than attempt to destroy them. Davis argues that in Los Angeles and other cities, a conscious effort has been made to create geographic and physical barriers (such as expressways) that circumscribe poor and minority neighborhoods and cut them off from the rest of the city (Davis, 1990). This spatial isolation can further heighten the marginalization of these communities and limit residents' access to goods, services, and economic opportunities that are vital to health.

Since homeless people spend a great deal of their time in public spaces, the nature of these spaces can have a significant impact on their quality of life. Some cities have numerous well-tended public spaces such as parks and squares that are conducive to those who wish to linger or rest, including homeless people. These spaces can serve a socially cohesive function if urban dwellers of diverse backgrounds perceive them to be safe "neutral" spaces in which to gather and socialize. In contrast, other cities have built environments that lack such public spaces and are instead dominated by privatized quasi-public spaces such as shopping malls. Non-purposeful lingering, which would be generally acceptable in a public space such as a park, is perceived as "loitering" in such places. In a relatively trivial but very specific expression of hostility toward homeless people, some cities have installed "bum-proof" benches that are designed to prevent reclining or sleeping on the seat. While these elements of the urban environment seem relatively minor, they may reflect a city's prevailing sentiment towards homeless and poor people that sets the tone of their daily existence (Davis, 1990).

3.7. Urban Governance

Homelessness is often perceived as having a negative effect on the quality of life in urban centers. Some consider the visible presence of homeless people in parks, street corners, and other public spaces to be a manifestation of "urban disorder" and a barrier to the successful promotion of commerce and tourism. In response to these concerns, a number of cities have enacted by-laws against panhandling, loitering or sleeping in public places, public intoxication, or possession of shopping carts. Some cities have instituted aggressive policing strategies to remove homeless people from public spaces (Graser, 2000). Efforts to displace street youth and homeless people rather than offer them any meaningful help might have negative effects on health and in fact increase high-risk behaviors such as survival sex and unsafe injection drug use practices (O'Grady and Greene, 2003; Wood, *et al.*, 2004).

Homeless people frequently interact with both police and paramedics, but they have much lower levels of trust in police than in paramedics (Zakrison, *et al.*, 2004). By inhibiting homeless people from calling for needed emergency assistance, this distrust could result in serious harms to health. In a study of injection drug users in San Francisco, 56% of those who had been present with an unconscious heroin overdose victim did not call for emergency services due to fear of police involvement (Davidson, *et al.*, 2002). Police action can also have direct adverse effects on the health through the excessive use of force (Cooper, *et al.*, 2004). In a study in

Toronto, 9% of homeless people reported having been assaulted by a police officer in the last 12 months (Zakrison, *et al.*, 2004).

On a larger scale, issues of urban governance such as fiscal disparities affect all urban dwellers, but have the potential to have a particularly severe impact on homeless and poor people. Fiscal disparities typically occur when an older central city with a significant number of high-poverty neighborhoods is surrounded by a ring of higher-income municipalities. The central city's primary revenue stream from property taxes is limited by a weak tax base, but at the same time the city is confronted by a high and rising demand for social services, some of which is driven by the downloading of 'unfunded mandates' by states onto central city municipalities (Drier, *et al.*, 2001). Meanwhile, the nearby ring communities have a strong property tax base and face a lower demand for social services, while at the same time its residents work in the central city and benefit from its economic activities and services (the so-called "free-rider" effect) (Orfield, 1998; Drier, *et al.*, 2001). These fiscal disparities greatly exacerbate the adverse effects of racial and economic segregation on homeless people and others living in extreme poverty in the central city.

In an example of an effort to redress this problem, state legislation in Minnesota, the Fiscal Disparities Act, mandates the sharing of commercial property tax between outlying, high tax base municipalities to central city municipalities to assist in the provision of social services. Enacted in 1971 by the Minnesota legislature, the plan pools 40% of the increase in all communities' commercial/industrial property valuation. All cities and townships keep their pre-1971 tax bases plus 60% of the annual growth. The pool is then taxed at a uniform rate and redistributed among all local government entities. Although this redresses some of the intra-metropolitan disparities, it does little to reduce the payoffs of "externalizing" social problems with tools like exclusionary zoning in typically more affluent communities. Moreover, the Minneapolis-St. Paul example depends on the existence of a strong regional-metropolitan level of governance, the Met Council, which although heavily studied (Orfield, 1998; Rusk, 1999; Katz and Bradley, 1999), is still a concept that is strongly resisted by homeowners' associations, gated communities, and affluent municipalities (McKenzie, 1994; Boudreau and Keil, 2001). An alternative solution is to create cities that encompass lower and higher income areas, rather allowing them to separate into different jurisdictions. In Toronto, Ontario, this was effectively accomplished through the amalgamation of five contiguous cities into a single urban entity, although the amalgamation was motivated by a desire to increase operating efficiency rather than concern regarding fiscal disparities (Boudreau, 2000).

4.0. THE EFFECTS OF HOMELESSNESS ON POPULATION HEALTH

Does homelessness have a sizeable effect on population health? This question raises a number of complex issues. Homeless people, especially those who are chronically homeless, tend to have poor health. However, homelessness is a temporary state, not a permanent trait. As many as 8 millions Americans experience homelessness over a five year period, but most of these episodes of homelessness are quite brief (Link, *et al.*, 1994). Thus, at any single point in time only a very small proportion of a city's population is without a home. Homeless people would therefore be expected to have a minimal impact on indicators of overall population health, such

as health status or mortality rates. Of course, this assumption may be incorrect in urban centers in the developing world, where extremely large numbers of people often live on the street or in encampments.

Some have suggested that homelessness may have an adverse effect on public health through the spread of infectious diseases, such as tuberculosis. Compared to the general population, homeless people are clearly at increased risk of developing latent tuberculosis, which is not infectious to others, as well as active tuberculosis, which can infect those who come in close contact with the individual. During tuberculosis outbreaks, shelter residents, shelter staff, and health care providers are at increased risk of becoming infected (Advisory Council for the Elimination of Tuberculosis, 1992a). To date, however, outbreaks of tuberculosis among homeless people have not spread widely within the general population. The threat of tuberculosis is therefore an important health problem for homeless people, but one that has demonstrated relatively limited potential to affect overall population health in urban areas.

The outbreak of Severe Acute Respiratory Syndrome (SARS) in 2003 has raised the specter of rapid and uncontrolled spread of acute respiratory infections through the homeless population. The 2003 SARS outbreak in Toronto was almost entirely confined to travelers returning from abroad, health care workers, and their household contacts (Svoboda, *et al.*, 2004). No homeless person became infected with SARS. If this had happened, the large, transient, and difficult-to-locate shelter population would have made it almost impossible for Toronto public health officials to implement their core strategy of identifying and quarantining all “household contacts” of patients with SARS. Such a situation could have had devastating effects on efforts to prevent the outbreak from spreading into the city’s general population. Given the threat of a recurrence of SARS or the possible emergence of other new and potentially deadly respiratory infections, infection control measures to deal with a severe acute infectious disease outbreak in the homeless population require serious consideration. Although this scenario is currently hypothetical, the potential implications for population health are considerable.

Homelessness may have major implications for population health, for reasons other than those discussed above. Emphasis on the direct impact of homelessness on population health may be misplaced. Instead, homelessness may be viewed as a sentinel event, a marker for dysfunction in multiple sectors including the housing market, job market, health care system, and social welfare system. Homelessness represents the extreme end of a larger distribution of socioeconomic status and housing status, and it attracts attention precisely because of its dire nature.

This conceptualization has been well-described in work by Rose (1985). As shown in Figure 1, the curve shown with a solid line represents the distribution of housing quality within a hypothetical population. Homelessness represents the extreme low point along the dimension of housing quality. This approach views one’s housing situation as a continuum and avoids creating a simple dichotomy between being homeless and being housed. For the sake of this discussion, we assume that housing conditions have an impact on health, an assertion for which there is ample support (Fuller-Thomson, *et al.*, 2000; Krieger and Higgins, 2002). Figure 1 also illustrates two different approaches to improving health through improving housing conditions. The greatest effect in terms of population health may be gained through approach A (shifting the entire population distribution for the factor upwards slightly, to the distribution curve indicated by a dotted line) rather than approach B (focusing on improving conditions for the highest-risk

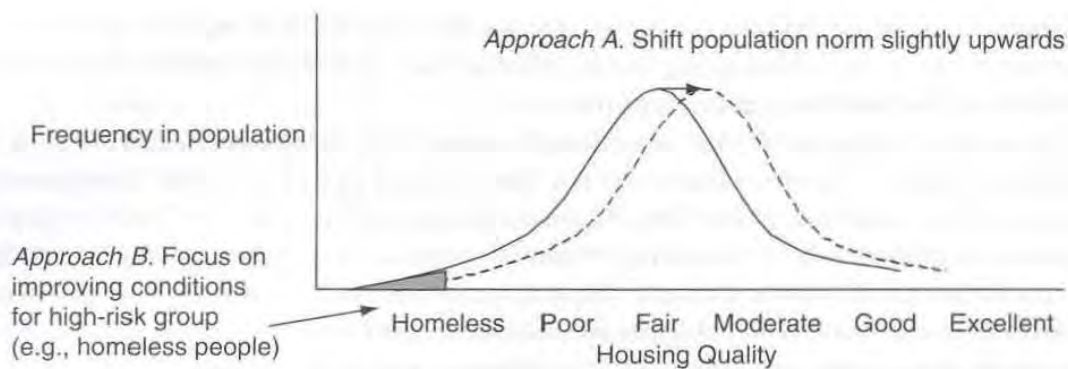


Figure 1. The Distribution of Housing Quality within a Hypothetical Population, and the Effect of Two Different Approaches to Improving Health Through Improving Housing Conditions.

group at the worst extreme of the distribution). A similar argument could be applied to the relationship between poverty and health, where the x-axis on the diagram would represent income rather than housing quality.

The case of asthma is an excellent example of this dilemma. About 40% of children staying at homeless shelters in New York City have asthma (McLean, *et al.*, 2004a). Although this is a disturbingly high rate, the prevalence of asthma is also very high among inner-city children living in substandard housing (Malveaux and Fletcher-Vincent, 1995). Because homeless children represent a relatively small proportion of all children living in poverty in a given city, the population health effect of asthma among homeless children is likely to be far smaller than the population health effect of asthma in the much larger number of children who are housed but living in decrepit buildings. While homeless children are a distressing manifestation of urban poverty, they represent “the tip of the iceberg” of the broader issue of poverty and poor housing. Thus, the problem of asthma among homeless children may be regarded as an extreme example of a much larger population health concern that may be a more appropriate target for intervention.

5.0. POTENTIAL STRATEGIES TO IMPROVE THE HEALTH OF HOMELESS PEOPLE

A consideration of strategies to improve the health of homeless people raises the question of whether our first concern should be to attempt to deal with the problem of homelessness itself, or to intervene to relieve illness among homeless youths, single adults, or families. Of course, this is not an either/or proposition. Nonetheless, an excessive emphasis on the latter approach might result in producing healthier homeless people, yet fail to recognize that homelessness is the result not only of individual vulnerabilities, but also of deeper structural problems within our society. On the other hand, a focus on the former approach may founder on the assumption that providing homeless people with stable housing will necessarily improve their health.

An example of this tension is the emergence of two contrasting service delivery models to meet the needs of chronically homeless adults with concurrent mental illness and substance abuse (Tsemberis, *et al.*, 2004; Hopper and Barrow, 2003). The

first model, known as the “Continuum of Care,” attempts to move homeless people from the street into transitional congregate housing, in conjunction with a requirement that the individual engage in treatment for their mental illness and addictions. Under this model, the person is allowed to make the transition to permanent housing only after they achieve abstinence from alcohol and drugs and their clinical status has been stabilized. In contrast, the “Housing First” model is based on the belief that homeless people should be afforded permanent housing as a basic human right, not as a reward contingent on participating in treatment. In this model, homeless people can obtain housing in individual apartments without any preconditions, and they are then offered an array of harm reduction and treatment services through an ACT team (see section 3.5, above). A recent randomized controlled trial assigned 225 homeless adults with concurrent severe mental illness and substance abuse to one of these two approaches. Individuals treated under the “Housing First” model spent significantly less time homeless over the follow-up period, and at the end of 24 months about 80% were in stable housing as compared to only 30% in the “Continuum of Care” model. However, there were no significant differences between the two groups in terms of alcohol use, drug use, or psychiatric symptoms. This study highlights the need to acknowledge that ending homelessness is a worthwhile goal in and of itself, but that it is not synonymous with improving the health of homeless people.

Other strategies include adapting the health care system to better meet the unique needs of homeless adolescents, single men and women, or families. As discussed in Section 3.5 above, a cornerstone of this effort is the use of multidisciplinary teams providing coordinated care at outreach sites, in combination with more traditional clinic-based health care services. For homeless people with severe mental illness, the availability of ACT services is vital, but the effectiveness of less resource-intensive systems of mental health care for homeless people needs to be assessed. For those with addictions, the availability of detoxification beds, post-detoxification stabilization programs, and longer-term (6 to 12 month) residential addiction treatment programs are important issues. In designing these services, the heterogeneous needs of different subgroups of homeless people (e.g., street youth, single men, single women, and mothers with young children) must be taken into account.

While improving conditions at shelters is by no means the preferred route to better health for homeless people, it is important that shelters not contribute to ill health. Certainly, the availability of adequate capacity to accommodate everyone who seeks a shelter bed is a reasonable first step towards protecting homeless adults from the elements. Adherence to basic standards of cleanliness, nutrition, and food hygiene within shelters and the avoidance of overcrowding and inadequate ventilation are mandatory. Perhaps equally important is the creation of a safe and welcoming environment that encourages clients to engage with service providers.

At a broader level, interventions are needed to decrease the prevalence of homelessness and address the systemic issues that contribute to homelessness. These efforts may at least in some cases have health benefits as well. For homeless families, there is compelling evidence that the provision of subsidized housing is both necessary and sufficient to end their homelessness (Shinn, *et al.*, 1998). The “Housing First” strategy appears to be more effective in moving homeless people with concurrent mental illness and substance abuse into stable housing; further research is needed to examine the effectiveness of this approach with other subgroups of homeless people.

Serious attention needs to be paid to the impact of the social welfare system on homelessness and health. Restrictions in eligibility for Temporary Aid for Needy Families and state-run welfare programs threaten to contribute to a potential rise in homelessness among families and single adults in coming years. Further research is needed in this area and on the impact of receipt of welfare or disability benefits on the health of homeless people.

Finally, upstream from the distinctive and visible issue of homelessness is the larger problem of urban poverty. The existence of entire communities and groups who are cut off from a decent education, employment opportunities, housing, and access to health care should raise extremely troubling questions for anyone who cares about the health of our urban centers. While the adverse health effects of homelessness are clearly severe, this phenomenon is only a specific and extreme example of the larger problem of the effects of poverty and inadequate housing on population health.

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EXHIBIT “3”



Toronto's homeless population more than doubled between 2021 and 2024, survey says

THE CANADIAN PRESS
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Outreach worker Lorraine Lam distributes cold weather supplies to a tented resident in Toronto.

CHRIS YOUNG/THE CANADIAN PRESS

The number of homeless people in Toronto has more than doubled between the spring of 2021 and last fall, a newly released survey showed.

“These data highlight the failure of multiple systems, such as affordable housing, health care, mental health, income support, and the justice system,” a city report said.

“People are left with nowhere to turn, and the shelter system or staying outdoors become the last resort.”

The report said the increase in Toronto mirrors the situation in Ontario and across Canada after the COVID-19 pandemic directly affected homelessness rates.

“Specific groups continue to be overrepresented among those experiencing homelessness, outlining the need for targeted investments and specialized supports,” it said.

The report said 9 per cent of homeless people in the city identified as Indigenous, while Indigenous people make up 3 per cent of Toronto’s overall population. It also said 58 per cent identified as Black, while Black people represent 10 per cent of the city’s overall population.

The most frequently cited reason for loss of housing was lack of income, the city said.

“The majority of people surveyed reported one or more health issue including mental health concerns, an illness or medical condition and substance use,” it said.

The report said the housing crisis requires strategic responses and Toronto is already seeing a reduction in the number of homeless people due to fewer refugee claimants in shelters, lower encampment numbers and movement of people into permanent housing.

“Individuals said the top factors that could have helped them avoid homelessness were housing affordability programs such as rent-geared-to-income (RGI), advice on tenant legal rights and support with employment or education,” the report said.

“Over the next decade, the city will invest in up to 20 new shelter sites that will be smaller, more cost effective and better suited to the needs of the people they serve,” it said, adding that seven of those sites have already been selected.

More than 80,000 people in Ontario were homeless in 2024, the Association of Municipalities of Ontario has said.

The association has called for a fundamentally different approach to tackling the homelessness crisis, one that prioritizes long-term housing solutions rather than temporary measures.

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Paliare Roland Rosenberg Rothstein LLP

155 Wellington Street West, 35th Floor
Toronto ON M5V 3H1
Tel: 416.646.4300

Gordon Capern (LSO # 32169H)

Tel: 416.646.4311
Email: gordon.capern@paliareroland.com

Andrew Lokan (LSO # 31629Q)

Tel: 416.646.4324
Email: andrew.lokan@paliareroland.com

Kartiga Thavaraj (LSO # 75291D)

Tel: 416.646.6317
Email: kartiga.thavaraj@paliareroland.com

Greta Hoaken (LSO # 87903I)

Tel: 416.646.6357
Email: greta.hoaken@paliareroland.com

Lawyers for the Applicant,
The Regional Municipality of Waterloo